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A For the 2009 calendar year, or tax year beginning 07-01-2009, and ending 06-30-2010				
B Check if applicable	Please use IRS label or print or type. See Specific Instructions.	C Name of organization Rotary International - Fargo Rotary		D Employer identification number 45-6013688
Address change		Number and street (or P O box, if mail is not delivered to street address) Room/suite Po Box 1653		E Telephone number (701) 232-6614
Name change				
Initial return		City or town, state or country, and ZIP + 4 Fargo, ND 58107		F Group Exemption Number 0573
Terminated				
Amended return				
Application pending				

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

I Website:  FMROTARYCLUBS.ORG		H Check  ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)
J Tax-Exempt status (check only one)— ☒ 501(c)(4)  (insert no.)  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 Form 990-EZ or Form 990 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 \$500,000 or more, file Form 990 instead of Form 990-EZ	\$	63,539
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Part I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)
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Revenue	1	Contributions, gifts, grants, and similar amounts received				1	
	2	Program service revenue including government fees and contracts				2	818
	3	Membership dues and assessments				3	55,972
	4	Investment income				4	246
	5a	Gross amount from sale of assets other than inventory		5a		5c	
	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)					
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here				6c	3,730
	a	Gross revenue (not including \$ _of contributions reported on line 1)		6a	5,976		
	b	Less direct expenses other than fundraising expenses		6b	2,246		
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)					
	7a	Gross sales of inventory, less returns and allowances		7a		7c	
	b	Less cost of goods sold		7b			
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)						
8	Other revenue (describe)				8	527	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8				9	61,293	
Expenses	10	Grants and similar amounts paid (attach schedule)				10	7,936
	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	5,400
	14	Occupancy, rent, utilities, and maintenance				14	
	15	Printing, publications, postage, and shipping				15	343
	16	Other expenses (describe)				16	54,406
17	Total expenses. Add lines 10 through 16				17	68,085	
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)				18	-6,792
	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	32,618
	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	25,826

Part II Balance Sheets—If Total assets on line 25, column (B) are \$1,250,000 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	33,647	22 24,162
23	Land and buildings		23
24	Other assets (describe )	163	24 2,769
25	Total assets	33,810	25 26,931
26	Total liabilities (describe )	1,192	26 1,105
27	Net assets or fund balances (line 27 of column (B) must agree with line 21) .	32,618	27 25,826

Part III Statement of Program Service Accomplishments (See the instructions for Part III)		Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)	
What is the organization's primary exempt purpose? PROGRAMS AND ACTIVITIES FOSTERING GOOD CITIZENSHIP			
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, and other relevant information for each program title			
28 FINANCIAL SUPPORT TO YOUTH ACTIVITIES AND PROGRAMS DESIGNED TO PROMOTE GOOD CITIZENSHIP IN FARGO (Grants \$ 7,936) If this amount includes foreign grants, check here . . . ☐		28a	7,936
29 THE CLUB SPONSORS AND PROVIDES FOR THE ANNUAL ROTARY TRACK MEET FOR HIGH SCHOOL AGED STUDENTS IN THE FARGO, ND AREA (Grants \$ 0) If this amount includes foreign grants, check here . . . ☐		29a	3,038
30 THE CLUB PARTICIPATES IN A LITERACY PROGRAM BY READING AND HELPING WITH ACTIVITIES AT THE FARGO JUNIOR HIGH SCHOOL DURING THE MONTHS OF OCTOBER THROUGH MAY THE CLUB HOSTS 4 STUDENT GUESTS FROM THE FARGO HIGH SCHOOLS ALLOWING THEM TO SPEAK ON A TOPIC THAT HAS AFFECTED THEIR LIVES THESE STUDENTS ARE ALSO ELIGIBLE TO WRITE AN ESSAY USING THE ROTARY 4-WAY TEST, WITH MONETARY PRIZES HANDED OUT TO A GRAND PRIZE WINNER AND 3 RUNNER UPS THE CLUB ALSO SPONSORS 2 YOUTH AT THE ROTARY SPONSORED YOUTH LEADERSHIP CONFERENCE (Grants \$ 0) If this amount includes foreign grants, check here . . . ☐		30a	1,425
31 Other program services (attach schedule) (Grants \$) If this amount includes foreign grants, check here . . . ☐		31a	
32 Total program service expenses (add lines 28a through 31a)		32	12,399

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for 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

Part V		Other Information (Note the statement requirements in the instructions for Part V.)		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			33	No
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes			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, attach a statement explaining 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 or was it subject to section 6033 (e) notice, reporting, and proxy tax requirements?			35a	No
b	If "Yes," has it filed a tax return on Form 990-T for this year?			35b	
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	0	
b	Did the organization file Form 1120-POL for this year?			37b	
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 period 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 is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's 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 . . . ▶		0		
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ▶		0		
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 ▶ DARRELL UTKE _____ Telephone no ▶ (701) 293-5011 _____ 301 7TH ST S Located at ▶ FARGO, ND _____ ZIP + 4 ▶ 581031820 _____				
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 .			Yes	No
				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	
44	Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of Form 990-EZ.			44	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	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 46-49b 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	Yes	No
47	Did the organization engage in lobbying activities? 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

50(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

51(d) Total number of other independent contractors each receiving over \$100,000

Please Sign Here	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.			
	***** Signature of officer		2010-09-20 Date	
Paid Preparer's Use Only	STAN KAUFMAN, PRESIDENT Type or print name and title			
	Preparer's signature	Bob Dale CPA	Date	Check if self-employed ☐
	Firm's name (or yours if self-employed), address, and ZIP + 4			Preparer's identifying number (See instructions)
	WIDMER ROEL PC 4334 18TH AVE S SUITE 101 FARGO, ND 581037414			EIN Phone no (701) 237-6022
May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No				

Additional Data

Software ID:

Software Version:

EIN: 45-6013688

Name: Rotary International - Fargo Rotary

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
JOEL FREMSTAD PO BOX 1820 FARGO,ND 58107	PAST-PRESIDENT 1 50	0	0	0
JILL GUSTOFSON 311 RUE AVENUE WEST FARGO,ND 58078	SECRETARY/TREASURER 1 50	0	0	0
STAN KAUFMAN 601 CENTER AVENUE MOORHEAD,MN 56560	PRESIDENT 1 50	0	0	0
DEB SOLIAH BOX MC FARGO,ND 58122	VICE PRESIDENT OF FUN 1 50	0	0	0
JOEL DICK 4014 14TH AVENUE NW FARGO,ND 58102	VICE PRESIDENT OF ADMINISTRAT 1 50	0	0	0
LYNN SPERAL 317 8TH STREET NORTH FARGO,ND 58102	DIRECTOR OF COMMUNICATIONS 1 50	0	0	0
HEATHER RANCK 3200 22ND STREET SOUTH 319 FARGO,ND 58104	VICE PRESIDENT OF INTERNATION 1 50	0	0	0
JIM O'DAY PO BOX 2706 FARGO,ND 58108	FOUNDATION DIRECTOR 1 50	0	0	0
RICH SLAGLE 4238 66TH STREET SOUTH FARGO,ND 58104	MEMBERSHIP DIRECTOR 1 50	0	0	0
MATT LANGEMO 1209 9TH ST N FARGO,ND 58102	PRESIDENT ELECT 1 50	0	0	0

TY 2009 Other Assets Schedule

Name: Rotary International - Fargo Rotary

EIN: 45-6013688

Description	Beginning of Year Amount	End of Year Amount
ACCOUNTS RECEIVABLE	163	2,769

TY 2009 Other Expenses Schedule**Name:** Rotary International - Fargo Rotary**EIN:** 45-6013688

Description	Amount
DUES	9,297
MEALS	29,120
MUSIC	1,410
INTERNET AND WEBPAGE DEVELOPMENT	670
INSURANCE	66
BADGES AND ENGRAVING	209
MISCELLANEOUS EXPENSE	2,164
LOCAL TRACK MEET	3,038
4H AWARDS	389
ROTARY YOUTH LEADERSHIP AWARDS	1,425
BAD DEBTS	344
4 CLUB EXPENSE	509
FOUR WAY ESSAY CONTEST	2,000
INTERNATIONAL PROJECTS	3,400
CLUB SUPPLIES	243
FUN RUN EXPENSE	122

TY 2009 Other Liabilities Schedule

Name: Rotary International - Fargo Rotary

EIN: 45-6013688

Description	Beginning of Year Amount	End of Year Amount
ACCOUNTS PAYABLE	1,192	1,105

TY 2009 Other Revenues Schedule

Name: Rotary International - Fargo Rotary

EIN: 45-6013688

Description	Amount
MEALS - DINNER/BANQUETS	260
MISCELLANEOUS INCOME	267

TY 2009 Transfers Personal Benefits Contracts Declaration

Name: Rotary International - Fargo Rotary

EIN: 45-6013688

Declaration: The organization did not, during the year, receive any funds, directly,or indirectly, to pay premiums on a personal benefit contract.The organization, did not, during the year, pay any premiums, directly,or indirectly, on a personal benefit contract.