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AMENDED

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

CMB No 1545-1150

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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 \$500,000 and total assets less than \$1,250,000 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

A For the 2009 calendar year, or tax year beginning

Jan 1, 2009, and ending

Dec 31, 2009

B Check if applicable:

- ☐ Address change
☐ Name change
☒ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

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

C Name of organization

Rotary Club of Kona Sunrise

Number and street (or P.O. box, if mail is not delivered to street address)

P.O. Box 2343

City or town, state or country, and ZIP + 4

Kailua-Kona, HI 96745

D Employer identification number

26-4183938

E Telephone number

808 331-8191

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: ☒ Cash ☐ Accrual
Other (specify) ▶

I Website: ▶ www.kona.sunrise.rotary.org

J Tax-exempt status (check only one) — ☒ 501(c)(4) (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 Form 990-EZ or Form 990 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 \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

		1		2		3		4		5c		6c		7c		8		9		10		11		12		13		14		15		16		17		18		19		20		21	
Revenue	1	Contributions, gifts, grants, and similar amounts received								5733																																	
	2	Program service revenue including government contracts								-0-																																	
	3	Membership dues and assessments								5295																																	
	4	Investment income								-0-																																	
	5a	Gross amount from sale of assets other than inventory				5a		-0-																																			
	b	Less: cost or other basis and sales expenses				5b		-0-																																			
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)										5c		-0-																													
	6	Special events and activities (complete applicable parts of Schedule O; if any amount is from gaming, check here ☐																																									
	a	Gross revenue (not including \$ of contributions reported on line 1)				6a		920																																			
	b	Less: direct expenses other than fundraising expenses				6b		920																																			
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)												6c		-0-																												
7a	Gross sales of inventory, less returns and allowances				7a		-0-																																				
b	Less: cost of goods sold				7b		-0-																																				
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)														7c		-0-																										
8	Other revenue (describe ▶)														8		-0-																										
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8														9		11,628																										
Expenses	10	Grants and similar amounts paid (attach schedule)														10		-0-																									
	11	Benefits paid to or for members														11		-0-																									
	12	Salaries, other compensation, and employee benefits														12		-0-																									
	13	Professional fees and other payments to independent contractors														13		-0-																									
	14	Occupancy, rent, utilities, and maintenance														14		-0-																									
	15	Printing, publications, postage, and shipping														15		-0-																									
	16	Other expenses (describe ▶)														16		5,715																									
	17	Total expenses. Add lines 10 through 16														17		5,715																									
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)														18		5,313																									
	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		-0-																									
	20	Other changes in net assets or fund balances (attach explanation)														20		-0-																									
	21	Net assets or fund balances at end of year. Combine lines 18 through 20														21		5,313																									

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	-0-	22 5,313
23	Land and buildings	-0-	23 -0-
24	Other assets (describe ▶)	-0-	24 -0-
25	Total assets	-0-	25 5,313
26	Total liabilities (describe ▶)	-0-	26 -0-
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	-0-	27 5,313

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Kit No 106421

Form 990-EZ (2009)

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No statute issue
JUL 22 2016

JUL 22 2016

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