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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)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities,

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.

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

OMB No. 1545-1150

2010

Open to Public Inspection

Α	For the	010 calendar year, or tax year beginning July 1, 2010, and ending			ine 30	, 20 11		
В	Check if ap	pplicable C Name of organization	C Name of organization D En		D Emplo	Employer identification num		
	Address c	hange Conway Rotary Club					6066022	
닏	Name cha		E Telept	one num	ber			
P. O. Box 211						(501)	7641154	
片	Terminated City or town, state or country, and ZIP + 4 Amended return			F Grou	F Group Exemption			
퓜						ber ▶	0573	
G							he organization is not	
	Websit						h Schedule B	
			sert no.) 4947(a)(1) or	□ 527	•		Z, or 990-PF).	
_	Check ▶			=		-	· · · · · · · · · · · · · · · · · · ·	
		90-EZ or Form 990 return is not required though Form 990-N (e-i	•	•	•			
		return, be sure to file a complete return.	,,	02 (0000			ga <u></u>	
L		s 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipt	s are \$200,000 or more	or if total asset	s (Part II.			
		lumn (B) below) are \$500,000 or more, file Form 990 instead of Form			o (. a ,	▶ ♠	99,560	
_	Part I	Revenue, Expenses, and Changes in Net Asse		· · · · ·	inotruo	tions f	or Port I \	
	arti	Check if the organization used Schedule O to response					•	
_								
	1	Contributions, gifts, grants, and similar amounts receive			· ·	1	13,334	
	2	Program service revenue including government fees and			· ·	2		
	3				[3	53,975	
	4				· · [4	90	
	5a	Gross amount from sale of assets other than inventory	<u>5a</u>		. 0	1		
	b	Less: cost or other basis and sales expenses	<u>5</u> b		0			
	C	Gain or (loss) from sale of assets other than inventory (S	ubtract line 5b from	line 5a)	[5c	0	
	6	Gaming and fundraising events			ŀ			
	а	Gross income from gaming (attach Schedule G if	greater than		}	ļ		
97		\$15,000)	6a		0	1		
Revenue	b	Gross income from fundraising events (not including \$	00	f contribution	ns			
é		from fundraising events reported on line 1) (attach Sch	edule G if the		1	-		
	'	sum of such gross income and contributions exceeds \$		1	32,161	1		
	c	Less: direct expenses from gaming and fundraising ever		† · · · · · · · · · · · · · · · · · · ·	13,039			
	d	Net income or (loss) from-gaming and fundraising eve		d 6b and su				
	-	line 6c) RECE: VED				6d	19,122	
	7a	Gross sales of inventory, less returns ang allowances .	7а	l	ol	-		
	, a	Less: cost orgoods sold of grant				ł		
	°	Gross profit or (loss) from sales of inventory (Subtract lin			<u>-</u>	7c	0	
	1 -	Other revenue (describe in Schedule Q)						
	9	8 Other revenue (describe in Schedule O)				9	86,521	
	10	Total revenue. Add [1] & F. 2.3, 4, 5d, 6d, 7c, and 8					00,321	
	1	Grants and similar amounts paid (list in Schedule O) .				10		
	11	Benefits paid to or for members				11	0	
Expenses	12	Salaries, other compensation, and employee benefits				12	0	
Š	13					13	0	
Ž	14					14	0	
ш						15	1,306	
;	16	Other expenses (describe in Schedule O)				16	84,160	
: 	17	Total expenses. Add lines 10 through 16	<u> </u>	<u> </u>	▶	17	85,466	
) ₍	18	Excess or (deficit) for the year (Subtract line 17 from line	9)		[18	1,055	
e te	19	Net assets or fund balances at beginning of year (from						
Ž	!	end-of-year figure reported on prior year's return)				19	24,293	
Net Assets	20	Other changes in net assets or fund balances (explain in	Schedule O)		[20	1,055	
Ž	21	Net assets or fund balances at end of year. Combine lin	•			21	25.348	

For Paperwork Reduction Act Notice, see the separate instructions.



Form **990-EZ** (2010)

Cat No 106421

Par			tion in this Dow	. 11	-	
	Check if the organization used Schedule	O to respond to any ques		Beginning of year	•	
	Oneth common and formation		(A) E			```
22	Cash, savings, and investments		· · ·	11,584	23	26,830 0
23	Land and buildings			14,216		0
24	Other assets (describe in Schedule O)		· · ·	25,800		
25	Total lightities (decembe in Schodule C)					26,830
26	Total liabilities (describe in Schedule O) Net assets or fund balances (line 27 of column	(P) must agree with line 21	· · ·	1,507 24,293		1,482 25,348
27 Part					21	
raru	Check if the organization used Schedule				(Reg	Expenses uired for section
\A/hat	is the organization's primary exempt purpose?					c)(3) and 501(c)(4)
Descr	is the organization's primary exempt purpose? Ibe what was achieved in carrying out the organization	's exempt purposes. In a clear	and concise ma	nner describe		nizations and section
	rvices provided, the number of persons benefited, and					(a)(1) trusts; optional hers.)
	Support Rotary Foundation - Activities including Wo				10. 0.	I
	Group Study Exchanges, Polio Eradication and Grain					
	other worthy causes.	its for Health, Quality of Life a				
		ıncludes foreign grants, che	ok boro		28a	19,864
	Provide Scholarships to three local colleges: Univer			Contral	20a	19,004
25	Baptist College, all in Conway, Arkansas.	sity of Central Arkansas, Hen	unx conege and		1	
	Dapust College, all in Collway, Arkansas.				1	ļ
	(Grants \$) If this amount	includes foreign grants, che	ock boro		29a	7,500
	Conway Alliance for the Arts/Rotary Africa Water Pr				254	7,300
30	funding a water well in Ghana.	oject - neid Fundraiser for Co	ilway Arts, Cont			
	Tunding a water well in Griana.					
	(Grants \$) If this amount	includes foreign grants, che			30a	6.025
	Other program services (describe in Schedule O)	includes loreign grants, che	CK HEIE	· · • ⊔	JV4	0,023
		includes foreign grants, che	ock boro		31a	825
	Total program service expenses (add lines 28a				32	34,214
Part	, ,	<u> </u>				
ıaıı	Check if the organization used Schedule					
	· · · · · · · · · · · · · · · · · · ·	(b) Title and average	(c) Compensation	(d) Contributio		(e) Expense
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee benefit deferred comper		account and other allowances
John	Gierke					
	Highpoint Drive, Conway, Ar 72034	President 4 Hours				į.
	Carroll			0	0	o
				0	0	0
		Vice Pres 3 Hours				
	ımmerfield, Conway, Ar 72033 II McClanahan	-		0	0	
4705	ımmerfield, Conway, Ar 72033 II McClanahan	Vice Pres 3 Hours Treasurer 4 Hours				
	ımmerfield, Conway, Ar 72033 II McClanahan Bay Hill Drive, Conway, Ar 72034	Treasurer 4 Hours				
Joan	ımmerfield, Conway, Ar 72033 II McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner	-				
Joan 2302	ımmerfield, Conway, Ar 72033 II McClanahan Bay Hill Drive, Conway, Ar 72034	Treasurer 4 Hours Secretary 4 Hours		0	0	0
Joan 2302 Gene	Immerfield, Conway, Ar 72033 II McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner College Ave, Conway, Ar 72034 Gardner	Treasurer 4 Hours		0	0	0
Joan 2302 Gene 3095	immerfield, Conway, Ar 72033 II McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner College Ave, Conway, Ar 72034 Gardner Windcrest Dr, Conway, Ar 72032	Treasurer 4 Hours Secretary 4 Hours Director 2 Hours		0	0	0
Joan 2302 Gene 3095 Beck	Immerfield, Conway, Ar 72033 II McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner College Ave, Conway, Ar 72034 Gardner Windcrest Dr, Conway, Ar 72032 y Harris	Treasurer 4 Hours Secretary 4 Hours	-	0	0	0
Joan 2302 Gene 3095 Beck 3 Ess	Immerfield, Conway, Ar 72033 II McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner College Ave, Conway, Ar 72034 Gardner Windcrest Dr, Conway, Ar 72032 y Harris ex Dr, Conway, Ar 72034	Treasurer 4 Hours Secretary 4 Hours Director 2 Hours Director 2 Hours		0	0 0	0 0
Joan 2302 Gene 3095 Beck 3 Ess Jim M	Immerfield, Conway, Ar 72033 II McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner College Ave, Conway, Ar 72034 Gardner Windcrest Dr, Conway, Ar 72032 y Harris lex Dr, Conway, Ar 72034 furphy	Treasurer 4 Hours Secretary 4 Hours Director 2 Hours		0	0 0	0 0 0
Joan 2302 Gene 3095 Beck 3 Ess Jim M	Immerfield, Conway, Ar 72033 II McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner College Ave, Conway, Ar 72034 Gardner Windcrest Dr, Conway, Ar 72032 y Harris ex Dr, Conway, Ar 72034 Aurphy Box 1904, Conway, Ar 72034	Treasurer 4 Hours Secretary 4 Hours Director 2 Hours Director 2 Hours Director 2 Hours		0	0 0 0	0 0 0
Joan 2302 Gene 3095 Beck 3 Ess Jim M P.O. Miche	Immerfield, Conway, Ar 72033 Il McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner College Ave, Conway, Ar 72034 Gardner Windcrest Dr, Conway, Ar 72032 y Harris sex Dr, Conway, Ar 72034 flurphy Box 1904, Conway, Ar 72034 elle Phillips	Treasurer 4 Hours Secretary 4 Hours Director 2 Hours Director 2 Hours		0	0 0 0	0 0 0
Joan 2302 Gene 3095 Beck 3 Ess Jim M P.O. I	Immerfield, Conway, Ar 72033 II McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner College Ave, Conway, Ar 72034 Gardner Windcrest Dr, Conway, Ar 72032 y Harris ex Dr, Conway, Ar 72034 Aurphy Box 1904, Conway, Ar 72034	Treasurer 4 Hours Secretary 4 Hours Director 2 Hours Director 2 Hours Director 2 Hours Director 2 Hours		0	0 0 0	0 0 0
Joan 2302 Gene 3095 Beck 3 Ess Jim M P.O. Michel 306 S Jim C	Immerfield, Conway, Ar 72033 III McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner College Ave, Conway, Ar 72034 Gardner Windcrest Dr, Conway, Ar 72032 y Harris lex Dr, Conway, Ar 72034 Murphy Box 1904, Conway, Ar 72034 elle Phillips salem Rd, Conway, Ar 72034 Capps	Treasurer 4 Hours Secretary 4 Hours Director 2 Hours Director 2 Hours Director 2 Hours		0	0 0 0	0 0 0
Joan 2302 Gene 3095 Beck 3 Ess Jim M P.O. Michel 306 S Jim C	Immerfield, Conway, Ar 72033 II McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner College Ave, Conway, Ar 72034 Gardner Windcrest Dr, Conway, Ar 72032 y Harris lex Dr, Conway, Ar 72034 furphy Box 1904, Conway, Ar 72034 elle Phillips lalem Rd, Conway, Ar 72034	Treasurer 4 Hours Secretary 4 Hours Director 2 Hours Director 2 Hours Director 2 Hours Director 2 Hours		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0
Joan 2302 Gene 3095 Beck 3 Ess Jim M P.O. Michel 306 S Jim C	Immerfield, Conway, Ar 72033 III McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner College Ave, Conway, Ar 72034 Gardner Windcrest Dr, Conway, Ar 72032 y Harris lex Dr, Conway, Ar 72034 Murphy Box 1904, Conway, Ar 72034 elle Phillips salem Rd, Conway, Ar 72034 Capps	Treasurer 4 Hours Secretary 4 Hours Director 2 Hours Director 2 Hours Director 2 Hours Director 2 Hours		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0
Joan 2302 Gene 3095 Beck 3 Ess Jim M P.O. Michel 306 S Jim C	Immerfield, Conway, Ar 72033 III McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner College Ave, Conway, Ar 72034 Gardner Windcrest Dr, Conway, Ar 72032 y Harris lex Dr, Conway, Ar 72034 Murphy Box 1904, Conway, Ar 72034 elle Phillips salem Rd, Conway, Ar 72034 Capps	Treasurer 4 Hours Secretary 4 Hours Director 2 Hours Director 2 Hours Director 2 Hours Director 2 Hours		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0
Joan 2302 Gene 3095 Beck 3 Ess Jim M P.O. Michel 306 S Jim C	Immerfield, Conway, Ar 72033 III McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner College Ave, Conway, Ar 72034 Gardner Windcrest Dr, Conway, Ar 72032 y Harris lex Dr, Conway, Ar 72034 Murphy Box 1904, Conway, Ar 72034 elle Phillips salem Rd, Conway, Ar 72034 Capps	Treasurer 4 Hours Secretary 4 Hours Director 2 Hours Director 2 Hours Director 2 Hours Director 2 Hours		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0
Joan 2302 Gene 3095 Beck 3 Ess Jim M P.O. Michel 306 S Jim C	Immerfield, Conway, Ar 72033 III McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner College Ave, Conway, Ar 72034 Gardner Windcrest Dr, Conway, Ar 72032 y Harris lex Dr, Conway, Ar 72034 Murphy Box 1904, Conway, Ar 72034 elle Phillips salem Rd, Conway, Ar 72034 Capps	Treasurer 4 Hours Secretary 4 Hours Director 2 Hours Director 2 Hours Director 2 Hours Director 2 Hours		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0
Joan 2302 Gene 3095 Beck 3 Ess Jim M P.O. Michel 306 S Jim C	Immerfield, Conway, Ar 72033 III McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner College Ave, Conway, Ar 72034 Gardner Windcrest Dr, Conway, Ar 72032 y Harris lex Dr, Conway, Ar 72034 Murphy Box 1904, Conway, Ar 72034 elle Phillips salem Rd, Conway, Ar 72034 Capps	Treasurer 4 Hours Secretary 4 Hours Director 2 Hours Director 2 Hours Director 2 Hours Director 2 Hours		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0
Joan 2302 Gene 3095 Beck 3 Ess Jim M P.O. Michel 306 S Jim C	Immerfield, Conway, Ar 72033 III McClanahan Bay Hill Drive, Conway, Ar 72034 Shofner College Ave, Conway, Ar 72034 Gardner Windcrest Dr, Conway, Ar 72032 y Harris lex Dr, Conway, Ar 72034 Murphy Box 1904, Conway, Ar 72034 elle Phillips salem Rd, Conway, Ar 72034 Capps	Treasurer 4 Hours Secretary 4 Hours Director 2 Hours Director 2 Hours Director 2 Hours Director 2 Hours		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0	0 0 0 0

Part	V Other Information (Note the statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		✓
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	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, explain in Schedule O 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 a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
ь 36	If "Yes," has it filed a tax return on Form 990-T for this year (see instructions)?	35b 36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0			'
b	Did the organization file Form 1120-POL for this year?	37b		✓
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 tax year covered by this return? .	38a		- /
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			
a b	Initiation fees and capital contributions included on line 9			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
70u	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 benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its 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. ▶ None			
42a	<u></u>	501)7		4
	Located at ► 4705 Bay Hill Dr., Conway, Ar ZIP + 4 ►	720	034	
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		Vac	No
	account)?	42b	163	√
	If "Yes," enter the name of the foreign country: ▶	72.17	 -	├ ▼
	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.?	42c	<u> </u>	1
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
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		1
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	44b		1
c	Did the organization receive any payments for indoor tanning services during the year?	44c	<u> </u>	1
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	44d	<u>_</u> -	

Form 990)-EZ (20	010)						_	F	age 4
	7			_					Yes	No
45	Is any	related organization a controlled entity of	of the organiza	ition within the	meani	ng of section	n 512(b)(13)?	45		✓
		ne organization receive any payment from						1	İ	
		ning of section 512(b)(13)? If "Yes," Form	n 990 and So	hedule R may	need	to be comp	leted instead of			
		990-EZ (see instructions)						45a	.	✓
		ne organization engage, directly or indirec						-		
	_	andidates for public office? If "Yes," comp					· · · · ·	46	1	✓
Part \		Section 501(c)(3) organizations and 501(c)(3) organizations and section 4 and 52, and complete the tables for I Check if the organization used Schedu	947(a)(1) noi ines 50 and	nexempt chari 51.	table	trusts must	answer questi	All se ons 4	ction 17–49	b . □
									Yes	No
47	Did th	ne organization engage in lobbying activit	ies? If "Yes."	complete Sche	dule C	. Part II .		47	1	1
		organization a school as described in sec					E	48	†	1
		he organization make any transfers to an						49a		1
		es," was the related organization a section			_			49b		1
		plete this table for the organization's five								
	emple	oyees) who each received more than \$10	<u> </u>			_				
	(a) Na	ume and address of each employee paid more than \$100,000	hour	and average s per week d to position	(c) C	compensation	(d) Contributions to employee benefit plans deferred compensation	& a	e) Exper ccount a er allowa	and
None										
								1		
										
								<u> </u>		
					l					
	-				L.,	n	<u> </u>			
		number of other employees paid over \$1				-	ba aaab wa		J	. +b.a
51		plete this table for the organization's fiv ,000 of compensation from the organizat				ent contracto	ors who each re	ceive	ı IIIOI	e illa
	•	(a) Name and address of each independent contract			1	(b) Typ	e of service	(c) C	ompens	ation
None										
		 								
								:		
							· · · · · · · · · · · · · · · · · · ·			
d	Total	number of other independent contractor	s each receiv	ng over \$100,00	. 00	.▶	0			
52		he organization complete Schedule A? N			nızatio	ons and 494		_	_	
	none	xempt charitable trusts must attach a co	mpleted Sche	dule A	<u> </u>		<u></u> >	Ye	s ✓	No
Under potrue, cor	enalties rect, an	of perjury, I declare that I have examined this return ind complete. Declaration of preparer (other than offic	, including accomer) is based on all	panying schedules a information of whic	and stat h prepa	ements, and to rer has any kno	the best of my knowl wledge.	edge a	nd belie	f, it is
		Sowell P. Mr. Clard)				10/24/20	<u></u>		
Sign		9		<u>-</u>				′′		
Here		Signature of officer	_				Date			
	1	Lowell P. McClanahan, Treasurer of Co	nway Rotary	Club (2010-11)		 -				
		Type or print name and title	namer's stands	<u> </u>		Date		PTIN		
Paid		Print/Type preparer's name	eparer's signature			Date	Check I if	1 S 11 N		
Prepa	arer	<u> </u>					self-employed	L		
	N-L -	Firm's name ▶					Firm's EIN ▶			

Firm's address

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

► ☐ Yes ☐ No

Phone no

July 1, 2010 - June 30, 2011

Schedules G & O

990-EZ

Conway Rotary Club

71-6066022

2010-11

PART	1 1	INIE	6
PARI		IIVE	ס

RECEIPTS:

6b PANCAKE BREAKFAST FUNDRAISER
GOLF TOURNAMENT FUNDRAISER

9,103

TOTAL RECEIPTS

23,058

EXPENSES.

6c PANCAKE BREAKFAST FUNDRAISER

1,733 11,306

GOLF TOURNAMENT FUNDRAISER

13,039

6d NET INCOME

19,122

32,161

PANCAKE FUNDRAISER NET CONTRIBUTION TO LOCAL SCHOLARSHIP FUNDS. GOLF TOURNAMENT NET CONTRIBUTION TO POLIO PLUS CAMPAIGN.

LINE 16 - OTHER EXPENSES

PART	III L	nes	28,	29,	& 30.
CON	TRIE	BUT	ION	S	

CONTRIBOTIONS			
ROTARY FOUNDATION	11,022	*	19,864
POLIO PLUS	8,842		*
SCHOLARSHIPS TO CONWAY COLLEGES	7,500		7,500
ROTARY AFRICA WATER PROJECT	5,508		6,025
ROTARY YOUTH LEADERSHIP ASSEMBLY	825		825
CONWAY ALLIANCE FOR THE ARTS	<u>517</u>	*	<u>0</u>
TOTAL	34,214		34,214

OTHER EXPENSES

MEALS EXPENSE	33,322
ROTARY INTERNATIONAL DUES	6,364
ROTARY DISTRICT 6170 DUES	2,820
SUPPLIES	991
ADVERTISING/ PROMOTION	2,339
CONWAY ENTRANCE SIGN	1,089
WEB SITE	850
DISTRICT CONFERENCE & TRAINING	810
AWARDS	738
ROTARY GROUP STUDY EXCHANGE TEAM	423
BONDING INSURANCE	100
CHAMBER OF COMMERCE DUES	<u>100</u>

49,946

TOTAL LINE 16

84,160