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Form **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)

OMB No 1545-1150

2010

Open to Public

Inspection

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions) All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Α	For the	e 2010 calend	dar year, or tax year beginning 07/01/10 , and ending	06/30/	11			
В		applicable	C Name of organization			DI	Employer	identification number
	Address	change						
	Name cl	hange	ROTARY CLUB OF WILLIAMSBURG, II	NC.			<u>54-60</u>	<u> </u>
	Initial ref	turn	Number and street (or P O box, if mail is not delivered to street address)		Room/suite	Ε.	Telephone	
Ц	Termina	ited	1209 JAMESTOWN ROAD			ļ		903-4403
	Amende	ed return		Group Exe	emption			
LL		ion pending		Number				
G		ling Method	Cash X Accrual Other (specify) ▶		H Check ▶		-	inization is not
1	Website	-	www.williamsburgrotary.org	·	· ·		h Schedule	
<u>J</u> _				147(a)(1) or 52			<u>-EZ, or 990</u>	-PF)
K	Check	_	organization is not a section 509(a)(3) supporting organization and its gross					
			990 return is not required though Form 990-N (e-postcard) may be required (see instructions)	lut if the organization	on cho	oses	
_			to file a complete return					
L			b, to line 9 to determine gross receipts If gross receipts are \$200,000 or mo	re, or if total assets	(Pan II,		•	112,243
			ow) are \$500,000 or more, file Form 990 instead of Form 990-EZ nue, Expenses, and Changes in Net Assets or Fur	d Balancae	(coo the inetrii	ations	for Port	
F	art i		if the organization used Schedule O to respond to any ques			JUOITE	o IUI Fait	X
	T ,			SUOIT III IIIIS FAI	<u> </u>	~~	1	19,879
	1		, gifts, grants, and similar amounts received			F	2	15,015
	3	_	rvice revenue including government fees and contracts p dues and assessments			F	3	92,362
	4	Investment				上	4	2
	5a		unt from sale of assets other than inventory	5a		-		
	b		or other basis and sales expenses	5b		\dashv	1	
	c		from sale of assets other than inventory (Subtract line 5b from line 5a)	<u> </u>		\neg	5c	
	6		d fundraising events			┌	-	·
ē	a	=	ne from gaming (attach Schedule G if greater than					
Revenue	_	\$15,000)						
ě	ь		ne from fundraising events (not including\$					
_			ising events reported on line 1) (attach Schedule G if the		į			
			n gross income and contributions exceeds \$15,000)	6b				
	c		expenses from gaming and fundraising events					
	d		or (loss) from gaming and fundraising events (add lines 6a and 6	b and subtract				
		line 6c)				L	6d	
	7a	Gross sales	s of inventory, less returns and allowances	7a				
	Ь	Less cost of	of goods sold	7b				
	С	Gross profit	t or (loss) from sales of inventory (Subtract line 7b from line 7a)			L	7c	
3	% 8 9	Other reven	nue (describe in Schedule O)			L	8	
2	∯ <u>9</u>	Total reven	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8				9	112,243
5	10	Grants and	வூறின் இருப்படுக்கு முற்ற விரும்படிக்கு விரும்படிக்கு விரும்படிக்கு விரும்படிக்கு விரும்படிக்கு விரும்படிக்கு			Ĺ	10	35,952
F==		Benefits pai	id to or for members Q			L	11	
G.	12	Salaries, otl	her compensation, arto employee benefits			L	12	
9	13		Affees and other payments to independent contractors			L	13	
٩	14		, rent, utilities, and maintenance				14	
9	15	Printing, pul	plications postage, and shipping	L	15			
Net Asset SCANNE Benger	16		nses (describe in Schedule O)	Ļ	16	80,304		
Ø.	17		nses. Add lines 10 through 16				17	116,256
%	18		deficit) for the year (Subtract line 17 from line 9)			-	18	_4,013
set	19	Net assets		ļ				
As		•	figure reported on prior year's return)	-	19	26,994		
Net	20		ges in net assets or fund balances (explain in Schedule O)			, -	20	
_	21	Net assets	or fund balances at end of year. Combine lines 18 through 20				21	22,981

DAA

Form **990-EZ** (2010)

Form 990-EZ (2010) ROTARY CL	UB OF WILLIAMSBUR	G, INC. 5	4-6053668			Page 2
·	the instructions for Part II.)					C21
Check if the organization	used Schedule O to respond to	any question in this				<u> </u>
			(A) Beginning of year		(B) E	nd of year
22 Cash, savings, and investments			<u>14,70</u>	6 22		<u>15,158</u>
23 Land and buildings		_		0 23		
24 Other assets (describe in Schedule O)		_	12,33			7,823
25 Total assets			<u>27,04</u>	$\overline{}$		22,981
26 Total liabilities (describe in Schedule C	D)	_		0 26		0
27 Net assets or fund balances (line 27 o			<u>26,99</u>	4 27		22,981
•	m Service Accomplishmer	•	´ (- -	<u>. </u>	•	enses
Check if the organization	used Schedule O to respond to	any question in this	Part III X	-	•	or section
What is the organization's primary exempt p	ourpose?					nd 501(c)(4)
See Schedule O				_ `		ns and section
Describe what was achieved in carrying out				494	47(a)(1) t	trusts, optional
the services provided, the number of person	ns benefited, or other relevant infor	mation for each program	n title.	for	others)	
28 THESE GRANTS ARE PAID TO THE	E WILLIAMSBURG ROTARY FOUN	DATION, A NON-PRO	FIT	i 1		
WHOSE MISSION IS TO PROVIDE	SCHOLARSHIPS TO VIRGINIA	STUDENTS ATTENDING	3			
VIRGINIA COLLEGES AND UNIVER			ـــم	,		
(Grants \$ 26,822)	f this amount includes foreign gran	ts, check here	<u> </u>	28a		26,822
29 See Schedule O				1 1		
				1 1		
			ـــم	,		
(Grants \$ 7,930)	f this amount includes foreign gran	ts, check here		29a		7,930
30 CONTRIBUTION TO THE UNITED W	WAY OF WILLIAMSBURG.					
			<u>ــ</u> ـم	,		
	f this amount includes foreign gran	ts, check here	<u> </u>	30a		<u>350</u>
31 Other program services (describe in Sci			_ 	,		
(Grants \$850)	f this amount includes foreign gran	ts, check here	<u> </u>	31a		850
32 Total program service expenses (add				32		35,952
	Trustees, and Key Employees. L			ee the in	structio	ns for Part IV)
Check if the organization	used Schedule O to respond to			(d) Contribut	tions to T	(2) 5
(a) Name and	1 address	(a) Title and average hours per week		ployee benef		(e) Expense account and
		devoted to position	<u>enter -0)</u> d	eferred comp	ensation	other allowances
ROBERT TUBBS	WILLIAMSBURG	PRESIDENT				
1209 JAMESTOWN ROAD	VA 23185	5.00	<u> </u>	.	- 0	0
TOM MORRIS	WILLIAMSBURG	1ST VICE PR	ESIDENT			
1209 JAMESTOWN ROAD	VA 23185	5.00			0	0
SEAN DRISCOLL	WILLIAMSBURG	2ND VICE PR	, ,		j	
1209 JAMESTOWN ROAD	VA 23185	5.00	 		0	0
JAMES KENT	WILLIAMSBURG	SECRETARY	1			
1209 JAMESTOWN ROAD	VA 23185	5.00			0	0
DOUG MCLEAN	WILLIAMSBURG	TREASURER	1			
1209 JAMESTOWN ROAD	VA 23185	5.00	<u> </u>		- 0	0
FRANK FERRANTE	WILLIAMSBURG	PAST PRESID	1			
1209 JAMESTOWN ROAD	VA 23185	5.00	<u> </u>		0	0
TESSA LOUER	WILLIAMSBURG	DIRECTOR				
1209 JAMESTOWN ROAD	VA 23185	5.00	0		0	0
MICHAEL KIRBY	WILLIAMSBURG	DIRECTOR			ĺ	
1209 JAMESTOWN ROAD	VA 23185	5.00	 		0	0
DON MURFEE	WILLIAMSBURG	DIRECTOR				
1209 JAMESTOWN ROAD	VA 23185	5.00	0		- 0	0
GEORGE GRATTAN	WILLIAMSBURG	DIRECTOR	1			
1209 JAMESTOWN ROAD	VA 23185	5.00			0	0
					}	
			 		-+	
			1		ļ	
			 			
	 					
DAA					Forn	n 990-EZ (2010)

	1990-EZ (2010) ROTARY CLUB OF WILLIAMSBURG, INC. 54-6		568			Page 3
Pa	Other Information (Note the statement requirements in the instructions for Part Check if the organization used Schedule O to respond to any question in this Part					
	Officers in the organization used defined to to respond to any queeters in the party	•			Ye	s No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detail	ailed				
	description of each activity in Schedule O			3	3	<u> </u>
34	Were any significant changes made to the organizing or governing documents? If "Yes," attached a continuous changes made to the organizing or governing documents?		ed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain	un the				
	change on Schedule O (see instructions)			3	4	<u> </u>
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, explain in Schedule O why the organization did not report the income on Form 990-T	4-N44N		ŀ	1	ŀ
а	Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501			25		x
_	501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax require	ments		35		├ ^
e b	If "Yes," has it filed a tax return on Form 990-T for this year (see instructions)? Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net as	eate		36	<u> </u>	+
36	during the year? If "Yes," complete applicable parts of Schedule N	3613		3	6	x
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	37a			-	————
b	Did the organization file Form 1120-POL for this year?	<u> </u>		37	_{'b}	X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employed	e or we	re			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this ref			38	3a	x
ь	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b				
39	Section 501(c)(7) organizations Enter					
а	Initiation fees and capital contributions included on line 9	39a				
b	Gross receipts, included on line 9, for public use of club facilities	39b				
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year und	der				
	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	ss bene	fit			
	transaction during the year, or did it engage in an excess benefit transaction in a prior year, that has it	not bee	n			ļ.
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I			40)b	X
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	-		—— I		
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 she	iter		1,00	.	x
A 4	transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed. None			40	e	<u> </u>
41	The organization's books are in care of MOSS & RIGGS, PLLC	To	lephone no	→ 757-9	903-	4403
42a	1209 JAMESTOWN ROAD	10	iepiione no	, , , ,	, 05	1100
	_	'A	ZIP + 4	2318	5	
b	At any time during the calendar year, did the organization have an interest in or a signature or other a					
~	over a financial account in a foreign country (such as a bank account, securities account, or other financial				Ye	s No
	account)?			42	2b	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.					
С	At any time during the calendar year, did the organization maintain an office outside of the U S?			42	2c	X
	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 her	e				▶
	and enter the amount of tax-exempt interest received or accrued during the tax year		► <u>4</u>	13	_	
					Ye	s No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be					1
	completed instead of Form 990-EZ			4	4a	X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must	be				
	completed instead of Form 990-EZ			4	4b	X
С	Did the organization receive any payments for indoor tanning services during the year?			4	4c	X
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide	an				
	explanation in Schedule O				4d	
				Form	990-l	EZ (2010)

Form	990-EZ	(2010)	ROTA	RY	CLUB	OF	WILLIAMSBUR	G, II	1C. !	54-60536	68			F	Page 4
		,									_			Yes	No
45	is any	related o	rganization	a con	trolled en	tity of	the organization within th	ne meanii	ng of section	512(b)(13)?			45		X
а	Did the	organiza	ation receive	e any	payment	from o	or engage in any transac	tion with	a controlled	entity within the					
	meanıı	ng of sec	tion 512(b)((13)? [f "Yes," F	orm 9	90 and Schedule R may	need to l	oe complete	d instead of					
	Form 990-EZ (see instructions)												45a		X
46	Did the	organiza	ation engag	ge, dire	ectly or in	directly	y, ın political campaign a	ctivities o	n behalf of c	or in opposition					
		didates fo	or public offi	ice? If	"Yes," co	mplet	e Schedule C, Part I						46		X
Pa	rt VI						ns and section 494						ection	ı	
		501(c)(3) organ	nızatıo	ns and s	sectio	n 4947(a)(1) nonexem	pt charit	able trusts	must answer q	ues	tions 47-49b			
		and 9	52, and co	mplet	e the tab	oles fo	or lines 50 and 51								
		Chec	k if the org	ganıza	ation use	ed Sch	nedule O to respond to	any qu	estion in thi	s Part VI					
														Yes	No
47		•		•			s? If "Yes," complete Sci						47	ļ	—
48	Is the	organizat	ion a schoo	ol as de	escribed	ın sect	ion 170(b)(1)(A)(ii)? If "Y	'es," com	plete Sched	ule E			48		├ ─
49a		_					rempt non-charitable rela	ated orga	nization?				49a		├
b				-			627 organization?						49b		<u> </u>
50				-			hest compensated emp								
	employ						000 of compensation fro		janization If) Title and average			(d) Contributions to	(0)	Expen	
	(a) Name and address of each employee paid more hours per week employee benefit plans to						₿ ac	count a	and						
	than \$100,000 devoted to position deferred compensation						deferred compensation	othe	allowa	inces					
					-			_					+		
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		<u>.</u>								<u> </u>		 	1		
f	Total n	umber of	f other empl	olovees	paid ove	er \$100	0.000			L					
51			-	-	•		phest compensated inde	pendent (contractors v	vho each receive	ed me	– ore than			
-				-			If there is none, enter								
			-			_	ctor paid more than \$100,00			(b) Type of servic	e	(c)	Compen	sation	
					_		<u> </u>								
		_				-									
									<u> </u>						
									<u> </u>						
									<u> </u>						
						_									
d			`	•			each receiving over \$100		-						
52		•	•				e. All section 501(c)(3) o	rganızatı	ons and 4947	7(a)(1)		, ,	_		
							leted Schedule A						Yes		No
							eturn, including accompanyii officer) is based on all inforr					my knowledge and be	elief, it is		
		La compia				- Cirian				1					
Sigr	,		nature of effic							Date					
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	oarer		. RIGGS,				as. PLIC	<u> </u>	Map	1010	-	16/12 self-employ	ed <u>P00</u> 5 – 18		
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	,	Firm's add			ust i		l, VA 23092	~0275	.			Phone no 804-	-759	_05	26
May	the IRS	discuse					wn above? See instruction					r none no OO4.		es X	
ay	· io ino	4,50433	and return t	···	- propart	5, 5,10	above Goo manache					<u></u>		IV	<u></u>

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2010 Open to Public

OMB No 1545-0047

Open to Public Inspection

Name of the organization

ROTARY CLUB OF WILLIAMSBURG, INC.

Employer identification number

54-6053668

Form 990-EZ, Part I, Line 16 - Other Expenses	Form	990-EZ,	Part	I,	Line	16	_	Other	Expenses
---	------	---------	------	----	------	----	---	-------	----------

Description		Amount				
Expenses						
PINS & BANNERS		\$	178			
OFFICE EXPENSE		\$	231			
LEGAL & ACCOUNTING		\$	7,744			
CONFERENCE EXPENSE		\$	390			
FINANCE CHARGES		\$	64			
MEALS		\$	62,107			
WEBSITE		\$	607			
DUES		\$	8,983			
	Total	\$	80,304			

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

Description		Beg.	of Year	End	of Year
Accounts Receivable		\$	0	\$	7,673
ORGANIZATIONAL COSTS		\$	150	\$	150
ACCOUNTS RECEIVABLE		\$	12,188	\$	0
	Total	\$	12,338	\$	7,823

Form 990-EZ, Part II, Line 26 - Other Liabilities

Description Beg. of Year End of Year Accounts Payable and Accrued Expenses \$ 50 \$ 0

Form 990-EZ, Part III - Primary Exempt Purpose

Employer identification number 54-6053668

ROTARY CLUB OF WILLIAMSBURG, INC.

THE ORGANIZATION'S PRIMARY FUNCTION IS TO PROVIDE FUNDING TO A RELATED FOUNDATION WHICH GRANTS SCHOLARSHIPS TO STUDENTS MATRICULATING AT VIRGINIA COLLEGES AND UNIVERSITIES.

Form 990-EZ, Part III, Line 29 - Second Achievement

THESE CONTRIBUTIONS SUPPORT THE MISSION OF ROTARY INTERNATIONAL. THE

MISSION OF THE ROTARY FOUNDATION IS TO ENABLE ROTARIANS TO ADVANCE WORLD

UNDERSTANDING, GOODWILL AND PEACE THROUGH THE IMPROVEMENT OF HEALTH, THE

SUPPORT OF EDUCATION AND THE ALLEVIATION OF POVERTY. THE FOUNDATION IS A

NOT-FOR-PROFIT CORPORATION SUPPORTED SOLELY BY VOLUNTARY CONTRIBUTIONS FROM

ROTARIANS AND FRIENDS OF THE FOUNDATION WHO SHARE ITS VISION OF A BETTER

WORLD.

Form 990-EZ, Part III, Line 31 - All Other Achievements

CONTRIBUTIONS TO A VARIETY OF LOCAL NON-PROFITS DEDICATED TO THE ENRICHMENT

OF THE COMMUNITY.