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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 \$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

Department of the Treasury
Internal Revenue Service

A For the 2009 calendar year, or tax year beginning 7/1/2009, and ending 6/30/2010

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization <u>Stillwater Noon Lions Club</u>		D Employer identification number <u>73-1323755</u>
		Number and street (or P O box, if mail is not delivered to street address) Room/suite		E Telephone number <u>405-743-2300</u>
		<u>2423 Countryside Dr</u>		F Group Exemption Number <u>0239</u>
		City, town, or country State ZIP + 4	<u>Stillwater OK 74074</u>	

• **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.stillwaternoonlions.org

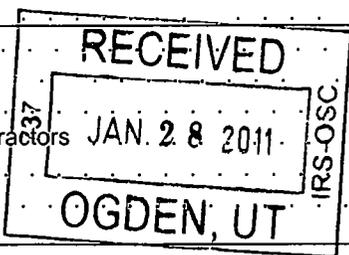
J Tax-exempt status (check only one)— 501(c) (4) ◀ (insert no.) 4947(a)(1) or 527

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 ▶ \$ 44,975

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

		Revenue	
1	Contributions, gifts, grants, and similar amounts received	1	5,916
2	Program service revenue including government fees and contracts	2	1,120
3	Membership dues and assessments	3	25,940
4	Investment income	4	84
5a	Gross amount from sale of assets other than inventory	5a	250
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	250
6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
a	Gross revenue (not including \$ <u>0</u> of contributions reported on line 1)	6a	0
b	Less: direct expenses other than fundraising expenses	6b	0
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	11,665
b	Less: cost of goods sold	7b	8,069
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	3,596
8	Other revenue (describe ▶ _____)	8	0
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	36,906
		Expenses	
10	Grants and similar amounts paid (attach schedule)	10	11,295
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	29,014
17	Total expenses. Add lines 10 through 16	17	40,309
		Net Assets	
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-3,403
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	15,681
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	12,278



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.

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	15,681	22 12,278
23	Land and buildings		23
24	Other assets (describe ▶ _____)	0	24 0
25	Total assets	15,681	25 12,278
26	Total liabilities (describe ▶ _____)	0	26 0
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	15,681	27 12,278

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Part III Statement of Program Service Accomplishments (See the instructions for Part III.)		Expenses	
What is the organization's primary exempt purpose? <u>Civic Service (club)</u>		(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)	
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, and other relevant information for each program title.			
28	<u>The Club conducts weekly educational and informative luncheons for members and guests</u> (Grants \$ <u>0</u>) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	28a	23,872
29	<u>See detail of line 10 for grants, eyeglasses for needy adults and children, scholarships, etc</u> (Grants \$ <u>0</u>) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	29a	11,295
30	<u>Members International, State and District dues</u> (Grants \$ <u>0</u>) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	30a	5,142
31	<u>Other program services (attach schedule)</u> ▶ <input type="checkbox"/> (Grants \$ <u>0</u>) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	31a	0
32	Total program service expenses. (add lines 28a through 31a) ▶	32	40,309

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV)				
(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
Ryan Luter 206 W Hwy 64 Morrison OK 74061	Title 3rd VP Hr/WK 2.00	0	0	0
Bill Dohmann 624 N Stallard Stillwater OK 74075	Title President Hr/WK 5.00	0	0	0
Dan Blankenship 2515 Summerlin Ct Stillwater OK 74075	Title 1st VP Hr/WK 2.00	0	0	0
Derek McCubbin 1612 S Westridge Stillwater OK 74074	Title 2nd VP Hr/WK 2.00	0	0	0
Gladeen Allred 923 W Osage Dr Stillwater OK 74075	Title Secretary Hr/WK 5.00	0	0	0
David Fairbanks 4710 N Britton Dr Stillwater OK 74075	Title Treas - Adm Hr/WK 5.00	0	0	0
Gaye Trivit 5118 W 4th Stillwater OK 74074	Title Treas - Project Hr/WK 5.00	0	0	0
Marcy Luter 206 W hwy 64 Morrison OK 74061	Title Director Hr/WK 2.00	0	0	0
Eddie Smith P O Box 346 Perkins OK 74059	Title Director Hr/WK 2.00	0	0	0
Juanita Phelan 116 E Eskridge Stillwater OK 74075	Title Director Hr/WK 2.00	0	0	0
Cindy Cumming 1406 S Mansfield Stillwater OK 74074	Title Director Hr/WK 2.00	0	0	0
Derrek Belase 117 E Lakehurst Stillwater OK 74075	Title Director Hr/WK 2.00	0	0	0
Sue Bonner 4626 N William Ct Stillwater OK 74075	Title Director Hr/WK 2.00	0	0	0
Jackie Padgett 4624 W 16th Ave Stillwater OK 74074	Title Tail Twister Hr/WK 2.00	0	0	0
Matt McCubbin 523 Hillcrest Ave Stillwater OK 74075	Title Lion Tamer Hr/WK 2.00	0	0	0
	Title Hr/WK .00	0	0	0
	Title Hr/WK .00	0	0	0
	Title Hr/WK .00	0	0	0

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.		X
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes.		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	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?		X
35b	b If "Yes," has it filed a tax return on Form 990-T for this year?		
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.		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. <input type="text" value="0"/>		
37b	b Did the organization file Form 1120-POL for this year?		
38a	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 outstanding at the end of the period covered by this return?		X
38b	b If "Yes," complete Schedule L, Part II and enter the total amount involved. <input type="text" value="0"/>		
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	a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 <input type="text"/> ; section 4912 <input type="text"/> ; section 4955 <input type="text"/>		
40b	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.		X
40c	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. <input type="text"/>		
40d	d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. <input type="text"/>		
40e	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.		X
41	List the states with which a copy of this return is filed. <input type="text" value="OK"/>		
42a	a The organization's books are in care of <input type="text" value="Banks & Banks, CPA, PC"/> Telephone no. <input type="text" value="405-743-2300"/> Located at <input type="text" value="215 W McElroy Rd, Suite 4"/> City <input type="text" value="Stillwater"/> ST <input type="text" value="OK"/> ZIP + 4 <input type="text" value="74075"/>		
42b	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: <input type="text"/> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		X
42c	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: <input type="text"/>		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year. <input type="text" value="43"/> N/A		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ.		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.		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. **Yes** **No**
- 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II. **46** **47**
- 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. **48**
- 49 a Did the organization make any transfers to an exempt non-charitable related organization? **49a**
- 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
Name <u>None</u> Str _____ City _____ ST ZIP _____	Title _____ Hr/WK .00	0	0	0
Name _____ Str _____ City _____ ST ZIP _____	Title _____ Hr/WK .00	0	0	0
Name _____ Str _____ City _____ ST ZIP _____	Title _____ Hr/WK .00	0	0	0
Name _____ Str _____ City _____ ST ZIP _____	Title _____ Hr/WK .00	0	0	0
Name _____ Str _____ City _____ ST ZIP _____	Title _____ Hr/WK .00	0	0	0

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
Name <u>None</u> Str _____ City _____ ST ZIP _____		
Name _____ Str _____ City _____ ST ZIP _____		
Name _____ Str _____ City _____ ST ZIP _____		
Name _____ Str _____ City _____ ST ZIP _____		
Name _____ Str _____ City _____ ST ZIP _____		

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

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

Sign Here Signature of officer: David J. Fairbanks Date: 1-21-11

Type or print name and title: David Fairbanks, Treasurer - Administrative Funds

Paid Preparer's Use Only

Preparer's signature: Michael D Banks Date: 12/15/2010 Check if self-employed: Preparer's identifying number (See instructions): P00114645

Firm's name (or yours if self-employed), address, and ZIP + 4: Banks and Banks, CPA, PC EIN: _____
215 W McElroy Rd, Ste 4, Stillwater, OK 74075 Phone no: (405) 743-2300

May the IRS discuss this return with the preparer shown above? See instructions **Yes** **No**

11,295 0 0

Amount of cash grant	Relationship	Description of the property	Purpose of payment to affiliate	Book value	How book value determined	Fair market value	Method used to determine FMV	Date received
1,595		Eyeglasses						
4,595		Cash						
750		Cash						
500		Cash						
1,530		Cash						
500		Cash						
750		Cash						
100		Cash						
975		Christmas gifts						

Part I, Line 16 (990-EZ) - Other Expenses

29,014

1	Travel*	1	
2	Meals and entertainment	2	21,124
3	Fundraising	3	
4	Amortization	4	0
5	Conferences, conventions, and meetings	5	
6	Depreciation	6	0
7	Depletion	7	
8	Equipment rental and maintenance	8	
9	Interest	9	
10	Supplies	10	
11	Telephone	11	
12	Unrelated business income taxes	12	0
13	P O Box	13	35
14	Sales Tax License	14	
15	Bank Charges	15	64
16	Awards	16	440
17	Admin supplies	17	671
18	Office expense	18	288
19	Meeting room rental	19	1,250
20	Advertising	20	
21	Int'l, State & District Dues	21	5,142
22		22	
23		23	
24		24	
25		25	
26		26	
27		27	
28		28	
29		29	