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Form **990** 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) Sponsoning 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. All other organizations with gross receipts less than \$500,000 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

Open to Public Inspection

A	For the	e 2010 c	calendar year, or tax year beginning JUL 1, 2010			and ending JU	N 3	0,	2011		
В	Check If applicable	le	C Name of organization				D Emp	oloyer i	dentification number		
	Addre	Address change									
	Name	Harme change   Lions International Wenatchee					9	296498			
	Initial	return	Number and street (or P O box, if mail is not delivered to street address) Room/suite					e E Telephone number			
	Terminated		P.O. Box 0135					509-662-9138			
		ded return	City or town, state or country, and ZIP + 4					F Group Exemption			
Ē		Application pending Wenatchee, WA 98807-0135						Number >			
G		iting Meth	od X Cash				H Check ► X if the organization is not				
							i	required to attach Schedule B			
									, 990-EZ, or 990-PF)		
	Check		if the organization is not a section 509(a)(3) supporting organization and its				•				
	Form 9		is not required though Form 990-N (e-postcard) may be required (see instri								
		te return.	· · · · · · · · · · · · · · · · · · ·		-,				• • • • • • • • • • • • • • • • • • • •		
			and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000	or m	1010.	or if total assets (Pai	t II.				
_			(B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ			•	•	<b>▶</b> \$	93,512.		
P	art I		enue, Expenses, and Changes in Net Assets or Fur	id B	ala	nces (see the inst	uctions	for Pai			
1-2-	<u></u>		if the organization used Schedule O to respond to any question in this Part			•			X		
_	1		tions, gifts, grants, and similar amounts received					1			
	2		service revenue including government fees and contracts					2			
	3	-	ship dues and assessments					3	40,389.		
	4			ee	S	chedule 0		4	31,697.		
	5a		nount from sale of assets other than inventory	5	a						
	b		st or other basis and sales expenses		ib						
			(loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	_				5c			
	6	6 Gaming and fundraising events									
•	a	•	come from gaming (attach Schedule G if greater than								
Ž	-	\$15,000	*	6	ia						
Revenue	ь		come from fundraising events (not including \$	of	con	tributions					
Œ			idraising events reported on line 1) (attach Schedule G if the sum of such								
			come and contributions exceeds \$15,000)	6	ib	17,8	321.				
	C		rect expenses from gaming and fundraising events	6	36			]			
	d		me or (loss) from gaming and fundraising events (add lines 6a and 6b and s	ubtra	ct lir	ne 6c)		6d	17,821.		
	78	Gross sa	ales of inventory, less returns and allowances	7	/a						
	Ь	Less: co	st of goods sold	7	b			]			
	C	Gross pr	rofit or (loss) from sales of inventory (Subtract line 7b from line 7a)					7c			
	8	Other rev	venue (describe in Schedule O)	ee	S	chedule 0		8	3,605.		
_	9	Total rev	venue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8				<b></b>	9	93,512.		
2012	10		π <del>α şımılar am<u>punts paid (li</u>st ın Sc</del> hadula O) S	ee	S	chedule 0		10	63,423.		
	111		paid to to the members D					11			
සේ	12	Salanes	other compensation, and employee benefits					12	2,400.		
Neth Assets NED Jexpenses	13	Projessi	onal fees and/other payments offndependent contractors					13	260.		
	14	Occupan	icy, rent, utilities, and maintenance					14			
	15							15			
	16	Other ex	-publications, postage, and shipping coenses (describe)in Scheogie O)	ee Schedule		chedule 0	)	16	45,173.		
	17	, ,	penses. Add lines 10 through 16				<b>&gt;</b>	17	111,256.		
ASSARIN	18	Excess o	or (deficit) for the year (Subtract line 17 from line 9)					18	<17,744.>		
	19	Net asse	ets or fund balances at beginning of year (from line 27, column (A))								
		(must ag	gree with end-of-year figure reported on prior year's return)					19	140,881.		
7	20	Other ch	ranges in net assets or fund balances (explain in Schedule O)					20	0.		
_	21	Net asse	ets or fund balances at end of year Combine lines 18 through 20				▶	21	123,137.		
Lŀ	IA For	Paperwo	ork Reduction Act Notice, see the separate instructions.						Form <b>990-EZ</b> (2010)		

Form **990-EZ** (2010)

	Check if the organization used Schedule O to respond to any question in this Part V			X		
			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			١,,		
	Schedule 0	33		X		
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended			X		
E	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					
a	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 purpose to section 502(c) a color property and property	25.0		х		
	501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a 35b	N/			
	If "Yes," has it filed a tax return on Form 990-T for this year?	330	147	-		
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		х		
27.		. 30	,,,,,,,,,			
		376		х		
	Did the organization file Form 1120-POL for this year?  Did the organization become from or make any lease to any officer, director, trustee, or key employee or were any such lease made.	3/0				
)O A	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made	38a		х		
<b>h</b>	in a prior year and still outstanding at the end of the tax year covered by this return?  If "Yes," complete Schedule L, Part II and enter the total amount involved   38b   N/A	304	.,			
39 39	Section 501(c)(7) organizations Enter	-				
	Initiation fees and capital contributions included on line 9	[				
	Gross receipts, included on line 9, for public use of club facilities  39b N/A	ㅓ				
	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under	<b>-</b> i				
	section 4911 ► N/A , section 4912 ► N/A , section 4955 ► N/A					
h	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the	ļ				
u	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					
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers.	40b		X		
۰	or disqualified persons during the year under sections 4912, 4955, and 4958	.				
đ	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the	-				
Ī	organization D	.				
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter	-				
Ī	transaction? If "Yes," complete Form 8886-T	40e		X		
41	List the states with which a copy of this return is filed <b>WA</b>	L-1-1-1				
	The organization's books are in care of ▶ Patti Sparks  Telephone no ▶ 509-6	62-1	421			
		9880				
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		Yes	No		
	account)?	42b		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.	-				
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		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 here	-				
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A				
	<u> </u>					
			Yes	No		
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of					
~ <b>~</b> d	Form 990-EZ	448		X		
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead			<u> </u>		
	of Form 990-EZ					
•	Did the organization receive any payments for indoor tanning services during the year?	44b 44c		X		
4	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation	1778				
	TO TO MAN TO THE STORE OF CONTRACT OF THE SECOND SECTION OF THE SECOND SE	1	ŧ	1		
u	in Schedule O	440	1			

#### SCHEDULE O (Form 990 or 990-EZ)

# 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 Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Lions International Wenatchee

Employer identification number 91-0296498

Amount:
1,693.
30,004.
31,697.
Amount:
3,605.
63,423.
Amount:
26,894.
7,058.
4,232.
2,400.
1,555.
265.
203.

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

44 C

## 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 inspection

**Employer identification number** Name of the organization 91-0296498 Lions International Wenatchee Payroll Taxes 265. 469. Supplies Conferences, Conventions, Meetings 2,300. Total to Form 990-EZ, line 16 45,173. Form 990-EZ, Part V, Information Regarding Personal Benefit Contracts: The organization did not, during the year, receive any funds, directly, or indirectly, to pay premiums on a personal benefit contract. The organization, did not, during the year, pay any premiums, directly, or indirectly, on a personal benefit contract.

## Form **8868**

(Rev. January 2011)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box									
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).									
•	•			-	m 8868.				
	Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.  Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation								
	to file Form 990-T), or an additional (not automatic) 3-mor								
•	,		•		•				
	of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain								
	ersonal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form,								
- 4-4	w irs.gov/efile and click on e-file for Charities & Nonprofits.								
Part			<del></del>						
	pration required to file Form 990-T and requesting an auton	natic 6⋅mo	nth extension - check this box and com	plete	_				
Part I o	nly				•				
	r corporations (including 1120-C filers), partnerships, REM	ICs, and ti	rusts must use Form 7004 to request an	exten	sion of time				
to file in	come tax returns.								
Type o	Name of exempt organization			Emp	Employer identification nur				
print				ł					
	Lions International Wenatch	nee		91-0296498					
File by the due date f		ee instruct	tions.						
filing your	P.O. Box 0135								
retum Se instruction		reign add	ress, see instructions.						
	Wenatchee, WA 98807-0135	•							
Enter th	ne Return code for the return that this application is for (file	a separa	te application for each return)			0 3			
	······································		,						
Applica	ation	Return	Application			Return			
Is For		Code	Is For			Code			
Form 9	00	01	Form 990-T (corporation)			07			
		<del></del>		· · · · · · · · · · · · · · · · · · ·	08				
Form 9		02 03	Form 1041-A						
Form 990-EZ			Form 4720	······································	09				
Form 9	······································	04 05	Form 5227		10				
Form 990-T (sec. 401(a) or 408(a) trust)			Form 6069		11				
Form 9	90-T (trust other than above)	06	Form 8870			12			
	Patti Sparks								
	books are in the care of ▶ PO Box 135, Wei	natch			<del></del>				
Tele	phone No. ► 509-662-1421		FAX No. ►						
<ul><li>If the</li></ul>	e organization does not have an office or place of business	s in the Ur	ited States, check this box		•				
<ul><li>If the</li></ul>	is <u>is fo</u> r a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) If th	is is fo	r the whole group, c	heck this			
box ▶	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs of all	memb	ers the extension is	for.			
1 1	request an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time unt	at					
_	February 15, 2012, to file the exemp	t organiza	tion return for the organization named a	bove.	The extension				
IS	is for the organization's return for:								
•	Calendar year or								
•	► X tax year beginning JUL 1, 2010 and ending JUN 30, 2011								
					<del></del>				
2 11	n								
	the tax year entered in line 1 is for less than 12 months, c  Change in accounting period								
3a  1	this application is for Form 990-BL, 990-PF, 990-T, 4720,								
	conrefundable credits. See instructions.	За	\$	0.					
-		- 56	<del>*</del>						
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.				21	•	0.			
_				3b	\$				
C Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,						0.			
by using EFTPS (Electronic Federal Tax Payment System). See instructions.  Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instru									
			orm 8868, see Form 8453-EO and Form	8879-					
LHA	For Paperwork Reduction Act Notice, see Instructions	<b>.</b>			Form <b>8868</b> (Re	ev. 1-2011)			