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Form 990-EZ

Department of the Treasury  
Internal Revenue Service

Short Form

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.

Information about Form 990-EZ and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-1150

2014

Open to Public Inspection

**A** For the 2014 calendar year, or tax year beginning 07-01-2014, and ending 06-30-2015

**B** Check if applicable:  
☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return/terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization  
Rotary International - Westerville  
Sunrise Rotary Club  
Number and street (or P O box, if mail is not delivered to street address) Room/suite  
PO Box 1200  
City or town, state or province, country, and ZIP or foreign postal code  
Westerville, OH 43086

**D** Employer identification number  
31-1426601  
**E** Telephone number  
(614) 901-7100  
**F** Group Exemption Number  
0573

**G** Accounting Method ☐ Cash ☒ Accrual Other (specify) \_\_\_\_\_

**H** Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

**I** Website: [www.westervill Rotary.org](http://www.westervill Rotary.org)

**J** Tax-exempt status (check only one) - ☐ 501(c)(3) ☒ 501(c)( 4) (insert no ) ☐ 4947(a)(1) or ☐ 527

**K** Form of organization ☐ Corporation ☐ Trust ☐ Association ☐ Other \_\_\_\_\_

**L** 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, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. \$ 64,177

Part I 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 . . . . . ☒

Revenue	1	Contributions, gifts, grants, and similar amounts received . . . . .	1	3,814
	2	Program service revenue including government fees and contracts . . . . .	2	33,668
	3	Membership dues and assessments . . . . .	3	26,584
	4	Investment income . . . . .	4	111
	5a	Gross amount from sale of assets other than inventory . . . . .	5a	
	b	Less cost or other basis and sales expenses . . . . .	5b	0
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .	5c	
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000) . . . . .	6a	
	b	Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . . .	6b	0
	c	Less direct expenses from gaming and fundraising events . . . . .	6c	0
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
	7a	Gross sales of inventory, less returns and allowances . . . . .	7a	
	b	Less cost of goods sold . . . . .	7b	0
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	7c	
	8	Other revenue (describe in Schedule O) . . . . .	8	
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 . . . . .	9	64,177
Expenses	10	Grants and similar amounts paid (list in Schedule O) . . . . .	10	9,820
	11	Benefits paid to or for members . . . . .	11	
	12	Salaries, other compensation, and employee benefits . . . . .	12	
	13	Professional fees and other payments to independent contractors . . . . .	13	
	14	Occupancy, rent, utilities, and maintenance . . . . .	14	
	15	Printing, publications, postage, and shipping . . . . .	15	128
	16	Other expenses (describe in Schedule O) . . . . .	16	62,154
	17	Total expenses. Add lines 10 through 16 . . . . .	17	72,102
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	18	-7,925
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . .	19	19,856
	20	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	20	393
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 . . . . .	21	12,324

Part II

Balance Sheets

(see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year	
22 Cash, savings, and investments	27,294	22	14,810
23 Land and buildings		23	
24 Other assets (describe in Schedule O)	1,328	24	727
25 Total assets	28,622	25	15,537
26 Total liabilities (describe in Schedule O)	8,766	26	3,213
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	19,856	27	12,324

Part III

Statement of Program Service Accomplishments

(see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose?  
The Object of Rotary is to encourage and foster the ideal of service as a basis of worthy enterprise and, in particular, to encourage and foster First The development of acquaintance as an opportunity for service Second High ethical standards in business and professions, the recognition of the worthiness of all useful occupations, and the dignifying by each Rotarian's occupation as an opportunity to serve society Third The application of the ideal of service in each Rotarian's personal, business, and community life Fourth The advancement of international understanding, goodwill, and peace through a world fellowship of business and professional persons united in the ideal of service

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28 Fellowship opportunities (weekly and periodic social gatherings)allow members to become acquainted, listen to weekly speakers who are community or charitable leaders, and enables members to support each other in pursuing charitable projects These expenses benefit the roughly 90 members of the Club (Grants \$ 53,784) If this amount includes foreign grants, check here

28a

29 Seminars and conventions - by attending seminars and conventions sponsored by Rotary International and the Club's District, the members gain invaluable leadership skills, knowledge about the world community, and how to utilize available resources to accomplish the charitable and humanitarian objectives of Rotary (i e , service) This year's expense covers three district meetings and the Rotary International convention (Grants \$ 4,727) If this amount includes foreign grants, check here

29a

30 Per Capita Dues paid to Rotary International and the Club's District chapter provide access and support to all of the resources provided at the international and district level As a Rotary Club, these per capita expenses are required (Grants \$ 9,820) If this amount includes foreign grants, check here

30a

31 Other program services (describe in Schedule O ) (Grants \$ ) If this amount includes foreign grants, check here

31a

32 Total program service expenses (add lines 28a through 31a)

32

68,331

Part IV

List of Officers, Directors, Trustees, and Key Employees

(list each one even if not compensated — see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c)Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Pat Kemmer President	12 00	0		
Julie Colley Director	1 00	0		
Scott Hrabcak Vice President	1 00	0		
Joe Morbitzer Director	1 00	0		
Diane Conley President-Elect	5 00	0		
Jim Erwin Director	1 00	0		
Mark Welling Director	1 00	0		
Mark Morgan Director	1 00	0		
Ruth Stenberg Secretary	3 00	0		
Roy Lawson Sergeant-at-Arm	2 00	0		
Rich Mannino Treasurer	5 00	0		

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Part VOther Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V ) 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 significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O . . . . .	33	No
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	No
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? . . . . .	35a	No
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O . . . . .	35b	No
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III . . . . .	35c	No
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .	36	No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶	37a	
b	Did the organization file Form 1120-POL for this year? . . . . .	37b	No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? . . . . .	38a	No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .	38b	
39	Section 501(c)(7) organizations Enter . . . . .		
a	Initiation fees and capital contributions included on line 9 . . . . .	39a	0
b	Gross receipts, included on line 9, for public use of club facilities . . . . .	39b	0
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶, section 4912 ▶, section 4955 ▶ . . . . .		
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958 excess benefit transaction during the 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? If "Yes," complete Schedule L, Part I . . . . .	40b	No
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ . . . . .		
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization . . . . .		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T . . . . .	40e	No
41	List the states with which a copy of this return is filed ▶ OH . . . . .		
42a	The organization's books are in care of ▶ Rich Mannino Telephone no ▶ (614) 568-7777 . . . . .		
	Located at ▶ PO Box 1200 Westerville, OH ZIP + 4 ▶ 430861200 . . . . .		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	42b	No
	If "Yes," enter the name of the foreign country ▶ . . . . .		
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) . . . . .		
c	At any time during the calendar year, did the organization maintain an office outside the U S ? . . . . .	42c	No
	If "Yes," enter the name of the foreign country ▶ . . . . .		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here . . . . . and enter the amount of tax-exempt interest received or accrued during the tax year . . . . .	43	
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	44a	No
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	44b	No
c	Did the organization receive any payments for indoor tanning services during the year? . . . . .	44c	No
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .	44d	No
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .	45a	No
45b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions) . . . . .	45b	No

		Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . .		No

Part VI

Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI ☐

		Yes	No
47	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 . . . . .		
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . .		
49a	Did the organization make any transfers to an exempt non-charitable related organization? . . . . .		
49b	If "Yes," was the related organization a section 527 organization? . . . . .		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "				
(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f	Total number of other employees paid over \$100,000 . . . . .	
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51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "		
(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d	Total number of other independent contractors each receiving over \$100,000. . . . .	
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52	Did the organization complete Schedule A? <b>NOTE.</b> All Section 501(c)(3) organizations must attach a completed Schedule A . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	***** Signature of officer		2016-05-16 Date		
	Diane Conley President Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶			Firm's EIN ▶	
	Firm's address ▶			Phone no	

May the IRS discuss this return with the preparer shown above? See instructions . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**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.**

**▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at  
[www.irs.gov/form990](http://www.irs.gov/form990).**

**2014**

**Open to Public  
Inspection**

Name of the organization  
Rotary International - Westerville  
Sunrise Rotary Club

**Employer identification number**

31-1426601

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Grants and Similar Amounts Paid In Excess of \$5,000 2	
Other Expenses 1	Weekly Meals \$33458
Other Expenses 2	Holiday Party Banquet \$6150
Other Expenses 3	20th Anniversary Banquet \$5328
Other Expenses 4	Meetings & Conferences \$4727
Other Expenses 5	Installation Banquet \$4024
Other Expenses 6	Installation Banquet Exp/Award \$3523
Other Expenses 7	Administrative Expenses \$2188
Other Expenses 8	Public Relations \$1455
Other Expenses 9	Rotary Information / Supplies \$860
Other Expenses 10	Weekly Meeting Expenses \$256
Other Expenses 11	Family of Rotary \$185
Other Assets 1005	Accounts Receivable - Beginning \$1060 Accounts Receivable - Ending \$727
Other Assets 1	Prepaid taxes - Beginning \$268 Prepaid taxes - Ending \$0
Total Liabilities 1001	Accounts Payable and Accrued Expenses - Beginning \$8766 Accounts Payable and Accrued Expenses - Ending \$3213