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Form 990-EZ

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

2012

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

A For the 2012 calendar year, or tax year beginning 07-01-2012

, and ending 06-30-2013

B Check if applicable

 Address change Name change Initial return Terminated Amended return Application pending

C Name of organization ROTARY INTERNATIONAL SPRINGFIELD SOUTHEAST CLUB		D Employer identification number 23-7405637
Number and street (or P O box, if mail is not delivered to street address) 1717 EAST REPUBLIC ROAD ROOM/SUITE STE A		E Telephone number (417) 886-8606
City or town, state or country, and ZIP + 4 SPRINGFIELD, MO 65804		F Group Exemption Number ► 0573

G Accounting Method Cash Accrual Other (specify) ► _____H Check ► if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ► SPRINGFIELDSOUTHEASTROTARY.ORG

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 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 ► \$ 186,481

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	
	2 Program service revenue including government fees and contracts	2	38,047
	3 Membership dues and assessments	3	147,579
	4 Investment income	4	855
	5a Gross amount from sale of assets other than inventory	5a	
	b Less cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
Expenses	b 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	
	c Less direct expenses from gaming and fundraising events	6c	
	d 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	
	b Less cost of goods sold	7b	
	c 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	186,481
	10 Grants and similar amounts paid (list in Schedule O)	10	
Net Assets	11 Benefits paid to or for members	11	98,137
	12 Salaries, other compensation, and employee benefits	12	10,525
	13 Professional fees and other payments to independent contractors	13	11,068
	14 Occupancy, rent, utilities, and maintenance	14	
	15 Printing, publications, postage, and shipping	15	75
	16 Other expenses (describe in Schedule O)	16	93,828
	17 Total expenses. Add lines 10 through 16 ►	17	213,633
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-27,152
	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	81,589
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	1,479
	21 Net assets or fund balances at end of year. Combine lines 18 through 20 ►	21	55,916

Part II Balance Sheets (see the instructions for Part II)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	81,924	22	56,093
23 Land and buildings		23	
24 Other assets (describe in Schedule O)		24	
25 Total assets	81,924	25	56,093
26 Total liabilities (describe in Schedule O)	335	26	177
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	81,589	27	55,916

Part III Statement of Program Service Accomplishments (see the instructions for Part III)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 MAIN OBJECTIVE OF ROTARY IS SERVICE IN THE COMMUNITY, IN THE WORKPLACE, AND THROUGHOUT THE WORLD ROTARIANS DEVELOP COMMUNITY SERVICE PROJECTS THAT ADDRESS MANY OF TODAY'S MOST CRITICAL ISSUES - SUCH AS CHILDREN AT RISK, POVERTY AND HUNGER, THE ENVIRONMENT, ILLITERACY, AND VIOLENCE THEY ALSO SUPPORT PROGRAMS FOR YOUTH, EDUCATIONAL OPPORTUNITIES AND INTERNATIONAL EXCHANGES FOR STUDENTS, TEACHERS, OTHER PROFESSIONALS, AND VOCATIONAL AND CAREER DEVELOPMENT THE ROTARY MOTTO IS SERVICE ABOVE SELF

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 See Additional Data Table

(Grants \$)	If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	28a
29		
(Grants \$)	If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	29a
30		
(Grants \$)	If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	30a
31 Other program services (describe in Schedule O)		
(Grants \$)	If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	31a
32 Total program service expenses (add lines 28a through 31a)	► <input type="checkbox"/>	32 213,633

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 title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms 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
See Additional Data Table				

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	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
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	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	37b	No
b Did the organization file Form 1120-POL for this year?	38a	
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?	38b	
b If "Yes," complete Schedule L, Part II and enter the total amount involved	39a	
39 Section 501(c)(7) organizations Enter	39b	
a Initiation fees and capital contributions included on line 9		
b Gross receipts, included on line 9, for public use of club facilities		
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► _____, section 4912 ► _____, section 4955 ► _____	40b	No
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		
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 ► CLUB MANAGEMENT SERVICES Telephone no ► (417) 886-8606 Located at ► 1717 EAST REPUBLIC ROAD STE A SPRINGFIELD, MO ZIP + 4 ► 65804		
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	No
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 .	42c	No
c At any time during the calendar year, did the organization maintain an office outside the U.S.?		
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		
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	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	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

46 No

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations 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

47 Yes No

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

48 Yes No

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

49a Yes No

49b If "Yes," was the related organization a section 527 organization?

49b Yes No

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 title of each employee paid more than \$100,000	(b) 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

Signature of officer

MIKE PEARL TREASURER

Type or print name and title

2014-01-08

Date

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature CAROLS DEHAVEN JANICK CPA	Date 2014-01-17	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ► SAMEK & COMPANY LLC			Firm's EIN ►	
	Firm's address ► 1900 S VENTURA AVE SPRINGFIELD, MO 658042714			Phone no (417) 887-1561	

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

Additional Data

Software ID:
Software Version:
EIN: 23-7405637
Name: ROTARY INTERNATIONAL SPRINGFIELD
SOUTHEAST CLUB

Form 990EZ, Part III - Statement of Program Service Accomplishments

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

(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-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
PRESIDENT	5 00	0		
TERRI EFTINK  SECRETARY	5 00	0		
DAVID COMPERE  TREASURER	5 00	0		
MICHAEL WEHRENBERG  DIRECTOR	5 00	0		
NANCY RIGGS  DIRECTOR	5 00	0		
KIM NICHOLS  DIRECTOR	5 00	0		
KENNETH BOWMAN  DIRECTOR	5 00	0		
BRENT BALDWIN  PAST PRESIDE	5 00	0		
THERESA ROBERTSON  EXEC ADMINIS	20 00	9,541		
JIM CONLEY  PRESIDENT -	5 00	0		

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.

2012**Open to Public
Inspection**Name of the organization
ROTARY INTERNATIONAL SPRINGFIELD
SOUTHEAST CLUB**Employer identification number**

23-7405637

Identifier	Return Reference	Explanation
OTHER EXPENSES	FORM 990-EZ, PART I, LINE 16	EXPENSES TELECOMMUNICATIONS 855 BANK FEES 1,390 WEBSITE 693 CLUB SUPPLIES 1,430 FOUR-WAY TEST 235 INTERNATIONAL CONVENTION 3,109 SPEAKER GIFTS 750 ATTENDANCE COMMITTEE 99 PROGRAM COMMITTEE 59 MEMBERSHIP DEVELOPMENT 287 DISTRICT ACTIVITIES 489 DISTRICT CONFERENCE 665 LARGE CLUB CONFERENCE 1,402 ROCK'N RIBS 295 INSURANCE 187 COMMUNITY SERVICE LANE 23,194 VOCATIONAL AWARENESS 270 ROTARY VOLUNTEERS 40 INTERNATIONAL SERVICE 23,608 NEW GENERATIONS 1,474 TRANSFER TO K PARK PROJ 28,297 TRANSFER TO TWIN CLUB 5,000 TOTAL 93,828
OTHER CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990-EZ, PART I, LINE 20	CORRECTION OF PRIOR PERIODS FUND BAL 1,485 PRIOR PERIOD FUNDS TO BE REMITTED -6
OTHER LIABILITIES	FORM 990-EZ, PART II, LINE 26	PAYROLL TAXES WITHHELD 335 27 FOUNDATION FUNDS TO BE REMITTED 0 150
PRIMARY EXEMPT PURPOSE	FORM 990-EZ, PART III	THE MAIN OBJECTIVE OF ROTARY IS SERVICE IN THE COMMUNITY, IN THE WORKPLACE, AND THROUGHOUT THE WORLD ROTARIANS DEVELOP COMMUNITY SERVICE PROJECTS THAT ADDRESS MANY OF TODAY'S MOST CRITICAL ISSUES - SUCH AS CHILDREN AT RISK, POVERTY AND HUNGER, THE ENVIRONMENT, ILLITERACY, AND VIOLENCE. THEY ALSO SUPPORT PROGRAMS FOR YOUTH, EDUCATIONAL OPPORTUNITIES AND INTERNATIONAL EXCHANGES FOR STUDENTS, TEACHERS, OTHER PROFESSIONALS, AND VOCATIONAL AND CAREER DEVELOPMENT. THE ROTARY MOTTO IS SERVICE ABOVE SELF
FIRST ACCOMPLISHMENT	FORM 990-EZ, PART III, LINE 28	CLUB SERVICE - THE CLUB PREPARES AND ARRANGES FOR WEEKLY PROGRAMS FOR REGULAR AND SPECIAL CLUB MEETINGS MAINTAINING A PROPER BALANCE OF ALL ASPECTS OF ROTARY AND MAKES CERTAIN THAT THE PROGRAMS ARE AT ALL TIMES IN KEEPING WITH THE DIGNITY OF ROTARY
SECOND ACCOMPLISHMENT	FORM 990-EZ, PART III, LINE 29	INTERNATIONAL SERVICE - THE WORLD COMMUNITY SERVICE LANE ADVANCES THE ROTARY GOALS OF WORLD PEACE AND UNDERSTANDING BY ORGANIZING AND FUNDING COMMUNITY SERVICE PROJECTS IN OTHER COUNTRIES AND BY COORDINATING INTERNATIONAL YOUTH EXCHANGES AND ADULT GROUP-STUDY EXCHANGES
THIRD ACCOMPLISHMENT	FORM 990-EZ, PART III, LINE 30	COMMUNITY SERVICE - THE CLUB CONTRIBUTES TO THE SPRINGFIELD, MISSOURI, COMMUNITY BY ORGANIZING AND FUNDING PROGRAMS FOR SPECIAL OLYMPICS, THE DONT METH WITH US PROJECT FOR DRUG PREVENTION IN ELEMENTARY AND SECONDARY SCHOOLS, IMPROVING K-PARK, FUNDING GRANTS TO A VARIETY OF LOCAL NONPROFIT ORGANIZATIONS, AND RECOGNIZING OUTSTANDING PUBLIC SERVANTS IN LAW ENFORCEMENT AND FIREFIGHTING
ALL OTHER ACCOMPLISHMENT	FORM 990-EZ, PART III, LINE 31	OTHER ADMINISTRATIVE EXPENSES OF OPERATING THE CLUB

TY 2012 Compensation Explanation

Name: ROTARY INTERNATIONAL SPRINGFIELD
SOUTHEAST CLUB
EIN: 23-7405637

Person Name	Explanation
LAURA WARD	
TERRI EFTINK	
DAVID COMPERE	
MICHAEL WEHRENBERG	
NANCY RIGGS	
KIM NICHOLS	
KENNETH BOWMAN	
BRENT BALDWIN	
THERESA ROBERTSON	
JIM CONLEY	