

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



990-EZ

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)

Soonsoring 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.

2009

OMB No. 1545-1150

Open to Public

► The organization may have to use a copy of this return to satisfy state reporting requirements.													
A	For th	e 2009 calend	ar year,	or tax year beginning	7 71	1 <u>, </u>	2009, ar	nd ending		6/30		, 20 10	
В	Check if	ck of epplicables: Please C Name of organization					D Emplo	yer ide	entification n	umber			
		s change	USE INT. POTABLY INTERNATIONAL GREATER FLINT CHAPTER					38-2987602					
n	Name o							E Telepi	Telephone number				
	Instal re	itum	um Itype.						·	84	0-249-2038		
	Termina	ated	See Specific	PO BOX 105			L						
	Amend	ed return	Instruc-	City or town, state or count	ry, and ZIP + 4				F Grou		•		
	Applica	tion pending	tions.	FLINT, MI 48501						ber 🕨		0573	_
	• Se	ction 501(c)(3)	organia	zations and 4947(a)(1) no	nexempt charit	able trusts must	attach	G Accou	nting Me	thod:	☐ Cash	✓ Accrua	al
	 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 M Other (specify 												
_	H Check ▶ □								▶ □;	then	manization	is not	_
							•						
-						□ 40.47(·)(4) ···	[] cox	- -		attach Schedule B (Form 990,			
1	Tax-e			nly one) — 🗹 501(c) (4					Z, or 990	<u> </u>			
	Check			ization is not a section 509								,000. A	
				turn is not required, but it						ete ret	um.		
L	Add lir	es 5b, 6b, and 7	b, to line	e 9 to determine gross recei	ipts; if \$500,000 o	r more, file Form 99	0 instead	of Form 990	-EZ ▶	\$			_
	art I	Revenu	e, Exp	enses, and Change	s in Net Ass	ets or Fund B	alance	s (See the	instruc	tions	s for Part	ĺ.)	
	1			ts, grants, and similar a						1			32
	2			revenue including gove					· · ·	2			_
		-			illilein ices ai	d Contracts .			!	3		480	<u></u>
	3		-	s and assessments.					!				72
	4	Investmen					1 - 1		· ·	4			
	5	a Gross amo	ount fro	m sale of assets other	than inventory		5a						
	1	Less: cost	or othe	er basis and sales expe	nses		5b			ļ			
		Gain or (lo	ss) fron	n sale of assets other the	han inventory (Subtract line 5b	from lin	e 5a)	[5c			
9	6	O 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1											
9	,					f contributions			ı				
Revenue	il '	reported o	· • .	. • • • • • • • • • • • • • • • • • • •			6a		25188	i			
•	`I.	•		•		· · · · ·	6b	·	5788	i			
	'		•	nses other than fundrai	• .			0.1	3700		ı	404	00
	1			ss) from special events			1 _ 1	ne 6a)	}	6c		1940	<u> </u>
	7:	a Gross sale	s of inv	ventory, less returns an	d allowances		7a						
		b Less: cost	of goo	ds sold			7b	<u> </u>					
		c Gross pro	fit or (lo	oss) from sales of invent	tory (Subtract li	ine 7 b from l ine	7a)			7c			
	8	Other reve	nue (de	escribe Weekly brea	akfast - net	l RFC	$\vdash \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \!$	-1)	\	8			0
	9	Total reve	nue. A	dd lines 1, 2, 3, 4, 5c, 6	6c, 7c, and 8	1			. ▶	9		248	04
	10	Grants and	d simila	ar amounts paid (attach	schedule) .	. KON .				10		240	89
	11					NOV	0 1 20	(0 : S		11			_
a		•		ompensation, and empl		一一		. <u>S</u>	· ·	12			
ğ	12	Salaries, C	uter CC	impersation, and empi	oyee benenis			<u>:</u>		13			—
Fxnenses	13	Protession	iai iees	and other payments to	o maepenaent (THE DESIGNATION OF THE PERSON	:N:						
Ž	14	Occupano	y, rent,	, utilities, and maintena	nce			• • •=		14			
Ü	15			ions, postage, and shipping						15			<u>-</u>
	16			(describe ► see attached)						16		49	
	17	Total exp	enses.	Add lines 10 through 1	6	<u></u>	<u> </u>	<u></u>	. ▶	17		290	69
a	18	Excess or	(deficit) for the year (Subtract	line 17 from lin	ie 9)			[18		-42	65
Not Assets	19	Net asset	or fur	nd balances at beginni	ing of year (fro	m line 27, colur	nn (A)) ((must agree	e with				
ä	į			e reported on prior yea						19		321	25
7	20	-	_							20			_
Ž	20	, , ,								21	· · · · · ·	278	60
		121 Net assets or fund balances at end of year. Combine lines 18 through 20								ed of Form			
	ail	Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 9											
			(See the instructions for Part II.) (A) Beg						-		of year		
2	2	Cash, savings, and investments					·	4	5033		456	74	
2	3	J								23			
2	24								24				
								25	456	74			
									_		178	_	
	.U 17	Not seeste o	r fund i	halances (line 27 of co	humn (R) must	egree with line 2	11)	-′ ├──		2125		278	_

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

Form **990-EZ** (2009)

Cat. No. 106421

Par	Statement of Program Service Accom	plishments (See the instr	uctions for Part I	II.)	-	Expenses
Wha	t is the organization's primary exempt purpose?	SERVICE TO YOUTH IN GR	EATER FLINT, MI			ired for section
Desc)(3) and 501(c)(4)				
manı		izations and section (a)(1) trusts; optional				
each	program title.					hers.)
28	GRANTS TO LOCAL 501(C)(3) ORGANIZATIONS FOR	R THE BENEFIT OF YOUTH I	N GENESEE COUN	TY		
	MICHIGAN INCLUDING \$2,000 IN SCHOLARSHIPS PA	AID DIRECTLY TO COLLEGE	S			

		includes foreign grants, ch	eck here	. ▶ 🗆	28a	18295
29	GRANTS TO ROTARY INTERNATIONAL	*				
		includes foreign grants, ch	eck here	▶ ⊔	29a	4977
30	LITERACY PROJECT IN FLINT, MI					

	(Crosto C	:				047
21	(Grants \$) If this amount Other program services (attach schedule)	includes foreign grants, ch	eck nere	<u>. ▶ ⊔</u>	30a	817
31	• •	includes foreign grants, ch			04-	•
32	Total program service expenses (add lines 28a t	through 31a)	eck nere	<u>. ▶ ∐</u>	31a 32	24089
Par		Employees. List each one e	ven if not compens	ted. (See the		
		(b) Title and average	(c) Compensation	(d) Contribution	ns to	(e) Expense
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee benefit deferred comper	plans &	account and other allowances
SEE	ATTACHED					00101 001010000
				!		
				<u> </u>		
			}			
]		
				1		
				1		
				1		
				<u> </u>		
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		}			
	·					
			ļ			
				<b> </b>		
				l		
						- <u></u>
	,					
						·
				İ		
	<del></del>		<del> </del>	-		<u> </u>
				<del>                                     </del>		
	,,					
						<del></del>
			1			
						<del></del>
				İ		
		i e		1		

Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes  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 why the organization did not report the income on Form 990-T.  Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?  If "Yes," has it filed a tax return on Form 990-T for this year?  Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicable parts of Schedule N  The complete applicabl	Part	Other Information (Note the statement requirements in the instructions for Part V.)			
description of each activity  4 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes  5 If the organization hard income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T.  a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(9) notice, reporting, and proxy tax requirements?  b If "Yes," has it filed a tax return on Form 990-T for this year?  3 Did the organization derope a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N  37 Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a	•			Yes	No
44 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes  55 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on firm 990-T, attach a statement explaining why the organization did not report the income on Form 990-T. attach a statement explaining why the organization of not report the income on Form 990-T. attach a statement explaining why the organization of or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?  56 If "Yes," has if filed at xertertim or Form 990-T for this year?  57a If "Yes," has if filed at xertertim or Form 990-T for this year?  57b If "Yes," has if filed at xertertim or Form 990-T for this year?  57b If "Yes," has if filed at xertertim or Form 990-T for this year?  57b If "Yes," complete Schedule N. Addition, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete splicable parts of Schedule N. Addition of the organization of the prior year and still outstanding at the end of the period covered by this return?  57c If "Yes," complete Schedule N. Part I and enter the total amount involved a section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule I, Part I in the organization aparty to a prohibited tax shelter transaction' If "Yes," complete Form 8886-T.  58ction 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c remultive by the organization.  58ction 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c remultive by the organization or disputation.  58ction 501(c)(3) and 501(c)(4) organizations are the organization aparty to a prohibited tax shelter t	33		33		1
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 933(e) notice, reporting, and proxy tax requirements?  b if "Yes," has it filed a tax return on Form 990-T for this year?  Did the organization indegro a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N  The provided part of the organization flower of the parts of Schedule N  Did the organization fle Form 1120-POL for this year?  Did the organization fle Form 1120-POL for this year?  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 outstanding at the end of the period covered by this return?  b if "Yes," complete Schedule L, Part II and enter the total amount involved  38b   Section 501(c/R) organizations. Enter the total amount involved  38c   Section 501(c/R) organizations. Enter amount of tax imposed on the organization during the year undersection 4911 ▶ : section 4912 ▶ : section 4955 ▶    Section 501(c/R) and 501(c/R) organizations. Enter amount of tax imposed on organization managers or disqualified person during the year undersection 4911 ▶ : section 4911 ▶ : section 4912 ▶ : section 4955 P   0    Section 501(c/R) and 501(c/R) organizations. Enter amount of tax imposed on organization managers or disqualified person during the year undersection 4912 P   0   0    All organizations of 10(c/R) organizations. Enter amount of tax imposed on organization managers or disqualified person during the year under sections 4912 P   0   0   0   0   0   0   0   0   0	34				1
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 803(e) notice, reporting, and proxy tax requirements?  b If "Yes," has it filed a tax return on Form 990-T for this year?  35 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete sphilicable parts of Schedule N.  37 Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37 a	35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but			
6033(e) notice, reporting, and proxy tax requirements?  35a		· · · · · · · · · · · · · · · · · · ·			[
Joil the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N  The amount of political expenditures, direct or indirect, as described in the instructions. ▶   37a   0    Both the organization brown from, or make any loans to, any officer, director, frustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	а		35a		1
during the year? If "Yes," complete applicable parts of Schedule N  7a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a	b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
b Did the organization file Form 1120-POL for this year?  38a 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 outstanding at the end of the period covered by this return?  b If "Yes," complete Schedule L, Part II and enter the total amount involved  Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on line 9  b Gross receipts, included on line 9, for public use of club facilities  c Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:  section 4911 ▶	36		36		✓
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 outstanding at the end of the period covered by this return?  b if "Yes," complete Schedule L, Part II and enter the total amount involved 389  Section 501(c)(7) organizations. Enter:  initiation fees and capital contributions included on line 9  B Gross receipts, included on line 9, for public use of club facilities 399  Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ section 4912 ▶ section 4912 ▶  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.  C Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c rembursed by the organization  e 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.  Located at ▶ 910 N Vernon Ave., Flint, Mi Schwartz, Treasurer  Located at ▶ 910 N vernon Ave., Flint, Mi Schwartz, Treasurer  Telephone no. ▶ 819-335-2455  Located at ▶ 910 N vernon Ave., Flint, Mi Schwartz, Treasurer  Telephone no. ▶ 819-335-2455  Located at ▶ 910 N vernon Ave., Flint, Mi Schwartz, Treasurer  Telephone no. ▶ 819-335-2455  425	37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0			
any such loans made in a prior year and still outstanding at the end of the period covered by this return?  b if "Yes," complete Schedule L, Part II and enter the total amount involved  38b  Section 501(e)(7) organizations. Enter:  initiation fees and capital contributions included on line 9  Gross receipts, included on line 9, for public use of club facilities  39b  40a Section 501(e)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 E-72 if "Yes," complete Schedule L, Part I  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on 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.  Located at ▶ 910 N Vernon Ave, Flint, MI  List the states with which a copy of this return is filed. ▶ NONE NOT REQUIRED  At any time during the calendar year, did the organization have an interest in or a signature or other atmonity over a financial account in a foreign country; ▶  See the instructions for exceptions and filing requirements for Form 10 F	ь	Did the organization file Form 1120-POL for this year?	37b		✓
Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 ▶ Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule 1, Part 1  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reminured by the organization or disqualified persons during the year under sections 4912, 4955, and 4958  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reminured by the organization or disqualified persons during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.  1 List the states with which a copy of this return is filed. ▶ NONE NOT REQUIRED  42a  The organization's books are in care of ▶ Mark Schwartz, Treasurer Telephone no. ▶ 819-836-2455 48566  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: ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  42b  yes No 442b  Ves No 4456, If "Yes," Form 990 must be completed in	38a		38a		1
a Initiation fees and capital contributions included on line 9 b Gross recepts, included on line 9, to public use of club facilities 33b	b	If "Yes," complete Schedule L, Part II and enter the total amount involved   38b			
Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4915 ▶ ; section 4915 ▶  b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Parl I	39	Section 501(c)(7) organizations. Enter:			1
Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶	а	Initiation fees and capital contributions included on line 9			
b Section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶  b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.  d Section 501(c)(3) and 501(c)(4) organizations. 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? If "Yes," complete Form 8886-T.  1 List the states with which a copy of this return is filed. ▶ NONE NOT REQUIRED  1 The organization's books are in care of ▶ Mark Schwartz, Treasurer Telephone no. ▶ 810-836-2455  1 Located at ▶ 910 N Vernon Ave., Flint, MI ZIP + 4 ▶ 48506  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: ▶ See the instructions for exceptions and filing requirements for Form 1D F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	b				
transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40a		-		
C Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	b				
organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			40b		✓
e 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.  List the states with which a copy of this return is filed. ▶ NONE - NOT REQUIRED  The organization's books are in care of ▶ Mark Schwartz, Treasurer Telephone no. ▶ 810-836-2455  Located at ▶ 910 N Vernon Ave., Flint, MI ZIP + 4 ▶ 48506  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)?  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.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country: ▶  3 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  42 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  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 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 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	C	organization managers or disqualified persons during the year under sections 4912,	1		
transaction? If "Yes," complete Form 8886-T.  List the states with which a copy of this return is filed. ▶ NONE - NOT REQUIRED  The organization's books are in care of ▶ Mark Schwartz, Treasurer Telephone no. ▶ 810-836-2455 Located at ▶ 910 N Vernon Ave., Flint, MI ZIP + 4 ▶ 48506  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;)?  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.  C At any time during the calendar year, did the organization maintain an office outside of the U.S.?	d				-
List the states with which a copy of this return is filed. ▶ NONE - NOT REQUIRED  The organization's books are in care of ▶ Mark Schwartz, Treasurer Telephone no. ▶ 810-836-2455  Located at ▶ 910 N Vernon Ave., Flint, MI ZIP + 4 ▶ 48506  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)?  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.  C 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: ▶  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  At Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	е		40e		1
The organization's books are in care of ▶ Mark Schwartz, Treasurer Telephone no. ▶ 810-836-2455  Located at ▶ 910 N Vernon Ave., Flint, MI ZIP + 4 ▶ 48506  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)?	41	List the states with which a copy of this return is filed. ▶ NONE - NOT REQUIRED			<u> </u>
Located at ▶ 910 N Vernon Ave., Flint, MI  ZIP + 4 ▶ 48506  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)?	42a		10-83	6-245	5
over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  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.  C At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country: ▶  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  Yes No  Yes No  Yes No  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			48	506	••••
account)?	b				
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.  C At any time during the calendar year, did the organization maintain an office outside of the U.S.?				Yes	No
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?		,	42b		✓
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 ►   44 and enter the amount of tax-exempt interest received or accrued during the tax year ►   45 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
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	C		42c		✓
Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. 1	▶ □
Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ			í	V	NI -
Form 990-EZ  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	44	Did the organization maintain any denor adviced funds? If "Vos." Form 000 must be completed instead of		Yes	NO
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	-				1
"Yes," Form 990 must be completed instead of Form 990-EZ	45		44		<b>-</b>
<u> </u>			45		1
				)-EZ	(2009)

Page	4

Part \	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 and	7(a)(1) nonexemp	nonexem t charitable	pt charita e trusts mu	<b>ble trusts only.</b> A st answer question	ll sec ons 46	tion 5-491	٥
46	Did the organization engage in direct or indirect	political campaign	activities of	n behalf of	or in opposition to		Yes	No
	candidates for public office? If "Yes," complete S	Schedule C, Part I				46		
47	Did the organization engage in lobbying activities	? If "Yes," complet	e Schedule	C, Part II		47		
	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E							<u> </u>
49a	Did the organization make any transfers to an ex-	empt non-charitabl	e related org	panization?		49a		l
Þ	If "Yes," was the related organization a section 5	27 organization?				49b		1
	Complete this table for the organization's five hig employees) who each received more than \$100,0							
	(a) Name and address of each employee paid more than \$100,000	(b) Title and avera hours per week devoted to positi	ge (c)	Compensation		(e)	Expen count a allowa	ise and
	Total number of other employees paid over \$100 Complete this table for the organization's five h		ed independ	lent contra	ctors who each rec	eived	more	e than
	\$100,000 of compensation from the organization  (a) Name and address of each independent contractor	n. If there is none, e	nter "None.	· , · · · · · · · · · · · · · · · · · ·	Type of service		mpens	
d	Total number of other independent contractors e	ach receiving over	\$100,000	▶				
Sign Here	Signature of officer  Date  Date  Date							
Paid Prepare	Type or print name and title  Preparer's signature  Er's		Date	Check if self- employed ▶ [	Preparer's identifying nur	nber (Se	e instruc	tions)
Use On	_   Parmis naune (or _ <b>L</b>				EIN ►			
	address, and ZIP + 4				Phone no. ▶			
May th	e IRS discuss this return with the preparer shown	above? See instru	ctions .	· · · · ·		Yes		No ranna

## Rotary International Greater Flint Sunrise Chapter

# Form 990EZ 38-2987602

#### **Other Expenses**

Total Other Expenses	\$ 4,980.00
Subtotal - club expenses	\$ 4,980.00
Dues to Regional & National Rotary	\$ 3,408.00
Supplies and convention	\$ 1,572.00
Club Expenses:	

## **Rotary International Greater Flint Sunrise Chapter**

# Form 990EZ 38-2987602

## Grants Paid FY ending 6/30/10

Local Grants:			
Arab American Council	\$	1,500.00	
Area XVIII Special Olympics	\$	500.00	
Big Brothers Big Sisters	\$	1,000.00	
Families of Murdered Children	\$	1,000.00	
Flint Community Schools	\$	1,000.00	
Flint Public Library	\$	1,000.00	
Foster Hope Project	\$	1,000.00	
Motherly Intercession	\$	2,000.00	
Salvation Army	\$	2,000.00	
Shelter of Flint	\$	1,000.00	
Weiss Advocacy Center	\$	1,000.00	
Seminar for Tomorrow's Leaders	\$	600.00	
Flushing Rotary Club	\$	150.00	
Rotary Club of Wiarton	\$	100.00	
Other	\$	215.00	
Salvation Army - purchase of new			
clothing	\$	2,230.00	
University of Michigan - Scholarships	\$	2,000.00	B. McAdory and D. Person
Subtotal Local Grants	\$	18,295.00	
Rotary District & Foundation			
Burton Rotary Club	\$	2,000.00	Avoidable Blindness Project
Rotary Foundation		1,035.00	Aquaboxes for Haiti
Rotary Foundation	\$ \$ \$	1,942.00	Unallocated
Subtotal Rotary grants	\$	4,977.00	-
Literacy Project			
Genesee Valley Rotary	\$	500.00	District Literacy Project
Salvation Army	\$		Other Literacy Project
Subtotal Literacy Project	\$	817.00	
Total Grants	\$	24,089.00	<u>-</u>

## **Rotary International Greater Flint Sunrise Chapter**

## Form 990EZ 38-2987602

#### **List of Officers and Directors**

(A) Name & Address	(B) Title & Hrs/wk	(C) Comp	(D) Benefits	(E) Exp	
Jeff Bennett 8198 Manchester, Grand Blanc, MI 48439	President - 5 hrs	None	None	None	
Stacy Merrill 2097 N. Belsay Rd., Burton, MI 48509	Pres-Elect - 5 hrs	None	None	None	
Jamie Gaskin 2117 Pierce St., Flint, MI 48503	Vice Pres - 1 hr	None	None	None	
Karl Olmsted 15496 Bealfred Dr., Fenton, MI 48430	Secy - 2 hrs	None	None	None	
Allen Tucker 10302 Greenbrier Dr., Brighton, MI 48114	Treas - 5 hrs	None	None	None	
James Murdock 13401 Wenwood Drive, Fenton, MI 48430	Director - 1 hr	None	None	None	
Karen Schmidt 3817 Woodrow, Flint, MI 48506	Director - 1 hr	None	None	None	
Stacy Merrill 2097 N. Belsay Rd., Burton, MI 48509	Director - 1 hr	None	None	None	
Ashoka Rao 2528 Nandi Hill, Swartz Creek, MI 48473	Director - 1 hr	None	None	None	
Gloria DeHart 2400 Wayburn, Mt Morris, MI 48458	Director - 1 hr	None	None	None	
Michael Heberling 4275 Redding Circle, Grand Blanc, MI 48439	Director - 1 hr	None	None	None	
Andrew Wittenberg 6166 Lismore Circle, Grand Blanc, Mi 48439	Director - 1 hr	None	None	None	
Tom Crampton 12104 Crawford Rd, Otisville, MI 48463	Past President - 1 hr	None	None	None	