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Form 990-EZ

Short Form QQQ Return of Organization Exempt From Income Tax

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

OMB No 1545-1150 **2018**

pento Public Inscedion

Department of the Treasury Internal Revenue Service

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

▶Go to www.irs.gov/Form990EZ for instructions and the latest information.

B Check if applicable Address change Address change Name change Institute Term Page 1 (Controlled to Street address) Room/suite P.O. Box 1183 Room
Name change Intail return Final return/terminated Amended return Application pending Midland Morning Midland
Initial return Number and street (or P O box, if mail is not delivered to street address) Room/suite E Telephone number 989-839-5374
Final return/terminated Annehold return Application pending
Amended return Application pending Midland MT 48641−1183
Application pending Midland MI 48641-1183 Number ▶ G Accounting Method ∑ Cash Accrual Other (specify) ▶ H Check ▶ ∑ if the organization is required to attach Schedule B (Form 990, 990-EZ, or 990-PF) 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)) are \$500,000 or more, file Form 990 instead of Form 990-EZ 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 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 6 Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than \$15,000) 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) 6 B Tax 8864 The Check I X if the organization is required to attach Schedule B (Form 990, 990-EZ, or 990-PF) H Check I X if the organization is required to attach Schedule B (Form 990, 990-EZ, or 990-PF) Form of organization (Post of the Schedule G if the sum of such gross income and contributions exceeds \$15,000)
G Accounting Method X Cash Accrual Other (specify) Website: N/A
Website: N/A
Tax-exempt status (check only one) — 501(c)(3) X 501(c)(4) 4 (insert no) 4947(a)(1) or 527 (Form 990, 990-EZ, or 990-PF) K Form of organization X 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)) are \$500,000 or more, file Form 990 instead of Form 990-EZ 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 1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory 5b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 6 Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than \$15,000) 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) 6 By Tax (Form 990, 990-EZ (P)
K Form of organization
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sum of such gross income and contributions exceeds \$15,000)
d. Not specime or (local) from gamens and fundacional events (add local for and 5h and cultural
line 6c) 7a Gross sales of inventory less returns and allowances
7a Gross sales of inventory, less returns and allowances
b Less cost of goods sold 7b
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)
b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c 8 Other revenue (describe in Schedule O) 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 41, 45
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 4 1 , 4 9
10 Grants and similar amounts paid (list in Schedule O)
11 Benefits paid to or for members 11
12 Salaries, other compensation, and employee benefits RECEIVED 13 Professional fees and other payments to independent contractors.
2 13 Professional fees and other payments to independent contractors 13
6 44 Occupancy rent utilities and maintenance
10 1 mining, publications, postage, and shipping
16 Other expenses (describe in Schedule O)
17 Total expenses. Add lines 10 through 16 OGDEN, UT 17 25, 40
18 Excess or (deficit) for the year (Subtract line 17 from line 9)
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 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) 20 Other changes in net assets or fund balances (explain in Schedule O) 21 161 31
21 Net assets or fund balances at end of year Combine lines 18 through 20

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2018)



Form 990-EZ (2018) Rotary Club of Midl	Land, Morr	ing 38-2	818076		Paye
Part II Balance Sheets (see the instructions for					
Check if the organization used Schedule	O to respond to a	any question in this	Part II		X
		(A) E	Beginning of year	_	(B) End of year
22 Cash, savings, and investments			143,44		163,61
23 Land and buildings		 -		0 23	
24 Other assets (describe in Schedule O) 25 Total assets			143,44	0 24	162 613
26 Total liabilities (describe in Schedule O)					163,613
27 Net assets or fund balances (line 27 of column (B) must	t agree with line 21	,	143,44	* 	2,300 161,31
Partill Statement of Program Service Acce				9 21	101,31.
Check if the organization used Schedule				וו	Expenses
What is the organization's primary exempt purpose?	- 10 100p 0110 10 1	any queener in this	<u> </u>	7	equired for section
See Schedule O				1 '	1(c)(3) and 501(c)(4)
Describe the organization's program service accomplishments	for each of its thre	e largest program ser	vices,	' 	ganizations, optional for
as measured by expenses. In a clear and concise manner, des	scribe the services	provided, the number	of	1	ners)
persons benefited, and other relevant information for each pro-	gram title				
28 to foster Rotary programs					
			بمدم	,	
(Grants\$) If this amount include	es foreign grants, c	heck here	•	28a	25,406
29					
(Cronto C					
(Grants\$) If this amount include	es toreign grants, c	neck nere		29a	
				1	
				1	
(Grants\$) If this amount include	es foreign grants c	heck here	▶ [7]	30a	
31 Other program services (describe in Schedule O)				1 222	
(Grants\$) If this amount include	es foreign grants, c	heck here	▶ □	31a	
32 Total program service expenses (add lines 28a through)	31a)		>	32	25,406
List of Officers, Directors, Trustees, and Ker Check if the organization used Schedule O to re	y Employees (list	each one even if not c	ompensated —	see the	instructions for Part
Check if the organization used Schedule O to h	(b) Average	(c) Reportable	(d) Health be	enefits	<u> </u>
(a) Name and title	hours per week	compensation (Forms W-2/1099-MISC	contributions to benefit plan	employe	e (e) Estimated amount of other compensation
	devoted to position	(if not paid, enter -0-)	deferred comp	ensation	other compensation
Megan Yezak		İ			
President - elect	0.00		0) <u> </u>
Kyle Boxey				_	
Secretary Jennifer Feuerstein	0.00		0	C) O
Treasurer	0.00		o	_	
Victor Atiemo-Obeng	0.00		 	<u> </u>	0
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Form **990-EZ** (2018)

Form 990-EZ See instructions

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46	Did the	e organi	zation engar	ae, directiv or	indirectly in	politic	al campaign ac	tivities o	on behalf of or	in oppo	sition				Yes	No
		_			complete Sch	•	, •		Seriali di Ol	oppo	GILIOIT			46		X
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				ganization ι	ised Schedu	ıle O	to respond to	any qu	estion in thi	s Part V	/1		_			
47						have a	a section 501(h)	electio	n in effect dur	ing the t	ax				Yes	No
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b					section 527 o			eu orga	mzauon					49a	<u> </u>	
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				of each emplo			(b) Average hours per week devoted to position	T (c) Reportable	(contr	i) Heal	th benefits, s to employ plans, and ompensatio	ee (e	e) Estimate other com		
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51	Compl \$100.0	ete this t	table for the	organization	s five highest	comp	ensated indepe none, enter "N	endent o	contractors wh	no each r	receive	ed more th	an			
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	_	(a) Name	and busines	s address of e	ach independer	nt cont	ractor		(b)	Type of s	ervice			(c) Comper	nsation	
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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

2018

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Rotary Club of Midland, Morning

38-2818076

Employer identification number

Form 990-EZ, Part I, Line	8 - Other	Revenue	
Description		Amount	
River Days		\$ 1,145	
Happy Dollars		\$ 675	
Contributions		\$ 667	
50/50 drawings		\$ 336	
Meals		\$ 76	
	Total	\$ 2,899	

Form 990-EZ, Part I, Line 16 - Other Expenses

Description		Am	ount
Expenses			
Post Office Box		\$	99
Meetings & conferences		\$	13,923
Misc		\$	523
Youth Exchange		\$	900
Grants Committee		\$	3,315
Badges, Pins, & Banners		\$	49
District & international		\$	5,361
Rotary Foundation		\$	618
Bank Charges		\$	279
Tridge Walk Supplies		\$	339
	Total	\$	25,406

Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balance:

Name of the organization

Description

Deferred Revenue

2,300

Beg. of Year End of Year

0 \$

Rotary Club of Midland, Morning	3	8-2818076	
Description	Ī	Amount	
Unrealized loss on investments	\$	-4 0	
Prior Period Adjustments	\$	1,809	
Form 990-EZ, Part II, Line 26 - Other Liabilities			

Form 990-EZ, Part III - Primary Exempt Purpose

To foster the advancement of goodwill & peace through fellowship and community service.