See a Social Security Number? Say Something!
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Form **990-EZ**

Short Form
Return of Organization Exempt From Income Tax

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

OMB No 1545-1150

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2015 calendar year, or tax year beginning 07-01-2015 , and ending 06-30-2016

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

C Name of organization
Bryan Rotary Club

Number and street (or P O box, if mail is not delivered to street address) | Room/suite
PO Box 2760

City or town, state or province, country, and ZIP or foreign postal code
Bryan, TX 778052760

D Employer identification number
36-3982007

E Telephone number
(979) 776-1851

F Group Exemption Number ▶

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.bryan-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 ▶ $ 174,549

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	
	2	Program service revenue including government fees and contracts		2	25,328
	3	Membership dues and assessments		3	88,827
	4	Investment income		4	69
	5a	Gross amount from sale of assets other than inventory	5a		
	b	Less cost or other basis and sales expenses	5b		
	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	60,325	
	c	Less direct expenses from gaming and fundraising events	6c	10,489	
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6d	49,836
	7a	Gross sales of inventory, less returns and allowances	7a		
	b	Less cost of goods sold	7b		
	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	164,060
Expenses	10	Grants and similar amounts paid (list in Schedule O)		10	49,338
	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	878
	16	Other expenses (describe in Schedule O)		16	107,444
	17	**Total expenses.** Add lines 10 through 16 ▶		17	157,660
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	6,400
	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	58,642
	20	Other changes in net assets or fund balances (explain in Schedule O)		20	0
	21	Net assets or fund balances at end of year Combine lines 18 through 20 ▶		21	65,042

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	58,642	22	65,042
23	Land and buildings		23	
24	Other assets (describe in Schedule O)		24	
25	**Total assets**	58,642	25	65,042
26	**Total liabilities** (describe in Schedule O)	0	26	0
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	58,642	27	65,042

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 ☑

Expenses (Required for section 501 (c)(3) and 501(c)(4) organizations, optional for others)

What is the organization's primary exempt purpose?
The Bryan Rotary Club is a service oriented club which raises funds for various community, national and international projects that range from providing mini-Grants of $250 each to innovative teachers in the local schools for implementation of innovative teaching concepts to providing funds to the Rotary Foundation in an effort to support the various projects carried out worldwide by the Foundation including the efforts to eradicate polio The Club recognizes and presents awards to local businesses that are among the fastest growing and most successful in the community and to adult leaders who have been chosen for their outstanding contributions Additionally, the Club provides manpower to assist with organizations such as the Salvation Army, Habitat for Humanity, the Brazos Valley Food Bank and the schools' programs to work with children in need of assistance, companionship and role models as well as others as the need arises

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 See Additional Data Table (Grants $) If this amount includes foreign grants, check here . . . ▶ ☐	**28a**		
29 (Grants $) If this amount includes foreign grants, check here . . . ▶ ☐	**29a**		
30 (Grants $) 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**	1,416	

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
Stephanie Simpson Co-Treasurer	2 00	0	0	0
Ron Hammond Co-Treasurer	2 00	0	0	0
Janie Williams Secretary	4 00	0	0	0
Steve Bledsoe Vice President	2 00	0	0	0
Joan Quintana Director	1 00	0	0	0
Cathy Hastedt President	2 00	0	0	0
Richard Van Duyne Director	1 00	0	0	0
Walter Hinkle Past President	1 00	0	0	0
Liz Dickey Director	1 00	0	0	0
Margaret Hastedt Sergeant at Arms	1 00	0	0	0
Charilie Coble Director	1 00	0	0	0
T Getterman Director	1 00	0	0	0

Part V **Other 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		
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 0			
b	Did the organization file **Form 1120-POL** for this year?	37b		
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			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
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 ▶ 0			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ 0			
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 ▶ James D Trotter Telephone no ▶ (979) 764-6633 Located at ▶ 2501 Ashford Dr College Station, TX ZIP + 4 ▶ 77840			

			Yes	No
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			

			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
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		
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		

		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	46		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	47		
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		
b	If "Yes," was the related organization a section 527 organization?	49b		

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

f Total number of other employees paid over $100,000 ▶

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

d Total number of other independent contractors each receiving over $100,000. ▶

52 Did the organization complete Schedule A? **NOTE.** All Section 501(c)(3) organizations must attach a completed Schedule A ▶ ☐ Yes ☐ No

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

****** 2016-07-26

Signature of officer Date

Catherine Hastedt President

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
James D Trotter CPA PC				P01381996
Firm's name ▶ James D Trotter CPA PC			Firm's EIN ▶ 74-2505429	
Firm's address ▶ 3308 Longmire Drive College Station, TX 77845			Phone no (979) 764-6633	

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☑ Yes ☐ No

Additional Data

Software ID:
Software Version:
EIN: 36-3982007
Name: Bryan Rotary Club

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	**Expenses (Required for 501(c)(3) and 501(c)(4) organizations and 4947(a)(1) trusts; optional for others.)**	
Funds were provided to one local public school district and two private schools for use in implementing **28** innovative teaching concepts as proposed by teachers (Grants $ 10,653) If this amount includes foreign grants, check here . . . ▶ ☐	**28a**	0
29 Funds were provided to sponsor local high school students to the annual Rotary Youth Leadership Program (Grants $ 700) If this amount includes foreign grants, check here . . . ▶ ☐	**29a**	0
Funds were provided to the Rotary Foundation for use in international projects including the efforts to **30** eradicate polio worldwide (Grants $ 14,352) If this amount includes foreign grants, check here . . . ▶ ☐	**30a**	0
The Club sponsors the 4-H Gold Star Award which is given to the year's outstanding adult leader (Grants $ 500) If this amount includes foreign grants, check here . . . ▶ ☐		0
The Club supports the efforts of the Texas Ramp Project of Bryan/College Station as they assist disabled individuals in the community by building ramps that allow them to access the entrance to their homes (Grants $ 2,000) If this amount includes foreign grants, check here . . . ▶ ☐		0
The club supports Bryan/College Station Habitat for Humanity and their efforts to provide affordable home ownership to deserving families (Grants $ 12,500) If this amount includes foreign grants, check here . . . ▶ ☐		0
The Club has initiated international projects of its own through the auspices of Rotary International and the Rotary Foundation These programs provide water wells, mosquito nets, books and other educational materials, medical supplies and needed services in various third world countries (Grants $ 0) If this amount includes foreign grants, check here . . . ▶ ☐		1,416
The Club provided funds to Health For All, a community medical clinic providing free and/or reduced cost medical services for those who would otherwise be unable to afford those services (Grants $ 2,840) If this amount includes foreign grants, check here . . . ▶ ☐		0
The Club provided funds to the National Alliance on Mental Illness to support its local programs, promoting the identification and treatment of those who need mental health services (Grants $ 2,660) If this amount includes foreign grants, check here . . . ▶ ☐		0
The Club provided funds to Project Unity, a local organization supporting and counseling local families by providing a safe harbor for those families to meet (Grants $ 2,500) If this amount includes foreign grants, check here . . . ▶ ☐		0

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TY 2015 Transfers Personal Benefits Contracts Declaration

Name: Bryan Rotary Club

EIN: 36-3982007

Declaration: The organization did not, during the year, receive any funds, directly,or indirectly, to pay premiums on a personal benefit contract.The organization, did not, during the year, pay any premiums, directly,or indirectly, on a personal benefit contract.

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
Bryan Rotary Club

Employer identification number
36-3982007

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

- **a** ☐ Mail solicitations
- **b** ☐ Internet and email solicitations
- **c** ☐ Phone solicitations
- **d** ☑ In-person solicitations
- **e** ☑ Solicitation of non-government grants
- **f** ☐ Solicitation of government grants
- **g** ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

	(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total			▶				

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II Fundraising Events.
Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 (event type)	(b) Event #2 Flags Across Bryan/Field of Valor (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts		60,325		60,325
	2 Less Contributions		0		
	3 Gross income (line 1 minus line 2)		60,325		60,325
Direct Expenses	4 Cash prizes		0		
	5 Noncash prizes		0		
	6 Rent/facility costs		0		
	7 Food and beverages		0		
	8 Entertainment		0		
	9 Other direct expenses		10,489		10,489
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				10,489
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				49,836

Part III Gaming.
Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in

a The organization's facility	**13a**	%
b An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ .....

Address ▶ .....

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____

c If "Yes," enter name and address of the third party

Name ▶ .....

Address ▶

.....

16 Gaming manager information

Name ▶ .....

Gaming manager compensation ▶ $.....

Description of services provided ▶ .....

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation

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.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization	Employer identification number
Bryan Rotary Club	36-3982007

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990-EZ, Part I, Line 4 - Other Investment Income	Description Interest Income - Prosperity Bank Amount 69
Form 990-EZ, Part I, Line 10 - Payments to Affiliates	Affiliate Name Youth Leadership Affiliate Address c/o Doris A Lockey 308 Harbor Circle Montgomery, TX 77356 Purpose of Payment Rotary Youth Leadership Awards Amount of Payment 700
Form 990-EZ, Part I, Line 10 - Payments to Affiliates	Affiliate Name International Projects Affiliate Address One Rotary Center 1560 Sherman Avenue Evanston, IL 60201 Purpose of Payment Rotary Foundation Polio Plus Amount of Payment 1,085
Form 990-EZ, Part I, Line 10 - Payments to Affiliates	Affiliate Name Rotary Foundation Annual Fund Affiliate Address One Rotary Center 1560 Sherman Avenue Evanston, IL 60201 Purpose of Payment Worldwide Rotary Projects Amount of Payment 13,268
Form 990-EZ, Part I, Line 10 - Payments to Affiliates	Affiliate Name Rotary International - Grant Services Affiliate Address One Rotary Center 1560 Sherman Avenue Evanston, IL 60201 Purpose of Payment International Projects Amount of Payment 632 Total included on Form 990-EZ, line 10 15,685
Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid	Activity Classification Mini-Grants for Local Teaching Innovation Grantee Name Bryan ISD Grantee Address 101 N Texas Bryan, TX 77801 Grantee Relationship None Property Description Cash Date of Gift 01/19/16 Amount Given 9,384
Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid	Activity Classification Adult Leadership Award Grantee Name Brazos Adult Leadership Association Grantee Address 7607 Eastmark Dr, Suite 101A College Station, TX 77840 Grantee Relationship None Property Description Cash Date of Gift 08/09/15 Amount Given 500
Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid	Activity Classification Mini-Grants for Local Teaching Innovation Grantee Name St Joseph's School Grantee Address 901 E William Joel Bryan Pkwy Bryan, TX 77803 Grantee Relationship None Property Description Cash Date of Gift 01/19/16 Amount Given 969
Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid	Activity Classification Mini-Grants for Local Teaching Innovation Grantee Name Allen Academy Grantee Address 3201 Boonville Road Bryan, TX 77802 Grantee Relationship None Property Description Cash Date of Gift 01/19/16 Amount Given 300
Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid	Activity Classification Community Health Services Grantee Name Health for All Grantee Address 3030 East 29th Street Bryan, TX 77802 Grantee Relationship None Property Description Cash Date of Gift 06/05/16 Amount Given 2,840
Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid	Activity Classification Mental Health Grantee Name National Alliance on Mental Illness Grantee Address 1713 Broadmoor East, Suite 101 Bryan, TX 77802 Grantee Relationship None Property Description Cash Date of Gift 06/05/16 Amount Given 2,660
Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid	Activity Classification Build Handicap Accessible Entries Grantee Name Texas Ramp Project B/CS Grantee Address 2331 W Briargate Bryan, TX 77802 Grantee Relationship None Property Description Cash Date of Gift 06/05/16 Amount Given 2,000
Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid	Activity Classification Affordable Housing Grantee Name Bryan-College Station Habitat for Humanity Grantee Address 119 Lake Street Bryan, TX 77801 Grantee Relationship None Property Description Cash Date of Gift 03/08/16 Amount Given 12,500
Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid	Activity Classification Family Outreach Services Grantee Name Project Unity Grantee Address 4001 E 29th Street, Ste 114 Bryan, TX 77805 Grantee Relationship None Property Description Cash Date of Gift 06/05/16 Amount Given 2,500 Total included on Form 990-EZ, line 10 33,653
Form 990-EZ, Part I, Line 16 - Other Expenses	Description Meals for Meetings Amount 58,234 Description Fellowship Events Amount 186 Description District Assembly, Conference & Mid-Year Amount 388 Description Chamber of Commerce Dues Amount 725 Description Initiation Fees Amount 504 Description Rotary District & International Dues Amount 13,224 Description Meeting Music Amount 1,430 Description President's Supplies & Registrations Amount 741 Description Secretary Fees & Supplies Amount 4,009 Description Centennial Project Expenses Amount 56 Description Group Study Exchange, Youth Exchange Sending/Receiving Amount 500 Description Global Grant Costs Amount 1,416 Description Processing & Bank Fees Amount 2,062 Description P O Box Rental Amount 136 Description Rotary 10 Awards Ceremony Amount 23,003 Description Membership Development & Orientation Amount 33 Description Website Maintenance Amount 797 Total to Form 990-EZ, line 16 107,444