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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

2009

Department of the Treasury Internal Revertue Service

may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

OMB No 1545 1150

A _	For the 2009 calendar year, or tax year beginning 7/01 , 2009, and ending 6/30	, 2010
B_	The state of the s	ployer identification number
	Address change   Please   Rotary Club of Springdale   71	1-6057314
	lu i lighelor bo b cocc	ephone number
	Instal coturn	•
	Termination See Specific 4 /	79-530-8060
	Amended return   Instruc-	oup Exemption
		mber -
	• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts  G Accounting method	d X Cash Accrual
	<ul> <li>Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts         must attach a completed Schedule A (Form 990 or 990-EZ).</li> <li>G Accounting method Other (specify) ►</li> </ul>	Accidal
		he organization is <b>not</b>
		Schedule B (Form 990,
	Tax-exempt status (clieck only one) — [22] Sor(c) ( 42 ) = (misert no.) [4347(a)(1) or [527]	<u> </u>
K	Check ► if the organization is not a section 509(a)(3) supporting organization <b>and</b> its gross receipts are norm	nally <b>not</b> 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	►\$ 188,489.
Pa	art I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instru	ictions for Part I.)
	1 Contributions, gifts, grants, and similar amounts received	1
	2 Program service revenue including government fees and contracts	2
	· · · · · · · · · · · · · · · · · ·	
	3 Membership dues and assessments	
	4 Investment income	4
	5a Gross amount from sale of assets other than inventory.  5a	ì
R	c Gain or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a)	5c
Ž	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here	<b>8</b> 8.;
アニションし	a Gross revenue (not including \$ of contributions	
Ü	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	*
9	b Less cost of goods sold 7b	
È	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c
4	8 Other revenue (describe - See Statement 1 RECEIVED )	8 11,885.
ŕ	b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a).  8 Other revenue (describe See Statement 1 RECEIVED 9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9 188,489.
t		
_		10 21,460.
Ē	11 Benefits paid to or for members  12 Salaries, other compensation, and employee benefits	11
ķ	12 Salaries, other compensation, and employee benefits	<b>12</b> 25, 920.
Œ	13 Professional fees and other payments to independent contractors  OGDEN, UT	1,350.
บ <sub>เรา</sub> หลุดรฐกษัก	14 Occupancy, rent, utilities, and maintenance	14
E	15 Printing, publications, postage, and shipping	15 1,282.
		16 112,121.
8		17 162,133.
		<u>18</u> <u>26,356.</u>
N S E T	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year	
ËŞ	figure reported on prior year's return)	<b>19</b> 25, 922.
' 1	20 Other changes in net assets or fund balances (attach explanation).	20
S	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21 52,278.
P	art II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead	
و ب		
-	(See the instructions for Part II.)  (A) Beginning of year 21 (40)	
22	==,	
23	3 Land and buildings	23
24	4 Other assets (describe ► See Statement 4 ) 4,814.	5,138.
25	5 Total assets 26, 463.	25 60,887.
26		
	7 Net assets or fund balances (line 27 of column (B) must agree with line 21) 25, 922.	27 52,278.
	20/384	1



Form	1990-EZ(2009) Rotary Club of	Springdale		71	<u>-60</u> !	57314 Page <b>2</b>
	t III Statement of Program Se			ons.)		Expenses
Desc	is the organization's primary exempt purpose? Pr cribe what was achieved in carrying out the ribe the services provided, the number of ram title	comotion of Goodwil ne organization's exempt purp f persons benefited, or other	1 poses. In a clear and co relevant information for	ncise manner, each	501 ( orga 4947	uired for section c)(3) and (4) nizations and section (a)(1) trusts, optional thers)
	Meals-Encouragement of go	odwill among the C	Club's members.		10. 0	
		nis amount includes foreign gi	rants, check here.	▶ 🗍	28 a	96,649.
29	<u>Dues</u>		<del>-</del>			
	77.774		 			
30	(Grants \$ ) If the Donations and Scholarship	iis amount includes foreign gi		- to	29 a	3,686.
50	worthy students and to su					
	(Grants \$ ) If th	is amount includes foreign gi	rants, check here	<b></b>	30 a	1,951.
		iis amount includes foreign gi	rants, check here	▶ □	31 a	555.
	Total program service expenses (add II		mlawasa I I I		32	102,841.
Par	(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0)	(d) Contributions employee benefit plar deferred compensa	to is and	(e) Expense account
 See	Statement 7		0.		0.	0.
				<u> </u>	_	
			<del></del>			

Га	Other information (Note the statement requirements in the histis for Fait V.)		r		
			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		X	
34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes	34		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 why the organization did not report the income on Form 990-T.	ŀ	_	<u> </u>	
	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?	35 a		X	
	b If 'Yes,' has it filed a tax return on Form 990-T for this year?	35 b			
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_		_ x	
37	a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0.	<u> </u>	,480 		
	<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year?	37 b		Х	
38	a 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?	38 a	Mara	X	
b If 'Yes,' complete Schedule L, Part II and enter the total					
20	amount involved 38b N/A		*		
	Section 501(c)(7) organizations Enter				
	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		,		
40	a 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		<del></del>		
	<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 L	40 b		х	
	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   ▶ 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	40 e		X	
41	List the states with which a copy of this return is filed None	•			
42	a The organization's				
	books are in care of ► Courtney Palfreeman Telephone no. ► 479-5	30-8	060		
	Located at > 4900 Hawthorn Way, Springdale, AR ZIP + 4 > 72762				
	h At any time during the calendar year, did the expansion have an interest in an a secretive and the effect of	ſ	Yes	No	
	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		X	
	If 'Yes,' enter the name of the foreign country:			]	
				1	
				ļ	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.	l		1	
	c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	-	X	
	If 'Yes,' enter the name of the foreign country:			<del></del> -	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here.	I	<b>-</b> □	N/A	
	and enter the amount of tax-exempt interest received or accrued during the tax year			N/A	
			Yes	No	
44					
	of Form 990-EZ	44		_X_	
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,'			17	
BA	Form 990 must be completed instead of Form 990-EZ  TEEA0812L 01/30/10  For	<b>45</b> m <b>990</b>	.EZ (	X 2009)	
-			(	/	

Form 990-EZ (2	2009)	Rotary	Club	of	Spring	idale	

71-6057314

⊃age **4** 

Part VI	Section 501(c)(3) organization 501(c)(3) organizations and se 46-49b and complete the table:	s and section 4947	(a)(1) nonexemp nexempt charitat i1.	ot charitable trusts only ole trusts must answer	. All sect questions	ion
46 Did	the organization engage in direct or indire	ct political campaign ac C, Part I	ctivities on behalf of o	or in opposition to candidate	s 46	'es No
<b>47</b> Did	the organization engage in lobbying activi	ties? If 'Yes,' complete	Schedule C, Part II		47	
<b>48</b> Is th	ne organization a school as described in se	ection 170(b)(1)(A)(ii)?	If 'Yes,' complete Sc	hedule E.	48	
<b>49 a</b> Did	the organization make any transfers to an	exempt non-charitable	related organization	?	49 a	
<b>b</b> If 'Y	es,' was the related organization a section	n 527 organization?			49 b	
50 Con	nplete this table for the organization's five bloyees) who each received more than \$10	highest compensated of 00,000 of compensation	employees (other that from the organization	n officers, directors, trustees n If there is none, enter 'No	and key ne.'	
	(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 and deferred compensation	(e) Exper account a other allow	and
						~
f Tota	al number of other employees paid over \$	100.000		<del></del>		
51 Con	nplete this table for the organization's five npensation from the organization of there in (a) Name and address of each independent continuous	s none, enter 'None '		(b) Type of service	(c) Compen	· · · · · · · · · · · · · · · · · · ·
					<u> </u>	
<b>d</b> Tota	al number of other independent contractor	s each receiving over \$	100,000	<b>-</b>		
	Under penalties of perjury, I declare that I have exam true, correct, and complete Declaration of preparer (	nined this return, including according than officer) is based on	mpanying schedules and sta all information of which prep	atements, and to the best of my knowledge	edge and belief	, it is
Sign Here	Courty Paper Date 11109 120 K					
TICIC	Type or print name and title	rector, Car	they taik	eemon		
Paid Pre-	Preparer's signature Daniel R. N	kami	Date 11/09/1		arer's Identifyin instructions) }	g Number
parer's		mick, C.P.A., I	P.A.			
Use	yours if self- employed). > 220 South Schoo	l Ave.		EIN N	/A	
Only	address, and Fayetteville, A	R 72701		Phone no ► (479)	444-82	200
	RS discuss this return with the preparer sl	nown above? See instru	ictions.	•	X Yes	No
RAA					Form <b>990-E</b>	:7 (200a)

2009	Federal Statements		Page 1
	Rotary Club of Springdale		71-6057314
Statement 1 Form 990-EZ, Part I, Line 8 Other Revenue  Visitor Meals Miscellaneous Fines Rotary Event		\$ Total <u>\$</u>	5,358. 2,575. 1,537. 1,215. 10,685.
Statement 2 Form 990-EZ, Part I, Line 10 Grants and Similar Amounts Paid			
Payments to Affiliates Name: Address: Purpose of payment: Amount:	Rotary District 6110 115 S. 18th Street Parsons, KS 67357 Rotary District Dues	\$	9,040.
Name: Address: Purpose of payment: Amount:	Rotary International 1560 Sherman Center Evanston, IL 60201 Rotary International Dues	\$	11,520.
Name: Address: Purpose of payment: Amount:	Springdale Rotary Ch FDN Trust PO Box 6006 Springdale, AR 72766 Donation	\$	900.
Payments to Affiliates		\$	21,460.
Statement 3 Form 990-EZ, Part I, Line 16 Other Expenses  Advertising and Promotion Bad debts Badges and member items Conferences, Conventions, and Council on Legislation District conference expense Door Prizes Raffle Dues Flowers and gifts GSE Team Program Insurance Meals Miscellaneous Office Expenses Past President Dinner	Meetings	\$	300. 1,067. 1,782. 1,100. 231. 555. -375. 3,686. 178. 135. 917. 96,649. 250. 1,036. 209.

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	Rotary Club of Springdale	71-6057314
Statement 3 (continued) Form 990-EZ, Part I, Line 16 Other Expenses		
Special events & fundraising Travel		\$ 3,901. 500. Total \$ 112,121.
Statement 4 Form 990-EZ, Part II, Line 24 Other Assets		
Accounts Receivable District Raffle Tickets	Total	Beginning       Ending         \$ 4,814.       \$ 5,188.         0.       -50.         \$ 4,814.       \$ 5,138.
Statement 5 Form 990-EZ, Part II, Line 26 Total Liabilities	<u>-</u>	
Accounts Payable and Accrued	Expenses Total	Beginning         Ending           \$ 541.         \$ 8,609.           \$ 541.         \$ 8,609.
Statement 6 Form 990-EZ, Part III, Line 31 Statement of Program Service Acco	mplishments	
Dogg	cintian	Program Service
District conference expense to the District conference.	ription to send the Club President Includes Foreign Grants: No	<u>Grants</u> <u>Expenses</u> 555.
	Total	<u>\$ 0.</u> <u>\$ 555.</u>

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## **Federal Statements**

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**Rotary Club of Springdale** 

71-6057314

Statement 7
Form 990-EZ, Part IV
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title Average Der Week D	Hours	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
Robyn Breshears 205 Angela St. Springdale, AR 72762	Pr	esident \$ 2.00	0.	\$ 0.	\$ 0.
Lynn Carver 401 Lake Road Springdale, AR 72764	Board	Member 2.00	0.	0.	0.
Eugene C. Anderson 117 Woodcliff Dr. Springdale, AR 72764	Board	Member 2.00	0.	0.	0.
Lance Eads 5943 Doris Hunt Ct. Springdale, AR 72762	Board	Member 2.00	0.	0.	0.
Sam Hollis 2002 S. 48th St. Springdale, AR 72764	Board	Member 2.00	0.	0.	0.
Courtney Palfreeman P.O. Box 6006 Springdale, AR 72764	Board	Member 40.00	0.	0.	0.
Fadil Bayyari 2880 Carley Rd. Springdale, AR 72765	Board	Member 2.00	0.	0.	0.
Jon Palfreeman 5130 Dover Springdale, AR 72764	Board	Member 2.00	0.	0.	0.
Jerry Sanders 12020 Churchill Downs Drive Springdale, AR 72762-4231	Board	Member 2.00	0.	0.	0.
Judy Van Hoose 497 Bordeaux Ave. Springdale, AR 72764	Board	Member 2.00	0.	0.	0.
Eric Lesh P.O. Box 5000 Springdale, AR 72762	Board	Member 2.00	0.	0.	0.
Brian Moore 4408 Spyglass Dr. Springdale, AR 72764	Board	Member 2.00	0.	0.	0.

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### **Federal Statements**

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**Rotary Club of Springdale** 

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Statement 7 (continued)
Form 990-EZ, Part IV
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
Lance P. Taylor 18658 Strawberry Plant Rd. Fayetteville, AR 72704-8586	Board Member 2.00	\$ 0.	\$ 0.	\$ 0.
Rolf B. Wilkin 318 W. Ila Street Fayetteville, AR 72701	Board Member 2.00	0.	0.	0.
	Total	\$ 0.	\$ 0.	\$ 0.