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DLN: 93492194003325

OMB No 1545-1150

Form 990-EZ

Department of the Treasury

**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  $\underline{www.irs.gov/form990}$ .

Open to Public

Intern	al Reven	nue Service							Inspection
	or the	e 2014 calendar	 year, or tax year beginning 07-01-2014 , and ending 06-30	-201	5				
			C Name of organization				D Employ	er id	entification number
		change	Rotary Club of Batavia				36-6208	8137	
	lame c		Number and street (or P O box, if mail is not delivered to street address) Room/- PO Box 111	suite			<b>E</b> Telephoi		mber
	nıtıal re	eturn	PO DOX 111						
	inal n/term	unated	City or town, state or province, country, and ZIP or foreign postal code				<b>F</b> Group Ex	xempt	tion
$\Box$	mende	ed return	Batavia, IL 60510				Number		
1	Applicati	ion pending							
			<del>.</del> <b>.</b>	н	Ch	eck 🛌	┌ ıf the	orga	nization is <b>not</b>
G A	ccoun	iting Method <b>I</b> '	Cash Accrual Other (specify) ►				to attach: 90,990-E		
ΙW	ebsite	e: 🟲		İ	(		-,	_,	,
J Ta	x-exem	npt status(check on	oly one) -						
K F	orm of	forganization	Corporation Trust Association Other						
LA	dd line	es 5b, 6c, and 7	b to line 9 to determine gross receipts If gross receipts are \$200,0	00 or	mor	e, or ı	f total ass	ets (	Part II, column
		· · · · · · · · · · · · · · · · · · ·	or more, file Form 990 instead of Form 990-EZ				<b>►</b> \$ 13		
P	art I		Expenses, and Changes in Net Assets or Fund Baland organization used Schedule O to respond to any question in this Par	ces :	(see	the in	structions	for F	Part I)
	1		gifts, grants, and similar amounts received					1	
	2		ce revenue including government fees and contracts					2	
	3	_	ues and assessments					3	26,404
	-	Investment in		•	• •			4	42
	4		,	I	• •		• •	4	42
а.	5a		from sale of assets other than inventory	-				1	
Revenue	b		other basis and sales expenses					l _	
9	C		) from sale of assets other than inventory (Subtract line 5b from line 5a)					5c	
œ	6								
	а	Gross income	from gaming (attach Schedule G if greater than \$15,000)	6a					
	ь		from fundraising events (not including \$of contribution gevents reported on line 1) (attach Schedule G if the	ns					
			ross income and contributions exceeds \$15,000)	6ь			110,163		
		=	xpenses from gaming and fundraising events				69,575	1	
			(loss) from gaming and fundraising events (add lines 6a and 6b and 9	6c	act li	no 6 c		1	40,588
	d					iie oc	,	6d	40,300
	7a   .		finventory, less returns and allowances	-				1	
	b	Less cost of g	- L	7b				- I	
	C		r (loss) from sales of inventory (Subtract line 7b from line 7a)					7c	
	8		e (describe in Schedule O )					8	
	9		.Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8					9	67,034
	10		milar amounts paid (list in Schedule O)	•				10	35,286
	11		co or for members	•				11	
_	12	•	r compensation, and employee benefits	•				12	
Ş	13	Professional fe	ees and other payments to independent contractors	•				13	1,420
Expenses	14		ent, utilities, and maintenance	•				14	
Ë	15	Printing, public	cations, postage, and shipping	•				15	1,901
	16	O ther expense	es (describe in Schedule O )	•				16	28,884
	17	Total expense	s. Add lines 10 through 16				•	17	67,491
ъ_	18	Excess or (def	ficit) for the year (Subtract line 17 from line 9)					18	-457
NetAssets	19	Net assets or	fund balances at beginning of year (from line 27, column (A)) (must a	gree	with				
ٽ حر		end-of-year fig	gure reported on prior year's return)					19	44,784
ž	20	O ther changes	s in net assets or fund balances (explain in Schedule O)					20	
	21	Net assets or	fund balances at end of year Combine lines 18 through 20				•	21	44,327
For	Daner	nwork Peduction	Act Notice see the senarate instructions Cat N	. 10	642	т		Form	990-F7 (2014)

Part II Balance Sheets (see the Check of the organization us		any question in this Pa	rt II		
		(A)	Beginning of year		(R) End of year
22 Cash, savings, and investments .		(A)	44,784	22	(B) End of year 44,32
23 Land and buildings			0	$\vdash$	11,52
24 Other assets (describe in Schedule	0)		0	+	
25 Total assets			44,784	25	44,32
26 Total liabilities (describe in Schedul	eO)		0	26	ı
27 Net assets or fund balances (line 27	of column (B) <b>must</b> agree w	ith line 21)	44,784	27	44,32
Part III Statement of Program Check if the organization us	-		· —		Expenses
What is the organization's primary exemple Raising money for charitable groups	ot purpose?				(3) and 501(c)(4) anızatıons, optıonal fo
Describe the organization's program serv measured by expenses In a clear and co benefited, and other relevant information	oncise manner, describe the			oth	ers )
28 Provided grants to numerous organiza		grants shock hara	<b>.</b> –		
(Grants \$ ) If t	this amount includes foreign	grants, check here .	· · F	28a	
25					
(Grants \$ ) If t	:his amount includes foreign	grants check here	▶ ┌	20-	
30	s amount merades foreign	grants, eneck nere		29a	
(Grants \$ ) If t	:his amount includes foreign	grants, check here .	▶┌	30a	
31 Other program services (describe in S		<u></u>	· · · · · ·	304	
	this amount includes foreign	grants, check here .	▶ ┌	31a	
32 Total program service expenses (add				32	
Part IV List of Officers, Directors, T Check if the organization us					
- Check if the organization as	ca seriedare o to respond te	any question in this i a			<u> </u>
(a) Name and title	(b) A verage hours per week devoted to position	(c)Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benef contributions t employee benefit p and deferred compensation	o olans,	(e) Estimated amour of other compensatio
Lauren Egan Secretary	1 50	0	compensation	0	C
Bruce Hartmann	1 00	0		0	(
Treasurer				ŭ	
Dave Petersen President	1 00	0		0	C
		_			
Jack Barshinger Past President	1 00	0		0	C
		1	1		

	instructions for Part V ) Check if the organization used Schedule O to respond to any question in this Part	V		<u>l</u>
			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	<b>b</b> If "Yes," to line 35a, has the organization filed a <b>Form 990-T</b> for the year? If "No," provide an explanation in Schedu			
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			
ь	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 <b>or</b> 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			
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
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 sections4912, 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 🕨			
42a	The organization's books are in care of bearing Bruce Hartmann Telephone no			-2638
	Located at F 1371 Ken Peddy Ct Batavia, IL ZIP + 4	6	0510	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		Yes	No
	over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	res	No 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 <b>Form 1041</b> - Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. •	Г
			Yes	No
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
	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an	770		110
u	explanation in Schedule O	44d		
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

DLN: 93492194003325

#### OMB No 1545-0047

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### **SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

◆ Section 501(c)(4) (5) or (6) organizations. Complete Part III.

Na	me of the organization			Employer iden	tification number
KOI	ary Club of Batavia			36-6208137	
Par	t I-A Complete if the or	ganization is exempt unde	section 501(	c) or is a section 527	organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect poli	tical campaign act	ivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt unde	section 501(	c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization u	nder section 4955	<b>▶</b>	\$
2	Enter the amount of any excise	e tax incurred by organization mana	gers under section	n 4955 🕨	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 47	20 for this year?		┌ Yes
4a	Was a correction made?				┌ Yes
b	If "Yes," describe in Part IV				
Par		ganization is exempt unde			1(c)(3).
1		ended by the filing organization for s			\$
2	Enter the amount of the filing o exempt function activities	organization's funds contributed to o	other organizations	s for section 527 ▶-	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	e and on Form 112	0-POL, line 17b	\$
4	Did the filing organization file <b>F</b>	Form 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments f amount of political contribution	nd employer identification number ( For each organization listed, enter t ns received that were promptly and political action committee (PAC) I	he amount paid fro directly delivered	om the filing organization's f to a separate political orga	unds Also enter the nization, such as a
	(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
		<u> </u>			<u> </u>

5 c	hedule C (Form 990 or 990-EZ) 2014					Page <b>2</b>
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	( <b>d)</b> 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Grassroots lobbying expenditures

	rt II-B Complete if the organization filed Form 5768 (election un	is exempt under section 501(c)(3) and has lader section 501(h)).	-			
For e	each "Yes" response to lines 1a through 1i below, pr	ovide in Part IV a detailed description of the lobbying	(ã	a) 	(b	)
activ	vity.		Yes	No	Amo	unt
1 a	legislation, including any attempt to influence performs the use of Volunteers?	mpt to influence foreign, national, state or local public opinion on a legislative matter or referendum,				
b C	Paid staff or management (include compensation Media advertisements?	on in expenses reported on lines 1c through 1i)?				
d	Mailings to members, legislators, or the public	7				
е	Publications, or published or broadcast statem	ents?				
f	Grants to other organizations for lobbying purp	oses?				
g	Direct contact with legislators, their staffs, gov	vernment officials, or a legislative body?				
h i	Rallies, demonstrations, seminars, conventions Other activities?	s, speeches, lectures, or any sımılar means?				
j	Total Add lines 1c through 1i		_			
2a	Did the activities in line 1 cause the organizati					
b	If "Yes," enter the amount of any tax incurred t			ļ		
C	If "Yes," enter the amount of any tax incurred b		_			
d	If the filing organization incurred a section 491					
Par	t III-A Complete if the organization 501(c)(6).	is exempt under section 501(c)(4), section	<b>501(c</b> )	)(5), o	r secti	ion
	301(0)(0).				Ye	s No
1	Were substantially all (90% or more) dues rec	eived nondeductible by members?			1	No
2	Did the organization make only in-house lobby				2 Yes	s
3	Did the organization agree to carry over lobbying	ng and political expenditures from the prior year?			3	No
Par		is exempt under section 501(c)(4), section ! OTH Part III-A, lines 1 and 2, are answered "				
1	Dues, assessments and similar amounts from	members	1			
2	Section 162(e) nondeductible lobbying and polexpenses for which the section 527(f) tax was	itical expenditures (do not include amounts of political spaid).				
а	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			
3		)(1)(A) notices of nondeductible section 162(e) dues	3			
4		exceeds the amount on line 3, what portion of the excess reasonable estimate of nondeductible lobbying and	4			
5	Taxable amount of lobbying and political expen	nditures (see instructions)	5			
Pa	art IV Supplemental Information					
	ovide the descriptions required for Part I-A, line 1 (see instructions), and Part II-B, line 1 Also, con	1 , Part I-B, line 4 , Part I-C , line 5 , Part II-A (affiliated groun nplete this part for any additional information	up list),	Part II-	A , lines	1 and
	Return Reference	Explanation				

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

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OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

**SCHEDULE G** 

**Fundraising or Gaming Activities** Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

**Supplemental Information Regarding** 

Attach to Form 990 or Form 990-EZ.

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	F Information about Schedule & (1 offin 990 of 990 EZ) and its instructions is at www.ns.go	V/101111990.	
Name of the organization		Employer iden	tification number
Rotary Club of Batavia			
		36-6208137	

Part	Fundraising Acti filers are not requi			janizatio	n answered "Yes" to	Form 990, Part IV,	line 17. Form 990-EZ
1	Indicate whether the organ	nization raised funds	through ai	ny of the f	following activities Che	eck all that apply	
а	Mail solicitations		-		Solicitation of non		
b	Internet and email sol	ıcıtatıons		f	Solicitation of gov		
c	Phone solicitations			а	Special fundraisin		
d	In-person solicitations	5		9	,	<b>y</b>	
_	, In person somercucion.	-					
	Did the organization have or or key employees listed in						Г Yes Г No
	If "Yes," list the ten highe to be compensated at leas			fundraıseı	rs) pursuant to agreeme	ents under which the fu	ndraiser is
•	) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
1			Yes	No			
2							
3							
4							
5							
6							
7							
8							
9							
10							
otal				<b>.</b>			
	List all states in which the registration or licensing	organization is regis	tered or li	censed to	solicit contributions o	r has been notified it is	exempt from

Pa	rt II	Fundraising Events. Components with gross receipts gi	aising event contribu	ion answered "Yes" to tions and gross income	Form 990, Part IV, li e on Form 990-EZ, lir	ne 18, or reported nes 1 and 6b. List
		<u> </u>	(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
dı			(event type)	(event type)	(total number)	
Ě	1	Gross receipts				
Revenue	2	Less Contributions				
_	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
ဟ	5	Noncash prizes				
Expenses	6	Rent/facility costs				
ă	7	Food and beverages .				
Direct	8	Entertainment				
ā	9	Other direct expenses .				
	10	Direct expense summary Add line	<del>-</del>			( )
	11	Net income summary Subtract lin				
Par	t II	<b>Gaming.</b> Complete if the org \$15,000 on Form 990-EZ, lin		"Yes" to Form 990, Pa	irt IV, line 19, or rep	orted more than
Revenue			(a) Bıngo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
~	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
Direct E	4	Rent/facility costs				
ă	5	Other direct expenses				
	6	Volunteer labor	│ Yes %	┌ Yes %	☐ Yes %	
	7	Direct expense summary Add lines	2 through 5 in column	(d)		
	8	Net gaming income summary Subtr	ract line 7 from line 1, c	olumn (d)		
9	Ent	er the state(s) in which the organiza	tion conducts gaming a	ctivities		
а		the organization licensed to conduct				Fyes Fno
b	If"	No," explain				
10a b		re any of the organization's gaming li Yes," explain	icenses revoked, suspe	nded or terminated during	the tax year?	

Sche	edule G (Form 990 or 990-EZ) 2014				Page <b>3</b>				
11	Does the organization conduct gaming	activities with nonn	members?	T <sub>Yes</sub> [					
12	Is the organization a grantor, beneficia	ry or trustee of a tru	ust or a member of a partnership or other entity						
	formed to administer charitable gaming	,,		Г <sub>Yes</sub> Г	— No				
13	Indicate the percentage of gaming acti		1 1	,					
а	The organization's facility		13a		%				
b	An outside facility				%				
14	Enter the name and address of the pers	on who prepares th	ne organization's gaming/special events books and records						
	Name <b>▶</b>								
	Address ►								
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming						
154				┌ Yes 「	– <sub>No</sub>				
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by	•	the organization <b>&gt;</b> \$ and the						
c	If "Yes," enter name and address of the	e third party							
	Name ▶								
	Address 🏲								
16	Gaming manager information								
	Name 🟲								
	Gaming manager compensation 🕨 \$		······						
	Description of services provided								
	Director/officer	<del>_</del> Employee	☐ Independent contractor						
17	Mandatory distributions								
а	Is the organization required under state	Is the organization required under state law to make charitable distributions from the gaming proceeds to							
	retain the state gaming license?								
b	Enter the amount of distributions requi	Enter the amount of distributions required under state law distributed to other exempt organizations or spent							
	ın the organization's own exempt activi		·						
Pa			explanations required by Part I, line 2b, columns (iii) 17b, as applicable. Also provide any additional inforr						
	Return Reference		Explanation						

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**SCHEDULE 0** 

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93492194003325

OMB No 1545-0047

2014

Open to Public Inspection

## 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.

Name of the organization
Rotary Club of Batavia

Employer identification number
36-6208137

#### 990 Schedule O, Supplemental Information

Return Reference	Explanation
List of grants and similar amounts paid Part I line 10	
Description of other expenses Part I line 16	Description AmountContracting Services 449Dues 4,719Bank Fees 2,342Fees 68Meetings Conferences 21,306