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DLN: 93492245004165

OMB No 1545-1150

2014

Open to Public Inspection

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.

		e 2014 calendar year, or tax year beginning 07-01-2014 , and ending 06-30-2015				
B Check if applicable		DOTARY OVER OF RATES THE	D Employer identification number			
Address change Name change Initial return		change	58-1743740			
		transport and street (of 1 o box) if that is not delivered to street address/ittomit/state	E Telephone number			
┢╏		turn 10 box 713	(7	706) 226	5-1489	
	ınaı n/term	inated City or town, state or province, country, and ZIP or foreign postal code	F Group Exemption			
\Box	mende	d return DALTON, GA 307220713	Number			
Γ_{A}	pplicati	on pending				
						
GΑ	ccoun	ting Method	attach S	chedu	le B	
ΙW	ebsite	: ► N/A	. , , , , , , , , , , , , , , , , , , ,	., 01 55	0 11)	
J Tax	c-exem	npt status(check only one) - 501(c)(3) 501(c)(4) ◀(Insert no) 4947(a)(1) or 527				
K Fo	rm of	organization 🔽 Corporation Trust TAssociation TOther				
		es 5b, 6c, and 7b to line 9 to determine gross receipts If gross receipts are \$200,000 or more, or if to) are \$500,000 or more, file Form 990 instead of Form 990-EZ	otal asse ►\$ 15	-	t II, column	
Pa	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instruction Check if the organization used Schedule O to respond to any question in this Part I	ructions	for Par	t I) 	
	1	Contributions, gifts, grants, and similar amounts received		1		
	2	Program service revenue including government fees and contracts	Ի	2	121,879	
	3	Membership dues and assessments	· ·	3	34,552	
	_	Investment income	· •	-	5 7 ,552	
	4	1 1	F	4	57	
_	5a	Gross amount from sale of assets other than inventory				
Revenue	Ь	Less cost or other basis and sales expenses				
Š	С	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	· ·	5c		
ď	6	Gaming and fundraising events				
	а	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)				
	_	Less direct expenses from gaming and fundraising events 6c				
		Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6d		
	d _	1 1	_	oa		
	7a	Gross sales of inventory, less returns and allowances				
	Ь	Less cost of goods sold				
	С	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	156,488	
	10	Grants and similar amounts paid (list in Schedule O)		10	44,190	
	11	Benefits paid to or for members	「	11		
	12	Salaries, other compensation, and employee benefits	「	12		
in O	13	Professional fees and other payments to independent contractors	 	13		
ž	14	Occupancy, rent, utilities, and maintenance	Ի	14		
Expenses	15	Printing, publications, postage, and shipping	⊢	15		
	16	Other expenses (describe in Schedule O)	⊢	16	108,447	
			_			
	17	Total expenses. Add lines 10 through 16		17	152,637	
e E	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	· •	18	3,851	
ا ای اس	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with				
etAssets		end-of-year figure reported on prior year's return)	· •	19	64,097	
Ne	20	Other changes in net assets or fund balances (explain in Schedule O)	L	20	15,213	
	21	Net assets or fund balances at end of year Combine lines 18 through 20	. 🟲	21	83,161	
For	Paper	work Reduction Act Notice, see the separate instructions. Cat No 10642I	F	orm 9	90-EZ (2014)	

	m 990-EZ (2014)					Page 2
Pa	Balance Sheets (see the II Check if the organization used		any question in this Pa	rt II		
			(A)	Beginning of year	<u> </u>	(B) End of year
22	Cash, savings, and investments			64,097	22	83,161
23	Land and buildings				23	
24	Other assets (describe in Schedule O				24	
	Total assets			64,097	\vdash	83,161
	Total liabilities (describe in Schedule (•			26	22.161
	Net assets or fund balances (line 27 of	r column (B) must agree w	th line 21) [64,097	27	83,161
	Check if the organization used	Schedule O to respond to		· —		Expenses equired for section 501 (3) and 501(c)(4)
WE NA REC SPC SPC	at is the organization's primary exempt EKLY MEETINGS AND CONFERENCES TIONAL AND WORLDWIDE ISSUES TO COGINITION AND SCHOLARSHIPS FO ONSORSHIP OF ROTARY INTERNATIO ONSORSHIP OF INTERNATIONAL GROUNTRIES	TO PROVIDE MEMBERS WHICH ROTARY AND I OR OUTSTANDING LOCA NAL TRACK MEET FOR	NDIVIDUAL MEMBERS AL HIGH SCHOOL STU HIGH SCHOOL TRACK	S MAY REACT DENTS (TEAMS	org	ganizations, optional for ners)
Des	scribe the organization's program servic asured by expenses In a clear and cond nefited, and other relevant information fo	ise manner, describe the				
28 I LO (PR(WH FO I	RECOGNITION AND SCHOLARSHIPS CAL NON PROFIT COMMUNITIES, SP OVIDE MEMBERS WITH PROGRAMS R ICH ROTARY MEMBERS MAY REACT, R ROTARIANS FROM OTHER COUNTR	FOR OUTSTANDING STONSORSHIP ANNUAL TEGARDING LOCAL, NATE SPONSORSHIP OF INTE	RACK MEET, WEEKLY I IONAL & WORLDWIDE RNATIONAL GROUP S	MEETINGS TO ISSUES TO		
	rants \$) If this MEAL COST FOR WEEKLY MEETINGS	s amount includes foreign	grants, check here .	► ┌	28a	90,951
		s amount includes foreign	grants, check here .	▶┌	29a	54,326
30						
<u> </u>		s amount includes foreign	grants, check here .	▶┌	30a	
	Other program services (describe in Sch ants \$)	hedule O) s amount includes foreign	grants, check here .	▶┌	31a	
32	Total program service expenses (add line	es 28a through 31a) .		•	32	+
Pa	List of Officers, Directors, Trus Check if the organization used					
	(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	its, :o olans,	(e) Estimated amount of other compensation
	ANK HOGSHEAD C / TREAS	000 00	0	·		
	UCK DOBBINS ST PRESIDE	000 00	0			
	VID AFT ESIDENT	000 00	0			
	SON PARKER ESIDENT -	000 00	0			

	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				
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)				
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	
ь	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			
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 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				
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	
С	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 🕨 GA				
42a	The organization's books are in care of FRANK HOGSHEAD Telephone no	<u>(70</u>	6)428	-9938	
	Located at ► 1902 KINGSRIDGE DRIVE DALTON, GA ZIP + 4	3	0721		
ь	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 Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. •	· [
	<u> </u>		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	
С	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				
	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	

orm 990-EZ (2	2014)						Page 4
						Yes	No
	rganization engage, directly es for public office? If "Yes,"			• • •	L L		
	· ·		πι		46		No
	ection 501(c)(3) orga ll section 501(c)(3) orga		questions 47-49h ar	nd 52 and complete the	tables	for lir	nes 50
aı	nd 51		•			, 101 111	—
CI	heck if the organization use	d Schedule O to respond to	o any question in this P	art VI			l No
						Yes	No
	rganızatıon engage ın lobbyı complete Schedule C, Part I		ction 501(h) election in		. 47		
18 Is the org	ganızatıon a school as descr	ribed in section 170(b)(1)((A)(II)? If "Yes," comple	ete Schedule E .	. 48		
19a Did the or	rganization make any transf	ers to an exempt non-char	ritable related organizat	tion?	. 49a		
	was the related organization				49b		
	this table for the organizaties) who each received more						
(a) Name ar	nd title of each employee	(b) A verage hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099- MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred	of othe		amouni ensatior
			,	compensation			
of comper	this table for the organizations the transfer that the transfer th	n If there is none, enter "I	None "	(b) Type of service		an \$10 ompen	
	ımber of other ındependent o	_		•			
	organization complete Sche ted Schedule A	edule A? NOTE. All Section	n 501(c)(3) organizatio	ns must attach a		Г Ye:	s Γ No
'						<u> </u>	<u> </u>
	of perjury, I declare that I hav pelief, it is true, correct, and c						
I k							
ign 🏴 🛚	****** 2015-08-24 Signature of officer Date						
	FRANK HOGSHEAD SECRETARY/TE	REASURER					
<u> </u>	Type or print name and title Print/Type preparer's name	Preparer's signature	e Dati	e Chack T if PTIN			
aid	KEVIN W HARRIS	, ,		5-08-24 self-employed P003	76447		
raiu Preparer	Firm's name 🕨 KEVIN W HA	RRIS CPA LLC		Firm's EIN ► 20-4035	331		
Ise Only	Firm's address ► 331 NOB NOB	RTH DR		Phone no (706) 270-	4793		
	COHUTTA, G	A 30710					
	scues this roturn with the pr				. Tv		No

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DLN: 93492245004165

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE 0

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

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

Name of the organization **Employer identification number** ROTARY CLUB OF DALTON INC 58-1743740

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART I, LINE 10	DISTRICT SEMI ANNUAL DUES 10,788 GRSP 9,375 ROTARY INTERNATIONAL 14,964 ROTARY INTERNATIONAL DUES 9,063
FORM 990-EZ, PART I, LINE 16	MEMBERSHIP MEALS COST OF GOODS SOLD 54,326 EXPENSES ADMINISTRATIVE ASSISTANCE 3,448 ADVERT ISING 100 AWARDS 1,496 BOY SCOUTS OF AMERICA 500 BUSINESS EXPENSES 80 CLUB RUNNER 349 DIST RICT CONFERENCE 5,653 DUES & MEMBERSHIPS 210 FLAG PLACEMENT 320 GIRL SCOUTS 500 GOLF TOURN AMENT 6,106 GRSP STUDENT SUPPORT 7,384 HONORARIUMS 435 LOCAL COMMUNITY PROJECT 5,000 MISCE LLANEOUS -3,331 OFFICE SUPPLIES 769 PETS CONFERENCE 830 POSTAGE 343 PR PROJECT 143 ROTARY INTERACT 432 ROTARY R&R 2,855 ROTARY YOUNG LEADERS ASSO 1,800 SCHOLARSHIPS 13,958 STUDENT OF THE YEAR 2,000 TRACK MEET 1,041 TRAVEL 400 WORLD COMM SVC PROJ DISTR 1,300 TOTAL 108,44 7
FORM 990-EZ, PART I, LINE 20	PRIOR PERIOD ADJUSTMENT 15,213
FORM 990-EZ, PART III	WEEKLY MEETINGS AND CONFERENCES TO PROVIDE MEMBERS WITH PROGRAMS REGARDING LOCAL, NATIONAL AND WORLDWIDE ISSUES TO WHICH ROTARY AND INDIVIDUAL MEMBERS MAY REACT RECOGINITION AND S CHOLARSHIPS FOR OUTSTANDING LOCAL HIGH SCHOOL STUDENTS SPONSORSHIP OF ROTARY INTERNATIONA L TRACK MEET FOR HIGH SCHOOL TRACK TEAMS SPONSORSHIP OF INTERNATIONAL GROUP STUDY EXCHANG E FOR ROTARIANS FROM OTHER COUNTRIES
FORM 990-EZ, PART III, LINE 28	RECOGNITION AND SCHOLARSHIPS FOR OUTSTANDING STUDENTS, DONATIONS TO VARIOUS LOCAL NON PROF IT COMMUNITIES, SPONSORSHIP ANNUAL TRACK MEET, WEEKLY MEETINGS TO PROVIDE MEMBERS WITH PRO GRAMS REGARDING LOCAL, NATIONAL & WORLDWIDE ISSUES TO WHICH ROTARY MEMBERS MAY REACT, SPON SORSHIP OF INTERNATIONAL GROUP STUDY EXCHANGE FOR ROTARIANS FROM OTHER COUNTRIES
FORM 990-EZ, PART III, LINE 31	MEAL COST FOR WEEKLY MEETINGS