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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) Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form. The organization may have to use a copy of this private to satisfy state reporting requirements.

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

OMB No 1545-1150 2008

Open to Public Inspection

Α	For the	2008 calend	ar year	, or tax year beginning	July 1	, 2008, and end	ing	June 3	0	, 20 09	
В	Check if ag		Trade of Grant of Grant Editori			D Employer	ider	ntification number			
닏	Address o	ss change use IRS Rotary International, Broken Arrow, Oklahoma Rotary Club 73					73				
님	Name cha	nange print or Number and street (or P.O. box if mail is not delivered to street address). Room/suite F. Tele						E Telephon	e nu	mber	
뉘	Initial returnation		type. See	P. O. Box 893				()			
H	Amended		Specific	City or town, state or country,	and ZIP + 4			F Group Ex	amn	tion	
\Box	Applicatio		Instruc- tions.	Broken Arrow, OK 74013				Number	emp.	→	
_	• Section	on 501(c)(3)	organiz	ations and 4947(a)(1) nonexer	not charitable	trusts must attach	G Accou	inting metho	d	✓ Cash ☐ Acci	rual
		(-)(-)		npleted Schedule A (Form 99				(specify) ▶			,
_									ho o	rganization is not	
ı	Websit	e: ▶								edule B (Form 990	
j	Organiz	ation type (check or	nly one)— 🖊 501(c) (4) ◀ (in	sert no.)	1947(a)(1) or 527	•	Z, or 990-PF			-1
				on is not a section 509(a)(3) sup			s are norn	nally not mo	re th:	an \$25 000 A retu	ırn ıs
••			-	zation chooses to file a return,		_		nany not mo		211 020,000 711010	
L				ne 9 to determine gross receipts,			ad of Form	990-EZ ▶	\$		
	art I			nses, and Changes in N					s fo	or Part I.)	
	1			s, grants, and similar amounts		1.		1			538
	2		. •	revenue including governme		ontracte	•	2	2	<u> </u>	
	3	_		and assessments		omacis ,	•	3	-	49.	451
	4	Investment					•		_		
	5a			m sale of assets other than	inventory	5a	•				
	b			er basis and sales expenses	-	· · · · -			1		
	1			sale of assets other than inve			tach sche	dule) 5	c		
ne	6			vities (complete applicable parts of S					1		
ē	1	•		ot including \$		• •	OK HOIC P				
Revenue	"	reported o	•	,		6a					
-	١ ۾	•		•							
		b Less: direct expenses other than fundraising expenses 6b c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) .							c		
	I _	7a Gross sales of inventory, less returns and allowances							-		
	b	Less: cost		-		7b					
	1		_	ds sold				7	c		
	8	Other reve			(Subtract line	75 Hom line raj	• •	Ε	-		
	9			dd lines 1, 2, 3, 4, 5c, 6c, 7	c, and 8			. ▶ 9	-	54,	989
	10			r amounts paid (attach scho			-	1	0		470
	11			, ,	saule) , ,		• •	1	-		
ŝ	1								2		
use	13	NECEIVEL							3		
Expenses	14			utilities, and maintenance		9		S 1	4		
ŭ	15			ons, postage, and shipping			2009	S-AU	5		
	16			describe > See Schedule			•	S. 1	6	28,	340
	17			Add lines 10 through 16		AUSTIN TE	AS .	1	7	52,	810
S	18	Excess or	(deficit)	for the year (Subtract line	17 from line 9)		1	В	2,	179
Net Assets	19		•	•		•		e with			
As	''	9 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).							9	19,	084
<u>e</u>	20			net assets or fund balance				. 2	0		
<u>z</u>	21			d balances at end of year.				▶ 2			<u> 263</u>
P	art II	Balance	Sheets	s. If Total assets on line 25,	column (B) a	re \$2,500,000 or more	e, file For	m 990 inste	ead	of Form 990-EZ	
		(ede the metadelene for fair ii.)						inning of year		(B) End of year	
22	2 Cash	Cash, savings, and investments						19,084	_	21,	263
23 Land and buildings								23	<u> </u>		
						24					
2	25 Total assets						19,084	+		263	
20	5 Tota	l liabilities	(describ	oe ▶)			26		
2				lances (line 27 of column (19,084	27		263
Fo	r Privac	y Act and Pa	aperwoi	k Reduction Act Notice, see	the Instruction	ı for Form 990.	Cat. No	106421		Form 990-EZ (2	2008)



Pa	rt V Other Information (Note the statement requirements in the instructions for Part VI.)					
			Yes	No		
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		1		
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		1		
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.					
а	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35a		/		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		1		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N	36		1		
	Enter amount of political expenditures, direct or indirect, as described in the instructions Did the organization file Form 1120-POL for this year?	37b		1		
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	1		<u> </u>		
004	any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		1		
b	If "Yes," complete Schedule L, Part II and enter the total amount involved					
39	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on line 9	_				
b	Gross receipts, included on line 9, for public use of club facilities	4				
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶; section 4955 ▶			3		
b	Section 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," complete Schedule L, Part I	40b				
С	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 ▶	*	*	;		
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	*			
41	List the states with which a copy of this return is filed. ▶ Oklahoma					
42a	The books are in care of ▶ Stan Evetts Telephone no ▶ ()				
	Located at ► Broken Arrow. OK ZIP + 4 ►					
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		Ţ,			
	over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	No ✓		
	If "Yes," enter the name of the foreign country: ▶					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		√		
	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					
			Yes	No		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of					
- •	Form 990-EZ	44		1		
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		1		

orm	990-EZ	(2008)

Page 4

Par	t VI	Section 501(c)(3) organizations only and complete the tables for lines 50 a		organizations mu	st answer quest	ions 4	6–49	
46	Did th	e organization engage in direct or indirect p	political campaign activities	s on behalf of or I	n opposition to		Yes	No
		dates for public office? If "Yes," complete S				46	ļ <u>.</u>	✓
47	Did th	e organization engage in lobbying activities	? If "Yes," complete Sche	dule C, Part II .		47		1
48	Is the	organization operating a school as describe	ed in section 170(b)(1)(A)(ii))? If "Yes," compl	ete Schedule E .	48		/
49a	Did th	e organization make any transfers to an exe	empt non-charitable relate	d organization?		49a		✓
b	If "Ye	s," was the related organization(s) a section	527 organization?			49b		<u> </u>
50		lete this table for the five highest compensate received more than \$100,000 of compensate					Expens	
	(a) N	ame and address of each employee paid more than \$100,000	hours per week devoted to position	(o, componential	employee benefit plans & deferred compensation	acc	ount ar allowar	nd
Non	e			-				
Tota	numb	er of other employees paid over \$100,000 🕨				<u> </u>		
51		lete this table for the five highest compensation from the organization. If there is no		ors who each rec	eived more than \$	100,000) of	
		(a) Name and address of each independent contractor	paid more than \$100,000	(b) Ty	pe of service	(c) Cor	npensa	tion
Non	е							
Total	numb	er of other independent contractors each re	<u> </u>	•				
Sign		Under penalties of peruny, Teclare that I have examinand belief, it is true correct and complete Declarate	ned this return, including accomp on of preparer (other than office	oanying schedules and r) is based on all inforr 	nation of which prepare	best of r er has ar	ny knov sy knov	vledge vledge
Here		Signature of officer			Date /			
		Stan Evetts, Treasurer						
		Type or print name and title						
Paid Prepa	aror!e	Preparer's signature	OA Date 1/- 1/6	Check if self-employed	Preparer's Identifying) Number (See insti	ructions)
Use (
	y	if self-employed), address, and ZIP + 4 319 W. Washington	St., Broken Arrow, Oklah	oma 74012	Phone no ► ()			
May	the IR	S discuss this return with the preparer show	vn above? See instructions	s	<u>.</u>	✓ У Y	es	(2008)

PAGE 1, LINE 10:

Rotary International	16,115
Local Charities	<u>8,356</u>

Total <u>24,470</u>

PAGE 1, LINE 16:

Meals	23,799
Advertising	250
Rotary Paraphernalia	2,394
Bank Expense	46
Other Expense	<u>1,851</u>

Total <u>28,340</u>

Rotary International Broken Arrow Oklahoma Rotary Club 73-1266278 Form 990EZ June 30, 2009

PAGE 2, PART IV:

Name and Address	Title & # of Hours		Comp.	Empl Ben	Exp A/C
Bob Cacy, Broken Arrow, OK	President	15	-0-	- 0-	-0-
Paul Barrett, Broken Arrow, OK	Pres. Elect	0	-0-	-0-	-0-
Terry Cupp, Broken Arrow, OK	Pres. Nom A	0	-0-	-0-	-0-
Jeff Hewett, Broken Arrow, OK	Pres. Nom B	0	-0-	-0-	-0-
David Rampey, Broken Arrow, OK	Past Pres.	0	-0-	-0-	-0-
Nick Nail, Broken Arrow, OK	Secretary	2	-0-	-0-	-0-
Stan Evetts, Broken Arrow, OK	Treasurer	2	-0-	-0-	-0-
Jeff Steen, Broken Arrow, OK	Sgt. At Arms	0	-0-	-0-	-0-
Janie Thomas, Broken Arrow, OK	Pub.Rel.	0	-0-	-0-	-0-