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Short Form
Return of Organization Exempt From Income TaxUnder 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

2009

Open to Public
Inspection

A For the 2009 calendar year, or tax year beginning 07/01/09, and ending 06/30/10

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 OAKLAND, MARYLAND CHARITIES, INC.

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

PO BOX 741

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

OAKLAND MD 21550

D Employer identification number

52-1874562

E Telephone number
301-334-8406

F Group Exemption Number

• 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: ► N/A

J Tax-exempt status (check only one) — 501(c) (3) (insert no) 4947(a)(1) or 527K 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 ► \$ 96,530

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

1 Contributions, gifts, grants, and similar amounts received
2 Program service revenue including government fees and contracts
3 Membership dues and assessments
4 Investment income
5a Gross amount from sale of assets other than inventory
b Less cost or other basis and sales expenses
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)
6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ►
a Gross revenue (not including \$ _____ of contributions reported on line 1)
b Less direct expenses other than fundraising expenses
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)
7a Gross sales of inventory, less returns and allowances
b Less cost of goods sold
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)
8 Other revenue (describe ► SEE STATEMENT 2)
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c and 8

SEE STATEMENT 1

5a	1
5b	2
	3 242
	4 182
	5c

6a	84,284
6b	50,074
6c	34,210
	7c
	8 8,822

7a	9 46,456
7b	10 15,935
	11
	12
	13 385
	14
	15
	16 23,404
	17 39,724
	18 6,732
	19 68,086
	20
	21 74,818

10 Grants and similar amounts paid (attach schedule) STMT 3
11 Benefits paid to or for members
12 Salaries, other compensation, and employee benefits
13 Professional fees and other payments to independent contractors
14 Occupancy, rent, utilities, and maintenance
15 Printing, publications, postage, and shipping
16 Other expenses (describe ► SEE STATEMENT 4)
17 Total expenses. Add lines 10 through 16

STMT 3

18 Excess or (deficit) for the year (Subtract line 17 from line 9)
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)
20 Other changes in net assets or fund balances (attach explanation)
21 Net assets or fund balances at end of year. Combine lines 18 through 20

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	16,901	22 23,633
23 Land and buildings	24,426	23 24,426
24 Other assets (describe ► SEE STATEMENT 5)	26,759	24 26,759
25 Total assets	68,086	25 74,818
26 Total liabilities (describe ►)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	68,086	27 74,818

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

Part V Other Information (Note the statement requirements in the instructions for Part V.)

	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	X
34 Were any changes made to the organizing or governing documents? 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, 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	35a	X
a 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?	35b	
b If "Yes," has it filed a tax return on Form 990-T for this year?	36	X
36 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	37a	37a
b Did the organization file Form 1120-POL for this year?	37b	X
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?	38a	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations. Enter:	39a	
a Initiation fees and capital contributions included on line 9	39b	
b Gross receipts, included on line 9, for public use of club facilities		
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► _____, section 4912 ► _____, section 4955 ► _____	40b	X
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	40e	X
41 List the states with which a copy of this return is filed ► MD		
42a The organization's books are in care of ► KEN WITTE 314 ALLEGANY DRIVE Located at ► MOUNTAIN LAKE PARK, MD	Telephone no ► 301-334-6991 ZIP + 4 ► 21550	
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, Report of Foreign Bank and Financial Accounts.	42c	X
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 ► _____		
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	<input type="checkbox"/>
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
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	X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

46	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	<input type="checkbox"/> Yes <input type="checkbox"/> No
46		<input checked="" type="checkbox"/> X
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> X
47		<input checked="" type="checkbox"/> X
48	Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> X
48		<input checked="" type="checkbox"/> X
49a	Did the organization make any transfers to an exempt non-charitable related organization?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> X
49a		<input checked="" type="checkbox"/> X
b	If "Yes," was the related organization a section 527 organization?	
49b		
50	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."	

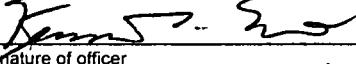
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE					

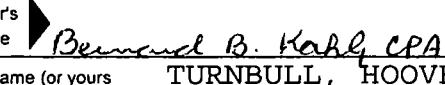
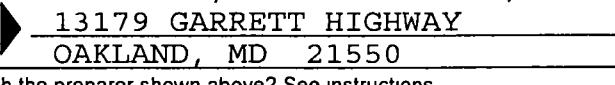
f Total number of other employees paid over \$100,000 ► _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

	(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE			

d Total number of other independent contractors each receiving over \$100,000 ► _____

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		
	► 	11-9-10	Date

Paid Preparer's Use Only	Preparer's signature ► 	Date 11/04/10	Check if self-employed ► <input type="checkbox"/>	Preparer's Identifying Number (See instr) P00119163
	Firm's name (or yours if self-employed), address, and ZIP + 4 ► 	TURNBULL, HOOVER & KAHL, P.A. 13179 GARRETT HIGHWAY OAKLAND, MD 21550	EIN ► 52-1518807	Phone no ► 301-334-2820

May the IRS discuss this return with the preparer shown above? See instructions

► Yes No

Form 990-EZ (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name of the organization ROTARY CLUB OF OAKLAND, MARYLAND
CHARITIES, INC. **Employer identification number** 52-1874562

Part I **Reason for Public Charity Status** (All organizations must complete this part) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)
9 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.)
10 An organization organized and operated exclusively to test for public safety See section 509(a)(4).
11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h
a Type I b Type II c Type III—Functionally integrated d Type III—Other
e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
(ii) A family member of a person described in (i) above?
(iii) A 35% controlled entity of a person described in (i) or (ii) above?
h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ

Schedule A (Form 990 or 990-EZ) 2009

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						► <input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>	
b 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>	
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>	
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	► <input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	68,515	57,183	61,379	74,347	84,284	345,708
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	68,515	57,183	61,379	74,347	84,284	345,708
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						345,708

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	68,515	57,183	61,379	74,347	84,284	345,708
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	10,912	12,381	579	344	182	24,398
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	10,912	12,381	579	344	182	24,398
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					0	
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)	79,427	69,564	61,958	74,691	84,466	370,106

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► **Section C. Computation of Public Support Percentage**

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	93.41 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	91.55 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	7 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	8 %
19a 33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization		► <input checked="" type="checkbox"/>
b 33 1/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions		► <input type="checkbox"/>

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Special Events Schedule		2009
Form 990	For calendar year 2009, or tax year beginning 07/01/09 , and ending 06/30/10	
Name ROTARY CLUB OF OAKLAND, MARYLAND CHARITIES, INC.	Employer Identification Number 52-1874562	

	(A)	(B)	(C)	Others	Total
Gross receipts	50,224	11,707	7,646	14,707	84,284
Less contributions	0	0	0	0	0
Gross revenue	50,224	11,707	7,646	14,707	84,284
Less direct expenses	21,435	16,998	5,617	6,024	50,074
Net income (loss)	28,789	-5,291	2,029	8,683	34,210

Description	(A)	<u>GARRETT COUNTY FAIR</u>
	(B)	<u>CHRISTMAS PROJECT</u>
	(C)	<u>AUTUMN GLORY/OCTOBERFEST</u>
Others		<u>CINDY'S FUND</u>
		<u>RODEO</u>
		<u>POLIO PLUS CAMPAIGN</u>
		<u>RED NECK DAYZ</u>
		<u>RELAY FOR LIFE</u>
		<u>TRACTOR PULL</u>

Federal Statements**Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments**

Description	Amount
MEMBERSHIP DUES	\$ 3,242
TOTAL	<u>3,242</u>

Statement 2 - Form 990-EZ, Part I, Line 8 - Other Revenue

Description	Amount
MEAL RECEIPTS	\$ 5,785
SCHOLARSHIP	1,248
CHRISTMAS BANQUET	1,031
MISCELLANEOUS CLUB	579
ADMISSION FEE	150
GUEST MEAL	29
TOTAL	<u>8,822</u>

Federal Statements

Statement 3 - Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid to Individuals

Relationship to Organization	Date of Gift	Class of Activity	Description of Property	Cash Contribution	Noncash Contribution	Book Value	Book Value Explanation	FMV Explanation
			COMMUNITY PROJECT	11,510				
TOTAL					11,510			

Federal Statements**Statement 4 - Form 990-EZ, Part I, Line 16 - Other Expenses**

Description	Amount
EXPENSES	
APPRECIATION PICNIC	634
BADGES & ENGRAVING	75
BANQUET MEALS & EXPENSES	2,308
BUILDING REPAIRS	97
CLEANING	3,818
DISTRICT DUES	975
EQUIPMENT REPAIRS	61
FLOWERS & GIFTS	494
FUEL	886
GROUP STUDY EXCHANGE	430
INSURANCE	1,145
LICENSES & PERMITS	255
MISCELLANEOUS	597
NEW MEMBER RECRUITMENT	71
POST OFFICE BOX	60
POSTAGE	67
PRINTING & STATIONARY	100
ROTARY INTERNATIONAL DUES	2,404
ROTARY SHIRTS	946
STEAK FRY-CLEANUP	283
TRAILER HAULING	1,000
TRAILER REPAIRS	1,058
WEEKLY MEALS	5,640
TOTAL	\$ 23,404

Statement 5 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beginning of Year	End of Year
MACHINERY & EQUIPMENT	\$ 26,759	\$ 26,759
	26,759	26,759

Federal Statements

Statement 6 - Form 990-EZ, Part III, Line 29 - Statement of Program Service Accomplishments

Description

COMMUNITY SERVICES- DONATIONS TO OTHER NOT-FOR-PROFIT GROUPS IE- LOCAL FIRE DEPTS, RESCUE SQUAD, LIBRARY, LITERACY GROUPS, CRIME WATCH, HOUSE OF HOPE, HABITAT FOR HUMANITY, AMERICAN CANCER SOCIETY, HOSPITAL FOUNDATION, HISTORICAL SOCIETY, UNITED WAY, ETC.

Federal Statements**Form 990-EZ, Part II, Line 23 - Land and Buildings**

Description	Beginning of Year	Accumulated Depreciation	End of Year
BUILDINGS AND EQUIPMENT	\$ 24,426	\$ 0	\$ 24,426
TOTAL	\$ 24,426	\$ 0	\$ 24,426

	Accumulated Depreciation
	\$ 0
	\$ 0

Federal Statements

Special Events Direct Expenses

Description	Amount
COLUMN A	
GARRETT COUNTY FAIR	\$ 21,435
COGS- FAIR	21,435
SUBTOTAL	21,435
COLUMN B	
CHRISTMAS PROJECT	16,998
COGS- CHRISTMAS PROJECT	16,998
SUBTOTAL	16,998
COLUMN C	
AUTUMN GLORY/OCTOBERFEST	615
COGS- OCTOBERFEST	5,002
COGS- AUTUMN GLORY	5,617
SUBTOTAL	5,617
COLUMN OTHERS	
CINDY'S FUND	472
COGS- HIGHLAND FESTIVAL	472
SUBTOTAL	472
RODEO	590
COGS- RODEO	590
SUBTOTAL	590
RED NECK DAYZ	512
COGS- RED NECK DAYZ	512
SUBTOTAL	512
RELAY FOR LIFE	3,084
COGS- RELAY FOR LIFE	3,084
SUBTOTAL	3,084
TRACTOR PULL	1,366
COGS - TRACTOR PULL	1,366
SUBTOTAL	1,366
SUBTOTAL (OTHERS)	6,024
TOTAL	50,074

DIRECT EXPENSES OTHER THAN FUNDRAISING EXPENSES
REPORTED ON FORM 990-EZ, PAGE 1, LINE 6B.