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# Short Form Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code

2012

OMB No. 1545-1150

Department of the Treasury Internal Revenue Service

(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.

Open to Public Inspection

A	or the		orz, and ending		une 30	, 20			
В	Check if a	pplicable: C Name of organization	loyer ider	tification number					
	Address o	- I the tellione iteliant of the				51 0225332			
	Name cha	Number and street (or P.O. box, if mail is not delivered to street address)	Room/suite	E Tele	ohone nun	nber			
=	Initial retu	1 P.O. BOX 15842				897-0015			
==	Terminate Amended	City or town, state or country, and ZIP + 4		F Gro	up Exem				
=		on pending RIO RANCHO, NM 87174			nber 🕨	0573			
_		ting Method: ☑ Cash ☐ Accrual Other (specify) ▶	н	Check	► Vift	he organization is not			
	Websit					th Schedule B			
		npt status (check only one) — ☐ 501(c)(3)	(1) or 527			EZ, or 990-PF).			
			<del></del>						
	Check •	1,11,7							
		te than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990	u-in (e-postcard) ma	ty be rec	quirea (se	e instructions). But if			
		anization chooses to file a return, be sure to file a complete return.	mara ar if total asset	n (Dost II					
		s 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or r		•	_				
			<u> </u>		<b>\$</b>	72679			
Р	art I	Revenue, Expenses, and Changes in Net Assets or Fund Ba	•			•			
		Check if the organization used Schedule O to respond to any ques	tion in this Part I			<u> </u>			
	1	Contributions, gifts, grants, and similar amounts received			1	5841			
	2	Program service revenue including government fees and contracts .			2				
	3	Membership dues and assessments			3	37360			
	4	Investment income			4				
	5a	Gross amount from sale of assets other than inventory	5a						
	Ь	Less: cost or other basis and sales expenses	5b		1				
	C	Gain or (loss) from sale of assets other than inventory (Subtract line 5b fi		5c					
	6	Gaming and fundraising events							
	a	Gross income from gaming (attach Schedule G if greater than							
ဏ္ဏမ	-	\$15,000)							
SCANNED Revenue	Ь	·	341 of contribution		1 1				
经备	"	from fundraising events reported on lied ) attach Schedule G if the	AT OF CONTIDUCTOR	ıə	1 1				
<b>Z</b> "		sum of such gross income and contributions exceeds \$15,000)	eh						
	l _	1071	6b	29478	1				
	C	Less: direct expenses from gaming and fundralsing events	6c	1812		•			
7	d	Net income or (loss) from garding and fundasing events (add lines 6a line 6c)	a and bo and sur	otract					
B	l		- 1	• •	6d	27666			
<b>6</b>	7a		7a						
டி	þ	Less: cost of goods sold	7b						
2	C	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a	a)		7c				
2016	8	Other revenue (describe in Schedule O)	· · · · · ·		8				
	9_	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		. ▶	9	70867			
	10	Grants and similar amounts paid (list in Schedule O)			10	28743			
	11	Benefits paid to or for members			11				
es es	12	Salaries, other compensation, and employee benefits			12				
Expenses	13	Professional fees and other payments to independent contractors			13	1270			
	14	Occupancy, rent, utilities, and maintenance			14	35371			
屳	15	Printing, publications, postage, and shipping			15	384			
	16	Other expenses (describe in Schedule O)		1	16				
	17	Total expenses. Add lines 10 through 16			17	65768			
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)			18	5099			
ă	19	Net assets or fund balances at beginning of year (from line 27, column							
\ss		end-of-year figure reported on prior year's return)			19				
Net Assets	20	Other changes in net assets or fund balances (explain in Schedule O).			20	6622			
ž	21	Net assets or fund balances at end of year. Combine lines 18 through 20							
<u>-</u>				· •	21	11721 - 900 F7 (2018)			
rut	- abau	work Reduction Act Notice, see the separate instructions.	Cat. No. 106421		F	orm <b>990-EZ</b> (2012)			

Pa	rt II	Balance Sheets (see the instructions	for Part II)				
		Check if the organization used Schedule	O to respond to a	ny question in this		<u></u>	<u> 🗆</u>
					(A) Beginning of year	L.,	(B) End of year
22		, savings, and investments			6622		11721
23		and buildings				23	
24		r assets (describe in Schedule O)			<u> </u>	24	
25		l assets				25	
26					······	26	
27		assets or fund balances (line 27 of column			6622	27	11721
Pai	t !!!	Statement of Program Service Accom	•		•		Expenses
		Check if the organization used Schedule	to respond to a	ny question in this	Part III	(Rec	quired for section
		organization's primary exempt purpose?		<del></del>		orga	(c)(3) and 501(c)(4) unizations and section
as r	neasure	e organization's program service accompli d by expenses. In a clear and concise managed and other relevant information for ea	nanner, describe the			4947	7(a)(1) trusts; optional others.)
28	See list	t attached					İ
						İ	
	70	. ф	land of a section				
~~	(Grants	<u> </u>				28a	<del> </del>
29							•
	(Grants	s\$ ) If this amount	includes foreign ar	into chook horo		29a	
30	Grane					29a	· • · · · · · · · · · · · · · · · · · ·
30							]
	(Grants	s \$ ) If this amount	includes foreign gra	ints, check here	• П	30a	
31	<del></del>	program services (describe in Schedule O)				-	<del> </del>
-	(Grants		includes foreign gra			31a	
32	Total	program service expenses (add lines 28a	through 31a)		•	32	28743
Par	t IV	List of Officers, Directors, Trustees, and Key				struc	
		Check if the organization used Schedule	O to respond to a	ny question in this	Part IV		🖂
		(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)		0	Estimated amount of their compensation
See	ist attac	hed	no compensation				
			paid				
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Page 3

Part	instructions for Part V) Check if the organization used Schedule O to respond to any question in this			_		
	instructions for Fart vy Check if the digaritzation used Schedule O to respond to any question in this	s Part	Yes	· L 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	33	103	\ \ \		
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)					
35a	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)?	35a		1		
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	<del></del>	1		
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	35c		1		
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		1		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a					
ь	Did the organization file Form 1120-POL for this year?	37b	L	✓.		
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?			,		
<b>.</b>		38a	ļ	✓		
39	If "Yes," complete Schedule L, Part II and enter the total amount involved   38b   Section 501(c)(7) organizations. Enter:	- !				
a	Initiation fees and capital contributions included on line 9					
b	Gross receipts, included on line 9, for public use of club facilities	1				
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4915 ▶ ; 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		1		
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		505) 89	7-001	5		
_	Located at ► 10225 GELFAND PL NW ALBUQUERQUE  At any time during the calendar year, did the organization have an interest in or a signature or other authority over	87114				
Ь	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	No ✓		
	If "Yes," enter the name of the foreign country: ▶	420				
	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 the U.S.?	42c		✓		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. •	<b></b>		
	and enter the amount of tax-exempt interest received or accrued during the tax year					
44.	Did the association of the second control of		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		✓		
ь	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		✓		
C	Did the organization receive any payments for indoor tanning services during the year?	44c		✓		
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in School to O	I				
<b>A</b> F-	explanation in Schedule O	44d		<b>√</b>		
45a 45b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		✓		
	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		✓		

•	_							
Form 99	0-EZ (2012)			····				age
	Did the second star				- babalf of outo our		Yes	<u>No</u>
46		n engage, directly or in						
		ublic office? If "Yes," c		, Parti	<u> </u>	46		_✓
Part		(c)(3) organizations						
		01(c)(3) organizations	s must answer que	estions 47–49b and	52, and complete t	the tables t	for line	S
	50 and 51							
	Check if the o	organization used Sch	hedule O to respond	to any question in	this Part VI	<u> </u>	· · ·	
							Yes	No
47	Did the organizatio	n engage in lobbying	activities or have a	section 501(h) election	on in effect during th	e tax	1	
	year? If "Yes," com	plete Schedule C, Parl	til			. 47		
48	Is the organization a	school as described in	n section 170(b)(1)(A)(i	ii)? If "Yes." complete	Schedule E	. 48		
49a	-	n make any transfers to		•				
b	_	lated organization a se		•		. 49b		
50		for the organization's						1 ko
00		ch received more than						1 100
			· · · · · · · · · · · · · · · · · · ·	<del>1</del>	(d) Health benefits,	T		—
	(a) Name and title of		(b) Average hours per week	(c) Reportable compensation	contributions to employe	e (e) Estimate	ed amou	nt of
	paid more than	\$100,000	devoted to position	(Forms W-2/1099-MISC)	benefit plans, and deferre	other con	npensati	on
					compensation	<del></del>		
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51 ————	\$100,000 of compe	e for the organization's ensation from the organization from the organization from the organization particular	nization. If there is no	ensated independent one, enter "None." (b) Type of sen	<del></del>	ch received (c) Compensati		tha
						(-)		
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d	Total number of oth	er independent contra	ctors each receiving	over \$100.000	<b>&gt;</b>			
52		n complete Schedule A	-		and 4947(a)(1)			
-		ole trusts must attach a				► ☐ Yes	_ N	0
Under n	<del></del>	e that I have examined this re	<del></del>					
		ration of preparer (other than				Kilowiedge allo	i Dellei, i	. 13
	The Alle							
Sign	Signature of	Signature of Officer Date						
	MARION T DEVRIES						,	
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Paid	Print/Type prepa	rer's name	Preparer's signature	Da	Check [			
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Use (		<u> </u>		···	Firm's EIN ▶			
	Firm's address				Phone no			
May th	ne IRS discuss this re	eturn with the preparer	shown above? See i	instructions		▶ ☐ Yes	□ N	0

▶ ☐ Yes ☐ No

## RIO RANCHO ROTARY CLUB 51 02253332 990 EZ 2012

LIST OF OFFICERS

PRESIDENT EARL WAID

3824 Sierra Madre NE Albuquerque, NM 87111

PRESIDENT-ELECT MICHAEL SCHAMP

P O BOX 2982 Corrales, NM 87048

VICE-PRESIDENT AUDRA DODSON

1304 Yucca Dr. Rio Rancho, NM 87124

SECRETARY BILL LOWEN

160 High Ridge Trail Rio Rancho, NM 87124

TREASURER MARION DEVRIES

10225 Gelfand Pl. NW Albuquerque, NM 87114

DIRECTOR CHRIS PACHECO

5720 Rio Pinos Rd. Rio Rancho, NM 87144

DIRECTOR BROCK FULLER

1062 Bernalilo Ct Bernalillo, NM 87004

DIRECTOR DARRYL GREGERSON

625 Monrerrey Rd Rio Rancho, NM 87144

DIRECTOR JIM WHEATLEY

202 Cabeza Negra Ct. Rio Rancho, NM 87124

## RIO RANCHO ROTARY CLUB 51 02253332 990 EZ 2012

LIST OF OFFICERS

## RIO RANCHO ROTARY CLUB 51 0225332

## 990 EZ 2012

# PART I, LINE 10 LIST OF GRANTS FISCAL

#### YEAR 2010 - 2011

A Park Above - serves handicapped citizens	\$	2000
Storehouse West - food pantry for low income citizens		1450
St. Felix Pantry - " " " " " "		200
Paws 7 Stripes - serves disabled veterans		1000
Sonny Brown Award - community outreach		135
Foreign Exchange Students		2225
Shelter Box Program - disaster victim relief		1005
Rotary International - Hurricane Sandy Victims		1000
" - African School Clean Water Project		1863
" - End Polio Now Program		500
Peanut Butter and Jelly PreSchool - disadvantaged children		1000
Explorer Post - youth project		1000
Rio Rancho Lions Club - youth program		400
4-Way Test - youth essay contest awards		175
School Backpack Program - underpriviledged youth		1500
Boy Scouts - community youth		2500
Child ID Program - youth safety		500
"Don't Meth with Us" - in school anti-drug program		3745
Flags for community school		115
RYLA - youth leadership program		1200
Scholarships - college scholarships for disadvantaged youth		3000
"Futures for Children" - Native American youth project		1000
Rio Rancho Skating club - community youth		500
Rotary District 5520 - grant		730
TOTAL	3	28743