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CISF7VVZ2K

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, 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

2011**Open to Public Inspection****A For the 2011 calendar year, or tax year beginning****07-01, 2011, and ending****06-30, 2012****B Check if applicable**

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization**GREATER LAWTON ROTARY**

Number and street (or P.O. box, if mail is not delivered to street address)

304 NW 19TH ST

City or town, state or country, and ZIP + 4

LAWTON, OK 73507**D Employer identification number****26-2999513****E Telephone number****(580) 248-3483****F Group Exemption**Number ► **0573****G Accounting Method** ☒ Cash ☐ Accrual Other (specify) ►**H Website:** ► **GREATERLAWTONROTARY.ORG****H Check** ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**J Tax-exempt status** (check only one) - ☐ 501(c)(3) ☒ 501(c)(4) (insert no.) ☐ 4947(a)(1) or ☐ 527**K Check** ☐ if the organization is not a section 509(a)(3) supporting organization or section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.**L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ► \$ **54,373******Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)Check if the organization used Schedule O to respond to any question in this Part I ☒

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	29,744
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	24,629
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	6a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	6b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
6c	Less: direct expenses from gaming and fundraising events	6c		
6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less: cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	54,373	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	17,309
	11	Benefits paid to or for members	11	21,869
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	2,332
	16	Other expenses (describe in Schedule O)	16	9,414
	17	Total expenses. Add lines 10 through 16	17	50,924
Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	3,449
	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)	19	71,292
	20	Other changes 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	74,741

For Paperwork Reduction Act Notice, see the separate instructions.

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Form 990-EZ (2011)

91.5

048.017/5ME

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	71,292	22	74,741
23 Land and buildings	0	23	0
24 Other assets (describe in Schedule O)	0	24	0
25 Total assets	71,292	25	74,741
26 Total liabilities (describe in Schedule O)	0	26	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	71,292	27	74,741

Check if the organization used Schedule O to respond to any question in this Part III ☐

What is the organization's primary exempt purpose? SEE SCHEDULE O

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and 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	COMMUNITY SERVICE - ACADEMIC TEAM, ROTARY YOUTH LEADERSHIP CAMP, SALVATION ARMY, GIDEONS INTERNATIONAL, BOY SCOUTS, GIRLS SCOUTS (Grants \$) If this amount includes foreign grants, check here ☐	28a	8,109
29	COMMUNITY SERVICE - PROVIDED SCHOLARSHIPS TO UNIVERSITIES (Grants \$) If this amount includes foreign grants, check here ☐	29a	7,000
30	FEEDING PROGRAMS, POLIO PLUS, LIBRARY BOOKS (Grants \$) If this amount includes foreign grants, check here ☐	30a	2,200
31	Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here ☐	31a	
32	Total program service expenses (add lines 28a through 31a) ☐	32	17,309

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Form W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
CHARLES WEBBER 7316 PECAN MEADOW DR, LAWTON OK 73505	PRESIDENT 0	0	0	0
RANDY RAY 2801 MORNINGSIDE DRIVE, CHOCTAW OK 73020	PAST PRESIDENT 0	0	0	0
MARTHA WEBB 109 SW 50TH STREET, LAWTON OK 73505	SECRETARY 0	0	0	0
J STEVE FITE 304 NW 19TH ST, LAWTON OK 73507	TREASURER 0	0	0	0
CARLOS IRZARRY 711 SW D SUITE 204, LAWTON OK 73501	DIRECTOR 0	0	0	0
PHILLIS ROBERTSON 806 NW PERSHING DRIVE, LAWTON OK 73501	DIRECTOR 0	0	0	0
GRADY MORGAN 4125 SW PARKRIDGE BLVD, LAWTON OK 73505	PRESIDENT ELECT 0	0	0	0
KATHY SUTTLES 2103 NW COLUMBIA AVE, LAWTON OK 73507	DIRECTOR 0	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract 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 significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		X
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)		X
35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		X
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		
35b		
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		X
35c		
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		X
36		
37 a 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?	37b	X
37b		
38 a 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	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
38b		
39 Section 501(c)(7) organizations Enter:		
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40 a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: 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	X
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		
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization		
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	40e	X
41 List the states with which a copy of this return is filed		
42 a The organization's books are in care of J STEVE FITE Telephone no 580-248-3483		
Located at 304 NW 19TH ST LAWTON, OK ZIP + 4 73507		
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)?	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	43	
44 a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	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	44b	X
c Did the organization receive any payments for indoor tanning services during the year?	44c	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	44d	
45 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	X
45 b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	X

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		X

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 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI ☐

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

	Yes	No
47		
48		
49a		
49b		

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If "Yes," was the related organization a section 527 organization?

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."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

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

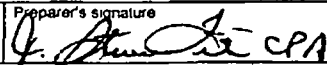
d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

☐ Yes ☒ No

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.

Sign Here		11-29-12
	Signature of officer	Date
	Charles B. Webber	
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
	J STEVE FITE CPA		10-26-2012		P00229720
	Firm's name	Firm's EIN			
	Firm's address	Phone no			
	LAWTON OK 73507-6307	580-248-3483			

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

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Form 990-EZ (2011)

DO NOT CORRESPOND FOR SIGNATURE CIS CASE 48 017

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

OMB No 1545-0047

2011

**Open to Public
Inspection**

Employer identification number

GREATER LAWTON ROTARY

26-2999513

01. General explanation attachment

**COMMUNITY SERVICES - ROTARY ELEMENTARY TRACK MEET, THIS IS HELD ANNUALLY FOR ALL LAWTON
ELEMENTARY SCHOOL STUDENTS, AND IS THE LONGEST CONTINUING SERVICE PROJECT OF ANY ROTARY
CLUB IN THE WORLD. PROVIDE THSI OPPORTUNITY FOR OVER 350 STUDENTS**

02. List of grants and similar amounts paid (Part I, line 10)

ACTIVITY COMMUNITY SERVICE - SCHOLARSHIPS

GRANTEE VARIOUS UNIVERSITIES

AMOUNT 7,000

ACTIVITY ROTARY LEADERSHIP CAMP

GRANTEE SALVATION ARMY, GIRL SCOUTS

AMOUNT 8,109

ACTIVITY FEEDING RPOGRAMS, POLIO PROGRAM

GRANTEE COMMUNITY CHARITIES

AMOUNT 2,200

03. Description of other expenses (Part I, line 16)

DESCRIPTION	AMOUNT
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EVENTS EXPENSE	2,256
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DUES ROTARY INTERNATIONAL	5,511
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DUES DISTRICT	1,350
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CONFERENCE & MEETINGS	297
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