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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)

OMB No 1545-1150

2009

Open to Public
Inspection

► 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 **07/01/09**, and ending **06/30/10**

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ROTARY INTERNATIONAL SHAWNEE ROTARY CLUB	D Employer identification number 73-6103179
	Number and street (or P O box, if mail is not delivered to street address) P. O. BOX 513	E Telephone number 405-273-2880
	City or town, state or country, and ZIP + 4 SHAWNEE OK 74802	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) ▶

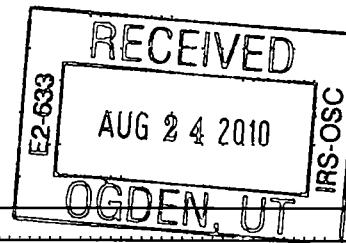
I Website: ▶ **N/A**J Tax-exempt status (check only one) — 501(c) (4) ▶ (insert no.) 4947(a)(1) or 527

H Check ▶ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

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 returnL 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 ▶ \$ **57,514**

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	1	1,217
2 Program service revenue including government fees and contracts	2	
3 Membership dues and assessments	3	35,235
4 Investment income	4	14
5a Gross amount from sale of assets other than inventory	5a	21,000
b Less: cost or other basis and sales expenses	5b	21,000
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ▶ <input type="checkbox"/>	6a	
a Gross revenue (not including \$ _____ of contributions reported on line 1)	6b	
b Less: direct expenses other than fundraising expenses	6c	
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	7a	
7a Gross sales of inventory, less returns and allowances	7b	
b Less: cost of goods sold	7c	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	8	48
8 Other revenue (describe ▶ See Statement 3)	9	36,514
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	10	5,695
10 Grants and similar amounts paid (attach schedule)	11	14,247
11 Benefits paid to or for members	12	780
12 Salaries, other compensation, and employee benefits	13	300
13 Professional fees and other payments to independent contractors	14	
14 Occupancy, rent, utilities, and maintenance	15	
15 Printing, publications, postage, and shipping	16	17,731
16 Other expenses (describe ▶ See Statement 4)	17	38,753
17 Total expenses. Add lines 10 through 16	18	-2,239
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	19	29,965
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	
20 Other changes in net assets or fund balances (attach explanation)	21	27,726
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	29,965	22	27,726
23 Land and buildings		23	
24 Other assets (describe ▶ _____)	24		
25 Total assets	29,965	25	27,726
26 Total liabilities (describe ▶ _____)	0	26	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	29,965	27	27,726

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

DAA

Form 990-EZ (2009)

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

What is the organization's primary exempt purpose?

COMMUNITY SERVICE CIVIC CLUB GROUP

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, or other relevant information for each program title.

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

28 GRANTS FOR SCHOLARSHIPS, YOUTH PROJECTS AND COMMUNITY SERVICE

(Grants \$ 5,695) If this amount includes foreign grants, check here

► 28a 38,753

29

(Grants \$ _____) If this amount includes foreign grants, check here

▶ 29a

30

(Grants \$) If this amount includes foreign grants, check here

30a

31 Other program services (attach schedule)

► 31a

32 Total program service expenses (add lines 28a through 31a)

38,753

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV.)

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

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity 33

34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes 34

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? 35b

b If "Yes," has it filed a tax return on Form 990-T for this year? 36

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

37a Enter amount of political expenditures, direct or indirect, as described in the instr 37b

b Did the organization file Form 1120-POL for this year? 38a

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? 38b

b If "Yes," complete Schedule L, Part II and enter the total amount involved 39a

39 Section 501(c)(7) organizations. Enter: 39b

a Initiation fees and capital contributions included on line 9 40a

b Gross receipts, included on line 9, for public use of club facilities 40b

40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 ► _____, section 4912 ► _____; section 4955 ► _____ 40c

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 40d

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 40e

d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization 40f

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 40g

41 List the states with which a copy of this return is filed. ► **OK**42a The organization's books are in care of ► **TONY MCMURRAY**Telephone no. ► **405-273-5000****201 N BROADWAY**Located at ► **SHAWNEE, OK**ZIP + 4 ► **74801**

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: ► _____

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** 44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 44 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

	Yes	No
33		<input checked="" type="checkbox"/>
34		<input checked="" type="checkbox"/>
35a		<input checked="" type="checkbox"/>
35b		
36		<input checked="" type="checkbox"/>
37b		<input checked="" type="checkbox"/>
38a		<input checked="" type="checkbox"/>
38b		
39a		
39b		
40a		
40b		<input checked="" type="checkbox"/>
40c		
40d		
40e		<input checked="" type="checkbox"/>
40f		
40g		

	Yes	No
42b		<input checked="" type="checkbox"/>
42c		<input checked="" type="checkbox"/>

	Yes	No
44		<input checked="" type="checkbox"/>
45		<input checked="" type="checkbox"/>

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.

		Yes	No
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	46	
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	
48	Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49a	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"		

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

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

Sign Here	<p>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</p> <p><input checked="" type="checkbox"/> <i>Aug 11-11'08</i> <input checked="" type="checkbox"/> <i>8-20-10</i></p> <p>Signature of officer <i>TONY M. McMURRY</i> Date <i>8-20-10</i></p> <p>Type or print name and title <i>TREASURER</i></p>	
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Paid Preparer's Use Only	Preparer's signature ►	Stan Blakemore CPA	Date 8/19/10	Check if self- employed ► <input type="checkbox"/>	Preparer's Identifying Number (See instr) P00000318
	Firm's name (or yours if self-employed), address, and ZIP + 4 ►	Gibson, Reynolds & Blakemore P.C. PO Box 549 Shawnee, OK 74802-0549			EIN ► 73-1438321 Phone no ► 405-275-5110

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

Yes No

77600000 ROTARY INTERNATIONAL SHAWNEE ROTARY

73-6103179

FYE: 6/30/2010

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Federal Statements

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

<u>Description</u>	<u>Amount</u>
MEMBERSHIP DUES	\$ 35,235
Total	\$ <u>35,235</u>

77600000 ROTARY INTERNATIONAL SHAWNEE ROTARY
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Federal Statements

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**Statement 2 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory -
Securities**

<u>How Received</u>	<u>Description</u>	<u>Whom Sold</u>	<u>Date Acquired</u>	<u>Date Sold</u>	<u>Sale Price</u>	<u>Cost & Expense</u>	<u>Depreciation</u>	<u>Gain / Loss</u>
BRANCH BANKING AND TRUST								
Donation			10/15/08	4/17/09	\$ 21,000	\$ 21,000	\$ 0	\$ 0
Total					\$ 21,000	\$ 21,000	\$ 0	\$ 0

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Federal Statements

Statement 3 - Form 990-EZ, Part I, Line 8 - Other Revenue

Description	Amount
MEMBER GUEST	\$ 48
Total	\$ 48

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

Description	Amount
Expenses	\$
DUES	1,600
PO BOX RENTAL	44
MISCELLANEOUS	100
PRINTING & COPYING	18
4-WAY SPEECH CONTEST	357
HAITI RELIEF	2,000
KNIGHT VISION	3,000
ROTARY CAMP RYLA	900
SUPPLIES	1,030
SCHOLARSHIPS	2,500
GSE	113
CLUB SOCIAL - SGCC	379
POLIO CANS	325
CHRISTMAS PARTY	121
PETS	623
OTHER PROGRAM EXPENSES	50
ROTARY INTERNATIONAL	4,571
Total	\$ 17,731

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FYE: 6/30/2010

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Federal Statements

Form 990-EZ, Part I, Line 11 - Benefits Paid To or For Members

Description	Amount
MEALS	\$ 14,247
Total	\$ <u>14,247</u>