2949306018706

2018

Form **990** (2018)

Form

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

► Go to www.irs.gov/Form990 for instructions and the latest information For the 2018 calendar year, or tax year beginning 07/01/18, and ending 06/30/19 D Employer identification number C Name of organization Check if applicable ROTARY CLUB OF SALT LAKE CITY Address change 87-0172865 Doing business as Name change Room/suite Number and street (or P O box if mail is not delivered to street address) F. Telephone number 801-363-8415 10 WEST 100 SOUTH, SUITE 400 Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/ terminated SALT LAKE CITY UT 84101 343,421 G Gross receipts \$ Amended return Name and address of principal officer H(a) Is this a group return for subordinates? Application pending MICHAEL CRIDDLE 10 WEST 100 SOUTH, SUITE 400 H(b) Are all subordinates included? If "No " attach a list (see instructions) SALT LAKE CITY UT 84101 501(c)(3) **X** 501(c) (Tax-exempt status WWW.SLCROTARY.ORG H(c) Group exemption number Website > Year of formation 1911 Form of organization X Corporation Trust Association M State of legal domicile Summary Part I 1 Briefly describe the organization's mission or most significant activities AS AN AFFILIATE OF ROTARY INTERNATIONAL, WE PROVIDE VARIOUS SERVICES TO OUR Activities & Governance COMMUNITY, TO INTERNATIONAL PROJECTS, AS WELL AS DISTRICT PROJECTS. 2 Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets 12 3 Number of voting members of the governing body (Part VI, line 1a) 12 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 1 5 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 0 6 6 Total number of volunteers (estimate if necessary) 7a 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 b Net unrelated business taxable income from Form 990-T, line 38 7b **Current Year** Prior Year 124,157 134,842 8 Contributions and grants (Part VIII, line 1h) Revenue 218,839 202,658 9 Program service revenue (Part VIII, line 2g) 1,402 442 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 31,942 4,519 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 375,380 343,421 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 79,771 53,885 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 33,718 33,418 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 237,884 232,996 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 325,187 346,485 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 28,895 18,234 19 Revenue less expenses Subtract line 18 from line 12 End of Year Beginning of Current Year 415,436 403,772 20 Total assets (Part X, line 16) S-0S 30,337 DEC 0 4 2019 25,167 21 Total liabilities (Part X, line 26) 373,435 390,269 Net assets or fund balances Subtract line 21 from line 20 Signature Block OCDEN, UT Under penalties of perjury, I declare that I have examined this return; including acc 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 Paid DWNO DON 1201 26 TREASURER MICHAEL Type or print name and title PTIN Print/Type preparer's name Check self-employed P00530667 SCOTT J. HANNI Preparer 87-0470666 KARREN, HENDRIX, STAGE ALLEN & COMPANY Firm's EIN Firm's name **Use Only** 111 E BROADWAY STE 250 SALT LAKE CITY, 84111-5225 801-521-7620 UT Yes No

	CLUB OF SALT LAKE CITY	87-0172865	Page 2
	of Program Service Accomplishments		
Check if Sc	hedule O contains a response or note to	any line in this Part III	X
1 Briefly describe the orga			
	TE OF ROTARY INTERNATIONA		
COMMUNITY, TO	INTERNATIONAL PROJECTS,	AS WELL AS DISTRICT PRO	DJECTS.
`			
2 Did the organization und	lertake any significant program services during the	year which were not listed on the	
prior Form 990 or 990-E			Yes X No
·	new services on Schedule O		
	se conducting, or make significant changes in how	it conducts, any program	
services?	oo oonaaamig, or mano organicani onangee iii nen	in contract, any program	Yes X No
If "Yes," describe these	changes on Schedule O		
	on's program service accomplishments for each of it	s three largest program services, as measured	bv
	c)(3) and 501(c)(4) organizations are required to rep		
		of the amount of grants and anocations to other	513,
the total expenses, and	revenue, if any, for each program service reported		
	14 062	s of \$ 20,976) (Revenue	\$ 132,260
	enses \$ 44,962 including grant	s of \$ 20,976) (Revenue	\$ 132,200
SEE SCHEDULE	O .		
4b (Code) (Exp	enses \$ 157,341 including grant	s of \$ 12,025) (Revenue	s 75,821
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_P	art IV Checklist of Required Schedules			
	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1_	<u> </u>	X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3	ļ	X
4	Section 501(c)(3) organizations. 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	4	<u> </u>	<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	ľ		}
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			J
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9_		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	1		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			_
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	1 1		
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
-	If "Yes," complete Schedule G, Part III	19	ļ	x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

	art iv Checklist of Required Schedules (continued)				
		. г		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individual	ils on	,,	x	İ
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	<u> </u>	22	^	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensation.	ed			
	employees? If "Yes," complete Schedule J		23		x
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than				
240	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lin				
	through 24d and complete Schedule K If "No," go to line 25a	•	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	Γ	24b	Ì	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the	year			
	to defease any tax-exempt bonds?	·	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess	s benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	L	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in	a prior	ļ		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 9	90-EZ?	ĺ		ı
	If "Yes," complete Schedule L, Part I		25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to a	iny	ŀ		ı
	current or former officers, directors, trustees, key employees, highest compensated employees, or				
	disqualified persons? If "Yes," complete Schedule L, Part II	-	26		_X_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			į	ı
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% control	led			37
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule	· L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	i	200	ŀ	X
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	-	28a	-	
D	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete</i>		28b		х
С	Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member the	T	-00		<u></u>
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	1	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedu		29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified				
-	conservation contributions? If "Yes," complete Schedule M		30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedu	ıle N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"				
	complete Schedule N, Part II		32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regu	ulations		İ	
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I		33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part	II, III,			
	or IV, and Part V, line 1		34		<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<u> </u>	35a_	 -∤	_ <u>X</u> _
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	1			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line		35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitab				
	related organization? If "Yes," complete Schedule R, Part V, line 2		36	+	—
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organ		<u>.</u>		х
••	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, F		37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 1	1b and	38	x	
p.	19? Note. All Form 990 filers are required to complete Schedule O Int V Statements Regarding Other IRS Filings and Tax Compliance		J U	49	
F-a	Check if Schedule O contains a response or note to any line in this Part V				\Box
	Officer if Ochedule O contains a response of flote to any line in this Fait V			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 5			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and				
•	reportable gaming (gambling) winnings to prize winners?		1c	x	
	A		Forn	990	(2018)

Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return X 2b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, X a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a If "Yes." enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 5c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods X 7a and services provided to the payor? 7b If "Yes." did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was X required to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year X 7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? X 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f 7g g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. 9a Did the sponsoring organization make any taxable distributions under section 4966? 9b b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII. line 12 10a 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter 11a Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which 13b the organization is licensed to issue qualified health plans 13c c Enter the amount of reserves on hand X 14a 14a Did the organization receive any payments for indoor tanning services during the tax year? 14b b If "Yes." has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or 15 X 15 excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O

Form 990 (2018) ROTARY CLUB OF SALT LAKE CITY 87-0172865 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 12 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 12 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X 8a a The governing body? Х 86 b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No X 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 13 Did the organization have a written whistleblower policy? X 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the

Section	C. Disc	losure

17	List the states with which a conv.	of this Form 990 is required to be filed V	7

organization's exempt status with respect to such arrangements?

Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Own website Another's website X Upon request Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶

MICHAEL CRIDDLE SALT LAKE CITY

10 WEST 100 SOUTH, SUITE 400

UT 84101

801-363-8415

16b

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average hours per week (list any	Average Position hours per (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	nours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(VV-211099-WIIGC)	organization and related organizations
(1)LINDA KRUSE										
	30.00									
EXECUTIVE DIRECTOR	0.00	X						30,633	0	0
(2) BRETT SUTHERLAND)									
	16.30									
PRESIDENT	0.00	X		X				0	0	0
(3) ALENE BENTLEY										
	3.80									
PRESIDENT ELECT	0.00	X		X				0	0	0
(4) NANCY BROWN										
	0.80									_
VICE PRESIDENT	0.00	X		X		\sqcup		0	0	0
(5) JULI BLANCH										
	0.90	١								_
VICE PRESIDENT	0.00	X	ļ	X				0	0	0
(6) MICHAEL CRIDDLE										
	2.90									•
TREASURER	0.00	X		X	_			0	0	0
(7) RANDI JACKSON										
	1.00									0
SECRETARY	0.00	X		X	_			0	0	0
(8) BRYANT DAVIS	0 20									
D.T.D.T.G.TO.D.	0.30						Î		0	0
DIRECTOR	0.00	X	ļ <u>.</u>	-		\vdash		0	0	
(9) CHRISTIAN DEPUTY	0.30									
DIRECTOR	0.00	x						o	0	0
DIRECTOR	0.00	 ^	 	ļ	_					
(10) TERI JENSEN	0.50									
DIRECTOR	0.00	x						o	o	0
(11) STEVE BOEKHOLDER		┢┸			\vdash	 				
(II) DIEVE DOERHOUDER	0.60									
DIRECTOR	0.00	x			1			o	0	0
DAA	<u> </u>	42		L	Ļ	L				Form 990 (2018)

Form 990 (2018) ROTARY CI								87 - 017 nd Highest Compensated				<u> </u>	age
(A) Name and title	(B) Average hours per week (list any	(di bo	o not o	Pos check ess pe	C) sition more erson	than costs both	one an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	c	(F) Estima amoun othe compens from the	ted t of r ation	
	hours for retated organizations below dotted line)	Individuat trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(44-271033-141130)	1	organiza and rela organiza	ation ated	
(12) SHAHAB SAEED						<u>a</u>							
PAST PRESIDENT	15.00	x						0	0				(
												· · · · ·	
1b Sub-total		<u></u>						30,633					
c Total from continuation shee d Total (add lines 1b and 1c)							▶	30,633				-	
2 Total number of individuals (in reportable compensation from				thos	e lıs	ted a	bove	e) who received more than	\$100,000 of			· · · · ·	
3 Did the organization list any fo								oyee, or highest compensa	ted	ſ		Yes	No X
employee on line 1a? If "Yes," For any individual listed on line organization and related organ individual	1a, is the sum	of re	porta	able	com	pens	atio				4		x
5 Did any person listed on line 1: for services rendered to the org									ındıvıdual		5		х
Section B. Independent Contractor Complete this table for your five	rs								han \$100,000 of				
compensation from the organiz	zation Report co	ompe	ensa	tion 1	for th	ne ca	lend	lar year ending with or with	in the organization's tax ye	ear		(C)	
Name and	(A) business address							Descript	(B) ion of services		Con	(C) npensatio	<u>n</u>
					_								
2 Total number of independent c	ontractors (incli	ıdına	but	not l	ımıte	ed to	thos	se listed above) who				· · · · · · · · · · · · · · · · · · ·	
received more than \$100,000 c									0		Form	990	(2018

Form 990 (2018) ROTARY CLUB OF SALT LAKE CITY 87-0172865 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax (C) (A) Total revenue Unrelated exempt husiness function revenue 512-514 revenue s, Grants 1a Federated campaigns la 94.726 b Membéráhip duos 16 Giffs, ilar Ar c Fundraising events 1c d. Related organizations 1d 35,401 . 44114111 ub nijb.. 1.1 e Government grants (contributions) 1e f All other contributions, gitts, grants, d , ab and similar amounts not included above 1f 4.715 .. 444 . . . ilinaania. g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f H 30413 134,842 Program Service Reverue Busii Code aannay ar comucaa 2a MEMBERSHIP MEETINGS 202,658 202,658 b С d f All other program service revenue Total, Add lines 2n 2f ▶ 202,658 ٠. Investment income (including dividends, interest, and other similar amounts) 1,402 1,402 Income from investment of tax-exempt bond proceeds ▶ 5 Royalties ii) Roal tii) Porsonal ar amiga อยอบอลออธิเลียรียบดีบีลเร 6a Gross rents , , b Loss rental exps C. Rental inc. or (loss) Net rental income or (loss) ▶ Gross amount from (i) Securities (II) Other sales of accets other than inventor **b** Less cost or other .:. .i. basis & culus oxps c Gam or (loss) d Net gain or (loss) ▶ §a Gross income from fundraising events Other Feverue (not including 3 1......... of contributions reported on line 1c) "a" an lampaya See Part IV, line 18 b Loss, direct expenses c Net income or (loss) from fundraising events Þ 1."!"|"[""] 9a Cross income from gaming activities. 444.41 didda. ..,...... See Part IV, line 19 Jan Mari (1 mm) :: billiess direct expenses c Net income or (loss) from gaming activities Þ 11 111 277 10a Gross sales of inventory less '#::HI 'eliiint returns and allowances iiii::::::::: b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 4,519 11a OTHER 4,519 h

1.519

202,658

343,421

www.i

Þ

5,921

0

All other revenue I otal. Add lines 11a-11d

Total revenue. See instructions

Form 990 (2018)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising (A) Total expenses (B) (C) Do not include amounts reported on lines 6b, Program service Management and 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations 18,723 18,723 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 23,137 23,137 individuals See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign 12,025 12,025 individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 30,633 15,317 15,316 trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 2,785 1,392 1,393 10 Payroll taxes Fees for services (non-employees) a Management b Legal 8,200 8,200 c Accounting d Lobbying Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion 31,658 31,658 13 Office expenses 14 Information technology 15 Royalties 16,068 16,068 16 Occupancy 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 6,355 6,355 Conferences, conventions, and meetings 19 20 Interest 14,454 14,454 21 Payments to affiliates 566 Depreciation, depletion, and amortization 566 22 1,088 1,088 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) MEMBERSHIP MEETING 145,316 145,316 6,902 6,902 BAD DEBT b 6,015 OTHER 6,015 C 1,262 MEMBER SERVICES 1,262 e All other expenses 102,000 0 325,187 223,187 Total functional expenses Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ following SOP 98-2 (ASC 958-720)

Part X **Balance Sheet** Check if Schedule O' contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash-non-interest bearing 381,674 368,298 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 30,558 30,773 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 Notes and loans receivable, net 8 Inventories for sale or use 1,359 1,319 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 50,332 other basis Complete Part VI of Schedule D 10a 48,702 3,597 1,630 10b 10c b Less accumulated depreciation 11 11 Investments—publicly traded securities 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 415,436 403,772 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 25,167 30,337 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 of Schedule D $30,3\overline{37}$ 25,167 26 26 Total liabilities Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 373,435 390,269 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 390,269 373,435 33 33 Total net assets or fund balances 415,436 403,772 Total liabilities and net assets/fund balances

Form 990 (2018)

Forn	1 990 (2018) ROTARY CLUB OF SALT LAKE CITY 87-0172865				Pa	ge 12
Pê	art XI Reconciliation of Net Assets					_
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1				421
2	Total expenses (must equal Part IX, column (A), line 25)	2	<u> </u>			187
3	Revenue less expenses Subtract line 2 from line 1	3				234
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3	73 <u>,</u>	<u>435</u>
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9	<u> </u>		-1,	400
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		3	90,	269
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					,
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight					
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in					
	Schedule O					ĺ
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in					
	the Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		
				For	m 99 0	(2018)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

. For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Attach to Form 990 or Form 990-EZ.

Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection

If the organization answered "Yes," on 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

• Section 501(c)(4), (5), or (6) organizations Complete Part III

If the organization answered "Yes," on 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," on 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

Nam	e of organization			1 ' '	ification number
	ROTARY CLUB OF SALT			87-01728	
Pa	t I-A Complete if the organization is exem	pt under section 501(c) or is a section	527 organization	on.
1	Provide a description of the organization's direct and indire	ect political campaign activities	in Part IV (see instr	uctions for	
	definition of "political campaign activities")				
2	Political campaign activity expenditures (see instructions)			▶ \$	
3	Volunteer hours for political campaign activities (see instru				
Pa	t I-B Complete if the organization is exem)(3)		
1	Enter the amount of any excise tax incurred by the organiz	ation under section 4955		▶ \$	
2	Enter the amount of any excise tax incurred by organization	n managers under section 495	5	▶ \$	
3	If the organization incurred a section 4955 tax, did it file Fo	orm 4720 for this year?			Yes No
4a	Was a correction made?				Yes No
<u>b</u>	If "Yes," describe in Part IV				
Pa	t I-C Complete if the organization is exem			n 501(c)(3).	
1	Enter the amount directly expended by the filing organization	on for section 527 exempt fund	tion		
	activities			▶ \$	
2	Enter the amount of the filing organization's funds contribu	ted to other organizations for s	ection		
	527 exempt function activities			▶ \$	
3	Total exempt function expenditures Add lines 1 and 2 Ent	ter here and on Form 1120-PO	L,		
	line 17b			▶ \$	
4	Did the filing organization file Form 1120-POL for this year	2			Yes No
5	Enter the names, addresses and employer identification nu		-		
	organization made payments For each organization listed,	•	• •		
	the amount of political contributions received that were pro			-	
	as a separate segregated fund or a political action committee	tee (PAC) If additional space i	s needed, provide in	formation in Part IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political contributions received and
				filing organization's funds If none, enter -0-	promptly and directly
					delivered to a separate
					political organization If none, enter -0-
					ir none, enter-o-
(1)					
	·				
(2)					
	<u>-</u> .				
(3)					
(4)					
<i>(5</i>)			-		
(5)					
(6)					
(6)					
		l			

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2018

Sche	edule C (Form 990 or 990-EZ) 2018 ROT	ARY CLUB OF	SALT LAKE	CITY	87-017286	5 Page 2
Pa	rt II-A Complete if the organ	nization is exemp	t under section	501(c)(3) an	d filed Form 5768 (e	lection under
	section 501(h)).					· · · · · · · · · · · · · · · · · · ·
4		-			ach affiliated group mer	nber's name,
_	address, EIN, expens				ali.	
<u> </u>	Check If the filing organization			provisions app		
		obbying Expendi			(a) Filing organization's totals	(b) Affiliated group totals
	(The term "expenditures				Organization's totals	group totals
	Total lobbying expenditures to influence	· · · · · · · · · · · · · · · · · · ·		}		
	Total lobbying expenditures to influence	•	ect lobbying)	}		
	Total lobbying expenditures (add lines 1	a and 1b)		}		
	Other exempt purpose expenditures					
	Total exempt purpose expenditures (add			}		
f	Lobbying nontaxable amount Enter the	amount from the follow	ving table in both			
ſ	columns	1				
	If the amount on line 1e, column (a) or (b)		ntaxable amount is:			
-	Not over \$500,000	20% of the amour	nt on line 1e			
- }	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15	% of the excess over \$5	00,000		
-	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10°	% of the excess over \$1	,000,000		
- }	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5%	of the excess over \$1,5	500,000		
	Over \$17,000,000	\$1,000,000			······	
_	Grassroots nontaxable amount (enter 25	•			<u> </u>	
h	Subtract line 1g from line 1a If zero or le			}		
İ	Subtract line 1f from line 1c If zero or le	•		l		
j	If there is an amount other than zero on	either line 1h or line 1i	, did the organization	file Form 4720		
	reporting section 4911 tax for this year?		- -			Yes No
		4-Year Averag	ing Period Under	Section 501(h	n)	
	(Some organizations that ma	de a section 501(h) election do not l	have to comp	lete all of the five colu	ımns below.
		See the separate i	nstructions for lin	es 2a through	n 2f.)	
		obbying Expendit	ures During 4-Yea	r Averaging F	Period	
	Calendar year (or fiscal year	(a) 2015	(b) 2016	(c) 2017	7 (d) 2018	(e) Total
	beginning in)	(a) 2015	(b) 2010	(0) 2017	(4) 2010	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount					
	(150% of line 2a, column (e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount					
	(150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 ROTARY CLUB OF SALT LAKE CITY Page 3 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 Part II-B (election under section 501(h)). (b) For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed No **Amount** Yes description of the lobbying activity During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No X Were substantially all (90% or more) dues received nondeductible by members? 1 X 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year 2b 2c 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and

2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

87-0172865

Page 4

Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number 87-0172865 ROTARY CLUB OF SALT LAKE CITY Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes No and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art. Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Schedule D (Form 990) 2018 ROTARY	CLUB O	F SALT	LAKE	CITY		87-0	172865	Page
Part III Organizations Maintain	ing Collec	tions of	Art, Histo	orical Ti	reasures,	or Othe	r Similar Assets	s (continued)
3 Using the organization's acquisition, accordilection items (check all that apply)	ession, and o	ther records	, check any	of the foll	lowing that a	re a signifi	cant use of its	
a Public exhibition		d 🗍 L	oan or excl	nange pro	grams			
b Scholarly research		e 🗌 (Other					
c Preservation for future generations		_						
4 Provide a description of the organization	s collections	and explain	how they fu	irther the o	organization'	s exempt į	ourpose in Part	
XIII								
5 During the year, did the organization soli			· •		•			
assets to be sold to raise funds rather th			art of the or	ganization	's collection?	· · · · · · · · · · · · · · · · · · ·		Yes No
Part IV Escrow and Custodial Complete if the organiza			on Form	000 Ba	rt IV Juno () or ron	orted an amount	on Form
990, Part X, line 21	lion answe	rea res	OH FOITH	990, Pa	irt iv, iiile s	a, or rep	orted an amount	On Poin
1a Is the organization an agent, trustee, cus	todian or othe	ar intermedi:	any for cont	ributions o	r other asset	e not		
included on Form 990, Part X?	todian or othe	, intermedia	ary for conti	ibutions o	other asset	3 1100		Yes No
b If "Yes," explain the arrangement in Part	XIII and comr	olete the foll	owing table					
2			y					Amount
c Beginning balance							1c	
d Additions during the year							1d	
e Distributions during the year							1e	
f Ending balance							1f	
2a Did the organization include an amount of	n Form 990, I	Part X, line	21, for escr	ow or cust	todial accour	it liability?		Yes No
b If "Yes," explain the arrangement in Part	XIII Check he	ere if the exp	planation ha	as been pr	ovided on Pa	art XIII		
Part V Endowment Funds.			_					
Complete if the organiza	ion answei	red "Yes"	on Form	<u>990, Pa</u>				
	(a) Curre	ent year	(b) Prior	year	(c) Two yea	rs back	(d) Three years back	(e) Four years back
1a Beginning of year balance								
b Contributions								-
c Net investment earnings, gains, and		i						
losses		<u> </u>						
d Grants or scholarships				_				
e Other expenditures for facilities and								
programs						-		
f Administrative expenses								
g End of year balance		nd balance	/line 1 = 00		hold oo			
2 Provide the estimated percentage of thea Board designated or quasi-endowment		%	(line 1g, co	iuiiiii (a))	ileiu as			
	%	70						
c Temporarily restricted endowment	,,, %	<u>,</u>						
The percentages on lines 2a, 2b, and 2c								
3a Are there endowment funds not in the po	•		on that are	held and	administered	for the		
organization by								Yes No
(i) unrelated organizations								3a(ı)
(ii) related organizations								3a(ii)
b If "Yes" on line 3a(ii), are the related orga	nizations liste	d as require	ed on Sched	dule R?				3b
4 Describe in Part XIII the intended uses of	the organizat	tion's endow	vment funds	3				
Part VI Land, Buildings, and Ed	quipment.							
Complete if the organizat	ion answer	ed "Yes"	on Form	990, Pai	rt IV, line 1	1a See	Form 990, Part	X, line 10
Description of property	(a) (Cost or other ba	sıs	(b) Cost or of	ther basis	(c) A	ccumulated	(d) Book value
		(investment)		(othe	er)	de	preciation	
1a Land								
b Buildings							40.70	40 500
c Leasehold improvements							48,702	-48,702
d Equipment	-							E0 336
e Other		000 5			50,332			50,332 1,630
Fotal, Add lines 1a through 1e (Column (d) mu	sı equal Forn	1990. Part)	ĸ. coiumn (i	5). IINE 10	C J		▶	1,036

Schedule D (Form 990) 2018 ROTARY CLUB OF SALT LAKE CITY 87-0172865 Page 3 Investments—Other Securities. Completé if the organization answered "Yes" on Form 990, Part IV, line 11b See Form 990, Part X, line 12 (c) Method of valuation (a) Description of security or category (b) Book value Cost or end-of-year market value (including name of security) (1) Financial derivatives (2) Closely-held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶ Investments—Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c See Form 990, Part X, line 13 (c) Method of valuation (a) Description of investment (b) Book value Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶ Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15 (b) Book value (a) Description (1) (2) (3) (4) (5) (6) (7)(8) (9) > Total (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25 (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5)(6)(7) (8) (9)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶

che	dule D (Form 990) 2018 ROTARY CLUB OF SALT LAKE (CITY	87-0172865	Page 4
Pa	art XI Reconciliation of Revenue per Audited Financial Sta	tements With Re	venue per Return.	
	Complete if the organization answered "Yes" on Form 9			
1	Total revenue, gains, and other support per audited financial statements		1	343,421
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	343,421
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	343,421
Pa	int XII Reconciliation of Expenses per Audited Financial St	tatements With Ex	cpenses per Return.	
	Complete if the organization answered "Yes" on Form 9			
1	Total expenses and losses per audited financial statements		1	326,587
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII)	2d	1,400	
е	Add lines 2a through 2d		2e	1,400
3	Subtract line 2e from line 1		3	325,187
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
_	Tetal evenence Add lines 2 and 4s. (This must equal Form 000, Part I line 19	١	5	325 187

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER

BOOK / TAX DEPRECIATION DIFFERENCE

\$

1,400

87-0172865

Page 5

Part XIII Supplemental Information (continued)

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

2018 Open to Pub

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990.

For to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Name of the organization

ROTARY CLUB OF SALT LAKE CTTY

Employer identification number 87 - 0172865

Pá	irt I Ge		n on Activities O			Complete if the organization ans	swered "Yes" on
		rm 990, Part IV, line					
1		kers. Does the organiz					
		nce, the grantees' eligi	bility for the grants or	assistance, an	d the selection crite	eria used to	
	award the gra	ints or assistance?					X Yes No
2	For grantma	kers. Describe in Part	V the organization's r	procedures for	monitoring the use	of its grants and other assistance	
_	outside the U		· ····· organization o p				
		Region (The following	,	_,			<u>.</u>
	(a) Region	(b) Number of offices in	(c) Number of employees,		es conducted in the by type) (such as,	(e) If activity listed in (d) is a program service,	(f) Total expenditures for
		the region	agents, and	fundraisin	g, program services,	describe specific type of	and investments
	,		independent contractors		s, grants to recipients ad in the region)	service(s) in the region	in the region
			in the region				
S	OUTH ASIA	•					
(1)				PROGRAM	SERVICES	MEDICAL	5,425
	OUTH AMER	ICA					
(2)				PROGRAM	SERVICES	MEDICAL	6,600
				1			
(3)		,	,				
(4)		ļ		-			
(5)			-				
(6)							
	5						
(7)							
				}			
(8)				 			
(9)							
(10)							
(11)				<u> </u>	·		
(12)							
(13)							
		İ					
(14)							
(15)							
(16)				 			
(47)							
(17)	ubtotal						12,025
				 		<u>-</u>	12,02
	tal from continuation						
	eets to Part I			 			
	otals (add						12,025
III	es 3a and 3b)	l					12,023

Page 2 Schedule F (Form 990) 2018 (i) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, (h) Description of noncash assistance (g) Amount of Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed noncash assistance 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt disbursement (f) Manner of CHECK 8,025 87-0172865 (e) Amount of cash grant by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter MEDICAL TRAINING (d) Purpose of Schedule F (Form 990) 2018 ROTARY CLUB OF SALT LAKE CITY (c) Region Enter total number of other organizations or entitles (b) IRS code section and EIN (if applicable) (a) Name of organization Part € ₹ 4 (15) (36) 130 (13) **a** 8 (11) (12) (2) (9) 3 9 8 Ð

RO812 11/20/2019 1 23 PM

Page 3

(h) Method of valuation (book, FMV, appraisal, other)

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16 (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement 87-0172865 (d) Amount of cash grant Schedule F (Form 990) 2018 ROTARY CLUB OF SALT LAKE CITY Part # Grants and Other Assistance to Individuals Outside the Un Part III can be duplicated if additional space is needed (a) Type of grant or assistance 8 9 62 ව ₹ ම 5 (11) (12) (13) 14 (15) 9 (17) (1) 9 9 **©**

Schedule F (Form 990) 2018

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see

Instructions for Form 5713, don't file with Form 990)

Schedule F (Form 990) 2018

Yes

X No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method, amounts of investments vs. expenditures per region), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions

PART I, LINE 3 - ACTIVITIES PER REGION

REGION	EXPE	NDITURES	INVEST	MENTS
SOUTH ASIA	\$	5,425	\$	0
SOUTH AMERICA	\$	6,600	\$	0

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SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

6

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

Open to Public Inspection

Employer identification number

OMB No 1545-0047

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2018)

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	D)
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Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 87-0172865 Schedule I (Form 990) (2018) ROTARY CLUB OF SALT LAKE CITY Part III can be duplicated if additional space is needed Part III

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7	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of noncash assistance
		recipients	cash grant	noncash assistance	FMV, appraisal, other)	
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Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	wide the information re-	quired in Part I, line 2	2, Part III, column (b)	, and any other additional i	nformation

SCHEDULE O (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.

2018

OMB No 1545-0047

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

ROTARY CLUB OF SALT LAKE CITY

87-0172865

Employer identification number

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT

LOCAL/COMMUNITY SERVICE: CLUB SERVICE - TO HELP CLUB MEMBERS GAIN A GREATER UNDERSTANDING OF HOW ROTARY WORKS AT THE CLUB, DISTRICT, AND WORLD LEVELS. ATTENDING ANNUAL DISTRICT AND WORLD CONFERENCES THUS DEVELOPING GOOD FRIENDSHIPS, FOSTERING WORLD PEACE AND UNDERSTANDING PUBLIC RELATIONS. PUBLIC RELATIONS - TO INCREASE PUBLIC AWARENESS OF ROTARY'S SERVICE AND COMMITMENT TO THE COMMUNITY. COMMUNITY SERVICE - ACTS OF KINDNESS TO PROVIDE ONE-TIME FINANCIAL GRANTS UP TO \$250 FOR EMERGENCIES, UTILITIES, MEDICAL EXPENSES, CLOTHING, FOOD, CAR EXPENSES, ETC FOR CHARITABLE ORGANIZATIONS. ARTS - PROMOTE THE ENJOYMENT OF THE ARTS. SCHOOL/EDUCATION -CONTRIBUTE TO THE EDUCATION OF THE YOUNG PEOPLE BY PROVIDING DICTIONARIES TO THE ELEMENTARY SCHOOLS AND MONETARY CONTRIBUTIONS TO AREA SCHOOLS K-12. YOUTH/CHILD CRISIS - PROVIDE FINANCIAL ASSISTANCE, PUBLIC RELATIONS EXPOSURE AND/OR MAN-POWER FOR A SPECIFIC PURPOSE OR NEED TO EXISTING ORGANIZATIONS ADDRESSING THE PROBLEMS OF CHILDREN IN CRISIS. CITY CREEK ROTARY PARK - MAINTAIN & RESTORE THE PARK. ENVIRONMENT - SELECT & PROMOTE LOCAL ENVIRONMENTAL ENHANCEMENT PROJECTS IN WHICH CLUB MEMBERS CAN PARTICIPATE. PUBLICATIONS - MONTHLY "ROTARY BEE" PUBLICATION TO INFORM MEMBERS OF VARIOUS CLUB MATTERS AND INITIATIVES.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE TREASURER REVIEWS THE FORM 990 BEFORE IT IS FILED.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL THE BOARD ATTEMPTS TO DETERMINE THE MARKET VALUE BASED ON EXPERIENCE AND Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization

ROTARY CLUB 'OF SALT LAKE CITY

Employer identification number

87-0172865

QUALIFICATIONS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

BOOK / TAX DEPRECIATION DIFFERENCE \$ -1,400