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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/form990ez.

OMB No 1545-1150

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2017 calendar year, or tax year beginning 07-01-2017, and ending 06-30-2018

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

C Name of organization
ROTARY INTERNATIONAL
EDMONDS ROTARY CLUB
Number and street (or P O box, if mail is not delivered to street address) Room/suite
PO BOX 115
City or town, state or province, country, and ZIP or foreign postal code
EDMONDS, WA 98020

D Employer identification number
91-6059620
E Telephone number
(425) 771-1744
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: EDMONDSROTARY.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. \$ 186,059

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
2 Program service revenue including government fees and contracts
3 Membership dues and assessments 11,184
4 Investment income 72
5a Gross amount from sale of assets other than inventory
5b Less cost or other basis and sales expenses
5c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)
6 Gaming and fundraising events
6a Gross income from gaming (attach Schedule G if greater than \$15,000)
6b 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) 149,133
6c Less direct expenses from gaming and fundraising events 115,495
6d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 33,638
7a Gross sales of inventory, less returns and allowances
7b Less cost of goods sold
7c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)
8 Other revenue (describe in Schedule O) 25,670
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 70,564

Expenses

10 Grants and similar amounts paid (list in Schedule O) 30,076
11 Benefits paid to or for members
12 Salaries, other compensation, and employee benefits
13 Professional fees and other payments to independent contractors
14 Occupancy, rent, utilities, and maintenance
15 Printing, publications, postage, and shipping
16 Other expenses (describe in Schedule O) 48,005
17 Total expenses. Add lines 10 through 16 78,081

Net Assets

18 Excess or (deficit) for the year (Subtract line 17 from line 9) -7,517
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) 122,072
20 Other changes in net assets or fund balances (explain in Schedule O) 21,349
21 Net assets or fund balances at end of year. Combine lines 18 through 20 135,904

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form 990-EZ (2017)

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

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 . . <input checked="" type="checkbox"/>	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations, optional for others)
What is the organization's primary exempt purpose? TO PROVIDE DIRECT AND INDIRECT SUPPORT, THROUGH OTHER NON- PROFIT ORGANIZAITONS, TO OUR COMMUNITY, AND ESPECIALLY OUR YOUTH	
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	

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

Form **990-EZ** (2017)

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		
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	
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 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 ▶		
42a The organization's books are in care of ▶ EDMONDS ROTARY Telephone no ▶ (425) 215-1585 Located at ▶ PO BOX 115 EDMONDS, WA ZIP + 4 ▶ 98020		
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 <input type="checkbox"/> 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	
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	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	
49b	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	***** Signature of officer		2018-11-01 Date	
	DAVID KAUFER, PRESIDENT, ELECT & PR Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name BRENT W HAGEN	Preparer's signature	Date 2018-11-02	Check <input type="checkbox"/> if self-employed PTIN P00199208
	Firm's name ► THE HAGEN FIRM PLLC			Firm's EIN ► 91-1942431
	Firm's address ► 110 THIRD AVENUE NORTH SUITE 201 EDMONDS, WA 98020			Phone no. (425) 771-5556

May the IRS discuss this return with the preparer shown above? See instructions ► ☒ **Yes** ☐ **No**

Additional Data

Software ID:
Software Version:
EIN: 91-6059620
Name: ROTARY INTERNATIONAL
EDMONDS ROTARY CLUB

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

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.		Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)
28 COMMUNITY SERVICES THE EDMONDS ROTARY CLUB PROVIDES ADDITIONAL FUNDS TO OTHER COMMUNITY SERVICE AND NON-PROFIT PROGRAMS THAT FURTHER OUR MISSION OF "SERVICE ABOVE SELF" IN OUR COMMUNITY AND OUR COUNTRY (Grants \$ 7,215)	28a	14,966
If this amount includes foreign grants, check here . . . <input type="checkbox"/>		

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

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.	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)	
<p>29</p> <p>SCHOLARSHIPS THE EDMONDS ROTARY CLUB PROVIDES ANNUAL COLLEGE SCHOLARSHIP FUNDS TO OUR LOCAL HIGH SCHOOL YOUTH WHO DEMONSTRATE THROUGH THEIR SCHOOL AND COMMUNITY ACTIVITIES THE ROTARY MISSION OF SERVICE ABOVE SELF WE FUND AN ENDOWED SCHOLARSHIP FUND AT THE LOCAL COMMUNITY COLLEGE AND WE FUND SCHOLARSHIPS FOR YOUTH TO ATTEND THE ROTARY YOUTH LEADERSHIP EXCHANGE AND OTHER RELEVANT CONFERENCES</p> <p>(Grants \$ 12,247)</p> <p>If this amount includes foreign grants, check here . . . <input type="checkbox"/></p>	29a	13,262

Form 990EZ, Part III - Statement of Program Service Accomplishments	
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.	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)
<div><div>30</div><div>PAUL HARRIS FOUNDATION THE EDMONDS ROTARY CLUB PROVIDES A MATCHING CONTRIBUTION TO EACH MEMBERS' CONTRIBUTION TO ROTARY INTERNATIONAL'S PAUL HARRIS FOUNDATION THIS FOUNDATION PROVIDES DIRECT TOTAL OR MATCHING FUNDS TO HUMANITARIAN CAUSES BOTH DOMESTICALLY AND THROUGHOUT THE WORLD</div><div>(Grants \$ 666)</div><div>If this amount includes foreign grants, check here . . . <input type="checkbox"/></div></div>	<div><div>30a</div><div>666</div></div>

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

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.	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)	
<p>VOCATIONAL SERVICE THE EDMONDS ROTARY CLUB SUPPORTS THE PROMOTION OF VOCATIONAL SERVICE PROJECTS THAT ENHANCE THE COMMUNITY AND THE EDUCATION OF YOUNG ADULTS IN RELATION TO VARIOUS VOCATIONAL OPPORTUNITIES INTERNATIONAL SERVICE THE EDMONDS ROTARY CLUB PARTICIPATES WITH OTHER ROTARY CLUBS AND SERVICE ORGANIZATIONS TO SUPPORT INTERNATIONAL DISASTER RELIEF PROGRAMS AND OTHER SERVICES TO DEVELOPING AND NEEDY NATIONS</p> <p>(Grants \$ 2,300)</p> <p>If this amount includes foreign grants, check here . . . <input type="checkbox"/></p>		9,948

Form 990EZ, 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
DOUG LOFSTROM PAST-PRESIDE	2 00	0		
ROBERT JORGENSEN MEMBERSHIP C	2 00	0		
SCOTT JAMES PRESIDENT	10 00	0		
VALERIE CLAYPOOL VICE PRESIDE	2 00	0		
RANDY HUTCHINS COMMUNITY SE	2 00	0		
RICHARD OKIMOTO YOUTH SVC C	3 00	0		
DAVID KAUFER PRESIDENT EL	3 00	0		
LIBBY FREESE TREASURER	4 00	0		
LINDA MCCULLOUGH CO-SECRETARY	2 00	0		
KATHY PREWITT COI-SECRETAR	2 00	0		
PAT SHIELDS CLUB ADMIN/S	3 00	0		
EMOKE ROCK CLUB ADMINIS	2 00	0		
MICHAEL KEALY VOCATIONAL C	2 00	0		
LAMIN MANNEH FOUND /INT'L	2 00	0		

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

2017

Open to Public Inspection

Name of the organization
ROTARY INTERNATIONAL
EDMONDS ROTARY CLUB

Employer identification number
91-6059620

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

e ☐ Solicitation of non-government grants

b ☐ Internet and email solicitations

f ☐ Solicitation of government grants

c ☐ Phone solicitations

g ☐ Special fundraising events

d ☐ In-person solicitations
- 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?		(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
		Yes	No			
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	(b) Event #2	(c) Other events	(d)
		WATERFRONT FEST (event type)	ART FESTIVAL GR (event type)	(total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts	138,486	9,083		147,569
	2 Less Contributions				
	3 Gross income (line 1 minus line 2)	138,486	9,083		147,569
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	43,558			43,558
	7 Food and beverages	9,642			9,642
	8 Entertainment	24,068			24,068
	9 Other direct expenses	30,700	5,814		36,514
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				113,782
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				33,787

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				
	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> 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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
13 Indicate the percentage of gaming activity conducted in					
a The organization's facility	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 100px; text-align: center;">13a</td><td style="width: 100px; text-align: center;">%</td></tr><tr><td style="text-align: center;">13b</td><td style="text-align: center;">%</td></tr></table>	13a	%	13b	%
13a	%				
13b	%				
b An outside facility					
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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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 ►					
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> 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?					
<input type="checkbox"/> Yes <input type="checkbox"/> 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 provide any additional information (see instructions).

Return Reference	Explanation
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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization
ROTARY INTERNATIONAL
EDMONDS ROTARY CLUB

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

2017

**Open to Public
Inspection**

Employer identification number

91-6059620

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART I, LINE 8	LUNCHES 25,670 TOTAL 25,670

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990- EZ, PART I, LINE 10	ROTARY INTERNAT'L INTERNATIONAL DUES 5,216 ONE ROTARY CENTER 1560 SHERMAN AVE EVANSTON IL 60201 ROTARY DISTRICT 5030 DISTRICT DUES 2,432 7834 SE 32ND ST SUITE 201 MERCER ISLAND W A 98040

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990- EZ, PART I, LINE 10	CLASS OF ACTIVITY SCHOLARSHIPS CASH CONTRIBUTION 12,247 RELATIONSHIP NONE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART I, LINE 16	EXPENSES ADVERTISING/PROMOTION 2,749 POSTAGE 209 STORAGE RENT 1,648 COMPUTER EXPENSES 440 DISTRICT CONFERENCES 998 DEMOTION PARTY 1,795 CLUB RETREAT 1,346 RYLA/WORLD AFFAIRS 325 WORLD AFFAIRS SEMINAR 690 BANK FEES 588 BUSINESS PERMITS 28 COMMUNITY MEMBERSHIP DUES 236 GENERAL SUPPLIES 1,020 LUNCH COSTS 30,762 PROGRAM SUPPLIES 125 STUDENT OF THE MONTH GIFT 341 TRINITY PLACE SUPPLIES 4,705 TOTAL 48,005

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990- EZ, PART I, LINE 20	TRANSFER FROM EDMONDS ROTARY FOUND 21,349

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990- EZ, PART II, LINE 24	DUE FROM EDMONDS ROTARY FOUNDATION 275 4,875 TOTAL 275 4,875

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990- EZ, PART II, LINE 26	DUE TO RI FOUNDATION 399 0

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990- EZ, PART III	TO PROVIDE DIRECT AND INDIRECT SUPPORT, THROUGH OTHER NON- PROFIT ORGANIZAITONS, TO OUR COMMUNITY, AND ESPECIALLY OUR YOUTH

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990- EZ, PART III, LINE 28	COMMUNITY SERVICES THE EDMONDS ROTARY CLUB PROVIDES ADDITIONAL FUNDS TO OTHER COMMUNITY S ERVICE AND NON-PROFIT PROGRAMS THAT FURTHER OUR MISSION OF "SERVICE ABOVE SELF" IN OUR COM MUNITY AND OUR COUNTRY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART III, LINE 29	SCHOLARSHIPS THE EDMONDS ROTARY CLUB PROVIDES ANNUAL COLLEGE SCHOLARSHIP FUNDS TO OUR LOCAL HIGH SCHOOL YOUTH WHO DEMONSTRATE THROUGH THEIR SCHOOL AND COMMUNITY ACTIVITIES THE ROTARY MISSION OF SERVICE ABOVE SELF WE FUND AN ENDOWED SCHOLARSHIP FUND AT THE LOCAL COMMUNITY COLLEGE AND WE FUND SCHOLARSHIPS FOR YOUTH TO ATTEND THE ROTARY YOUTH LEADERSHIP EXCHANGE AND OTHER RELEVANT CONFERENCES

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990- EZ, PART III, LINE 30	PAUL HARRIS FOUNDATION THE EDMONDS ROTARY CLUB PROVIDES A MATCHING CONTRIBUTION TO EACH M EMBERS' CONTRIBUTION TO ROTARY INTERNATIONAL'S PAUL HARRIS FOUNDATION THIS FOUNDATION PRO VIDES DIRECT TOTAL OR MATCHING FUNDS TO HUMANITARIAN CAUSES BOTH DOMESTICALLY AND THROUGHOUT THE WORLD

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART III, LINE 31	VOCATIONAL SERVICE THE EDMONDS ROTARY CLUB SUPPORTS THE PROMOTION OF VOCATIONAL SERVICE PROJECTS THAT ENHANCE THE COMMUNITY AND THE EDUCATION OF YOUNG ADULTS IN RELATION TO VARIOUS VOCATIONAL OPPORTUNITIES INTERNATIONAL SERVICE THE EDMONDS ROTARY CLUB PARTICIPATES WITH OTHER ROTARY CLUBS AND SERVICE ORGANIZATIONS TO SUPPORT INTERNATIONAL DISASTER RELIEF PROGRAMS AND OTHER SERVICES TO DEVELOPING AND NEEDY NATIONS