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Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form**
Return of Organization Exempt From Income TaxUnder 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.
▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150

2008Open to Public
Inspection**A** For the 2008 calendar year, or tax year beginning **JUL 1, 2008** and ending **JUN 30, 2009****B** Check if applicable:
☒ Address change
☐ Name change
☐ Initial return
☐ Termination
☐ Amended return
☐ Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization**ROTARY INTERNATIONAL-BLUE RIDGE MOUNTAINS ROTARY CLUB**

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

PO BOX 1408

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

CHARLOTTESVILLE, VA 22902-1408**D** Employer identification number**52-1315803****E** Telephone number**434-296-2156****F** Group Exemption Number ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

G Accounting method: ☐ Cash ☒ Accrual
Other (specify) ▶**I** Website: ▶ **N/A****J** Organization type (check only one) ☒ 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 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.**L** 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 ▶ \$ **58,013.****Part I** Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	57,865.
	4	Investment income	4	7.
	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) (attach schedule)	5c	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ☐		
	a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
b	Less: direct expenses other than fundraising expenses	6b		
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c		
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 ▶ MISCELLANEOUS INCOME)	8	141.	
9	Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	58,013.	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	26,513.
	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	
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	739.
	16	Other expenses (describe ▶ SEE STATEMENT 1)	16	52,544.
	17	Total expenses Add lines 10 through 16	17	79,796.
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-21,783.
	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	55,880.
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	34,097.

Part II Balance Sheets. If total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	20,696.	31,027.
23 Land and buildings		
24 Other assets (describe ▶ ACCOUNTS RECEIVABLE)	37,900.	3,520.
25 Total assets	58,596.	34,547.
26 Total liabilities (describe ▶ SEE STATEMENT 2)	2,716.	450.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	55,880.	34,097.

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(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

28a	60,581.
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28a	60,581.
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29a	19,214.
-----	---------

30a	
-----	--

31a

32	79,795.
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(e) Expense
account and
other allowances

BOB KAHN, 6025 BUCK RIDGE ROAD , EARLYSVILLE, VA 22936	PRESIDENT 1.00	0.	0.	0.
PAMELA TURNER, 1276 STILL MEADOW AVENUE, CHARLOTTESVILLE, VA 22901	PRESIDENT ELECT 1.00	0.	0.	0.
KAREN ROGERS, 1730 MONET HILL, CHARLOTTESVILLE, VA 22911	VICE PRESIDENT 1.00	0.	0.	0.
ROGER HIGGINS, 2248 MONTALCINO WAY, CHARLOTTESVILLE, VA 22911	SECRETARY 1.00	0.	0.	0.
JOHN GOBBLE, 5032 CLEARFIELDS LANE, CROZET, VA 22932	TREASURER 1.00	0.	0.	0.
PHIL KIESTER, 165 FARMINGTON DRIVE, CHARLOTTESVILLE, VA 22901	CLUB SERVICE 1.00	0.	0.	0.
STEVE SARGEANT, 2175 MEADOWFIELD WAY, CHARLOTTESVILLE, VA 22911	COMMUNITY SERVICE 1.00	0.	0.	0.
HENRY WEINSCHENK, 500 IVY FARM DRIVE, CHARLOTTESVILLE, VA 22901	INTERNATIONAL SERVICE 1.00	0.	0.	0.
RICHARD BOGAN, 3013 COPPER KNOLL ROAD, CHARLOTTESVILLE, VA 22911	VOCATIONAL SERVICE 1.00	0.	0.	0.
LARRY LAMBERT, 144 TUCKAHOE FARM LANE, CHARLOTTESVILLE, VA 22911	SGT AT ARMS 1.00	0.	0.	0.
DONALD BLAKE, 198 POPULAR LAKE ROAD, STANARDSVILLE, VA 22973	SPEAKER PROGRAMS 1.00	0.	0.	0.
DARREL JONES, 510 LEGO DRIVE, CHARLOTTESVILLE, VA 22901	PAST PRESIDENT 1.00	0.	0.	0.

**ROTARY INTERNATIONAL-BLUE RIDGE
MOUNTAINS ROTARY CLUB**

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Part V Other Information (Note the statement requirements in the instructions for Part VI)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
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		X
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.		
35a	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		X
35b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch. N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. 0.		
37b	Did the organization file Form 1120-POL for this year?		X
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 unpaid at the start of the period covered by this return?		X
38b	If "Yes," complete Schedule L, Part II and enter the total amount involved N/A		
39a	Section 501(c)(7) organizations. Enter:		
39b	a Initiation fees and capital contributions included on line 9 N/A b Gross receipts, included on line 9, for public use of club facilities N/A		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 N/A ; section 4912 N/A ; section 4955 N/A		
40b	b 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		X
40c	c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.		
40d	d Enter amount of tax on line 40c reimbursed by the organization 0.		
40e	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		X
41	List the states with which a copy of this return is filed. NONE		
42a	The books are in care of PREPARER Telephone no. 434-296-2156 Located at PO BOX 1408, CHARLOTTESVILLE, VA ZIP + 4 22902-1408		
42b	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)?		X
42c	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.		X
43	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: 		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here N/A and enter the amount of tax-exempt interest received or accrued during the tax year		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
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		X

Form 990-EZ (2008)

**ROTARY INTERNATIONAL-BLUE RIDGE
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Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

- 46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I
- 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48 Is the organization operating 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(s) a section 527 organization?
- 50 Complete this table for the 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."

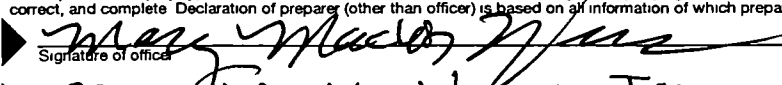
	Yes	No
46		
47		
48		
49a		
49b		

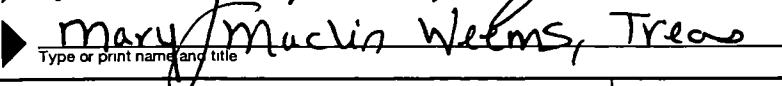
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
N/A				
Total number of other employees paid over \$100,000				

- 51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

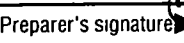
(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
N/A		
Total number of other independent contractors each receiving over \$100,000		

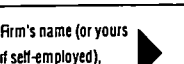
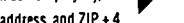
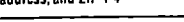
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here  Date 5.10.10

 Type or print name and title

Paid Preparer's Use Only

Preparer's signature  Date _____ Check if self-employed ☐ Preparer's Identifying Number (See instr.) _____

Firm's name (or yours if self-employed), address, and ZIP + 4  EIN  Phone  no. _____

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

Form 990-EZ (2008)

FORM 990-EZ	OTHER EXPENSES	STATEMENT	1
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DESCRIPTION	AMOUNT
MEETING COSTS-MEALS AND FACILITIES	34,974.
SOCIAL EVENTS	13,818.
BANK CHARGES	243.
ADVERTISING	699.
DUES AND SUBSCRIPTIONS	300.
TRAINING	495.
INSURANCE	1,333.
MISCELLANEOUS	682.
TOTAL TO FORM 990-EZ, LINE 16	52,544.

FORM 990-EZ	OTHER LIABILITIES	STATEMENT	2
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
ACCOUNTS PAYABLE AND ACCRUED	2,716.	450.
TOTAL TO FORM 990-EZ, LINE 26	2,716.	450.

FORM 990-EZ	PAYMENTS TO AFFILIATES	STATEMENT	3
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AFFILIATE'S NAME	AFFILIATES ADDRESS
ROTARY INTERNATIONAL	1560 SERMAN AVENUE EVANSTON, IL

PURPOSE OF PAYMENT	AMOUNT
ANNUAL DUES	7,299.

TOTAL INCLUDED ON FORM 990-EZ, LINE 10	7,299.
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FORM 990-EZ	CASH GRANTS AND ALLOCATIONS	STATEMENT	4
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CLASS OF ACTIVITY/DONEE'S NAME AND ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
COMMUNITY GRANTS VARIOUS LOCAL CHARITIES CHARLOTTESVILLE, VA 22901	NONE	19,214.
TOTAL INCLUDED ON FORM 990-EZ, LINE 10		19,214.

FORM 990-EZ	INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS	STATEMENT 5
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A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS,
 DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL
 BENEFIT CONTRACT? [] YES [X] NO

B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS,
 DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . [] YES [X] NO

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STATEMENT 6

CHARITABLE SERVICES - THE CLUB PROVIDED GRANTS TO THE ROTARY FOUNDATION,
SECTION 501(C)(3) ORGANIZATIONS, OTHER LOCAL CHARITIES AND SCHOLARSHIPS TO
STUDENTS, AS WELL AS OTHER RELATED PROGRAMS.

THE ROTARY INTERNATIONAL - BLUE RIDGE MOUNTAINS IS A CIVIC ORGANIZATION OPERATED EXCLUSIVELY FOR THE PROMOTION OF SOCIAL WELFARE. THE MEMBERSHIP ACTIVITIES NOTED IN THIS RETURN, FROM WHICH THE MEMEBERSHIP DUES AND OTHER REVENUES ARE DERIVED, ARE SUBSTANTIALLY RELATED TO THE PURPOSES FOR WHICH THE ORGANIZATION'S EXEMPTION WAS GRANTED. THE ACTIVITIES CONTRIBUTE IMPORTANTLY TO THE ACCOMPLISHMENT OF THE EXEMPT PURPOSE OF THE ORGANIZATION.