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990-EZ

SCANNED

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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 (except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

2008

OMB No 1545-1150

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2008 calendar year, or tax year beginning 7/01 2008, and ending 20 09 6/30 B Check if applicable: C Name of organization Please D Employer identification number use IRS Address change YAKIMA SOUTHWEST ROTARY CLUB 7001797 label or Name change print or Number and street for P.O. box, if mail is not delivered to street address! Room/suite E Telephone number Institut neuturn type. (509) 840-0267 See Specific Termination City or town, state or country, and ZIP + 4 Amended return F Group Exemption Instruc-Apprication pending **YAKIMA. WA 98907** Number G0573 Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach G Accounting method: ☐ Cash ☑ Accrual a completed Schedule A (Form 990 or 990-EZ). Other (specify) H Check ► ☑ if the organization is not Website: ► WWW.SOUTHWESTROTARY.ORG required to attach Schedule 8 (Form 990. J Organization type (check only one) -

☐ 501(c) (4)

(insert no.) 990-EZ, or 990-PF). 4947(a)(1) or 527 K Check ▶ If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return. Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) 1 Contributions, gifts, grants, and similar amounts received 2 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 3 30,771 4 250 Investment income Gross amount from sale of assets other than inventory 5b Less: cost or other basis and sales expenses 5с Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule) . Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here 🕨 🔲 Gross revenue (not including \$ ___ _ of contributions 65.992 ва reported on line 1) **b** Less: direct expenses other than fundraising expenses 37,695 c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 6c **⊚** Gross sales of inventory, less returns and allowances 7a es) 7b Less: cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c 8 Other revenue (describe > Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8, 68,716 9 25.083 10 10 Grants and similar amounts paid (attach schedule) 11 11 Benefits paid to or for members 12 12 Salanes, other compensation, and employee benefits Professional fees and other payments to independent contractorsWAY 5,012 13 13 14 14 Occupancy, rent, utilities, and maintenance 1,690 15 Printing, publications, postage, and shipping 15 Other expenses (describe | SEE ATTACHED SCHEDULE 17,175 16 16 Total expenses. Add lines 10 through 16 48,960 17 17 18 19,756 18 Excess or (deficit) for the year (Subtract line 17 from line 9). 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 98,058 19 end-of-year figure reported on prior year's return). ž 20 Other changes in net assets or fund balances (attach explanation) 20 Net assets or tund balances at end of year. Combine lines 18 through 20 21 Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ. (A) Beginning of year (B) End of year (See the instructions for Part II.) 74,454 22 78,000 22 Cash, savings, and investments 0 23 0 23 Land and buildings 24 Other assets (describe ► ACCOUNTS RECEIVABLE 23,604 24 39,814 117,814 98.058 25 25 Total assets 0 26 Total liabilities (describe ▶

Net assets or fund balances (line 27 of column (B) must agree with line 21)

For Privacy Act and Paperwork Reduction Act Notice, see the Instruction for Form 990.

117,814

Form 990-EZ (2008)

98,058 27

Portif BBO-EX (2000)					Page Z
Part III Statement of Program Service Accom]	Expenses
What is the organization's primary exempt purpose? I	O CONTRIBUTE TO YOUT	H AND COMMUN	NTY	(Req	ured for 501(c)(3)
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner,				and	(4) organizations 4947(a)(1) trusts;
describe the services provided, the number of persons ber	nefited, or other relevant into	rmation for each pi	rogram title.	optic	onal for others.)
28 GRANTS PROVIDED FOR YOUTH SERVICES					
)	ı
***************************************	••			1	
(Grants \$ 19.406) If this amount incli	idee toroian amate, check	hom	▶ □	28a	
CDANTS PROVIDED FOR COMMINITY IMPROVE	MENT	nere		200	
GRANTS PROVIDED FOR COMMUNITY IMPROVE				1 1	
				1 1	
				1 1	
(Grants \$ 5.677) If this amount incli	udes toreign grants, check	here	<u>▶ [Z]</u>	29a	
30			+	1 1	I
~~~~		••••	************		
				1 1	İ
(Grants \$) If this amount incli	ides foreign grants, check	here	▶ □	30a	1
31 Other program services (attach schedule)					
(Grants \$ ) If this amount incli	udes toreign grants, check	here	▶ □	31a	
32 Total program service expenses (add lines 28a th	rough 31a)	11010	<u> </u>	32	
Part IV List of Officers, Directors, Trustees, and Key		n if not compansate	d /See the in		one for Part (V)
sat of ontodis, buscars, trustass, and resy	(b) Title and average	(c) Compensation	(d) Contributi		(e) Expense
(a) Name and address	hours per week	(if not paid,	employee benefi	t plans &	account and
DVANDEOVETY	devoted to position	enter -0j	deterred compo	ensation	other allowances
RYAN BECKETT	PRESIDENT 6		j	_	
301 S 72ND AVENUE, YAKIMA, WA 98908		0	<u></u>	0	0
RICK SMITH	PRESIDENT ELECT 2		1		
315 E WINE COUNTRY ROAD, GRANDVIEW, WA		0		0	0
DAVID RANKIN	VICE PRESIDENT 1				
PO BOX 168, YAKIMA, WA 98907	110211201021111	0	1	0	) 0
SONJA DODGE	SECRETARY	~·····			
2205 W CHESTNUT AVENUE, YAKIMA, WA 98902	SECRETARY 2	o	1	0	0
IIII IE CHITU			<del></del>		
	TREASURER 2	0	ļ	0	o
PO BOX 1624 YAKIMA, WA DUSTY ST. JOHN	<del></del>		<del> </del>		
	ASSISTANT	4,800		0	0
PO BOX 1624 YAKIMA, WA	SECRETARY	4,000		<del>-</del>	<u>_</u>
DOUG BERND	DIRECTOR			_	1
660 N 18TH AVENUE, YAKIMA, WA 98902		0	<u> </u>	0	0
ROGER CALHOUN	DIRECTOR				1
501 ROWE HILL DRIVE, YAKIMA, WA 98901		0	ļ	0	0
TERESA HOLLAND	DIRECTOR				
PO BOX 22520. YAKIMA, WA 98907	DIRECTOR	0		0	0
DAVE MCDONNELL	DIPERTOR			<u>_</u>	
1203 N 40TH AVENUE, YAKIMA, WA 98908	DIRECTOR	0	1	0	0
ANNA FRANKS		<del></del>			<u> </u>
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	DIRECTOR	0	ŀ	0	1 0
1117 TIETON DRIVE, YAKIMA, WA 98902		<u> </u>	 		
JACK IRION	DIRECTOR		1	•	
104 N 4TH AVENUE, YAKIMA, WA 98902		0	<u> </u>	0	0
TONY KLEIN	DIRECTOR		i		
502 W YAKIMA AVENUE, YAKIMA, WA 98902		0		0	0
TRESSA STADEL	DIRECTOR				
101 E YAKIMA AVENUE, YAKIMA, WA 98902	BIREGIOR	0	1	0	0
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Par	other Information (Note the statement requirements in the instructions for Part VI.)		
		Y	es No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	1
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34	1
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, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35a	1
b	If "Yes," has it filed a tax return on Form 890-T for this year?	35b	
36	Was there a liquidation, dissolution, termination, or substantial contraction 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 N/A		
þ	Did the organization file Form 1120-POL for this year?	37b	
	any obtained the principle and any angular art and based of the portion by the relationst	38a	1
þ	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A		
39	Section 501(c)(7) organizations. Enter:		
	Initiation tees and capital contributions included on line 9 Gross receipts included on line 9 for public use of club recitities 39a N/A		
	Circos recorpio, increaces on line of for papers and records recording		
	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶		
ь	Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I	40b	1
C	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d	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 filled.		
42a	The books are in care of ▶ DUSTY ST. JOHN Located at ▶ PO BOX 1624 YAKIMA, WA ZIP + 4 ▶	840 98907	-0267
b	· · · · · · · · · · · · · · · · · · ·	42b	es No
	If "Yes," enter the name of the toraign country: N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c	··· -	42c	✓
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
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	es No
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If		
	"Yes," Form 990 must be completed instead of Form 990-EZ	45	
	For	m 990-	EZ (2008)

Par	t VI Section 501(c)(3) and complete the	organizations only tables for lines 50 a	. All section 501(c)(3) ond 51.	rganizations mus	st answer question	ons 46-49
47 48 49a b 50	Did the organization engage candidates for public office Did the organization engages is the organization operated Did the organization makes if "Yes," was the related of Complete this table for the each received more than \$ (a) Name and address of each than \$100,01	ge in direct or indirect pe? If "Yes," complete Sign in lobbying activities and a school as described any transfers to an exemple and transfer	colitical campaign activities chedule C, Part I ? If "Yes," complete Scheled in section 170(b)(1)(A)(ii) empt non-chantable related 527 organization?	dule C, Part II I? If "Yes," completed organization? officers, director	ete Schedule E s, trustees and key	Yes No 46 47 48 49a 49b employees) who (e) Expense account and other allowances
Total	I number of other employee	s paid over \$100,000 ►			<u> </u>	
51	Complete this table for the compensation from the or			ors who each reco	eived more than \$1	00.000 ot
	(a) Name and address of	each independent contractor	paid more than \$100,000	(b) Ty	pe of service	(c) Compensation
Tota	al number of other independ	dent contractors each r	eceiving over \$100,000	>		
Sigr Her	Under penalties of period and belief, it is true, on Signature of officer	ury, I declare that I have examined, and complete. Declared	ined this return, including accomption of preparer (other than office)	ar) is based on all infon		er has any knowledge.
	parer's Signature Firm's name for yours	The work	Lotaus Date	30/10 Check if self- employed		Number (See instructions)
	Uniy if self-employed), address, and ZIP + 4	170 BOX 160	4 yarrama W	A 98901	Phone no. ►: 209	840-0361
May	the IRS discuss this return	n with the preparer sho	wn abgye? See instruction	<u> </u>		Yes No

YAKIMA SOUTHWEST ROTARY CLUB ATTACHMENT TO FORM 990-EZ FOR THE YEAR ENDED JUNE 30, 2009

PART 1, EXPENSES, LINE 10 GRANTS AND SIMILAR AMOUNTS PAID:

Project Mercy Africa \$ 4,500 Circle of Success Yakima, WA 98902 1,200 Allied Arts Yakima, WA 98902 3,000 Children Christmas Gift Project Yakima, WA 98902 806 Yakima Arboretum Yakima, WA 98902 277 Naches Valley Athletics Yakima, WA 98902 2,500 Ready by Five Yakima, WA 98902 7,500 KYVE Yakima, WA 98902 7,500 KYVE Yakima, WA 98902 3,000 Mt. Olive Church, Feed the 5,000 Yakima, WA 98902 500 Yakima Student Achievement Yakima, WA 98902 1,400 Stable Time Time Time Time Time Time Time Tim		
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Supplies <u>2,620</u>	Student exchange	
· /	-	
<u>\$17.175</u>	• •	
		<u>\$17.175</u>

DECLARATION RE FILING RETURN(S) LATE

Rick Smith hereby states and declares as follows under the penalties of perjury:

- 1. I am the president of the Yakima Southwest Rotary Club for the 2009-10 Rotary Year (July 1 to June 30).
- 2. About one week ago I learned for the first time that no Form 990 returns may have been filed for our Rotary Club for the 2006-7 and 2007-8 Rotary Years, and further, that no return was filed for the 2008-9 Rotary Year.
- 3. The Club Treasurer and CPA, Julie Smith, during the first two of those Rotary Years and a portion of the third year (she resigned her membership earlier this year) advises us that she prepared and filed returns for the 2006-7 and 2007-8 Rotary Years and has receipts to evidence that she did so, but she has not provided them to me as yet. I understand that the IRS has no record of having received those returns.
- 4. During the above time frame, Ms. Smith left the accounting firm with which she had been associated for several years and became an in-house accountant with a local medical clinic and more recently, I understand, with a local fruit company. It was sometime during these transitions that she should have prepared the return for the 2008-9 Rotary Year and, if necessary, the two previous Rotary Years, but she overlooked doing so, I believe, because of the changes which were occurring in her professional life.
- 5. Until about one week ago, neither I nor anyone else in our Rotary Club, to my knowledge, was aware of Ms Smith's failure to ensure the timely filing of a return for the 2008-9 Rotary Year or, if she failed to do so, for the two previous Rotary Years. Upon learning of this, I acted promptly to have returns prepared for all three years, which are filed herewith.
- 6. Attached to the Form 990 for each year is my letter explaining other circumstances having to do with our Rotary Club and the impact an imposition of late filing penalties will have on our Club's community service activities. By this reference, I am incorporating my letter into this Declaration.
- 7. I respectfully request that the circumstances which I have described in this Declaration and my referenced letter be deemed reasonable cause for the late filing of the return for the 2008-9 Rotary Year and for the two previous Rotary Years should it be determined that no returns were filed for those years as well.

Dated this ____ day of May, 2010 at Yakima, WA.

Rick Smith

President, Yakima Southwest Rotary Club