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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

OMB No 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Under Section 301(c), 327, or 4947(a)(1) or internal neverties code (except black long benefit trust or private foundation)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than \$200,000 and total assets less than \$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

JUL 1, 2010 and ending JUN 30, 2011 For the 2010 calendar year, or tax year beginning Check if D Employer identification number C Name of organization Address change 41-1750809 WESTMORELAND ROTARY #25 FOUNDATION X Name change Number and street (or P O box, if mail is not delivered to street address) Room/suite E Telephone number Initial return 209 218-722-0451 505 WEST SUPERIOR STREET Terminated City or town, state or country, and ZIP + 4 F Group Exemption Amended return DULUTH, MN 55802 Number > Application pending H Check | X if the organization is not Accounting Method X Cash Accrual Other (specify) Website. ► N/A required to attach Schedule B Tax-exempt status (check only one) - X 501(c)(3) ] 501(c) ( ) **◄**(insert no ) 4947(a)(1) or 527 (Form 990, 990-EZ, or 990-PF) K Check In the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, 60,004. line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ Part | Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I ) Check if the organization used Schedule O to respond to any question in this Part I 7,780 1 1 Contributions, gifts, grants, and similar amounts received 2 2 Program service revenue including government fees and contracts 3 3 Membership dues and assessments 6,082. SEE SCHEDULE O 4 Investment income 46,142 5a Gross amount from sale of assets other than inventory 42,413. 5b Less cost or other basis and sales expenses 3,729. Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than 83-1 Revenue 6a \$15,000) of contributions b Gross income from fundraising events (not including \$ from fundraising events reported on line 1) (attach Schedule G if the sum of such: €6b gross income and contributions exceeds \$15,000) Ø 60 c Less direct expenses from gaming and fundraising events d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtracijin இடு)? 6d 7a Gross sales of inventory, less returns and allowances 7h b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c 8 Other revenue (describe in Schedule O) 17,591. 9 Total revenue Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 4,500. 10 Grants and similar amounts paid (list in Schedule O) 10 11 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 12 Expenses 550. 13 Professional fees and other payments to independent contractors 13 14 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 15 952. SEE SCHEDULE O 16 16 Other expenses (describe in Schedule O) 6,002. 17 Total expenses. Add lines 10 through 16 17 11,589. 18 18 Excess or (deficit) for the year (Subtract line 17 from line 9) Net Assets Net assets or fund balances at beginning of year (from line 27, column (A)) 19 134,740. (must agree with end-of-year figure reported on prior year's return) 19 10,525. SEE SCHEDULE O 20 20 Other changes in net assets or fund balances (explain in Schedule O) 156,854. Net assets or fund balances at end of year Combine lines 18 through 20 21 Form **990-EZ** (2010)

LHA For Paperwork Reduction Act Notice, see the separate instructions.

|  | ESTMORELAND ROTARY #25 F   | OUNDATION   | 4   | 1-17!  | 5080  | 09 Page  |
|--|--|---|---|--|---|--|
|  | heets. (see the instructions for Part II )   |   |   |  |   |  |
| Check if the org   | anization used Schedule O to respond to any question i   | n this Part II  |   | 1  | : -   |  |
|  |  | <u> </u>  | (A) Beginning of year                                       | <del>                                     </del>   |   | nd of year   |
| 22 Cash, savings, and inv  | estments   | <u> -</u> -   | 134,740.  | <del>                                     </del>   |   | 156,854  |
| 23 Land and buildings  |  | ļ   |   | 23   |   |  |
| 24 Other assets (describe  | ın Schedule O)   | <u> </u>  | 124 740   | 24   |   | 156 054  |
| 25 Total assets  |  | <u> -</u>   | 134,740.  | 1  |   | 156,854  |
| 26 Total liabilities (descr  | •  | <u> </u>  | 0.  | 1-4  |   | 156 054  |
|  | ances (line 27 of column (B) must agree with line 21)  | <b>A</b>  | 134,740.  | 27   |   | 156,854  |
| <del></del>  | t of Program Service Accomplishmen   |   | i for Part III )  | , p. ,   |   | penses<br>for section                              |
|  | ganization used Schedule O to respond to any question  |   | r conviced  |  |   | and 501(c)(4)                                      |
|  | mary exempt purpose? CHARITABLE AND  |   |   | 1 40 4   |   | ns and section                                     |
|  | red in carrying out the organization's exempt purp   |   |   |  | others  | trusts, optional<br>)                              |
|  | number of persons benefited, and other relevan   | t information for each  | program title.  | <del></del>  |   | , <u> </u>   |
| 28 EVALUATING  | PROJECTS TO FUND   |   |   |  |   |  |
|  |  |   |   |  |   |  |
|  |  |   |   |  |   | 4 500  |
| (Grants \$   | ) If this amount includes foreign g  | rants, check here   | <b>&gt;</b>   | 28a  |   | 4,500  |
| 29   |  |   |   | -  |   |  |
|  |  |   |   |  |   |  |
|  |  |   |   | <u> </u>   |   |  |
| (Grants \$   | ) If this amount includes foreign o  | rants, check here   | <u> </u>  | 29a  |   |  |
| 30   |  |   |   | -  |   |  |
|  |  |   | - · · · · · · · · · · · · · · · · · · ·                     | — I I  |   |  |
|  |  |   |   |  |   |  |
| (Grants \$   | ) If this amount includes foreign o  | rants, check here   |   | 30a  |   |  |
|  | es (describe in Schedule O)  |   | <b>.</b> i  |  |   |  |
| (Grants \$   | ) If this amount includes foreign of   | rants, check here   |   | 31a  |   | 4,500  |
| 32 Total program service   | ce expenses (add lines 28a through 31a)  |   |   | ▶ 32   | <u> </u>                                      | 4,500  |
| W  | Di Turreta a a   |   |   |  |   |  |
| Part IV List of Off  | icers, Directors, Trustees, and Key E  |   | one even if not compensated (s                              | ee the instru                                      | ictions fo                                    | or Part IV)  |
| Part IV List of Off  | icers, Directors, Trustees, and Key E<br>ganization used Schedule 0 to respond to any question   | in this Part IV   |   |  | ·   |  |
| Part IV List of Off  | icers, Directors, Trustees, and Key E<br>ganization used Schedule O to respond to any question   | in this Part IV (b) Title and average ho  | ours (c) Compensation                                       | (d) Contrib<br>to emplo                            | utions  | (e) Expense  |
| Part IV List of Off  | icers, Directors, Trustees, and Key E  | (b) Title and average ho<br>per week devoted to   | ours (c) Compensation                                       | (d) Contrib  | outions<br>lyee<br>ans &                      |  |
| Part IV List of Off<br>Check if the or   | icers, Directors, Trustees, and Key E<br>ganization used Schedule 0 to respond to any question<br>(a) Name and address   | in this Part IV  (b) Title and average ho per week devoted to position  | ours (c) Compensation (If not paid, enter                   | (d) Contrib<br>to emplo<br>benefit pla             | outions<br>lyee<br>ans &                      | (e) Expense account and                            |
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| STEVE MANGAN, STREET #209, TOM MCCABE, 5 #209, DULUTH, GREG HANSEN, STREET #209, SKEETER MOORE STREET #209, TOM WHEELER, STREET #209, CATHERINE CAR SUPERIOR STRE DIANNE HOLLIE  | icers, Directors, Trustees, and Key Eganization used Schedule O to respond to any question  (a) Name and address  505 WEST SUPERIOR  DULUTH, MN 55802  505 WEST SUPERIOR  DULUTH, MN 55802  5, 505 WEST SUPERIOR  DULUTH, MN 55802  5, 505 WEST SUPERIOR  DULUTH, MN 55802  ET #209, DULUTH, MN  DAY-WELSCH, 505 WEST | In this Part IV  (b) Title and average hore per week devoted to position  PRESIDENT  0.50  VICE PRESID  0.50  TREASURER  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR | Ours (c) Compensation (If not paid, enter -0)  OENT  O.  O. | (d) Contrib<br>to emplo-<br>benefit pla<br>deferre | outions bysee ans & kd ation O . O . O . O .  | (e) Expense account and other allowance  0 0 0 0 0 |
| STEVE MANGAN, STREET #209, TOM MCCABE, 5 #209, DULUTH, GREG HANSEN, STREET #209, SKEETER MOORE STREET #209, TOM WHEELER, STREET #209, CATHERINE CAR SUPERIOR STRE DIANNE HOLLIE  | icers, Directors, Trustees, and Key Eganization used Schedule O to respond to any question  (a) Name and address  505 WEST SUPERIOR  DULUTH, MN 55802  505 WEST SUPERIOR  DULUTH, MN 55802  5, 505 WEST SUPERIOR  DULUTH, MN 55802  5, 505 WEST SUPERIOR  DULUTH, MN 55802  ET #209, DULUTH, MN  DAY-WELSCH, 505 WEST | In this Part IV  (b) Title and average hore per week devoted to position  PRESIDENT  0.50  VICE PRESID  0.50  TREASURER  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR | Ours (c) Compensation (If not paid, enter -0)  OENT  O.  O. | (d) Contrib<br>to emplo-<br>benefit pla<br>deferre | outions bysee ans & kd ation O . O . O . O .  | (e) Expense account and other allowance  0 0 0 0 0 |
| STEVE MANGAN, STREET #209, TOM MCCABE, 5 #209, DULUTH, GREG HANSEN, STREET #209, SKEETER MOORE STREET #209, TOM WHEELER, STREET #209, CATHERINE CAR SUPERIOR STRE DIANNE HOLLIE  | icers, Directors, Trustees, and Key Eganization used Schedule O to respond to any question  (a) Name and address  505 WEST SUPERIOR  DULUTH, MN 55802  505 WEST SUPERIOR  DULUTH, MN 55802  5, 505 WEST SUPERIOR  DULUTH, MN 55802  5, 505 WEST SUPERIOR  DULUTH, MN 55802  ET #209, DULUTH, MN  DAY-WELSCH, 505 WEST | In this Part IV  (b) Title and average hore per week devoted to position  PRESIDENT  0.50  VICE PRESID  0.50  TREASURER  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR | Ours (c) Compensation (If not paid, enter -0)  OENT  O.  O. | (d) Contrib<br>to emplo-<br>benefit pla<br>deferre | outions bysee ans & kd ation O . O . O . O .  | (e) Expense account and other allowance  0 0 0 0 0 |
| STEVE MANGAN, STREET #209, TOM MCCABE, 5 #209, DULUTH, GREG HANSEN, STREET #209, SKEETER MOORE STREET #209, TOM WHEELER, STREET #209, CATHERINE CAR SUPERIOR STRE DIANNE HOLLIE  | icers, Directors, Trustees, and Key Eganization used Schedule O to respond to any question  (a) Name and address  505 WEST SUPERIOR  DULUTH, MN 55802  505 WEST SUPERIOR  DULUTH, MN 55802  5, 505 WEST SUPERIOR  DULUTH, MN 55802  5, 505 WEST SUPERIOR  DULUTH, MN 55802  ET #209, DULUTH, MN  DAY-WELSCH, 505 WEST | In this Part IV  (b) Title and average hore per week devoted to position  PRESIDENT  0.50  VICE PRESID  0.50  TREASURER  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR | Ours (c) Compensation (If not paid, enter -0)  OENT  O.  O. | (d) Contrib<br>to emplo-<br>benefit pla<br>deferre | outions bysee ans & kd ation O . O . O . O .  | (e) Expense account and other allowance  0 0 0 0 0 |
| STEVE MANGAN, STREET #209, TOM MCCABE, 5 #209, DULUTH, GREG HANSEN, STREET #209, SKEETER MOORE STREET #209, TOM WHEELER, STREET #209, CATHERINE CAR SUPERIOR STRE DIANNE HOLLIE  | icers, Directors, Trustees, and Key Eganization used Schedule O to respond to any question  (a) Name and address  505 WEST SUPERIOR  DULUTH, MN 55802  505 WEST SUPERIOR  DULUTH, MN 55802  5, 505 WEST SUPERIOR  DULUTH, MN 55802  5, 505 WEST SUPERIOR  DULUTH, MN 55802  ET #209, DULUTH, MN  DAY-WELSCH, 505 WEST | In this Part IV  (b) Title and average hore per week devoted to position  PRESIDENT  0.50  VICE PRESID  0.50  TREASURER  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR | Ours (c) Compensation (If not paid, enter -0)  OENT  O.  O. | (d) Contrib<br>to emplo-<br>benefit pla<br>deferre | outions bysee ans & kd ation O . O . O . O .  | (e) Expense account and other allowance  0 0 0 0 0 |
| STEVE MANGAN, STREET #209, TOM MCCABE, 5 #209, DULUTH, GREG HANSEN, STREET #209, SKEETER MOORE STREET #209, TOM WHEELER, STREET #209, CATHERINE CAR SUPERIOR STRE DIANNE HOLLIE  | icers, Directors, Trustees, and Key Eganization used Schedule O to respond to any question  (a) Name and address  505 WEST SUPERIOR  DULUTH, MN 55802  505 WEST SUPERIOR  DULUTH, MN 55802  5, 505 WEST SUPERIOR  DULUTH, MN 55802  5, 505 WEST SUPERIOR  DULUTH, MN 55802  ET #209, DULUTH, MN  DAY-WELSCH, 505 WEST | In this Part IV  (b) Title and average hore per week devoted to position  PRESIDENT  0.50  VICE PRESID  0.50  TREASURER  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR | Ours (c) Compensation (If not paid, enter -0)  OENT  O.  O. | (d) Contrib<br>to emplo-<br>benefit pla<br>deferre | outions bysee ans & kd ation O . O . O . O .  | (e) Expense account and other allowance  0 0 0 0 0 |
| STEVE MANGAN, STREET #209, TOM MCCABE, 5 #209, DULUTH, GREG HANSEN, STREET #209, SKEETER MOORE STREET #209, TOM WHEELER, STREET #209, CATHERINE CAR SUPERIOR STRE DIANNE HOLLIE  | icers, Directors, Trustees, and Key Eganization used Schedule O to respond to any question  (a) Name and address  505 WEST SUPERIOR  DULUTH, MN 55802  505 WEST SUPERIOR  DULUTH, MN 55802  5, 505 WEST SUPERIOR  DULUTH, MN 55802  5, 505 WEST SUPERIOR  DULUTH, MN 55802  ET #209, DULUTH, MN  DAY-WELSCH, 505 WEST | In this Part IV  (b) Title and average hore per week devoted to position  PRESIDENT  0.50  VICE PRESID  0.50  TREASURER  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR  0.50  DIRECTOR | Ours (c) Compensation (If not paid, enter -0)  OENT  O.  O. | (d) Contrib<br>to emplo-<br>benefit pla<br>deferre | outions lyee ans & side attorn O.  O.  O.  O. | (e) Expense account and other allowance  0 0 0 0 0 |

|     | Check if the organization used Schedule O to respond to any question in this Part V  |      | Yes         | No         |
|-----|--|------|-------------|------------|
| 33  | Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in   | [    |             |            |
|     | Schedule O   | 33   |             | Х          |
| 34  | Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended   |      |             |            |
| •   | documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)  | 34   |             | Х          |
| 5   | If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b>  |      |             |            |
| -   | reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T   |      |             |            |
| а   | Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or  |      |             |            |
| _   | 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?   | 35a  |             | X          |
| b   | If "Yes," has it filed a tax return on Form 990-T for this year?   | 35b  | N/          | A          |
| 6   | 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          |
| 7 a | Enter amount of political expenditures, direct or indirect, as described in the instructions   |      |             |            |
|     | Did the organization file Form 1120-POL for this year?   | 37b  | Ì '         | Х          |
|     | 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 tax year covered by this return?   | 38a  |             | Х          |
| h   | If "Yes," complete Schedule L, Part II and enter the total amount involved  38b N/A  |      |             | ********   |
| 9   | Section 501(c)(7) organizations Enter  | 1    |             |            |
|     | Initiation fees and capital contributions included on line 9  N/A  |      |             |            |
|     | Gross receipts, included on line 9, for public use of club facilities  39b N/A   | 1    |             |            |
|     | Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under   | 1    |             |            |
| va  | section 4911 ► 0 • , section 4912 ► 0 • , section 4955 ► 0 •   |      | [           |            |
| h   | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the   |      |             |            |
| u   | year, or did it engage in an excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-EZ?   |      | Ì           | İ          |
|     | If "Yes," complete Schedule L, Part I  | 40b  |             | X          |
| _   | Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers.   | 1.00 |             |            |
| ٠   | or disqualified persons during the year under sections 4912, 4955, and 4958  |      |             |            |
|     | Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the   |      |             |            |
| u   | organization   |      |             |            |
|     | 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  | ĺ           | X          |
| 11  | List the states with which a copy of this return is filed MN   | 100  | L           |            |
|     | The organization's books are in care of ▶ PATTY SHOGREN  Telephone no ▶ 218-73   | 22-0 | 451         |            |
| )   |  | 5580 |             |            |
| h   | 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  |      | Yes         | N          |
|     | account)?  | 42b  | 1           | X          |
|     | 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.  |      |             |            |
|     | At any time during the calendar year, did the organization maintain an office outside of the U.S.?   | 42c  | Ì           | X          |
| •   | If "Yes," enter the name of the foreign country  |      | 1           |            |
| 13  | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here  |      | <b>&gt;</b> |            |
| IJ  | and enter the amount of tax-exempt interest received or accrued during the tax year  | N/A  |             |            |
|     | and enter the amount of tax-exempt interest received of accross during the tax your  |      |             |            |
|     |  |      | Yes         | N          |
|     | Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of   |      | 1.00        | 1          |
| 146 |  | 44a  |             | ĺχ         |
|     | Form 990-EZ  Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead  | 774  | <b>†</b>    | † <u> </u> |
| נ   |  | 44b  | Ì           | X          |
| _   | of Form 990-EZ   | 44c  |             | X          |
|     | Did the organization receive any payments for indoor tanning services during the year?  If "Yea" to line 446, has the organization find a Form 720 to report these payments? If "No." provide an explanation | 7446 | <u> </u>    | 1          |
|     | If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation  | 1    | 1           | 1          |
|     | ın Schedule O  | 440  |             |            |

## **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

Inspection

Name of the organization

**Employer identification number** 

|             |                                       | WESTMOR                | ELAND ROTARY  | #25  | FOUND.            | ATION  |  |                    | 41   | -1750        | 809     |              |
|-------------|---------------------------------------|------------------------|---|--|-------------------|--|--|--------------------|--|--------------|---------|--------------|
| Part I      | Reason                                | for Public Char        | ity Status (All organiz                             | ations mu  | st complet        | e this part                                      | :.) See inst                                     | ructions.          |  |              |         |              |
| The organ   | ization is not a                      | private foundation     | because it is: (For lines 1                         | through 1  | 1, check o        | only one b                                       | ox.)   |                    |  |              |         |              |
| 1 🔲         | A church, cor                         | nvention of churches   | s, or association of churc                          | ches desci                                       | nbed in <b>se</b> | ction 170  | (b)(1)(A)(i)                                     |                    |  |              |         |              |
| 2 🗀         | A school des                          | cribed in section 17   | <b>0(b)(1)(A)(ii).</b> (Attach Sc                   | hedule E.)                                       |                   |  |  |                    |  |              |         |              |
| з 🗀         |                                       |                        | al service organization of                          |  | n section         | 170(b)(1)(                                       | (A)(iii).  |                    |  |              |         |              |
| 4           | •                                     | •                      | operated in conjunction                             |  |                   |  |  | (b)(1)(A)(ii       | ii). Enter th                                    | e hospital   | 's nam  | ne,          |
| -           | city, and stat                        |                        |   |  | •                 |  |  |                    | ·  | •            |         |              |
| 5           | •                                     |                        | benefit of a college or ur                          | niversity ov                                     | vned or op        | erated by  | a governi  | mental uni         | t described                                      | d ın         |         |              |
|             | _                                     | (b)(1)(A)(iv). (Comple | _   |  | •                 | •  | Ū  |                    |  |              |         |              |
| 6           |                                       |                        | ent or governmental unit                            | t described                                      | d in section      | n 170(b)(1                                       | )(A)(v).   |                    |  |              |         |              |
| 7 X         |                                       | - · · ·                | eives a substantial part                            |  |                   |  |  | r from the         | general p  | ublic desci  | ribed i | n            |
| ,           | -                                     | b)(1)(A)(vi). (Comple  |   | <del>.</del>                                     |                   | <b>3</b> 0.0                                     |  |                    | <b>3</b>   |              |         |              |
| 8 🗆         | -                                     |                        | ection 170(b)(1)(A)(vi).                            | (Complete  | Part II.)         |  |  |                    |  |              |         |              |
| 9 🗔         | •                                     |                        | eives: (1) more than 33 1                           |  |                   | rom contri                                       | butions, m                                       | nembershi          | n fees, and                                      | d aross rea  | ceints  | from         |
| •           | -                                     | •                      | nctions - subject to certa                          |  |                   |  |  |                    | •  | _            | •       |              |
|             |                                       | •                      | axable income (less sect                            | •  | •                 | •  |  |                    |  | _            |         |              |
|             |                                       | 509(a)(2). (Complete   | •   |  | A) 110111 Du      | 511105505  | 20401100 0                                       | y tho orga         | inization a                                      | itoi vailo o | o, 101  | •            |
| 10 🔲        |                                       |                        | perated exclusively to te                           | st for nubli                                     | c safety S        | See sectio                                       | n 509(a)(4                                       | 1)                 |  |              |         |              |
| 11 🗔        | •                                     | •                      | perated exclusively for the                         |  | -                 |  |  | •                  | v out the n                                      | nurnoses o   | f one   | or           |
| ••••••      | •                                     | •                      | itions described in secti                           |  | •                 |  |  |                    | •  |              |         | 0.           |
|             | •                                     | • • •                  | organization and comple                             |  | •                 |  | -,. 000 <b>00</b> 1                              |                    | <b>-</b> /( <b>-</b> /                           | JA 1110 00A  |         |              |
|             | a Type I                              |                        | <del>-</del> -                                      | Type   |                   |  | enrated  |                    | d $\Box$   | Type III - C | Other   |              |
| е 🗀         | • •                                   |                        | t the organization is not                           | • • •  |                   | •  | •  | r more dis         |  |              |         | ın           |
| <b>6</b> [] |                                       | •                      | han one or more publicly                            |  | •                 | -  | -  |                    |  |              |         | 41 1         |
| f           |                                       |                        | ten determination from t                            |  |                   |  |  |                    | 3(a)(1) Of 3                                     | 00000        | (u)(E)  |              |
| •           |                                       |                        |   |  | it it is a ry     | pe i, Type                                       | n, or Type                                       | <b>5</b> III       |  |              |         |              |
| _           |                                       | rganization, check th  | rganization accepted ar                             | w off or o                                       | antribution       | from any   | of the follo                                     | owing per          | eone?  |              |         |              |
| 9           | •                                     |                        | rectly controls, either al                          |  |                   | •  |  |                    |  |              | Yes     | No           |
|             | *                                     |                        |   | one or tog                                       | ether with        | persons c  | iescribed i                                      | iii (ii) ailo (    | iii) DeiOw,                                      | 11g(i)       | 163     | 110          |
|             | -                                     | • •                    | upported organization?<br>n described in (i) above? |  |                   |  |  |                    |  | 11g(ii)      |         | <del> </del> |
|             |                                       | •                      | • •   |  | 2                 |  |  |                    |  |              |         |              |
| _           | • •                                   | •                      | person described in (i) of                          |  |                   |  |  |                    |  | 11g(iii)     | l       |              |
| h           | Provide the i                         | ollowing information   | about the supported or                              | gamzanom   | (8).              |  |  |                    |  |              |         |              |
|             | · · · · · · · · · · · · · · · · · · · |                        | (iii) Type of                                       | tink to the e                                    | rganization       | (w) Did was                                      | . natification                                   | (vi) Is            | the  |              |         |              |
|             | of supported                          | (ii) EIN               | organization  |  | sted in your      |  |  | organizati         | on in col 📗                                      | (vii) Am     |         | )T           |
| org         | anization                             |                        | (described on lines 1-9                             | governing  |                   |  | r support?                                       | (I) organiz<br>U S | ed in the  | Sup          | port    |              |
|             |                                       |                        | above or IRC section (see instructions))            | Yes  | No                | Yes  | No   | Yes                | No   |              |         |              |
|             | · · · · · · · · · · · · · · · · · · · |                        | (000  | 100  |                   |  |  | 1.00               |  |              |         | -            |
|             |                                       |                        |   |  |                   |  | 1  |                    |  |              |         |              |
|             |                                       |                        |   | <del>                                     </del> | <b>——</b>         |  | <del> </del>                                     |                    | <del>                                     </del> |              |         |              |
|             |                                       |                        |   |  |                   |  |  |                    |  |              |         |              |
| · · · · · · |                                       |                        | <del> </del>  | <del> </del>                                     | <del> </del>      | <del>                                     </del> | -  |                    | <del>  -</del>                                   |              |         |              |
|             |                                       |                        |   |  |                   |  |  |                    |  |              |         |              |
|             |                                       |                        |   |  |                   |  | <del> </del>                                     |                    |  |              |         |              |
|             |                                       |                        |   |  |                   |  |  |                    |  |              |         |              |
|             |                                       |                        |   | <del> </del>                                     | <del> </del>      | <b> </b>   |  | -                  | <del>                                     </del> |              |         |              |
|             |                                       |                        |   |  |                   |  |  |                    | ]  |              |         |              |
|             |                                       |                        |   | <del> </del>                                     |                   |  | <del>                                     </del> | <del> </del>       | <del>  -</del>                                   |              |         |              |
|             |                                       | 1                      | 1   | 1  | ł i               | 1  | <b>\$</b>  | 1                  | 1  |              |         |              |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

# Schedule A (Form 990 or 990-EZ) 2010 WESTMORELAND ROTARY #25 FOUNDATION 41-1750809 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| Se        | ction A. Public Support   |                    |  |                        |                     |                                       |                        |
|-----------|---|--------------------|--|------------------------|---------------------|---------------------------------------|------------------------|
| Cale      | ndar year (or fiscal year beginning in)                               | (a) 2006           | <b>(b)</b> 2007                        | (c) 2008               | (d) 2009            | (e) 2010                              | (f) Total              |
| 1         | Gifts, grants, contributions, and                                     |                    |  |                        |                     |                                       |                        |
|           | membership fees received. (Do not                                     |                    |  |                        |                     |                                       |                        |
|           | include any "unusual grants.")  | 10,928.            | 10,598.                                | 5,052.                 | 10,170.             | 7,780.                                | 44,528.                |
| 2         | Tax revenues levied for the organ-                                    |                    |  |                        |                     |                                       |                        |
|           | ization's benefit and either paid to                                  |                    |  |                        |                     | ļ                                     |                        |
|           | or expended on its behalf   |                    |  |                        |                     |                                       |                        |
| 3         | The value of services or facilities                                   |                    |  |                        |                     |                                       |                        |
|           | furnished by a governmental unit to                                   |                    |  |                        |                     |                                       |                        |
|           | the organization without charge                                       |                    |  |                        |                     |                                       |                        |
| 4         | Total. Add lines 1 through 3  | 10,928.            | 10,598.                                | 5,052.                 | 10,170.             | 7,780.                                | 44,528.                |
| 5         | The portion of total contributions                                    | ·                  |  |                        | •                   |                                       |                        |
| •         | by each person (other than a  |                    | ŀ                                      |                        |                     |                                       |                        |
|           | governmental unit or publicly   |                    |  |                        |                     |                                       |                        |
|           | supported organization) included                                      |                    |  |                        |                     |                                       |                        |
|           | on line 1 that exceeds 2% of the                                      |                    |  |                        |                     |                                       |                        |
|           | amount shown on line 11,  |                    | l                                      | 1                      |                     |                                       |                        |
|           | column (f)  |                    | }                                      |                        |                     |                                       |                        |
| B         | Public support. Subtract line 5 from line 4                           | <del></del>        | ······································ |                        | 1                   | ·                                     | 44,528.                |
|           | ction B. Total Support  | <u> </u>           |  |                        |                     | · · · · · · · · · · · · · · · · · · · | 11/0201                |
| -         | ndar year (or fiscal year beginning in)                               | (a) 2006           | <b>(b)</b> 2007                        | (c) 2008               | (d) 2009            | (e) 2010                              | (f) Total              |
|           | Amounts from line 4   | 10,928.            | 10,598.                                | 5,052.                 | 10,170.             | 7,780.                                | 44,528.                |
|           |   | 10,3200            | 10/3301                                | 3,032.                 | 10/1/00             | ,,,,,,,,                              | 11/3201                |
| 8         | Gross income from interest,   |                    |  | :                      |                     | ļ                                     |                        |
|           | dividends, payments received on                                       |                    |  |                        |                     |                                       |                        |
|           | securities loans, rents, royalties                                    | 7,037.             | 14,474.                                | 3,040.                 | 4,955.              | 6,082.                                | 35,588.                |
| _         | and income from similar sources                                       | 7,037.             | 17,7/7.                                | 3,040.                 | 4,000.              | 0,002.                                | 337300.                |
| 9         | Net income from unrelated business                                    |                    |  |                        |                     |                                       |                        |
|           | activities, whether or not the  |                    |  |                        |                     |                                       |                        |
| 4.0       | business is regularly carried on                                      |                    |  |                        |                     |                                       | <del></del>            |
| 10        | Other income Do not include gain                                      | İ                  | -                                      | İ                      |                     |                                       |                        |
|           | or loss from the sale of capital                                      |                    | İ                                      |                        |                     |                                       |                        |
|           | assets (Explain in Part IV.)  |                    |  |                        |                     |                                       | 80,116.                |
| 11        | •                               | L                  | <u>.</u>                               | 1                      |                     | 40                                    | 00,110.                |
| 12        |   |                    |  |                        |                     | 12                                    |                        |
| 13        | First five years. If the Form 990 is for                              | _                  | s tirst, second, third                 | i, tourtn, or tiπtn ta | x year as a section | n 501(c)(3)                           | ▶□                     |
| <u>Sa</u> | organization, check this box and stor<br>ction C. Computation of Publ |                    | rcentage                               |                        |                     |                                       | ▶∟                     |
|           |   |                    |  | -lu (f)                |                     | 14                                    | 55.58 %                |
|           | Public support percentage for 2010 (                                  |                    | •                                      | olumn (I))             |                     | 15                                    | 55.58 <u>%</u> 57.30 % |
| 15        | ,, ,  |                    |  | h 40 h 4               | 4 00 4/00/          | <del></del>                           |                        |
| 108       | 33 1/3% support test - 2010. If the o                                 | •                  |  | line 13, and line 14   | 4 IS 33 1/3% OF ITI | ore, check this box                   | <b>►</b> X             |
|           | stop here. The organization qualifies                                 |                    | •                                      | - 10 16                | ino 15 io 22 1/20/  | ar mara shook thu                     |                        |
|           | 33 1/3% support test - 2009. If the o                                 |                    |  | -                      | ine 15 is 33 1/3%   | or more, check this                   | <b>▶</b> □             |
| 4-        | and stop here. The organization qual                                  |                    | • • •                                  |                        | 10 10 10-           |                                       |                        |
| 178       | 10% -facts-and-circumstances tes                                      | •                  |  |                        |                     |                                       |                        |
|           | and if the organization meets the "fac                                |                    |  | •                      | •                   | τ iv now the organi                   | zation                 |
|           | meets the "facts-and-circumstances"                                   | •                  |  |                        | -                   | 7                                     | ₽∟                     |
| t         | 10% -facts-and-circumstances tes                                      | •                  |  |                        |                     |                                       | u% or                  |
|           | more, and if the organization meets to                                |                    |  |                        |                     |                                       | <b>~</b>               |
|           | organization meets the "facts-and-cire                                |                    |  |                        |                     |                                       |                        |
| <u>18</u> | Private foundation. If the organization                               | on did not check a | box on line 13, 16a                    | i, 16b, 17a, or 17b    | , check this box a  | ind see instructions                  |                        |

## Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

| Sec  | tion A. Public Support   |                      |                       |                        |                    |                      |                                       |
|------|--|----------------------|-----------------------|------------------------|--------------------|----------------------|---------------------------------------|
| Cale | ndar year (or fiscal year beginning in) 🕨  | (a) 2006             | <b>(b)</b> 2007       | (c) 2008               | (d) 2009           | (e) 2010             | (f) Total                             |
| 1    | Gifts, grants, contributions, and  |                      |                       |                        |                    |                      |                                       |
|      | membership fees received. (Do not  |                      |                       | 1                      |                    |                      |                                       |
|      | include any "unusual grants")  |                      |                       |                        |                    |                      |                                       |
| 2    | Gross receipts from admissions,<br>merchandise sold or services per-<br>formed, or facilities furnished in   |                      |                       |                        |                    |                      |                                       |
|      | any activity that is related to the organization's tax-exempt purpose  |                      |                       |                        |                    |                      |                                       |
| 3    | Gross receipts from activities that  |                      | ļ                     |                        |                    |                      |                                       |
|      | are not an unrelated trade or bus-<br>iness under section 513  |                      |                       |                        |                    |                      |                                       |
| 4    | Tax revenues levied for the organ-   |                      |                       |                        |                    |                      |                                       |
|      | ization's benefit and either paid to   |                      |                       |                        |                    |                      |                                       |
|      | or expended on its behalf  |                      |                       |                        |                    |                      |                                       |
| 5    | The value of services or facilities  |                      |                       |                        |                    |                      |                                       |
|      | furnished by a governmental unit to  |                      |                       |                        |                    |                      |                                       |
|      | the organization without charge  |                      |                       |                        |                    |                      |                                       |
| 6    | Total. Add lines 1 through 5   |                      |                       |                        |                    |                      |                                       |
| 7 a  | Amounts included on lines 1, 2, and  |                      |                       |                        |                    |                      |                                       |
|      | 3 received from disqualified persons   |                      |                       |                        |                    |                      | 7                                     |
| t    | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | l                    |                       |                        |                    |                      |                                       |
|      | Add lines 7a and 7b  | -                    |                       |                        |                    |                      |                                       |
| 8    | Public support (Subtract line 7c from line 6)  |                      |                       |                        |                    |                      |                                       |
|      | ction B. Total Support   |                      |                       |                        |                    |                      |                                       |
| Cale | ndar year (or fiscal year beginning in)  | (a) 2006             | <b>(b)</b> 2007       | (c) 2008               | (d) 2009           | (e) 2010             | (f) Total                             |
|      | Amounts from line 6  |                      |                       |                        |                    |                      |                                       |
| 10   | Gross income from interest,<br>dividends, payments received on<br>securities loans, rents, royalties<br>and income from similar sources                        |                      |                       |                        |                    |                      |                                       |
| t    | Unrelated business taxable income  |                      |                       |                        |                    |                      |                                       |
|      | (less section 511 taxes) from businesses   |                      |                       |                        |                    |                      |                                       |
|      | acquired after June 30, 1975   |                      |                       |                        |                    | <u> </u>             |                                       |
|      | Add lines 10a and 10b  |                      |                       |                        |                    |                      |                                       |
| 11   | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on                                    |                      |                       |                        |                    |                      |                                       |
| 12   | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)   |                      |                       |                        |                    |                      |                                       |
| 13   | Total support (Add lines 9, 10c, 11, and 12)   |                      | <u> </u>              | <u></u>                |                    |                      |                                       |
| 14   | First five years. If the Form 990 is for   | the organization     | 's first, second, thi | rd, fourth, or fifth t | tax year as a sect | on 501(c)(3) organiz | zation,                               |
|      | check this box and stop here   | <del></del>          |                       |                        |                    |                      | <u> </u>                              |
| Se   | ction C. Computation of Publ   | ic Support Pe        | ercentage             |                        |                    | <del></del>          |                                       |
| 15   | Public support percentage for 2010 (   | line 8, column (f) o | divided by line 13,   | column (f))            |                    | 15                   |                                       |
| 16   | Public support percentage from 2009  | Schedule A, Par      | t III, line 15        |                        |                    | 16                   |                                       |
| Se   | ction D. Computation of Inves  | stment Incom         | ne Percentage         | <u> </u>               |                    | <del></del>          |                                       |
|      | Investment income percentage for 20  |                      |                       |                        |                    | 17                   |                                       |
| 18   | Investment income percentage from  |                      |                       |                        |                    | 18                   | · · · · · · · · · · · · · · · · · · · |
|      | a 33 1/3% support tests - 2010. If the   |                      |                       | on line 14, and lin    | ne 15 is more than | 33 1/3%, and line    | 17 is not                             |
|      | more than 33 1/3%, check this box a  |                      |                       |                        |                    |                      | ▶□                                    |
|      | b 33 1/3% support tests - 2009. If the   |                      |                       |                        |                    |                      | and                                   |
|      | line 18 is not more than 33 1/3%, che  |                      |                       |                        |                    |                      |                                       |
| 20   | Private foundation. If the organization  |                      |                       |                        |                    |                      | ▶□                                    |

#### SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Department of the Treasury Internal Revenue Service

**Employer identification number** Name of the organization WESTMORELAND ROTARY #25 FOUNDATION 41-1750809 FORM 990-EZ, PART I, LINE 4, OTHER INVESTMENT INCOME: DESCRIPTION OF PROPERTY: AMOUNT: INTEREST AND DIVIDENDS 6,082. FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES: DESCRIPTION OF OTHER EXPENSES: AMOUNT: 813. INVESTMENT ADVISORY FEES 139. **MISCELLANEOUS** 952. TOTAL TO FORM 990-EZ, LINE 16 FORM 990-EZ, PART I, LINE 20, CHANGES IN NET ASSETS: AMOUNT: CHANGES IN NET ASSETS OR FUND BALANCES: 10,525. UNREALIZED INVESTMENT INCOME (LOSS) FORM 990-EZ, PART V, INFORMATION REGARDING PERSONAL BENEFIT CONTRACTS: 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. FORM 990-EZ, PAGE 1, LINE B: THE ORGANIZATION CHANGED IT'S NAME IN 1998 FROM ROTARY CLUB OF DULUTH NO 25 FOUNDATION TO WESTMORELAND ROTARY 25 FOUNDATION. ATTACHED ARE THE AMENDED AND RESTATED ARTICLES OF INCORPORATION AND THE CURRENT MINNESOTA SECRETARY OF STATE FILING.

DULUTH ROTARY #25 ORMAIL & NORD LAW

P4GE 84

16-674

0511

#### AMENDED AND RESTATED

## ARTICLES OF INCORPORATION

OF

## ROTARY CLUB OF DULUTH NO. 25 FOUNDATION

The undersigned, for the purpose of forming a corporation pursuant to the provisions of the Minnesota Nonprofit Corporation Act, Minnesota Statutes, Chapter 317A, and all future laws amendatory thereof and supplementary thereto, adopt the following Articles of Incorporation:

## ARTICLE I

**~**/

The name of this corporation shall be Westmoreland Rotary 25 Foundation.

#### ARTICLE II

This corporation is organized and shall be operated exclusively for the benefit of and carrying out the humanitarian, charitable and educational purposes of the Rotary Club of Duluth, Duluth, Minnesota, a non-profit corporation, all as contemplated and permitted by Sections 170(c) (2) and 501(c) (3) of the Internal Revenue Code of 1954.

Within the framework and limitations of the foregoing, this corporation is organized and shall be operated exclusively to engage in, advance, support, and promote, carrying out activities, causes, and projects of Westmoreland Rotary 25 Foundation of every kind and nature whatsoever in its own behalf or as the agent, trustee, or representative of others and, but only if and to the extent consistent with the foregoing purposes, to aid, assist, and contribute to the support of corporations, associations, trusts, foundations, and institutions that are affiliated with, supported by, and closely related in purpose and function to Rotary Club of Duluth and (1) that are organized and operated exclusively for one or more purposes described in Sections 170(c) (2) and 501(c) (3) of the Internal Revenue Code of 1954, (2) that are described in Section 501(c) (3) of the Internal Revenue Code of 1954, and (3) that are exempt from federal income taxes under Section 501(a) of the Internal Revenue Code of 1954.

For such purposes, and not otherwise, this corporation shall have and exercise only such powers as are required by and are consistent with the foregoing purposes, including the power to acquire and receive funds and property of every kind and nature whatsoever, whether by purchase, conveyance, lease, gift, grant, bequest, legacy, devise, or otherwise and whether in trust or otherwise, and to own, hold, expend, make gifts, grants, and contributions of, and to convey, transfer, and dispose of any funds and property and the income therefrom in furtherance of the purposes of this corporation herein above set forth, or any of them, and to lease, mortgage, encumber, and use the same, and such other powers that are consistent with the foregoing purposes and that are afforded to this corporation by the Minnesota Nonprofit Corporation Act and by any future laws amendatory thereof and supplementary thereto. Provided, however, that all such powers of this corporation shall

be exercised only so that the activities of this corporation shall be exclusively within the contemplation of Sections 170(c) (2) and 501(c) (3) of the Internal Revenue Code of 1954, and of Section 290.05, Subdivision 1(i), of the Minnesota Statutes; provided further, however, that the reference herein to Section 290.05, Subdivision 1(i), of the Minnesota Statutes shall not permit, and shall not be taken as permitting, this corporation to have or exercise any power which is not within the contemplation of Sections 170(c) (2) and 501(c) (3) of the Internal Revenue Code of 1954: and provided finally however, that this corporation shall not carry on any activity not permitted to be carried on by a corporation that is exempt from federal income taxes under Section 501(a) of the Internal Revenue Code of 1954 as an organization described in Section 501(c) (3) of the Internal Revenue Code of 1954 or by a corporation that is described in, and contributions to which are deductible for federal income tax purposes under, Section 170(c) (2) of the Internal Revenue Code of 1954.

All references in these Articles of Incorporation to a particular section of the Internal Revenue Code of 1954 shall mean and include as now enacted or as hereafter amended, such section and any provision of federal law as is or may hereafter be applicable, cognate to such section; and the references in this Article II to Section 290.05, Subdivision 1(i), of the Minnesota Statutes shall mean and include, as now enacted or as hereafter amended, such provision and any provision of Minnesota law as is or may hereafter be applicable, cognate to such provision.

#### ARTICLE III

This corporation shall not, incidentally or otherwise, afford or pay any pecuniary gain, dividends, or other pecuniary remuneration to its members as such, and no part of the net income or net earnings of this corporation shall, directly or indirectly, be distributable to or otherwise inure to the benefit of any member or individual. No part of the activities of this corporation shall be the carrying on of propaganda, or otherwise attempting, to influence legislation, and this corporation shall not participate in, or intervene in (including the publishing or distributing of statements), any political campaign on behalf of, or in opposition to, any candidate for public office. This corporation shall not lend any of its assets to any officer, director, or member of this corporation or guarantee to any person the payment of a loan by any officer, director, or member of this corporation.

#### ARTICLE IV

The period of duration of corporate existence of this corporation shall be perpetual.

## ARTICLE V

The registered office of this corporation shall be located at Radisson Hotel Duluth, 5th Avenue West and Superior Street, Duluth, Minnesota 55802.



## ARTICLE VI

The name and address of the incorporator, who is a natural person of full age, is:

Name

Address

Leo M. McDonnell

8629 Beverly Street Duluth, MN 55808

## ARTICLE VII

The management and direction of the business and affairs of this corporation shall be vested in a Board of Directors. The number, qualifications, term of office, method of election, powers, authority, and duties of the directors of this corporation, the time and place of their meetings, and such other provisions with respect to them as are not inconsistent with the express provisions of these Articles of Incorporation shall be as specified in the Bylaws of this corporation.

The names and addresses of the members of the first Board of Directors of this corporation are:

| Name                | <u>Address</u>  |
|---------------------|---|
| Thomas G. Bell, III | 601 N. 56th Avenue W.<br>P. 0. Box 7138<br>Duluth, MN 55807         |
| Daniel P. Bergeland | 600 Ordean Building<br>424 W. Superior Street<br>Duluth, MN 55802   |
| Michael E. Orman    | 1301 Miller Trunk Highway, Suite 400<br>Duluth, MN 55811            |
| John F. Schilling   | 310 Sellwood Building<br>200 W. Superior street<br>Duluth, MN 55802 |
| Dr. Joseph H. Leek  | The Duluth Clinic<br>400 E. Third Street<br>Duluth, MN 55805        |

Dr. Vernon L. Amundson

Plaza Medical Center 1021 E. First Street

Duluth, MN 55805

Jon A. Helstrom

900 Torrey Building

314 W. Superior Street Duluth, MN 55802

Donald D. Melander

30 W. First Street

Duluth, MN 55802

Gordon H. Butler

6000 N. Pike Lake

Duluth, MN 55811

Richard C. Olson

Stewart Taylor Co.

326 W. Michigan Duluth, MN 55802

The term of office of each such member of the first Board of Directors shall continue until such director's successor shall have been elected or otherwise shall qualify. All directors shall be members of the corporation.

#### ARTICLE VIII

The Board of Directors of Rotary Club of Duluth No. 25 will appoint seven (7) members from its general membership to be the succeeding members of the Westmoreland Rotary 25 Foundation. The members shall also serve as Directors and their term as members shall be concurrent with their term as Directors. The Board will consist of seven (7) directors succeeding the original Board of Directors as set forth in these articles. Initially, two (2) of the Foundation directors will be appointed to serve one year, two (2) will be appointed to serve two years; and three (3) will be appointed to serve three years. Notwithstanding the initial staggered appointments of term, the initial Directors as well as the succeeding Directors shall have the opportunity to serve two consecutive full three-year terms.

A full term of office for a Foundation Director will be three years. When the full term of each Director expires, the term of the Director's reappointment or the term of the Director's successor will be three years. No Director will be eligible to serve more than two consecutive full three-year terms. A Director who has served two consecutive three-year terms will be eligible for reappointment after an absence of one year from the Board of Directors. All appointments to Westmoreland Rotary 25 Foundation Board of Directors will occur when the Board of Directors of Rotary Club of Duluth (No. 25) convene in July of each year. In the event of a vacancy, the Rotary Club of Duluth (No. 25) Board of Directors is authorized to fill said vacancy for the unexpired term of the departed Director who has resigned, died, or been removed. Filling the vacancy of an unexpired term shall take place

within one month of the Rotary Club of Duluth (No. 25)'s knowledge of said vacancy.

The officers of the Westmoreland Rotary 25 Foundation will be elected by the Foundation members within its membership. The members shall, in August of each year, elect a Chair, Vice Chair and Secretary Treasurer.

The Rotary Club of Duluth (No. 25) Board of Directors will appoint the President elect of the club to serve as an exofficial liaison to the Westmoreland Rotary 25 Foundation Board of Directors.

#### ARTICLE IX

The officers, directors, and members of this corporation shall not be personally liable to any extent whatsoever for any debts or obligations of this corporation.

#### **ARTICLE X**

This corporation shall have no capital stock, either authorized or issued.

#### ARTICLE XI

The corporation shall have no corporate seal.

#### ARTICLE XII

This corporation may be dissolved in accordance with the laws of the State of Minnesota. Upon dissolution of this corporation, and after the payment of all liabilities and obligations of this corporation and all costs and expenses incurred by this corporation in connection with such dissolution, and subject always to the further provisions of this Article, any remaining assets shall be distributed to the successor of this corporation, if there be one, or if not, to and among such one or more corporations, associations, trusts, foundations, and institutions that are then in existence, all of which are organized and operated exclusively for one or more purposes described in Sections 170(c) (2) and 501(c) (3) of the Internal Revenue Code of 1954, that are described in Section 501(c) (3) and in Section 509(a) (1), (2), or (3) of the Internal Revenue Code of 1954, and that are exempt from federal income taxes under Section 501(a) of the Internal Revenue Code of 1954, all in such proportions as shall be determined (1) by the Board of Directors of this corporation if the dissolution of this corporation is not required by the laws of the State of Minnesota then in existence to be conducted under court supervision, or (2) by a court of competent jurisdiction if the dissolution of this corporation is required by the laws of the State of Minnesota then in existence to be conducted under court supervision. Notwithstanding anything apparently or expressly to the contrary herein above contained in this Article, if any assets are then held by this corporation in trust or upon condition or subject to any executory or special limitation and if the condition or limitation occurs by reason of the dissolution of this corporation, such assets shall revert or be returned, transferred,

or conveyed in accordance with the terms and provisions of such trust, condition, or limitation.

IN WITNESS WHEREOF, I have hereunto set my hand to these Amended and Restated Articles of Incorporation this 17 day of 1998

Janet B. Davis

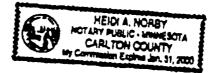
STATE OF MINNESOTA

)55

COUNTY OF ST LOUIS

On this 17th day of sept. 1998, personally appeared before me Ninet B. Dulis to me known to be the person described as the President of Rotary Club of Duluth #25, and who executed, the foregoing Articles of Incorporation, and she acknowledged that she executed the same for the uses and purposes therein expressed.

Notary Public



STATE OF MINNESOTA DEPARTMENT OF STATE FILED

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Filings (/Business/Filings)

Search » Business Filings

## **Business Record Details »**

« Back to Search Results

Minnesota Business Name

**Westmoreland Rotary 25 Foundation** 

**Business Type** 

**Nonprofit Corporation (Domestic)** 

File Number

1G-674

Filing Date

10/7/1991

Renewal Due Date

12/31/2012

Status Active / In Good Standing

Home Jurisdiction

MN Statute

Minnesota

317A

Registered Office Address

5th Ave W & Superior Str Radisson Hotel

Duluth MN 55802

**USA** 

Registered Agent(s)

(Optional) None provided

President

Steve Mangan

5th Ave W & Superior Str Radisson Hotel

Duluth MN 55802

USA

| Filing History | Renewal History                                    |
|----------------|--|
| Filing History |  |
| 10/7/1991      | Original Filing - Nonprofit Corporation (Domestic) |
| 10/7/1991      | Nonprofit Corporation (Domestic) Business Name     |
| 9/30/1998      | Nonprofit Corporation (Domestic) Business Name     |
|                | Nonprofit Corporation (Domestic) Restated Articles |

File Amendment or Renewal (/Business/Amendments/1G-674?status=Active&itemType=Nonprofit% 20Corporation%20(Domestic))

# Form **8868**

(Rev. January 2011)

Department of the Treasury Internal Revenue Service

## Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return

OMB No. 1545-1709

**▶** [X] If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. **Employer identification number** Name of exempt organization Type or print 41-1750809 WESTMORELAND ROTARY #25 FOUNDATION File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date fo filing your 505 WEST SUPERIOR STREET, NO. 209 City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions 55802 DULUTH, MN 0 3 Enter the Return code for the return that this application is for (file a separate application for each return) Return **Application** Return **Application** Code Code Is For Is For 07 01 Form 990-T (corporation) Form 990 80 02 Form 1041-A Form 990-BL 09 03 Form 4720 Form 990-EZ 10 Form 990-PF 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 8870 12 Form 990-T (trust other than above) PATTY SHOGREN The books are in the care of ▶ 505 WEST SUPERIOR STREET - DULUTH, MN 55802 Telephone No ► 218-722-0451 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box > . If it is for part of the group, check this box > . and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2012 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year or ► X tax year beginning JUL 1, 2010 , and ending JUN 30, 2011 Initial return If the tax year entered in line 1 is for less than 12 months, check reason: \_\_\_ Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 0. nonrefundable credits. See instructions За If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and þ estimated tax payments made Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions. For Paperwork Reduction Act Notice, see Instructions. Form 8868 (Rev. 1-2011)

LHA