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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

► Do not enter Social Security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public

Inspection For the 2013 calendar year, or tax year beginning 2013, and ending 6/30 2014 D Employer Identification Number Check if applicable Rotary Club of Davenport 42-0499088 Address change P.O. Box 2483 E Telephone number Name change Davenport, IA 52809 563-322-3567 Initial return Terminated G Gross receipts \$ 221,644. Amended return H(a) Is this a group return for subordinates? F Name and address of principal officer X No H(b) Are all subordinates included?
If 'No,' attach a list (see instructions) Same As C Above No Tax-exempt status 4947(a)(1) or 527 501(c)(3) X 501(c) (4 (insert no) Website: ► H(c) Group exemption number Trust M State of legal domicile X Corporation Other > L Year of formation Form of organization Association Part I Briefly describe the organization's mission or most significant activities The Rotary Club of Davenport meets weekly and provides various speakers and events to help educate and develop its Governance membership. The Organization provides assistance to local, national and international charities through monetary donations and manpower when needed. Check this box Fig. 1 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 13 Number of independent voting members of the governing body (Part VI, line 1b) 4 0 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7 a 0._ b Net unrelated business taxable income from Form 990-T, line 34 7 b 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 99,200. 8 Program service revenue (Part VIII, line 2g) 9 81,381 122,405. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 39. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 75,119 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 156,500 221,644. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 62,006 161,691. Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a 11d, LIT, 24e) 79,560 82,590. Total expenses Add lines 13-17 (must equal Part IX column A), line 25, 141,566 244,281. Revenue less expenses Subtract line 18 from 1/12/12 ഗ് 14,934 -22,637. O S End of Year Beginning of Current Year 108,293 Total assets (Part X, line 16) 79,765. 21 Total liabilities (Part X, line 26) 10,056 4,165. Net assets or fund balances Subtract line 21 from line 20 22 98.237 75,600. Signature Block Rinder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is deseroing a subject on all information of which preparer has any knowledge. Sign 'ere 10-31ード ature of office Secretary Here Type or print name and Print/Type preparer's name reparer's signature Paid William A. Doll, CPA P01082973 self-employed Preparer Reiser, Jennings & Co. Use Only 1706 BRADY ST STE 306 Firm's EIN ► 42-0955680 DAVENPORT, IA 52803-4708 (563)322-6271 Phone no

May the IRS discuss this return with the preparer shown above? (see instructions)

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

Yes

No

Form	990 (2013) Rotary Club of Davenport	420499088	Page 2
Par	Statement of Program Service Accomplishments		
•	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission.		
	See Schedule O		
2	Did the organization undertake any significant program services during the year which were not listed	on the prior	
	Form 990 or 990-EZ?	. Yes	X No
	If 'Yes,' describe these new services on Schedule O.	_	_
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	services? Yes	X No
	If 'Yes,' describe these changes on Schedule O.		_
4	Describe the organization's program service accomplishments for each of its three largest program se Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the others, the total expenses, and revenue, if any, for each program service reported.	ervices, as measured by exp amount of grants and alloc	penses. cations to
4 a	(Code) (Expenses \$ 161,691. including grants of \$ 99,200.) (Revenue \$)
	The Rotary Club of Davenport makes contributions to other char		ions
	during the year and makes education grants to High School stud		
	are paid directly to the colleges. See Attached List.		<u> </u>
		·	
		·	
	(Code:) (Expenses \$ 82,590. including grants of \$) (Revenue \$	
	The Rotary Club of Davenport meets weekly for lunch and busine of this program service activity represent the cost of meals d of members served is 200+. The club provides various speakers educate and develop its' membership at these meeting and get t	luring the year. and events to he	Number
4.0	: (Code.) (Expenses \$ including grants of \$) (Revenue \$	
70	The Rotary Club of Davenport sponsors a foreign exchange stude	-' `	itina
	international students every other year.	int and other vis.	TCTIIG
	International Students every other year.		
		- : 	
4 0	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue	· \$)
	a Total program cervice expenses > 2// 291		'

•			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		x
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
б	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
á	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	11 a	<u>x</u> _	
ı	Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		х
•	Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		х
•	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	X	
1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	111	 	Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		х
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13		X
	, , , , ,	14a	_	<u> ^</u>
ı	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17	_	Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	<u> </u>	Х
!	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		1

TEEA0103L 11/08/13

Form 990 (2013) Rotary Club of Davenport

Part V. Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a.	24a		Х
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		x
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		X
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	が記		
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	<u> </u>	<u> </u>
ŧ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28ь		x
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part L	33		х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ł	o If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38		<u>x</u>
BAA		Forn	1 990	(2013)

Form 990 (2013) Rotary Club of Davenport Part V. Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V

a Ernter the number reported in Box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-26 included in line 1a. Enter -0- if not applicable c Did the regination comply with backup withfolding rules for reportable payments to vendors and reportable gaming c Did the regination comply with the backup withfolding rules for reportable payments to vendors and reportable gaming did provided to the calendar year entering with or within the year covered by this return 2 a Ernter the number of employees reported on Form W-3. Transmittant of Wage and Tax State. 2 a Ernter the number of employees reported on Form W-3. Transmittant of Wage and Tax State. 2 b Note. If the sum of Irines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 a Did the organization have unreaded business gross inconer of \$1,000 or more dumpt in year? 3 b If Yes's, the did a Form 990 for this year? If the Irine 28, press a september in Schedule 0 3 b If Yes's, and during the calendary ever, did the organization have a mitreast in, or a signature or other authority over, a financial account in a foreign country. 3 b If Yes's, find the fining requirements for Form TD F 90-221, Report of Foreign Bank and Financial accountly. 3 b If Yes's, fining requirements for Form TD F 90-221, Report of Foreign Bank and Financial accountly. 3 b If Yes's during the search of the organization had it was or is a party to a prohibited tax sheller transaction? 4 b If Yes's, ride the organization had it was or is a party to a prohibited tax sheller transaction? 5 b If Yes's, during the search of the file of the organization for the search of the file of the party of the organization received a contribution of guide search of the file of the search of the file of the organization received a contribution of guide search of the file of the party of the organization received a contribution of guide the file of the party of the organization received a contribution of guided the file of the guided price of the party of the or	Check if Schedule O contains a response or note to any line in this Part V		ſ	\neg
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be Enter the number of Forms W-20 included in line 1a. Enter -0 if not applicable Dot the segmentation comply with backs privity with privity grups for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Benefits fire in the service of the privity winners? Benefits fire the calendar year ending with or within the year covered by this return. Benefits fire the calendar year ending with or within the year covered by this return. Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see institutions). 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4 a At any time during the calendar year, did the organization have an interest in, or a significant advanced or the results of the year? 5 a Was the organization a party to a prohibited tax shelter transaction of other authority over, a financial accounty. 5 a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization in the organization have a north and a start of the organization of the organization in the value of the organizatio	1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	l 1al	0 32 32 33	37
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Gambling) winnings to prize winners? 2 a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return bif at least one is reported on line 2a, did the organization file all required feeder employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 b Lid the organization have unrelated business gross income of \$1,000 or more during the year? bif Yes' has it field a form \$50.1 for this year? Who bins 8, provide a explanation a Schedule 0 4 At any time during the calendar year, did the organization have a ministrest in, or a significant or other authority over, a financial account, in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for filing requirements for Form TD F 30-22.1, Report of Foreign Bank and Financial Accounts. S Was the organization and such set for securities account, or other financial accounts? b Did any taxable party notity the organization that it was or is a party to a prohibited that shelter transaction? cif Yes, to line 5a or 5b, did the organization that it was or is a party to a prohibited that shelter transaction? cif Yes, to line 5a or 5b, did the organization that it was or is a party to a prohibited that shelter transaction? 5c S Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? b If Yes, did the organization include with every solicitation and express statement that such contributions or gifts were not tax deductible. b If Yes, did the organization motify the donor of the value of the goods or services provided? c) Did the organization received a payment in excess of \$35 made party as a contribution and party for goods and services provided to the payor? b) If Yes, indicate the number of Forms 8822 filed during the year. g) Form 1089 contributio	••	<u> </u>		
ments, flied for the calendar year ending with or within the year covered by this return 2a 0 0 2 3 2 1 1 2 1 2 1 2 2 1 3 3 3 3 3 3 3 3 3	(gambling) winnings to prize winners?	l l	1 c	271
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions) 3 a Did the organization have unrelated business gross incrose of \$1,000 or more during the year? 4 at 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 thoreign country (such as a brain account, or other financial account), or the financial accounts, bit "Yes," enter the name of the foreign country." 5 a Was the organization a party to a prohibited tax shelter fransaction at any time during the tax year? 5 b Was the organization a party to a prohibited tax shelter fransaction at any time during the tax year? 5 b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter fransaction? 5 c If "Yes," to line 5 ao 5 b, did the organization that that or is a party to a prohibited tax shelter fransaction? 5 c If "Yes," to line 5 ao 5 b, did the organization that that or is a party to a prohibited tax shelter fransaction? 5 b If "Yes," to line 5 ao 5 b, did the organization that that or is a party to a prohibited tax shelter fransaction? 5 c If "Yes," to line 5 ao 5 b, did the organization that that or is a party to a prohibited tax shelter fransaction? 5 b If "Yes," to line 5 ao 5 b, did the organization that that or is a party to a prohibited tax shelter fransaction? 6 a Date the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shelt may receive deductible contributions under section 170(c). 6 a Did the organization shelt may receive deductible contributions under section 170(c). 6 b If Yes, indicate the number of forms 8282 filed during the year? 7 b If Yes, indicate the number of Forms 8282 filed during the year. 9 b If Yes, indicate the number of Forms 8282 filed during the year. 10 b If the organization, during the year, pay premiums, directly or indirectly, or a personal benefit contract? 11 b If Yes, indicate the	ments, filed for the calendar year ending with or within the year covered by this return		0	
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b if Yes' has it field a Form 993-T for this year? if 'Mo' to line 3b, provide an explanation in Schedule 0 4 a 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. b if 'Yes', enter the name of the foreign country. See instructions for filing requirements for Form TD F. 90-22.1, Report of Foreign Bank and Financial accounts. 5 a Was the organization a party to a prohibited tax shelter fransaction of Form 90-22.1, Report of Foreign Bank and Financial Accounts. 5 a Was the organization a party to a prohibited tax shelter fransaction of Form 90-22.1, Report of Foreign Bank and Financial Accounts. 5 a Was the organization approach to prohibited tax shelter fransaction of Form 90-22.1, Report of Foreign Bank and Financial Accounts. 5 a Was the organization approach to prohibited tax shelter transaction? 5 a Was the organization approach that this or is a party to a prohibited tax shelter transaction? 5 a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solid a tray contribution that this or is a party to a prohibited tax shelter transaction? 5 a Was the organization shelt were not tax deductible as charibable contributions? 5 a Was the organization shelt were not tax deductible as charibable contributions? 5 a Was the organization shelt may receive deductible or of the star are normally greater than \$100,000, and did the organization organization shelt were not tax deductible and the organization shelt are promoted to the payor? 5 b If Yes, did the organization or northy the donor of the value of the goods or services provided? 6 b If Yes, indicate the number of Forms 8282 filed during the year and property for which it was required to file form 8222 filed during the year and property. If the organization the promote the year promote the year properties of the year properties of the year properties of the year properties of the ye	- , , , , , , , , , , , , , , , , , , ,	•	lange lange lange lange	
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Form 990 (2013) Rotary Club of Davenport 420499088 Page 6 Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 13 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents Х since the prior Form 990 was filed? 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 X 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more X 7 a members of the governing body? **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or other persons other than the governing body? 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X Яa a The governing body? X 8 b b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code., No Yes X 10 a 10 a Did the organization have local chapters, branches, or affiliates? b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b X 11 a 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 X 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done 12 c X 13 Did the organization have a written whistleblower policy? 13 14 X 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a X 15 b X b Other officers of key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16 a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the 16 b organization's exempt status with respect to such arrangements? **Section C. Disclosure** List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Other (explain in Schedule O) Own website Another's website Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to

the public during the tax year See Schedule O State the name, physical address, and telephone number of the person who possesses the books and records of the organization

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Page 7

Partiville Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - · List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

	1	(C)			i					
(A) Name and Title	(B) Average hours per week (list	ane box office	r, uni	ess po d a dir	ersor	more to n is both r/trustee	n an e)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Highest compensated employee Key employee Officer Institutional frustee Individual trustee or director		Former	the organization (W-2/1099 MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations			
(1) Cheryl Goodwin Pres Elect	0							0.	0.	
(2) Betsy Pratt	0	-		-+	\dashv		_	0.	<u> </u>	<u> </u>
Director	16	†	- (- 1	ļ			0.	0.	0.
(3) Brian Wright	0	-	_	_	\neg				<u> </u>	
				Į	ļ			0.	0.	0.
(4) Gary Loss	0		\Box	\neg						
President	0							0.	0.	0.
(5) Stephen Gray	0									
Secretary	0		_		_		L.,	0.	0.	0.
(6) Gene Meeker	0		ŀ		l					
Director	0		_	_	_			0.	0.	0.
(7) Rick Best	0	ļ		- 1						
Director	0	ļļ	_	_			L	0.	0.	0.
_(8) Mark Zimmerman	0]			Ì	· '	1			
Director	0		_		_		_	0.	0.	0.
(9) Bob Morrison	0	}	Ì			'		_	_	
Director	0	 					L.,	0.	0.	0.
(10) Rob Scott	00_	1					}		_	
Director	0		\dashv	_	-		<u> </u>	0.	0.	0.
(11) Eloise Graham	$-\frac{0}{0}$	 	1	1				,		,
Director (12) Paul E Johnson	0				-		\vdash	0.	0.	0.
Vice President		† }						0.	0.	0.
(13) Robert Sharp	0						<u> </u>			
Treasurer	0							0.	0.	0.
(14)										
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	(A) Name and title		erage (do not che			Position heck more than one ss person is both an id a director/trustee)			(D) Reportable	(E) Reportable	(F) Estimated	
		per week (list any hours for related organiza - tions below dotted line)	Individual trustee or director				Highest compensated employee		compensation from the organization (W 2/1099 MISC)	compensation from related organizations (W-2/1099 MISC)	amount of other compensation from the organization and related organizations	
(15)_												_
(16)												_
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(18)									<u>. </u>			_
(19)												
(20)												_
(21)						-						_
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1 b	Sub-total .	· .	<u></u>	ш					0.	0	1) .
c ·	Total from continuation sheets to Part VII, Section Total (add lines 1b and 1c)	A						>	0.	0	. 0).
2	Total number of individuals (including but not limite	d to tho	se lis	ted	abo	ve)	who	rece				•
	from the organization 0										Yes No	
3	Did the organization list any former officer, director on line 1a? <i>If 'Yes,' complete Schedule J for such i</i>	, or trus ndıvıdua	tee, I	key	emp	oloye	ee, o	r hiệ	ghest compensate	d employee	3 X	Ų,
	For any individual listed on line 1a, is the sum of re the organization and related organizations greater to such individual	portable han \$15	e con 50,00	nper 0? <i>I</i>	nsati f'Ye	ion : es' d	and o	othe <i>lete</i>	r compensation fr Schedule J for	om	4	調温く
5	Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,'	compen:	sation e Sc	n fro hedu	m a	iny i	unrela suci	ated h pe	d organization or i	ndıvıdual	5 X	
	ion B. Independent Contractors											
_1 	Complete this table for your five highest compensa compensation from the organization. Report compe	ted inde insation	pend for t	ent he c	con aler	trac idar	tors t year	that en	received more that ding with or within	an \$100,000 of the organization	's tax year.	
	(A) Name and business addre	ss							Description) of services	(C) Compensation	
												_
	Total number of independent contractors (including \$100,000 of compensation from the organization		lımıt	ed t	o th	ose	liste	d at	pove) who receive	[94]		

A Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory. b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including is of contributions reported on line 1c). 9 a Gross income from gaming activities See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 8 Business Code 11 a b C C d All other revenue e Total. Add lines 11a-11d			Check if Schedule O	contains a	respo	nse or note to any	line in this Part VII	I		
The Property of the Property o		が記れる					(A) Total revenue	Related or exempt function	Unrelated business	Revenue excluded from tax under sections
2a Membership Dies & Assessments 87.294 87.294 26.249 26.2	IBUTIONS, GIFTS, GRANTS THER SIMILAR AMOUNTS	d d	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions)	ns)	1 a 1 b 1 c 1 d 1 e					
2a Membership Dies & Assessments 87.294 87.294 26.249 26.2	E S	_		ın lines 1a-	1f: \$_		and the property of the state of		克莱克丁克克	
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties 6a Gross rents	띨	h	Total. Add lines 1a-1f			Pusiness Code		The fact study of the California	The said of the said of the	The first of the arterior
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties 6a Gross rents		2 9	Mambanahan Dara C	3		Business Code		EFFERE FIELD	المشاك فالمائد فالمحددة	Land Both Lite Comband
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties 6a Gross rents	Æ	Membership Dues & Assessments Description Product								
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties 6a Gross rents	95 15 15 15 15 15 15 15 15 15 15 15 15 15									
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties 6a Gross rents	ğ									
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties 6a Gross rents	₩.	е	Youth Harvest Proj	<u>ect</u>			1,500.			1,500.
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties 6a Gross rents	뗭		· -		; <u> </u>			n en euro contracto de la la la como.	Control of the contro	111.75581-701 2 *6 85 1 5 4 87 5 24
other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalities 6 a Gross rents b Less: rental expenses c Rental income or (loss) 7 a Gross amount from sales of assets other than inventory. b Less: cost or other basis and sales expenses c Garn or (loss) d Net grain or (loss) 4 Net grain or (loss) 6 Net grain or (loss) 7 a Gross income from fundraising events (not including .\$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events. See Part IV, line 19 b Less: direct expenses b Less: cost of goods sold c Net income or (loss) from gaming activities. See Part IV, line 19 b Less: cost of goods sold c Net income or (loss) from sales of inventory. Business Code 11a b	<u>æ</u>		<u> </u>			•	122,405.			
Company Comp		3	other similar amounts)			•	39.			39.
Basis cost or other basis and sales expenses c Gain or (loss) 8 a Gross income from fundraising events (not including: \$\frac{1}{2}\$ of contributions reported on line: 1c). 9 a Gross income from gaming activities. 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold b c Net income or (loss) from sales of inventory. 11 a b C Missis Servenue Business Code 11 a C Tost Add lines 11a-111d		5	Royalties .			•				
b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a fross amount from sales of assets other than inventory. b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including .5 of contributions reported on line 1c). See Part IV, line 18 b Less. direct expenses c Net income or (loss) from fundraising events. 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses b c Net income or (loss) from gaming activities. See Part IV, line 19 b Less direct expenses b c Net income or (loss) from gaming activities. See Part IV, line 19 b Less cost of goods sold b c Net income or (loss) from sales of inventory. Miscellaneous Revenue Business Code 11 a b c c d All other revenue e Total. Add lines 11a-11d				(i) Re	al	(ii) Personal				到这个时间
C Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory. b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including. \$ Contributions reported on line 1c). See Part IV, line 18 b Less. direct expenses c Net income or (loss) from fundraising events See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities C Net income or (loss) from gaming activities b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b C C d All other revenue e Total. Add lines 11a-11d										
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Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a-11d		ŧ	Less: cost of goods sold	t	t					
b c d All other revenue e Total. Add lines 11a-11d					f inver	_				
b c d All other revenue e Total. Add lines 11a-11d		4-		ue	 -	Business Code	Link Berghatte		the through the second	RECEIVED TO STANK
c d All other revenue e Total. Add lines 11a-11d					+		 			
e Total. Add lines 11a-11d ► Total. Add lines 11a-11d			,		+		 			
e Total. Add lines 11a-11d ► Total. Add lines 11a-11d			d All other revenue		+	<u>.</u>	 			
							-0218 2020	· 14 14 15 15 16 15 15 15 15 15 15 15 15 15 15 15 15 15	CANAL PROPERTY.	
						•	221,644.	1		122,444.

Partix Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising (A) Total expenses (C) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Program service Management and expenses general expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 . . 161,691 161,691 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments. organizations, and individuals outside the United States. See Part IV, lines 15 and 16. Benefits paid to or for members Compensation of current officers, directors, 0 0 0 0. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described 0 0 0 0. in section 4958(c)(3)(B) Other salaries and wages. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Payroll taxes Fees for services (non-employees): a Management ... **b** Legal 1.190 1.190 c Accounting d Lobbying . 在五年 多种种种的 e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule () Advertising and promotion 12 1,774 1.774. Office expenses 13 14 Information technology 15 Royalties 3,600 3,600. 16 Occupancy 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 8,208 8,208 19 Conferences, conventions, and meetings 20 21 Payments to affiliates 22 Depreciation, depletion, and amortization 194 194 2,170. 2,170. 23 Insurance Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 32,129 32,129 a Meeting Meal costs ___ 9,100. b Contractor expenses 9,100. 7,412 Wingfest Project Expense 7,412 3,690 3,690 d Rotary District 6000 dues 13,123. 13,123 e All other expenses 0. 0. 25 Total functional expenses. Add lines 1 through 24e. 244,281. 244,281 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► If following SOP 98-2 (ASC 958-720)

		Check if Schedule O contains a response or note to	any line in this Pa	rt X.			
					(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing			108,003.	1	15,242.
	2	Savings and temporary cash investments				2	64,427.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former of trustees, key employees, and highest compensated en Part II of Schedule L	officers, directors, nployees. Complete			5	
	6	Loans and other receivables from other disqualified pe section 4958(f)(1)), persons described in section 4958(employers and sponsoring organizations of section 50 beneficiary organizations (see instructions) Complete	ributing nployees'		6		
ŝ	7	Notes and loans receivable, net .				7	
A S S E T S	8	inventories for sale or use .				8	
T S	9	Prepaid expenses and deferred charges .				9	
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	2,344.			
Į	Ь	Less: accumulated depreciation	10b	2,248.	290.	10 c	96.
Í	11	Investments – publicly traded securities .	L	2,240.	250.	11	70.
	12	Investments – other securities See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11				13	
	14	Intangible assets .				14	
	15	Other assets. See Part IV. line 11	•			15	
	16	Total assets. Add lines 1 through 15 (must equal line 3	3/1)		108,293.	16	70.765
\dashv	17	Accounts payable and accrued expenses	, , ,		100,293.	17	79,765.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
Ā	21	Escrow or custodial account liability. Complete Part IV	of Schedule D			21	
LIABILITIES	22	Loans and other payables to current and former officer key employees, highest compensated employees, and Complete Part II of Schedule L	rs, directors, truste disqualified persor	es, 1s.		22	
<u> </u>	23	Secured mortgages and notes payable to unrelated the	ird parties			23	
Š	24	Unsecured notes and loans payable to unrelated third	•			24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Comp	s to related third pa olete Part X of Sch	rties, edule D	10,056.	25	4,165.
	26	Total liabilities. Add lines 17 through 25			10,056.	26	4,165.
E T		Organizations that follow SFAS 117 (ASC 958), check lines 27 through 29, and lines 33 and 34.	there► X and co	mplete			
ξ	27	Unrestricted net assets .			98,237.	27	75,600.
(NOE-N	28	Temporarily restricted net assets .				28	
	29	Permanently restricted net assets				29	
R F		Organizations that do not follow SFAS 117 (ASC 958) and complete lines 30 through 34.), check here►				
מבכיו	30	Capital stock or trust principal, or current funds			The same of the sa	30	ALL STATE OF THE S
	31	Paid-in or capital surplus, or land, building, or equipm	ent fund			31	
Ã	32	Retained earnings, endowment, accumulated income,				32	
Ñ	33	Total net assets or fund balances			98,237.	33	75,600.
日々して文しいの	34	Total liabilities and net assets/fund balances			108,293.	34	79,765.
RΛ					100,273.		Form 990 (2012)

		<u> 20499088</u>		_Pag	ge 12
Pai	teXIII Reconciliation of Net Assets		·		
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	22	1,6	44.
2	Total expenses (must equal Part IX, column (A), line 25)	2	24	4,2	81.
3	Revenue less expenses. Subtract line 2 from line 1	3	-2	2,6	37.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9	8,2	37.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities .	6			
7	Investment expenses .	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	7	5,6	00.
Pai	teXIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII.				
1	Accounting method used to prepare the Form 990. X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain			Yes	No
	ın Schedule O.				
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both:	ed on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
ł	Were the organization's financial statements audited by an independent accountant?		2 b		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ	ate	1983		
	basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis				
(If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of review, or compilation of its financial statements and selection of an independent accountant?	the audit,	2 c	ياند بالدين	Targrapha
_	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	e Single	3 a		Х
	olf 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the re or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired audit	3 b		
BAA			Form	990 (2013)

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is atwww.irs.gov/form990.

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

Employer identification number

OMB No 1545-0047

Rotary Club of Davenport		420499088
Part Organizations Maintaining Do	or Advised Funds or Other Similar Fu	inds or Accounts.
Complete if the organization ar	nswered 'Yes' to Form 990, Part IV, line	e 6.
_	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year		
2 Aggregate contributions to (during year).		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and do are the organization's property, subject to the	onor advisors in writing that the assets held in do e organization's exclusive legal control?	nor advised funds Yes No
for charitable purposes and not for the bene impermissible private benefit?	ors, and donor advisors in writing that grant fund fit of the donor or donor advisor, or for any other	s can be used only purpose conferring Yes No
Rantilia Conservation Easements.	and Marita Farma 000 Bart N/ La	- 7
	nswered 'Yes' to Form 990, Part IV, line	e /
1 Purpose(s) of conservation easements held		of an in standard land
Preservation of land for public use (e.g.,	· L	of an historically important land area
Protection of natural habitat	Preservation	of a certified historic structure
Preservation of open space	Annu ballal a succelebrat annual succession on the body of the succession of the suc	H 6 6
2 Complete lines 2a through 2d if the organizal last day of the tax year.	tion held a qualified conservation contribution in	the form of a conservation easement on the
		Held at the End of the Tax Year
a Total number of conservation easements		2a
b Total acreage restricted by conservation eas	ements	2 b
c Number of conservation easements on a cer	tified historic structure included in (a)	2 <i>c</i>
d Number of conservation easements included structure listed in the National Register	in (c) acquired after 8/17/06, and not on a histor	2 d
3 Number of conservation easements modified tax year ►	I, transferred, released, extinguished, or terminate	ed by the organization during the
4 Number of states where property subject to	conservation easement is located >	
5 Does the organization have a written policy and enforcement of the conservation easem	regarding the periodic monitoring, inspection, har ents it holds?	ndling of violations, Yes No
6 Staff and volunteer hours devoted to monito	ring, inspecting, and enforcing conservation ease	ments during the year
7 Amount of expenses incurred in monitoring,▶\$	inspecting, and enforcing conservation easement	ts during the year
8 Does each conservation easement reported and section 170(h)(4)(B)(ii)?	on line 2(d) above satisfy the requirements of sec	ction 170(h)(4)(B)(i) Yes No
9 In Part XIII, describe how the organization runclude, if applicable, the text of the footnote conservation easements.	eports conservation easements in its revenue and e to the organization's financial statements that de	d expense statement, and balance sheet, and escribes the organization's accounting for
Partill Organizations Maintaining Colle	ections of Art, Historical Treasures, or On Inswered 'Yes' to Form 990, Part IV, line	ther Similar Assets. e 8.
art, historical treasures, or other similar assi	der SFAS 116 (ASC 958), not to report in its rever ets held for public exhibition, education, or resear ancial statements that describes these items.	
b If the organization elected, as permitted und historical treasures, or other similar assets following amounts relating to these items:	ler SFAS 116 (ASC 958), to report in its revenue held for public exhibition, education, or research in	statement and balance sheet works of art, n furtherance of public service, provide the
(i) Revenues included in Form 990, Part VI	II, line 1	▶ \$
(ii) Assets included in Form 990, Part X		≻ \$
2 If the organization received or held works of amounts required to be reported under SFA	art, historical treasures, or other similar assets for S 116 (ASC 958) relating to these items.	or financial gain, provide the following
a Revenues included in Form 990, Part VIII, li	ne 1	. > \$
b Assets included in Form 990, Part X		. ▶\$

Partilla Organizations Maintain	ing Collection	is of Art, Historic	al treasures, or Ot	her Similar Assets (<u>contini</u>	ıed)				
 3 Using the organization's acquisition items (check all that apply): 	n, accession, an	d other records, che	ck any of the following	that are a significant use	of its c	ollection	n			
a Public exhibition		d Loan o	or exchange programs							
b Scholarly research		e 🔲 Other								
c Preservation for future genera	itions									
4 Provide a description of the organ Part XIII.	ization's collection	ons and explain how	they further the organiz	zation's exempt purpose	ın					
5 During the year, did the organizat to be sold to raise funds rather th	an to be maintaii	ned as part of the or	ganization's collection?		Yes		No			
Partiva Escrow and Custodial A	rrangements. amount on Fo	Complete if the oi orm 990, Part X,	ganization answere line 21.	d 'Yes' to Form 990,	Part IV	′, 				
1 a is the organization an agent, trust on Form 990, Part X?				er assets not included	Yes]No			
b If 'Yes,' explain the arrangement	in Part XIII and o	complete the followin	g table:							
				 	Amount					
c Beginning balance				1 c						
d Additions during the year				1 d						
e Distributions during the year	•			1 e						
f Ending balance.				1f						
2 a Did the organization include an amount on Form 990, Part X, line 21? b If 'Yes,' explain the arrangement in Part XIII. Check here if the explantion has been provided in Part XIII.										
Part V Endowment Funds. Co	mplete if the	organization ans	wered 'Yes' to Forr	m 990. Part IV. line	10.					
	(a) Current year		1			our years	back			
1 a Beginning of year balance				, , , , , , , , , , , , , , , , , , , ,	1					
b Contributions					1					
c Net investment earnings, gains, and losses										
d Grants or scholarships					+					
e Other expenditures for facilities and programs										
f Administrative expenses.					1					
g End of year balance					T					
2 Provide the estimated percentage	of the current y	ear end balance (line	e 1g, column (a)) held a	as:						
a Board designated or quasi-endow	ment >	¥								
b Permanent endowment ►	क									
c Temporarily restricted endowmen	t ►	%								
The percentages in lines 2a, 2b,	and 2c should ec	ual 100%.								
3a Are there endowment funds not a organization by:	n the possession	of the organization t	that are held and admin	nistered for the	Γ	Yes	No			
(i) unrelated organizations					3a(i)					
(ii) related organizations					3a(ii)					
b If 'Yes' to 3a(ii), are the related of	rganizations liste	ed as required on Sci	hedule R?		3b					
4 Describe in Part XIII the intended	_				للشتا		<u> </u>			
Part VI Land, Buildings, and						***				
Complete if the organi		red 'Yes' to Form	990, Part IV, line	11a. See Form 990	, Part)	X, line	10.			
Description of property	(a)	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) E	Book va	lue			
1 a Land				BATTER MANAGEMENT						
b Buildings										
c Leasehold improvements	Γ.									
d Equipment			2,344.	2,248.			96.			
e Other .	<u>. </u>									
Total Add lines 1a through 1e (Colum	n (d) must equal	Form 990 Part X c	olumn (R) line 10(c)	•			96			

420499088

Page 2

Schedule **D** (Form 990) 2013

Schedule D (Form 990) 2013 Rotary Club of Davenport

BAA

Part VIII Investments - Other Securities.		N/A
		Part IV, line 11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests (3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(1)		The Title States in the second of the management of the management of the second of the second secon
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)		N/A
Complete if the organization answered	'Yes' to Form 990,	Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
<u>(6)</u> (7)	· ·	
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)		・おきまながらから極いていませんは事業などである。
PartiX Other Assets.	N/A 'es' to Form 990 Pa	art IV, line 11d. See Form 990, Part X, line 15.
	scription	(b) Book value
(1)		
(2)		
(3)		
(4) (5)		
(6)		
(7)		
(8)		
(9) (10)		
Total. (Column (b) must equal Form 990, Part X, column (B)) //oo 15)	>
Part X Other Liabilities.), line 15.)	
Complete if the organization answered 'Yes' to Form	990, Part IV, line 11e or 1	11f. See Form 990, Part X, line 25
(a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) Paul Harris Clearing (3)	4,16	25.
(4)		
(5)	-	
(6)		
(7)		The state of the s
(8)		
(9)		
(10)		The state of the s
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	4 ,16	
2. Liability for uncertain tax positions. In Part XIII, provide the text of the fool		
tax positions, under FIN 48 (ASC 740). Check here if the text of the footnote h		

Schedule D (Form 990) 2013 Rotary Club of Davenport		420499088	Page 4
Part:XI: Reconciliation of Revenue per Audited Financial Statemen	nts With Revenue per F	Return. N/A	
 Complete if the organization answered 'Yes' to Form 99 	0, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.		- A	
a Net unrealized gains on investments	2 a		
b Donated services and use of facilities	2 b		
c Recoveries of prior year grants.	2 c		
d Other (Describe in Part XIII.)	2 d		
e Add lines 2a through 2d	\	2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	100	
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b	· · · · · · · · · · · · · · · · · · ·	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	2.)	5	
RarteXIII Reconciliation of Expenses per Audited Financial Stateme			
Complete if the organization answered 'Yes' to Form 99		i itetuiii. II/A	
	0, 1 att 14, iiiic 12a.		
1 Total expenses and losses per audited financial statements	•	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1		
a Donated services and use of facilities	2 a		
b Prior year adjustments	2 b		
c Other losses	2 c		
d Other (Describe in Part XIII.)	2 d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1	1 1	3 Obertus state	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII.) c Add lines 4a and 4b	4 b	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line is	18)	5	
PartXIII Supplemental Information.			
		5	
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also	14; Part IV, lines 1b and 2b complete this part to provide	; Part V, e anv additional informat	ion.
		,	
			
BAA		Schedule D (Form	1 990) 2013

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

Rotary Club of Davenport

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.

► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

OMB No 1545 0047

Open to Rublic

Employer identification number

420499088

Form 990, Part III, Line 1 - Organization Mission	
The Rotary Club of Davenport meets weekly and provides various speakers and events	
to help educate and develop its' membership. The Organization provides assistance to	2
local, national and international charities through monetary donations and manpower	
when needed. The chapter also provides educational grants to qualified High School	
Seniors each year.	
Form 990, Part VI, Line 11b - Form 990 Review Process	
No review was or will be conducted.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
No documents available to the public.	
	- - -

Form **4562**

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545 0172

Department of the Treasury Internal Revenue Service Name(s) shown on return

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No 179

Rotary	Club	of	Davenport

Identifying number 420499088

เวนรเกย								
	ess or activity to which this form rela	nes						
	m 990/990-PF	nonco Cartaira F	Proporty Haday Car	tion 170				
_' щаг	til篇 Election To Ex Note: If you have a	pense Certain F any listed property.	ropeπy Under Sec complete Part V before	Suon 17 9 vou complete Pa	art I			
1	Maximum amount (see in:			,			1	
2	Total cost of section 179	•	ervice (see instructions)				2	
3	Threshold cost of section				١		3	
4	Reduction in limitation St				, .		4	
5	Dollar limitation for tax ye		•		narried f	ilina	-	
	separately, see instruction					······9	5	
6	(a	Description of property		(b) Cost (business	use only)	(c) Elected cos	st .	ALC: A CONTRACT OF THE PARTY OF
				<u> </u>				
7	Listed property. Enter the				7			
8	Total elected cost of secti		•), lines 6 and 7			8	
9	Tentative deduction Ente						9	
10	Carryover of disallowed de		-				10	
11			,	•		5 (see instrs)	11	
	Section 179 expense dedicarryover of disallowed de				13	<u> </u>	12	
	: Do not use Part II or Part				- 13	<u> </u>		一一一一
	till Special Depred	<u> </u>				de lieted eveneut.) (C	
) (See	Instructions.)
14	Special depreciation allow tax year (see instructions)		roperty (other than liste	d property) place	ed in se	rvice during the	14	
15	• '			•				<u> </u>
	Property subject to section					• •	15	
	Other depreciation (included)		alvela lessas accordes 2 0	C			16	<u>l, </u>
<u>r</u> ar	tillia MACRS Depre	CIALIOII (DO HOT IN	Sectio		.)			
17	MACDS deductions for as	cate placed in senii					1 17	104
17	MACRS deductions for as							
		•		•			17	194.
18	If you are electing to grou	ip any assets placed		•	or more	general		194.
18	asset accounts, check her	up any assets placed re	I in service during the ta	ax year into one		<u> </u>		
18	asset accounts, check her Section E	ip any assets placed re B – Assets Placed in	I in service during the ta n Service During 2013 1	ax year into one	he Gene	eral Depreciation		n
18	asset accounts, check her	ap any assets placed in (b) Month and year placed	In service during the to Service During 2013 1 (c) Basis for depreciation (business/investment use	ax year into one		eral Depreciation (f)	Systen	
	Section E (a) Classification of property	p any assets placed in a set of the set of t	I in service during the ta n Service During 2013 1 (c) Basis for depreciation	ax year into one ax Year Using to	he Gene	eral Depreciation (f)	Systen	n (g) Depreciation
19 a	(a) Classification of property 3-year property	ap any assets placed in (b) Month and year placed	In service during the to Service During 2013 1 (c) Basis for depreciation (business/investment use	ax year into one ax Year Using to	he Gene	eral Depreciation (f)	Systen	n (g) Depreciation
19 a	(a) Classification of property 3-year property 5-year property	ap any assets placed in (b) Month and year placed	In service during the to Service During 2013 1 (c) Basis for depreciation (business/investment use	ax year into one ax Year Using to	he Gene	eral Depreciation (f)	Systen	n (g) Depreciation
19 a	Classification of property 3-year property 5-year property 7-year property 7-year property	ap any assets placed in (b) Month and year placed	In service during the to Service During 2013 1 (c) Basis for depreciation (business/investment use	ax year into one ax Year Using to	he Gene	eral Depreciation (f)	Systen	n (g) Depreciation
19 a	Classification of property 3-year property 5-year property 7-year property 10-year property	ap any assets placed in (b) Month and year placed	In service during the to Service During 2013 1 (c) Basis for depreciation (business/investment use	ax year into one ax Year Using to	he Gene	eral Depreciation (f)	Systen	n (g) Depreciation
19 a	Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property	ap any assets placed in (b) Month and year placed	In service during the to Service During 2013 1 (c) Basis for depreciation (business/investment use	ax year into one ax Year Using to	he Gene	eral Depreciation (f)	Systen	n (g) Depreciation
19 a	asset accounts, check her Section E (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property	p any assets placed in (b) Month and year placed in service	In service during the to Service During 2013 1 (c) Basis for depreciation (business/investment use	ax year into one (ax Year Using to (d) Recovery period	he Gene	eral Depreciation (f) ntion Method	System	n (g) Depreciation
19 a	asset accounts, check her Section E (a) Classification of property 3-year property 7-year property 10-year property 15-year property 20-year property 25-year property	ap any assets placed in (b) Month and year placed	In service during the to Service During 2013 1 (c) Basis for depreciation (business/investment use	ax year into one (ax Year Using to (d) Recovery period	he Gene	eral Depreciation (f) Intion Method	System	n (g) Depreciation
19 a	asset accounts, check her Section E (a) Classification of property 3-year property 7-year property 10-year property 110-year property 120-year property 125-year property Residential rental	p any assets placed in (b) Month and year placed in service	In service during the to Service During 2013 1 (c) Basis for depreciation (business/investment use	25 yrs 27.5 yrs	he Gene (e Conve	eral Depreciation : (f) (ntion Method	System	n (g) Depreciation
19 a	asset accounts, check her Section E (a) Classification of property 3-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property	p any assets placed in (b) Month and year placed in service	In service during the to Service During 2013 1 (c) Basis for depreciation (business/investment use	25 yrs 27.5 yrs 27.5 yrs	he Gene (e Conve	eral Depreciation : (f) (ntion Method S/L M S/L M S/L M S/L	System	n (g) Depreciation
19 a	asset accounts, check her Section E (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real	p any assets placed in (b) Month and year placed in service	In service during the to Service During 2013 1 (c) Basis for depreciation (business/investment use	25 yrs 27.5 yrs	MM MM	stral Depreciation: (f) (ntion Method S/L M S/L M S/L M S/L M S/L	System	n (g) Depreciation
19 a	asset accounts, check her Section E (a) Classification of property 3-year property 7-year property 10-year property 110-year property 20-year property 25-year property Residential rental property Nonresidential real property	p any assets placed in (b) Month and year placed in service	In service during the tandard service During 2013 1 (c) Basis for depreciation (business/investment use only — see instructions)	25 yrs 27.5 yrs 39 yrs	M M M	S/L M S/L	System	(g) Depreciation deduction
19a	Classification of property 3-year property 5-year property 10-year property 110-year property 20-year property 20-year property Residential rental property Nonresidential real property Section C	(b) Month and year placed in service	In service during the to Service During 2013 1 (c) Basis for depreciation (business/investment use	25 yrs 27.5 yrs 39 yrs	M M M	S/L M S/L ative Depreciation	System	(g) Depreciation deduction
19 a b c c c c c c c f f c c t i i	Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Class life	(b) Month and year placed in service	In service during the tandard service During 2013 1 (c) Basis for depreciation (business/investment use only — see instructions)	25 yrs 27.5 yrs 27.5 yrs 39 yrs	M M M	S/L M S/L	System in System	(g) Depreciation deduction
19 a b c c c c e e f f f c c c i i	Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Class life 12-year	p any assets placed in (b) Month and year placed in service	In service during the tandard service During 2013 1 (c) Basis for depreciation (business/investment use only — see instructions)	25 yrs 27.5 yrs 27.5 yrs 39 yrs x Year Using the	M M M M M M M M M M M M M M M M M M M	S/L M S/L S/L S/L S/L S/L	System in System	(g) Depreciation deduction
19 a b c c c c e e f f f c c c c i i	Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 20-year property Residential rental property Nonresidential real property Class life 12-year 40-year	p any assets placed in (b) Month and year placed in service Assets Placed in service	In service during the tandard service During 2013 1 (c) Basis for depreciation (business/investment use only — see instructions)	25 yrs 27.5 yrs 27.5 yrs 39 yrs	M M M	S/L M S/L S/L S/L S/L S/L	System in System	(g) Depreciation deduction
19a	Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Class life 112-year 40-year Summary (See	(b) Month and year placed in service - Assets Placed in service - Assets Placed in service	In service during the tandard service During 2013 1 (c) Basis for depreciation (business/investment use only — see instructions)	25 yrs 27.5 yrs 27.5 yrs 39 yrs x Year Using the	M M M M M M M M M M M M M M M M M M M	S/L M S/L S/L S/L S/L S/L	System in System	(g) Depreciation deduction
19a t c c f f c t 20a t c Pai	Classification of property 3-year property 5-year property 10-year property 20-year property 20-year property Residential rental property Nonresidential real property Class life 112-year 40-year Class life Listed property. Enter am	(b) Month and year placed in service - Assets Placed in service - Assets Placed in service - Assets Placed in service	In Service during the tandard service During 2013 To (C) Basis for depreciation (business/investment use only — see instructions) Service During 2013 Ta	25 yrs 27.5 yrs 27.5 yrs 39 yrs ex Year Using the	M M M M M M M M M M M M M M M M M M M	S/L M S/L S/L S/L S/L S/L	System in System	(g) Depreciation deduction
19a t c c f f c Pai	Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Class life 12-year 41V Summary (See Listed property. Enter am Total. Add amounts from line 12	ap any assets placed in (b) Month and year placed in service - Assets Placed in service - Assets Placed in service - Instructions) instructions (c) inservice in service in	Service During 2013 Ta (c) Basis for depreciation (business/investment use only — see instructions) Service During 2013 Ta	25 yrs 27.5 yrs 27.5 yrs 39 yrs Ex Year Using the second	M M M M M M M M M M M M M M M M M M M	S/L M S/L S/L S/L S/L S/L	System System 21 22	(g) Depreciation deduction
19a b c c c e f c c e f c c Pai	Classification of property 3-year property 5-year property 10-year property 20-year property 20-year property Residential rental property Nonresidential real property Class life 112-year 40-year Class life Listed property. Enter am	Assets Placed in (b) Month and year placed in service - Assets Placed in service - Assets Placed in service - Instructions) Bount from line 28 P., lines 14 through 17, line arm Partnerships and S coand placed in service	Service During 2013 Ta (c) Basis for depreciation (business/investment use only — see instructions) Service During 2013 Ta set 19 and 20 in column (g), and or prorations — see instructions e during the current year	25 yrs 27.5 yrs 27.5 yrs 27.5 yrs 39 yrs Ex Year Using the state of t	M M M M M M M M M M M M M M M M M M M	S/L M S/L S/L S/L S/L S/L	System System 21 22	(g) Depreciation deduction

2013	Federal Supporting Deta	ail	Page 1
	Rotary Club of Davenport		42049908
Contributions, Gifts, and Gra	ants, etc.		42.000
Community Foundation of Community Foundation of	Gr Riverbend		43,200. 56,000. 0. 99,200.
Stmt. of Functional Expenses Grants & other assistance to	s (990) gov. & orgs. in U.S. [O]		
Colleges (detai attache City of Davenport (Cent District 6000 FAMSCO Big Brothers Big Sister Family Resouces Hand in Hand Rick's House of Hope.	ennial Pavillion) s .	\$	56,000. 97,516. 1,000. 1,000. 1,500. 1,500. 1,000.
WQPT Public Radio North Scott Rotary Handicapped Development	Center	Total 🛐	1,000. 175. 1,000. 161,691.
Balance Sheet Cash-non-interest-bearing			
Checking Undeposited funds Petty cash		\$ Total \$	15,167. 0. 75. 15,242.
Balance Sheet Savings and temporary cash	investments		
Money Market. Certificates Money Market Projects		\$ Total \$	64,427. 0. 0. 64,427.

Rotary Club of Davenport 2013-14 Board of Directors

First	Last	Address	City	State Zip	Comments
Gary	Loss /	2603 E. Geo Washington Blvd	Davenport	IA 5	52803
Paul E.	Johnson	2167 W 31 Street	Davenport	IA 5;	52804
Betsy	Pratt	1568 30th Street	Bettendorf	IA 5	722
Steve	Gray '	1 Cobblestone Lane	LeClaire	IA 5	52753
Bob	Sharp /	5121 Amesbury Drive	Davenport	IA 5	1807
Brian	Wright	1019 Pershing Blvd	Clinton	IA 5	732
Gene	Meeker	2306 Windsor Ct.	Davenport	IA 5	1807
Rick	Best		Davenport	IA 5	307
Mark	Zimmerman	a).	Davenport	IA 5	:803
Cheryl	Goodwin /		Milan	.9 	31264
Bob	Morrison	2117 Americana Avenue	Muscatine	IA 5	52761
Rob	Scott	2510 Eastbury Ct	Bettendorf	19 19 19 19 19 19 19 19 19 19 19 19 19	52722
Eloise	Graham	804 W. Lombard Street	Davenport	IA 5	52804

08/01/2013 5801 08/01/2013 5802 08/01/2013 5803 08/01/2013 5805 08/01/2013 5805 08/01/2013 5805 08/01/2013 5806 08/01/2013 5809 08/01/2013 5810 08/01/2013 5811 08/01/2013 5814 08/01/2013 5815 08/01/2013 5815 08/01/2013 5815	St Olaf College & Petra Hahn iowa state University & Trevor Fennelly University of Iowa & Claire Saskowski University of Iowa & Amold Kompaniyets University of Iowa & Allison Vandecar Notre Dame - Timothy Ford Anzona State University - Hannah McAtee	Scholarship Scholarship			:	
08/01/2013 5801 08/01/2013 5802 08/01/2013 5804 08/01/2013 5805 08/01/2013 5806 08/01/2013 5806 08/01/2013 5806 08/01/2013 5809 08/01/2013 5810 08/01/2013 5811 08/01/2013 5811 08/01/2013 5814 08/01/2013 5815 08/01/2013 5816 08/01/2013 5816	Olaf College & Petra Hahn a state University & Trevor Fennelly versity of Iowa & Claire Saskowski versity of Iowa & Amold Kompaniyets versity of Iowa & Allison Vandecar re Dame - Timothy Ford cona State University - Hannah McAtee	Scholarship Scholarship				
08/01/2013 5802 08/01/2013 5803 08/01/2013 5804 08/01/2013 5806 08/01/2013 5806 08/01/2013 5806 08/01/2013 5809 08/01/2013 5810 08/01/2013 5811 08/01/2013 5812 08/01/2013 5814 08/01/2013 5815 08/01/2013 5815 08/01/2013 5816 08/01/2013 5816	a state University & Trevor Fennelly versity of Iowa & Claire Saskowski versity of Iowa & Amold Kompaniyets versity of Iowa & Allison Vandecar re Dame - Timothy Ford cona State University - Hannah McAtee	Scholarship	Loan and Scholarship Clearing	O	Checking	2,500 00
08/01/2013 5803 08/01/2013 5804 08/01/2013 5805 08/01/2013 5807 08/01/2013 5807 08/01/2013 5809 08/01/2013 5810 08/01/2013 5811 08/01/2013 5811 08/01/2013 5814 08/01/2013 5815 08/01/2013 5815 08/01/2013 5816 08/01/2013 5816	versity of lowa & Claire Saskowski versity of lowa & Amold Kompaniyets versity of lowa & Allison Vandecar re Dame - Timothy Ford ona State University - Hannah McAtee	O attended	Loan and Scholarship Clearing	O	Checking	2,500 00
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