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SCANNED DEC 2010

Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) 0806

▶ Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than $100,000 and total assets less than $250,000 at the end of the year may use this form

▶ *The organization may have to use a copy of this return to satisfy state reporting requirements*

OMB No 1545-1150

2007

Open to Public Inspection

A For the 2007 calendar year, or tax year beginning 7/1/2007 and ending 6/30/2008

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
Rotary Club of Lahina Sunrise

Number and street (or P O box, if mail is not delivered to street address) Room/suite
P O Box 913

City, town, or country State ZIP + 4
Lahaina HI 96761-0913

D Employer identification number
91-2148846

E Telephone number
708-524-1976

F Group Exemption Number ▶ 0573

- *Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).*

G Accounting method [X] Cash [ ] Accrual
Other (specify) ▶

H Check ▶ [X] if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ N/A

J Organization type (check only one)— [X] 501(c) (04) ◀ (insert no) [ ] 4947(a)(1) or [ ] 527

K Check ▶ [ ] if the organization is not a section 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than $25,000 A return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if $100,000 or more, file Form 990 instead of Form 990-EZ ▶ $ 99,347

Part I **Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 55 of the instructions)

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	59,727
	2	Program service revenue including government fees and contracts		2	
	3	Membership dues and assessments		3	8,895
	4	Investment income		4	
	5a	Gross amount from sale of assets other than inventory	5a		
	b	Less cost or other basis and sales expenses	5b		
	c	Gain or (loss) from sale of assets other than inventory Subtract line 5b from line 5a (attach schedule)		5c	0
	6	Special events and activities (attach schedule). If any amount is from **gaming,** check here ▶ ☐			
	a	Gross revenue (not including $ 41,579 of contributions reported on line 1) Received 10-20-2010	6a 30,725		
	b	Less direct expenses other than fundraising expenses	6b 66,940		
	c	Net income or (loss) from special events and activities. Subtract line 6b from line 6a		6c	-36,215
	7a	Gross sales of inventory, less returns and allowances	7a		
	b	Less. cost of goods sold	7b		
	c	Gross profit or (loss) from sales of inventory. Subtract line 7b from line 7a		7c	0
	8	Other revenue (describe ▶)		8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶		9	32,407
Expenses	10	Grants and similar amounts paid (attach schedule)		10	
	11	Benefits paid to or for members		11	
	12	Salaries, other compensation, and employee benefits		12	
	13	Professional fees and other payments to independent contractors		13	
	14	Occupancy, rent, utilities, and maintenance		14	
	15	Printing, publications, postage, and shipping		15	
	16	Other expenses (describe ▶ See attached statement)		16	25,534
	17	**Total expenses.** Add lines 10 through 16 ▶		17	25,534
Net Assets	18	Excess or (deficit) for the year. Subtract line 17 from line 9		18	6,873
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	40,698
	20	Other changes in net assets or fund balances (attach explanation)		20	
	21	Net assets or fund balances at end of year Combine lines 18 through 20 ▶		21	47,571

Part II **Balance Sheets**—If Total assets on line 25, column (B) are $250,000 or more, file Form 990 instead of Form 990-EZ

(See page 60 of the instructions.)	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	40,698	22	47,571
23 Land and buildings		23	
24 Other assets (describe ▶)		24	
25 **Total assets**	40,698	25	47,571
26 **Total liabilities** (describe ▶)		26	
27 **Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	40,698	27	47,571

Part III Statement of Program Service Accomplishments (See page 60 of the instructions)

What is the organization's primary exempt purpose? Community Services

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title

Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)

28	Vocational Services for youths, 4th of July Displays for Lahaina Town Dictionary Project, Elementary Schools, Halloween Parade for children Cultural Heritage support, RYLA support, Paul Harris Foundation (Grants $) If this amount includes foreign grants, check here ▶ ☐	28a	
29	Newspapers in the Classroom, Positive Action Program, Rotaract MCC RYLA, School Supply Drive, New Generations, Maui Police Dept Onsite Paint Mokuolele, Fire Relief, Seniors Xmas Service Project (Grants $) If this amount includes foreign grants, check here ▶ ☐	29a	
30	Lahainaluna HS Marching Band, Project Graduation (Grants $) If this amount includes foreign grants, check here ▶ ☐	30a	
31	Other program services (attach schedule) (Grants $ 0) If this amount includes foreign grants, check here ▶ ☐	31a	0
32	**Total program service expenses.** Add lines 28a through 31a ▶	32	0

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated See page 61 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Name Karen Kondo Str P O Box 913 City Lahaina ST HI ZIP 96761	Title Pres Hr/WK 10.00	0		
Name Str City ST ZIP	Title Hr/WK 00	0		
Name Str City ST ZIP	Title Hr/WK 00	0		
Name Str City ST ZIP	Title Hr/WK 00	0		

Part V Other Information (Note the statement requirement in General Instruction V)

			Yes	No
33	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	33		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34		X
35	*If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but **not** reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T*			
a	Did the organization have unrelated business gross income of $1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	35b	N/A	
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	36		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file **Form 1120-POL** for this year?	37b		X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee **or** were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		X
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved 38b			
39	*501(c)(7) organizations* Enter:			
a	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			

Part V **Other Information** (Note the statement requirement in General Instruction V) *(Continued)*

			Yes	No
40 a	*501(c)(3) organizations* Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____ , section 4912 ▶ _____ ; section 4955 ▶ _____			
b	*501(c)(3) and (4) organizations* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation	40b		X
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ _____			
d	Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ _____			
e	*All organizations* At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	40e		X

41 List the states with which a copy of this return is filed ▶ HI

42 a The books are in care of ▶ Name Ann Neizman Telephone no ▶ (808) 661-0222

Located at ▶ P.O. Box 913 City Lahaina ST HI ZIP + 4 ▶ 96767-0913

			Yes	No
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		X
	If "Yes," enter the name of the foreign country ▶ _____ See the instructions for exceptions and filing requirements for **Form TD F 90-22.1.**			
c	At any time during the calendar year, did the organization maintain an office outside of the U S ?	42c		X
	If "Yes," enter the name of the foreign country: ▶ _____			

43 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of* ***Form 1041*** —Check here . . ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year . . ▶ | 43 | N/A

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Karen Kondo — Signature of officer — Date 2/15/2009

Karen Kondo — Type or print name and title — President

Paid Preparer's Use Only

Preparer's signature ▶ David W Ristau CPA	Date 2/15/2009	Check if self-employed ▶ ☐	Preparer's SSN or PTIN (See Gen Inst X) P00255882
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ The Integer Company/David W. Ristau CPA, 202 W. Chicago Avenue, Oak Park, IL 60302-2313		EIN ▶ 36-3547425	Phone no ▶ (708) 524-1976

Line 1 (990-EZ) - Contributions, gifts, grants, and similar amounts received

1	Contributions	1	
2	NonCash Contributions	2	
3	Membership dues and assessments (contributions from the public)	3	
4	Government contributions (grants)	4	
5	Commercial co-venture	5	
6	Special events contributions (Line 6 - Special Events)	6	41,579
7	District Grants, Weekly Drawing, and Weekly Happy Dollars	7	4,289
8	Hollywood Canteen	8	8,553
9	New Generations, Rotary Foundation, Shirts, Meeting income	9	5,306
10	Total	10	59,727

Line 6 (990-EZ) - Special events and activities

		Event A	Event B	Event C	All others		Totals
1	Special event name	July 4th 2007	July 4th 2008	2007 Tree Sale	July 4th 07+08 Passthrough		
1a	Number of special events	1	1	1	2		
2	Gross receipts	8,503	65	22,157	41,579	2	72,304
3	Less contributions	0	0	0	41,579	3	41,579
4	Gross revenue	8,503	65	22,157	0	4	30,725
5	Less direct expenses	5,242	5,694	12,564	43,440	5	66,940
6	Net income or (loss)	3,261	-5,629	9,593	-43,440	6	-36,215

Line 16 (990-EZ) - Other Expenses 25,534

1	Travel, Meals and Entertainment		
	a Travel	1a	
	b Total meals and entertainment	1b	
2	Fundraising	2	
3	From Form 4562 - Amortization	3	
4	Conferences, conventions, and meetings	4	
5	Depreciation, depletion, etc	5	
6	Equipment rental and maintenance	6	
7	Interest	7	
8	Supplies	8	1,860
9	Telephone	9	
10	Unrelated business income taxes	10	
11	Bank Fees	11	134
12	Merchant Monthly Fees	12	324
13	NSF charges	13	130
14	Rotary Ditrict 5000 Fees	14	1,539
15	Rotary International Fees	15	1,860
16	Annual Dues-other	16	110
17	Conference Expense	17	1,453
18	District 5000 Expenses	18	-1,181
19	Rotary Intl Paul Harris	19	3,710
20	Community Services	20	8,579
21	International Service	21	3,977
22	New Generations	22	2,656
23	Social Services	23	267
24	Club Service	24	116
25		25	
26		26	

Line 35(a) (990-EZ) - Unrelated Business Tax Income and Proxy

Did the organization have unrelated business gross income of $1,000 or more or 6033(e) notice, reporting, and proxy tax requirements? [ ] Yes [X] No

				Yes	No
1	*501(c)(4),(5), or (6) organizations.* Were substantially all dues nondeductible by members?		1	X	
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?		2	X	
	If "Yes" was answered to either 1 or 2, **do not** complete 3 through 8 below unless the organization received a waiver for proxy tax owed for the prior year				
3	Dues, assessments, and similar amounts from members	3			
4	Section 162(e) lobbying and political expenditures	4			
5	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	5			
6	Taxable amount of lobbying and political expenditures (line 4 less 5)	6	0		
7	Does the organization elect to pay the section 6033(e) tax on the amount on line 6?		7		
8	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 6 to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		8		

Line 40(b) (990-EZ) - Sec. 4958 Excess Benefit Transactions

Did the organization engage in any Sec. 4958 excess benefit transaction during the year or become aware of one from a prior year? ☐ Yes ☒ No

If "Yes," please describe income

Line 41 (990-EZ) - States with Which a Copy of this Return is Filed

☐ Armed Forces the Americas	☐ Louisiana	☐ Palau
☐ Armed Forces Europe	☐ Massachusetts	☐ Rhode Island
☐ Alaska	☐ Maryland	☐ South Carolina
☐ Alabama	☐ Maine	☐ South Dakota
☐ Armed Forces Pacific	☐ Marshall Islands	☐ Tennessee
☐ Arkansas	☐ Michigan	☐ Texas
☐ American Samoa	☐ Minnesota	☐ Utah
☐ Arizona	☐ Missouri	☐ Virginia
☐ California	☐ Commonwealth of the Northern Mariana Islands	☐ U S Virgin Islands
☐ Colorado	☐ Mississippi	☐ Vermont
☐ Connecticut	☐ Montana	☐ Washington
☐ District of Columbia	☐ North Carolina	☐ Wisconsin
☐ Delaware	☐ North Dakota	☐ West Virginia
☐ Florida	☐ Nebraska	☐ Wyoming
☐ Federated States of Micronesia	☐ New Hampshire	
☐ Georgia	☐ New Jersey	
☐ Guam	☐ New Mexico	
☒ Hawaii	☐ Nevada	
☐ Iowa	☐ New York	
☐ Idaho	☐ Ohio	
☐ Illinois	☐ Oklahoma	
☐ Indiana	☐ Oregon	
☐ Kansas	☐ Pennsylvania	
☐ Kentucky	☐ Puerto Rico	

Form **8868**
(Rev April 2008)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I **Automatic 3-Month Extension of Time.** Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only . . . . . ▶ [ ]

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (*e-file*). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T) However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868 For more details on the electronic filing of this form, visit *www irs gov/efile* and click on *e-file for Charities & Nonprofits*

Type or print File by the due date for filing your return See instructions	Name of Exempt Organization	Employer identification number
	Rotary Club of Lahina Sunrise	91-2148846
	Number, street, and room or suite no If a P O box, see instructions	
	P O Box 913	
	City, town or post office, state, and ZIP code For a foreign address, see instructions	
	Lahaina HI 96761-0913	

Check type of return to be filed (file a separate application for each return)

[ ] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (sec 401(a) or 408(a) trust)	[ ] Form 5227
[X] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ▶ See attached worksheet

Telephone No ▶ (808) 661-0222 FAX No ▶ (866) 266-4185

- If the organization does not have an office or place of business in the United States, check this box . . ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) 0573 If this is for the whole group, check this box . ▶ [ ] . If it is for part of the group, check this box. . . ▶ [ ] and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 2/15/2009, to file the exempt organization return for the organization named above The extension is for the organization's return for

▶ [ ] calendar year ____ or

▶ [X] tax year beginning 7/1/2007 , and ending 6/30/2008

2 If this tax year is for less than 12 months, check reason [ ] Initial return [ ] Final return [ ] Change in accounting period

3 a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	3a	$
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit	3b	$
c	**Balance Due.** Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	3c	$ 0

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions