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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 and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 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

**2009****Open to Public Inspection**Department of the Treasury  
Internal Revenue Service**A** For the 2009 calendar year, or tax year beginning **1 July**, 2009, and ending **30 June**, 20 **10****B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Terminated  
☐ Amended return  
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

**C** Name of organization

Rotary Club of Bailey's Crossroads

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

P. O. Box 1510

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

Falls Church, VA 22041

**D** Employer identification number

54-1184665

**E** Telephone number

703 941-0566

**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: ► [www.bxrrotary.org](http://www.bxrrotary.org)**J** Tax-exempt status (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 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 ► \$ **104,559****Part I** Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	<b>1</b>	Contributions, gifts, grants, and similar amounts received . . . . .	<b>1</b>	754
	<b>2</b>	Program service revenue including government fees and contracts . . . . .	<b>2</b>	1,780
	<b>3</b>	Membership dues and assessments . . . . .	<b>3</b>	22,267
	<b>4</b>	Investment income . . . . .	<b>4</b>	152
	<b>5a</b>	Gross amount from sale of assets other than inventory . . . . .	<b>5a</b>	
	<b>5b</b>	Less: cost or other basis and sales expenses . . . . .	<b>5b</b>	
	<b>5c</b>	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .	<b>5c</b>	
	<b>6</b>	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/> . . . . .		
	<b>6a</b>	Gross revenue (not including \$ _____ of contributions reported on line 1) . . . . .	<b>6a</b>	79,606
	<b>6b</b>	Less: direct expenses other than fundraising expenses . . . . .	<b>6b</b>	44,468
<b>6c</b>	Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . . . .	<b>6c</b>	35,138	
<b>7a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>7a</b>		
<b>7b</b>	Less: cost of goods sold . . . . .	<b>7b</b>		
<b>7c</b>	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	<b>7c</b>		
<b>8</b>	Other revenue (describe ► _____) . . . . .	<b>8</b>		
<b>9</b>	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 . . . . .	<b>9</b>	60,091	
Expenses	<b>10</b>	Grants and similar amounts paid (attach schedule) . . . . .	<b>10</b>	48,645
	<b>11</b>	Benefits paid to or for members . . . . .	<b>11</b>	
	<b>12</b>	Salaries, other compensation, and employee benefits . . . . .	<b>12</b>	
	<b>13</b>	Professional fees and other payments to independent contractors . . . . .	<b>13</b>	
	<b>14</b>	Occupancy, rent, utilities, and maintenance . . . . .	<b>14</b>	
	<b>15</b>	Printing, publications, postage, and shipping . . . . .	<b>15</b>	
	<b>16</b>	Other expenses (describe ► See Attached Schedule) . . . . .	<b>16</b>	6,157
	<b>17</b>	<b>Total expenses.</b> Add lines 10 through 16 . . . . .	<b>17</b>	54,802
Net Assets	<b>18</b>	Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	<b>18</b>	5,289
	<b>19</b>	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) . . . . .	<b>19</b>	49,086
	<b>20</b>	Other changes in net assets or fund balances (attach explanation) . . . . .	<b>20</b>	
	<b>21</b>	Net assets or fund balances at end of year. Combine lines 18 through 20 . . . . .	<b>21</b>	54,375

**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
<b>22</b> Cash, savings, and investments . . . . .	49,086	<b>22</b> 54,375
<b>23</b> Land and buildings . . . . .		<b>23</b>
<b>24</b> Other assets (describe ► _____) . . . . .		<b>24</b>
<b>25</b> <b>Total assets</b> . . . . .		<b>25</b>
<b>26</b> <b>Total liabilities</b> (describe ► _____) . . . . .		<b>26</b>
<b>27</b> <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21) . . . . .	49,086	<b>27</b> 54,375

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2009)

SCANNED SEP 14 2010

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**Part III Statement of Program Service Accomplishments** (See the instructions for Part III.)

## Expenses

**What is the organization's primary exempt purpose?** **Community/International Service**

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.

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

28

**See Attached Schedule**

(Grants \$ ) If this amount includes foreign grants, check here ☐

28a	54,796
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29

(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 (attach schedule)** . . . . .

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(Grants \$ ) If this amount includes foreign grants, check here ☐

31a

<b>32</b>	<b>Total program service expenses</b> (add lines 28a through 31a)	<b>32</b>
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**Part IV** List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV.)

[illegible]

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

	Yes	No
<b>33</b> Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . .	<b>33</b>	✓
<b>34</b> Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes . . . . .	<b>34</b>	✓
<b>35</b> 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.		
<b>a</b> 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? . . . . .	<b>35a</b>	✓
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>35b</b>	
<b>36</b> 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 . . . . .	<b>36</b>	✓
<b>37a</b> Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ <b>37a</b>		
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	<b>37b</b>	✓
<b>38a</b> 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? . . . . .	<b>38a</b>	✓
<b>b</b> If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .	<b>38b</b>	
<b>39</b> Section 501(c)(7) organizations. Enter:		
<b>a</b> Initiation fees and capital contributions included on line 9 . . . . .	<b>39a</b>	
<b>b</b> Gross receipts, included on line 9, for public use of club facilities . . . . .	<b>39b</b>	
<b>40a</b> Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶		
<b>b</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 . . . . .	<b>40b</b>	✓
<b>c</b> 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 . . . . . ▶		
<b>d</b> Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶		
<b>e</b> 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. . . . .	<b>40e</b>	✓
<b>41</b> List the states with which a copy of this return is filed. ▶ <u>Virginia</u>		
<b>42a</b> The organization's books are in care of ▶ <u>Robert Glasser</u> Telephone no ▶ <u>703 914-0566</u> Located at ▶ <u>6605 Bay Tree Lane, Falls Church, VA</u> ZIP + 4 ▶ <u>22041</u>		
<b>b</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)? . . . . .	<b>42b</b>	✓
If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .		
<b>c</b> At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . .	<b>42c</b>	✓
If "Yes," enter the name of the foreign country: ▶ _____		
<b>43</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ use of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>43</b>		
<b>44</b> Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>44</b>	✓
<b>45</b> 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 . . . . .	<b>45</b>	✓

**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.

	Yes	No
<b>46</b> 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 . . . . .	<b>46</b>	<input checked="" type="checkbox"/>
<b>47</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .	<b>47</b>	<input checked="" type="checkbox"/>
<b>48</b> Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<b>48</b>	<input checked="" type="checkbox"/>
<b>49a</b> Did the organization make any transfers to an exempt non-charitable related organization? . . . . .	<b>49a</b>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes," was the related organization a section 527 organization? . . . . .	<b>49b</b>	<input checked="" type="checkbox"/>

**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."

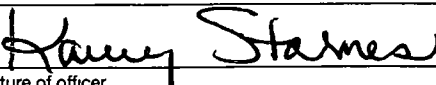
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

**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 . . . . . ▶

<b>Sign Here</b>	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		8/13/10 Date	
<b>Paid Preparer's Use Only</b>	Karey Starnes, President Type or print name and title		Preparer's identifying number (See instructions)	
	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	EIN
	Firm's name (or yours if self-employed), address, and ZIP + 4		Phone no	
May the IRS discuss this return with the preparer shown above? See instructions . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No				

ROTARY CLUB OF BAILEY'S CROSSROADS, 54-1184665  
Attachment to Form 990EZ - FYE 6/30/10

Page 1, Part I, Line 10, Grants and Similar Amounts Paid,  
and Page 2, Part III, Program Services

	<u>Awards &amp; Affiliates Totals</u>	
	<u>Grants</u>	
ROTARY INTERNATIONAL		
Member Dues	\$ 3,745	\$ 3,745
RI Convention	1,000	1,000
Rotary Foundation	5,500	5,500
VOCATIONAL SERVICE		
Chesapeake Conference	900	900
Dictionary Project	591	591
JEB Stuart Booster Club	210	210
JEB Stuart Foundation	6,000	6,000
Music Contest	600	600
Outstanding Teacher Award	750	750
Rotary Youth Leadership Conf.	500	500
Speech Contest	325	325
INTERNATIONAL SERVICE		
Group Study Exchange	524	524
Haiti Clean Water	2,500	2,500
Haiti Stop Hunger Now	200	200
Jamaica Project	600	600
Safe Blood Committee	500	500
Uganda Children	500	500
COMMUNITY SERVICE		
Bailey's Beautification All	500	500
Bailey's Crossroads Shelter	500	500
Bailey's Fire Department	2,000	2,000
Bethany House	500	500
Bike Racks	1,565	1,565
Boxes For Troops	1,240	1,240
Children's Toys	1,165	1,165
Eastern Community	200	200
FFX County Explorer Post	1,000	1,000
FFX Park Authority Found.	3,000	3,000
FFX Partnership For Youth	2,000	2,000
Friends of Clarendon House	500	500
Gifts For Seniors	500	500
HACAN	650	650
Langley Residential Support	350	350

ROTARY CLUB OF BAILEY'S CROSSROADS, 54-1184665  
Attachment to Form 990EZ - FYE 6/30/10

COMMUNITY SERVICE - Cont'd

Project Japabe Goure	85		85
Special Olympics	250		250
Thanksgiving Meals	2,047		2,047
TOTALS	\$ 38,400	\$10,245	\$48,645

ROTARY CLUB OF BAILEY'S CROSSROADS, 54-1184665  
Attachment to Form 990EZ - FYE 6/30/10

Page 1, Part I, Line 16, Other Expenses, and  
Page 2, Part III, Program Services

Other Expenses	\$
Bank Charges	203
Rotary Supplies	1,294
Directory	250
Post Office Box	132
Insurance	294
Web Site support	600
Warbler	312
Presidents Gifts	459
Photography	18
Guest Meals	1,234
Miscellaneous Expense	<u>1,361</u>
Total Other Expenses	\$6,157
Program Services Expenses	\$
Installation and Anniversary Dinners	3,476
PETS	630
District Foundation Seminar	190
District Dues	<u>1,855</u>
Total Program Services Expenses	\$6,151
Totals	\$14,114

Page 1, Part I, Line 6, Special Events & Activities

	<u>Gross</u> <u>Revenue</u>	<u>Direct</u> <u>Expense</u>	<u>Net</u> <u>Income</u>
Auto Raffle	\$ 79,081	43,564	35,517
Other Events/Sales	<u>525</u>	<u>904</u>	<u>-379</u>
Totals	\$ 79,606	44,468	\$35,138



ROTARY CLUB OF BAILEY'S CROSSROADS, 54-1184665  
Attachment to Form 990EZ - FYE 6/30/10

Page 2, Part IV, List of Officers and Directors.

<u>Officers</u>	<u>Title</u>
Karey Jean Starnes 3430 Glen Carlyn Road Falls Church, VA 22041	President
Max L. Gross 3320 Holloman Road Falls Church, VA 22042	President Elect
Robert K. Holland 3439 Upside Court Falls Church, VA 22042	Vice President
Robert Glasser 6605 Bay Tree Lane Falls Church, VA 22041	Treasurer
David Borowski 6824 Pacific Lane Annandale, VA 22003	Secretary
<u>Directors</u>	
William J. Strickland 6800 Sprucedale Court Annandale, VA 22003	Community Service
Susan Lydick 5222 Pomeroy Drive Fairfax, VA 22032	Vocational Service
Mary Carol Kulick 2620 Foundry Way #201 Alexandria, VA 22314	Club Service
Roland B. Gomez 3705 S.George Mason Dr. Falls Church VA 22041	International Service