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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, 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

Check if applicable

Address change

Name change

Initial return

Terminated

Amended return

Application pending

C Name of organization

ROTARY CLUB OF LARAMIE

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

PO BOX 12

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

LARAMIE, WY 82073

D Employer identification number

83-6006176

E Telephone number

F Group Exemption Number

G Accounting method

Cash

Accrual

Other (specify)

I Website:

WWW.LARAMIEWYROTARY.CLUBWMZARD.COM

J Tax-Exempt status

(check only one)—

501(c)(3)

501(c)(4)

(insert no)

4947(a)(1) or

527

H Check

if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

K Check if the organization is not a section 509(a)(3) supporting organization or a 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 \$ 101,529

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	8,863
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	62,211
	4	Investment income	4	98
	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	6d	13,885
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)		
	6a			
Expenses	b	Gross income from fundraising events (not including \$ 736 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	26,104
	6c	Less direct expenses from gaming and fundraising events	6c	12,219
	d	Net income or (loss) from gaming and fundraising events (Add lines 6a and 6b and subtract line 6c)	6d	13,885
	7a	Gross sales of inventory, less returns and allowances	7a	104
	7b	Less cost of goods sold	7b	81
	7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	23
	8	Other revenue (describe in Schedule O)	8	4,149
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	89,229
Net Assets	10	Grants and similar amounts paid (list in Schedule O)	10	30,690
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	4,400
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	1,315
	16	Other expenses (describe in Schedule O)	16	41,269
	17	Total expenses. Add lines 10 through 16	17	77,674
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	11,555
	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	60,044
	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	71,599

Part II

Balance Sheets

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

☒

(See the instructions for Part II)		(A) Beginning of year	(B) End of year	
22	Cash, savings, and investments	78,768	22	82,601
23	Land and buildings		23	
24	Other assets (describe in Schedule O)	15,241	24	4,150
25	Total assets	94,009	25	86,751
26	Total liabilities (describe in Schedule O)	33,965	26	15,152
27	Net assets or fund balances (line 27 of column (B) must agree with line 21) .	60,044	27	71,599

Part III Statement of Program Service Accomplishments		Expenses	
Check if the organization used Schedule O to respond to any question in this Part III		☒	
What is the organization's primary exempt purpose? THE ROTARY CLUB OF LARAMIE IS A CIVIC ORGANIZATION THAT PROVIDES CASH AND IN-KIND CONTRIBUTIONS AND SERVICES TO THE SURROUNDING COMMUNITY AS WELL AS TO ROTARY INTERNATIONAL SIGNIFICANT ACHIEVEMENTS AND PROJECTS INCLUDE PROVIDING FUNDING TO RI TO PURCHASE SHELTER BOXES FOR INTL RELIEF EFFORTS, COMMUNITY CHRISTMAS DONATIONS AND HUMANITARIAN AND CONSERVATION PROJECTS		(Required for section 501 (c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)	
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			
28	THE ROTARY CLUB OF LARAMIE IS A CIVIC ORGANIZATION PROVIDING CASH AND IN- KIND CONTRIBUTIONS AND SERVICES TO THE SURROUNDING COMMUNITY AS WELL AS TO ROTARY INTERNATIONAL (Grants \$ 30,690) If this amount includes foreign grants, check here ☐	28a	73,138
29	THE ROTARY CLUB OF LARAMIE IS A CIVIC ORGANIZATION PROVIDING CASH AND IN- KIND CONTRIBUTIONS AND SERVICES TO THE SURROUNDING COMMUNITY AS WELL AS TO ROTARY INTERNATIONAL (Grants \$) If this amount includes foreign grants, check here ☐	29a	
30	(Grants \$) If this amount includes foreign grants, check here ☐	30a	
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	73,138

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV)				
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) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
See Additional Data Table				

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 significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	No
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	No
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 during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	No
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	35c	No
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	No
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?	37b	No
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	No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	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	
40a	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	No
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	No
41	List the states with which a copy of this return is filed ☐ _____		
42a	The organization's books are in care of ☐ CPA GROUP OF LARAMIE LLC Telephone no ☐ (307) 745-7241 1273 N 15TH ST STE 121 Located at ☐ LARAMIE, WY ZIP + 4 ☐ 82072		
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)? 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 .	42b	No
c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country ☐ _____	42c	No
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		
44a	Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of Form 990-EZ.	44a	No
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	No
c	Did the organization receive any payments for indoor tanning services during the year?	44c	No
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	
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	No
45b	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	

		Yes	No
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		No

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.

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

		Yes	No
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		
48	Is the organization a school 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?		
49b	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) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

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	***** Signature of officer	2012-11-07 Date		
	TOM MANGAN VICE PRESIDENT Type or print name and title			
Paid Preparer's Use Only	Preparer's signature PAULINE M DUNNUCK	Date 2012-11-08	Check if self-employed	Preparer's taxpayer identification number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4	CPA GROUP OF LARAMIE LLC 1273 N 15TH ST SUITE 121 LARAMIE, WY 82072		EIN
				Phone no (307) 745-7241

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

Yes No

Additional Data

Software ID:
Software Version:
EIN: 83-6006176
Name: ROTARY CLUB OF LARAMIE

Form 990-EZ, Special Condition Description:

Special Condition Description

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
LINDY JOHNSON 184 SPRAGUE LANE LARAMIE, WY 82070	TREASURER 2 00	0		
TOM MANGAN 2521 PARK AVENUE LARAMIE, WY 82070	VICE PRESIDE 1 00	0		
MEGAN GOETZ 501 GARFIELD STREET LARAMIE, WY 82070	PRESIDENT 10 00	0		
PAUL IRISH 221 IVINSON AVENUE LARAMIE, WY 82070	BOARD MEMBER 1 00	0		
LARRY STRUEMPF PO BOX 1632 LARAMIE, WY 82073	BOARD MEMBER 1 00	0		
JANICE LAWRENCE 1059 COLINA LARAMIE, WY 82072	BOARD MEMBER 1 00	0		
MONICA CORDELL PO BOX 12 LARAMIE, WY 82073	SECRETARY 4 00	0		

Open to Public Inspection

83-6006176

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		<u>DUCK RACE</u> (event type)	<u>HARLEM AMBASSAD</u> (event type)	 (total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts	14,238	9,213	23,451
	2	Less Charitable contributions			
	3	Gross income (line 1 minus line 2)	14,238	9,213	23,451
Direct Expenses	4	Cash prizes	2,475		2,475
	5	Non-cash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	2,798	5,138	7,936
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			(10,411)
	11	Net income summary Combine lines 3 and 10 in column (d). ▶			13,040

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
7 Direct expense summary Add lines 2 through 5 in column (d) ▶					()
8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶					

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

- 11

Does the organization operate gaming activities with nonmembers?

Yes

No
- 12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

Yes

No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

Yes

No

b

If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c

If "Yes," enter name and address

Name

Address

16

Gaming manager information

Name

Gaming manager compensation \$

Description of services provided

Director/officer

Employee

Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

Yes

No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV

Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
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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 to provide any additional information.**
► Attach to Form 990 or 990-EZ.

2011

**Open to Public
Inspection**

Name of the organization
ROTARY CLUB OF LARAMIE

Employer identification number

83-6006176

Identifier	Return Reference	Explanation
OTHER REVENUE	FORM 990-EZ, PART I, LINE 8	CHRISTMAS PARTY 2,275 GOLF TOURNAMENT 1,559 STEAK FRY / BBQ 315 TOTAL 4,149
GRANTS AND SIMILAR AMTS PAID TO ORGANIZATIONS	FORM 990-EZ, PART I, LINE 10	VARIOUS INTL SUPPORT 5,269 0 0
OTHER EXPENSES	FORM 990-EZ, PART I, LINE 16	EXPENSES BANK CHARGES 20 OFFICE SUPPLIES 108 ROTARY SUPPLIES 527 PO BOX RENTAL 44 DISTRICT CONFERENCE 190 DISTRICT ASSEMBLY 281 CLUB AWARDS 121 MEALS EXPENSE / MEMBERS 34,144 ROTARY MEMBER FUNCTIONS 3,900 STUDENT CONFERENCE 1,375 WEB PAGE 559 TOTAL 41,269
OTHER ASSETS	FORM 990-EZ, PART II, LINE 24	ACCOUNTS RECEIVABLE 14,238 2,028 INVENTORIES FOR SALE OR USE 203 122 RYLA - PRE- PAID 800 2,000 TOTAL 15,241 4,150
OTHER LIABILITIES	FORM 990-EZ, PART II, LINE 26	ACCOUNTS PAYABLE AND ACCRUED EXPENSES 7,563 4,931 DEFERRED REVENUE 26,367 303 ESCROW ACCOUNT 35 239 DONATIONS PAYABLE 0 7,479 PHF CONTRIBUTIONS PAYABLE 0 2,200
PRIMARY EXEMPT PURPOSE	FORM 990-EZ, PART III	THE ROTARY CLUB OF LARAMIE IS A CIVIC ORGANIZATION THAT PROVIDES CASH AND IN- KIND CONTRIBUTIONS AND SERVICES TO THE SURROUNDING COMMUNITY AS WELL AS TO ROTARY INTERNATIONAL SIGNIFICANT ACHIEVEMENTS AND PROJECTS INCLUDE PROVIDING FUNDING TO RI TO PURCHASE SHELTER BOXES FOR INTL RELIEF EFFORTS, COMMUNITY CHRISTMAS DONATIONS AND HUMANITARIAN AND CONSERVATION PROJECTS
ALL OTHER ACCOMPLISHMENT	FORM 990-EZ, PART III, LINE 31	THE ROTARY CLUB OF LARAMIE IS A CIVIC ORGANIZATION PROVIDING CASH AND IN- KIND CONTRIBUTIONS AND SERVICES TO THE SURROUNDING COMMUNITY AS WELL AS TO ROTARY INTERNATIONAL

TY 2011 Compensation Explanation**Name:** ROTARY CLUB OF LARAMIE**EIN:** 83-6006176

Person Name	Explanation
LINDY JOHNSON	
TOM MANGAN	
MEGAN GOETZ	
PAUL IRISH	
LARRY STRUEMPF	
JANICE LAWRENCE	
MONICA CORDELL	