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SCANNED JUN 1 3 2011.

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)

Sponsonng 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

OMB No 1545-1150

2009

Open to Public Inspection

	Department of the Treasury Internal Revenue Service 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 , 2009, and ending							(100 30 ,2010									
_	heck if ap		Please		ne of orga			July	7	, = = = = , ,			mployer identification number				
$\overline{}$	Address cl	hange	use IRS	L	10.40	lota	21	aub					74-6064280				
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t	nitial retur	m ·	type.	_	080	•	Λ						281391-3655				
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_	Amended	retum	Instruc-	· .		TX			-0070			F Gr	oup Exe	empt	ion	,	
=	Application	po	tions.		ty		_						mber ► 0573				
	Sect	ion 501(c)(3) (ble trusts mus	t attach		_)M	Cash 🗌	Accrual	
a completed Schedule A (Form 990 or 990-EZ). Other (spec																	
I Website: ► WNW. I(Gy lotaly .com H Check ► 2 required to a										if the organization is not							
											— 1	•	attach Schedule B (Form 990,				
J T	ax-exe								4947(a)(1) o			90-EZ, or 9					
KC	check 🕨	► ☐ If the	organı	zation is	not a se	ection 509	(a)(3) s	supporting o	rganızation and	lits gross	receipts a	are normall	y not m	ore t	han \$25,00	0. A	
F	orm 99	0-EZ or Form	990 re	turn is n	ot requi	red, but if	the o	rganization	chooses to file	a return,	be sure to	file a com	plete re	turn.			
L A	dd lines								more, file Form !				▶ §	<u> </u>			
Pa	art I	Revenue	e, Exp	enses	i, and	Change	s in	Net Asse	ts or Fund I	Balanc	es (See	the instr	uction	s fo	r Part I.)		
	1	Contributio	ns, gif	ls, gran	ts, and	sımılar a	moui	nts receive	d				1		6046)	
	2	Program se											2				
	3	-											3		3212	7	
	4	Investment											4		47	00	
	5a	Gross amo			of asse	ets other	than i	inventory		5a							
	Ь							•		5b							
	c					•			ubtract line 5I		no 5a)		5c				
<u>o</u>									If any amount is				30				
Revenue	6										ilig, check i						
eve	а	Gross rever	nue (no	ot includ	aing \$	-		or	contributions	1 1							
ď	_	reported or Less: direct	ııne⊴	11100			٠.٠			6a							
	b /	/Less: direct	t expe	nses ou	her tha	nyundrai	sing (expenses		6b			_	ļ			
	c/	YNet Income	or (lo	ss) trom	n speci	aļ events	and a	activities (S	Subtract line 6	1 1	ine 6a) .		6c				
	7a'	Gross sales		205			d allo	wances .		7a							
	Þ	Less-cost								7b			_	ļ			
	{c_								e 7b from line	∍7a) .			7c		÷6.		
į	8 Other revenue (describe \ \frac{1}{2} \frac{\text{fundlusing}}{\text{fundlusing}} \) 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8									8		2963					
	9	Total rever	iue. A	dd'lines	<u>3 1, 2, 3</u>	3, 4, 5c, 6	c, 7c	, and 8 .			· · .	<u></u> ▶	9		41530	<u> </u>	
	10	Grants and	simila	r amour	nts/pai	d (attach	sche	dule)					10		6700	<u> </u>	
	11	Benefits pa	id to o	r for me	embers	.							11				
တ	12	Salaries, ot	her co	mpensa	ation, a	ınd emplo	oyee	benefits .					12				
Ľ	13	Professiona	al fees	and oth	her pay	ments to	inde	pendent co	ontractors .				13				
xpenses	14							-					14				
ŭ	15												15				
	16	Other expe											16		2751	9	
	17												17		3421		
	18	Excess or (deficit)	for the	vear (Subtract	line 1	7 from line	9)				18		131	ı' —	
Net Assets	19								i line 27, colu								
SS	'												19		3053	7	
¥	20	-	-			-			planation) .				20	-	0000	-	
ž	21		_					•	es 18 through				21		3784	70	
Ð														ad o			
Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 99 (See the instructions for Part II.) (A) Beginning							1 0	(B) End of y									
-								00	3784								
22		sh, savings, and investments					1	22	5'10"	<u> </u>							
23		and and buildings						23									
24	Oti	Other assets (describe ▶)						24	0-10	110 -							
25								3053		25	378	<u>18</u>					
26		tal liabilities			<u></u>			(Th) -			_)	-20		26	7 4 7	īro —	
27	' Ne	t assets or	tund b	alance	s (line	27 of col	umn	(B) must a	gree with line	21) .	.	3053	7_	27	318	48.	

Part III Statement of Program Service Accomp	olishments (See the instru	uctions for Part II	l.)		Expenses			
What is the organization's primary exempt purpose? (2)	woeldwide		red for section					
Describe what was achieved in carrying out the organic	nd concise		(3) and 501(c)(4) izations and section					
manner, describe the services provided, the number of	4947(a)(1) trusts; optional						
each program title.		(T)	A	for ot	ners.)			
28 Plegnancy Help Center - to	aunna o coucation	al materia	<u> </u>					
	includes foreign grants, che				4000.			
(Grants \$) If this amount 1	28a							
29 KATH UNCOTIANT PHYNOSICARD - A	· my	'						
			1000					
(Grants \$) If this amount i	(Grants \$) If this amount includes foreign grants, check here ▶ □							
			dia					
	30 Polio Plus Theoren Rotary Foundation - to readriate Polio							
	includes foreign grants, che		. ▶ 🔲	30a	1200.00			
31 Other program services (attach schedule) Fish ((00.0)			
	includes foreign grants, che		. ▶↓	31a	<u>500 %</u>			
32 Total program service expenses (add lines 28a ti Part IV List of Officers, Directors, Trustees, and Key			P	32 Detruc	tions for Bart IV			
Part IV List of Officers, Directors, Trustees, and Key	(b) Title and average	en it not compensation	(d) Contribution		(e) Expense			
(a) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee benefit deferred compen	plans &	account and other allowances			
VICKI RAO	Maxill	611.61 -0,	deterred compen	SELON	Outer anowarices			
1806 KYPALLE D. SLUTE LOG KATY TX	2he							
Nancy Book	Schrin							
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GRAG HARISON	Pundent							
POBOY 10 KAMTX 77492	Princent 2he							
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	L	L	<u> </u>	Form	990-EZ (2009)			

Part	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.			
а	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?	35a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
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	36_		×
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 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?	00-		$\overline{}$
.	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	38a		_
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9			
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 ▶			
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	40b		×
С	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			
е	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		×
41	List the states with which a copy of this return is filed. ▶			
42a	The organization's books are in care of ► VIVI LAO Telephone no. ► 28	1391	<u>\$4.5</u>	.
	Located at > 1806 AWMU 1, Sude 106 Kaly 17 ZIP+4 > 774	92		
D	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		Yes	No
	account)?	42b	103	
	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		\times
	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	• •	. !	▶ ∐
			Yes	No
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		Z
		m 990)-F7	(200a)

Part V	Section 501(c)(3) organizations and 501(c)(3) organizations and section 49 and complete the tables for lines 50 are	section 4947(a)(1) none 47(a)(1) nonexempt char nd 51.	exempt charita itable trusts m	able trusts only. A ust answer question	II sect ons 46	ion -49b			
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				46	\rightarrow			
		organization engage in lobbying activities? If "Yes," complete Schedule C, Part II							
	s the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization make any transfers to an exempt non-charitable related organization?								
	- · · · · · · · · · · · · · · · · · · ·	Yes," was the related organization a section 527 organization?							
50	officers, directors, in officers, in officer								
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensatio	d) Contributions to employee benefit plans & deferred compensation	(e) l	Expense ount and allowances			
									
		-				•			
	Total number of other employees paid over \$10	0.000	<u> </u>	<u> </u>	1				
(a) Name and address of each independent contractor paid more than \$100,000 (b) Type of service (c)									
		•••••							
	1) X								
	T V								
									
d	Total number of other independent contractors	each receiving over \$100,0	000▶		<u>–</u>				
	Under penalties of perjury, I declare that I have examinand belief, it is true, correct, and complete. Declaration	ned this return, including accompa	nying schedules and based on all informat	statements, and to the beston of which preparer has	st of my	knowledge wledge			
Sign Here	VICILAN Statement 5/10/11 Signature of officer Date Type or print name and title								
Paid	Preparer's signature	Date	Check if self- employed ▶	Preparer's identifying nui	mber (See	_ instructions)			
Prepare Use On	Pr'S Firm's name (or	EIN ►							
May th	e IRS discuss this return with the preparer show	n above? See instructions		🕨	Yes	□ No)-EZ (2009)			

Katy Rotary Club Form 990-EZ FYE July 1, 2009 – June 30, 2001

Part I, Line 16, Other Expenses:

Awards & Speaker Gifts	\$	555
Bank Charges		5
Club Lunches	21	,288
District 5890 Dues	1	,025
District Conferences		180
District Training & Pets		956
Office Expenses		219
Training/Ambassadorial & RYLA		425
Rotary International Dues	2	<u>2,866</u>
Total	ቀጋ-	7.519
Total	ΨZ	7,519