2949315604812

Department of the Treasury Internal Revenue Service

SCANNED OCT 6 & 2021

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

AF	or the	2019 calendar year, or tax year beginning J	<u> ՄL_1, 2019and</u>	ending	<u>JUN 30</u>	J, 2020 (
B c	heck if	C Name of organization			D Emp	loyer identific	ation number
	Addres change Name	THE ROTARY CLUB OF DOWN	NERS GROVE				
<u>_</u>	change	Doing business as		<u>6-286758</u>			
	Initial return Final return/	Number and street (or P.O. box if mail is not del P.O. BOX 256	ivered to street address)	Room/suit		phone number 30-960-2	
	termin- ated	City or town, state or province, country, and	ZIP or foreign postal code		G Gross	receipts \$	31,622.
	Amend	DOWNERS GROVE, IL 6051	L5		∬H(a) Is t	this a group re	
	Application pendin	F Name and address of principal officer Party	GIE CANON	11	' ,	subordinates	
_		SAME AS C ABOVE	4	774	—	all subordinates in	
				<u>•{}</u>	_		list (see instructions)
		e: DGROTARY.ORG	againting Other N	I va		oup exemption	State of legal domicile: IL
		organization X Corporation Trust As Summary	sociation Other	L Ye	ar of formatio	DU T DOT N	State of legal domicile 11
[[r]o		Briefly describe the organization's mission or most	significant activities TO E	NCOLLE	AGE AN	ID FOSTE	R THE
Governance		IDEAL OF SERVICE AS A BAS	S OF WORTHY ENT	ERPRI	SE.		
rus	2	Check this box if the organization discorplination of young members of the governing body.	ntinued its operations or dispos			of its net ass	ets
ŏ		realition of voting members of the governing body		NL(<u> </u>	 ()	16 16
		Number of independent voting members of the gov			0 = 000		0
Activities &		Total number of individuals employed in calendar y	ear 2019 (Part V, line 2a)	FFB	0 5 202	10/11 ~ 1	0
Ĭ,		Total number of volunteers (estimate if necessary)	1 +			┸┦╬╟╬┤	0.
Act		Total unrelated business revenue from Part VIII, col		OGI	DEN, L	JT 7a 7b	1 0.
	<u> </u>	Net unrelated business taxable income from Form	990-1, line 39	- 		Year	Current Year
		Contributions and synath (Bort VIII June 16)		⊢		18,707.	16,317.
ne		Contributions and grants (Part VIII, line 1h)		<u> </u>		0.	0.
Revenue		Program service revenue (Part VIII, line 2g)	and 7d)	-		9,653.	10,555.
Re		Investment income (Part VIII, column (A), lines 3, 4, Other revenue (Part VIII, column (A), lines 5, 6d, 8c,		<u> </u>	1 (00,136.	-3,976.
		Other revenue (Fart VIII, Column (A), lines 3, od, oc, Total revenue - add lines 8 through 11 (must equal		-		28,496.	22,896.
		Grants and similar amounts paid (Part IX, column (40,757.	20,568.
		Benefits paid to or for members (Part IX, column (A				0.	0.
		Salaries, other compensation, employee benefits (F				0.	0.
Expenses		Professional fundraising fees (Part IX, column (A), li				0.	0.
pen		Total fundraising expenses (Part IX, column (D), line		0.			
Ä		Other expenses (Part IX, column (A), lines 11a-11d,			ļ	52,352.	50,988.
		Total expenses Add lines 13-17 (must equal Part I)			(93,109.	71,556.
		Revenue less expenses Subtract line 18 from line				35,387.	-48,660.
PS				L		Current Year	End of Year
t Assets or nd Balances	20	Total assets (Part X, line 16)		<u> </u>	4	07,987.	344,127.
t Ass	21	Total liabilities (Part X, line 26)		<u> </u>		0.	2,250.
2,3	22	Net assets or fund balances Subtract line 21 from	line 20		4 (07,987.	341,877.
		Signature Block					
		Ities of perjury, I declare that I have examined this return,					knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than office	r) is based on all information of wh	nich prepar	er has any ki	nowledge.	-71
		Signature of officer				Date	2
Sign			5			54.0	
Her	e	MARGIE CANON, TREASURED Type or print name and title	<u> </u>	_			
		Print/Type preparer's name	Preparer's signature		Date	Check	PTIN
Paid			E			ıf self-employe	ed
Prep		Firm's name				Firm's EIN	
Use		Firm's address					
	-					Phone no.	
May	the IF	RS discuss this return with the preparer shown abo	ve? (see instructions)				Yes No

36-2867580 Page

PartiV 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_	L	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Ĺ	X
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		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		ļ
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
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors 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,			٠,,
	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," complete			٠,,
	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?			٠,,
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			,,
	or in 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,			v
	Part VI	11a		Х
Ь	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total		v	
	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	44-		Х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		^
a	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	44.1		х
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
Ť		444		х
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	_11f_		
124		12a		х
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	IZa		
U	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	170		
•	investment, and program service activities outside the United States, or aggregate 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	-	Х
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	17		Х
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	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	Х	
			agn /	

2019.05030 THE ROTARY CLUB OF DOWNER ROTARYD1

Partily Checklist of Required Schedules (continued)

		-	Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
_	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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 compensated employees? If "Yes," complete			
	Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b 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?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
Ū	any tax-exempt bonds?	24c		
а	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) 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).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
_	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes." complete Schedule L, Part IV	28c		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	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		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule 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		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			ì
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			İ
	Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, 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," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 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 organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		3,7	
	Note: All Form 990 filers are required to complete Schedule O	38_	X	
[Ka	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		V-	
	Enter the number reported in Box 3 of Form 1096. Enter -0: if not applicable		Yes	No
	Enter the hamber reported in Box of Control of the Control of the Approach			
	Enter the hamber of Forms W 2d included in line 1d. Enter 6 in Not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1c		
	(gambling) winnings to prize winners?		990	(2019)

THE ROTARY CLUB OF DOWNERS GROVE 36-2867580 Page 5 Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 0 filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2h Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b 4a 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)? 4a **b** 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 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 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 gifts were not tax deductible? 6b 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 and services provided to the payor? 7a 7b b 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 required 7c d If "Yes." indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е 7f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7g g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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 a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter. a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations, Enter. a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against 11b amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 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. a Is the organization licensed to issue qualified health plans in more than one state? 13a 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 the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a 14b b If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 If "Yes," see instructions and file Form 4720, Schedule N

Form 990 (2019)

16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

If "Yes," complete Form 4720, Schedule O

THE ROTARY CLUB OF DOWNERS GROVE 36-2867580 Form 990 (2019) Part VI | 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 on 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 16 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 on Schedule 0. 16 b Enter the number of voting members included on line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X 7a more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X 7b persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a a The governing body? 8b_ 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 the organization's mailing address? If "Yes." provide the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Х 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 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 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 12c in Schedule O how this was done 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? X a The organization's CEO, Executive Director, or top management official 15a X 15b b Other officers or key employees of the organization 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 with a X 16a taxable entity during the year? 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 organization's 16b exempt status with respect to such arrangements? Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed -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 X Upon request Other (explain on Schedule O) Own website Another's website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 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 MARGIE CANON - 630-960-2305 P.O. BOX 256, DOWNERS GROVE 60515

932006 01-20-20

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.

 See instructions for the order in which to list the persons above.

X Check this box if neither the organization n	or any related	orga	nıza	tion	con	nper	sate	ed any current officer, d	rector, or trustee	
(A)	(B)			(6	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos	itior more	ነ than o	one	Reportable	Reportable	Estimated
	hours per	box	, unte	ss pe	rson	s both	n an	compensation	compensation	amount of
	week	-	_	luau	II ect	17005	(66)	from	from related	other
	(list any hours for	lirecto						the organization	organizations (W-2/1099-MISC)	compensation from the
	related	90.0	ag ag			satec		(W-2/1099-MISC)	(**-2/1099-141130)	organization
	organizations	Individual trustee or director	Institutional trustee		ak	шре		(** =* ********************************		and related
	below	Jana	量	 =	Jd wa	esto	<u>بة</u>			organizations
	line)	Ę	iş i	Officer	Ř	Highest compensated employee	Former			
(1) ANN HATTEN	3.00	1						_		
SECRETARY		X	<u> </u>	X				0.	0.	0.
(2) MARGIE CANNON	3.00							_	_	_
TREASURER		X	ļ	X	<u> </u>		_	0.	0.	0.
(3) JOE KENNY	4.00			l						_
PRESIDENT	ļ	X		X		ļ		0.	0.	0.
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932007 01-20-20

(A) Average hours per veek (inst any hours of compensation from the compensation of the calendary and state of the calendary are ending with or supervision from the organization from the organizati	Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)	·	
Name and title Average hours per week hours per week hours for related organizations hours for re	•								l I		(F)	
10 Subtotal	Name and title	Average	,,,						Reportable	Reportable		
Did the organization from the organization and related organization from the organizat			box.	unies	s per	rson ı	s both	an	compensation	compensation	amour	t of
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	w 100,000 of compensation from the organic	alion								- <u></u>	Form 990	(2019)

Form 990 (2019)	THE	ROTARY	CLUB O	F DOWNER	S GROV	'E	36-2867	580 Page
Part VIII Sta	tement of Rev	enue						
Chec	ck if Schedule O co	ntains a respo	onse or note to	o any line in thi	<u>Part VIII</u>			
					(A)	(B)	(C)	(D)
				Tot	al revenue	Related or exempt	Unrelated	Revenue excluded
						function revenue	business revenue	from tax under
				{		1	1	sections 512 - 51.

		Check if Schedule O contains a	response o	or note to any lin	e in this Part VIII			
				ļ	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
20 20	1	a Federated campaigns	1a					
ᄩᆲ	•	-	1b	15,317.				
ΰβ	'	•		13,317.				
Ę,ţ		c Fundraising events	1c					
声	١ ١	d Related organizations	1d					
Š.		e Government grants (contributions)	1e					
iğ S	1	f All other contributions, gifts, grants, and	1					
bet		similar amounts not included above	1f	1,000.				ı
Ēġ		Moncash contributions included in lines 1a-1f	1g \$					
Contributions, Gifts, Grants and Other Similar Amounts.		h Total. Add lines 1a-1f		>	16,317.			
				Business Code				
	2	a						
ا قِ	2			·				
E e	1	·					·	
Sugar	٠	c						
ēğ	١	d						
Program Service Revenue		e			·,			
ا ته	' t	f All other program service revenue	1					
		Total. Add lines 2a-2f						
	3	Investment income (including divide	ands, intere	st, and				
		other similar amounts)		>	10,555.			10,555.
	4	Income from investment of tax-exer	npt bond p	roceeds 🕨				
	5	Royalties		>				
			(i) Real	(II) Personal				
	6 :	a Gross rents 6a	,,					
		Less rental expenses 6b						
		D						
		, ,						
		Net rental income or (loss)	Coourtion	(v) Other				
	7 :		Securities	(II) Other				
		assets other than inventory 7a						
}	١	Less, cost or other basis				,		
ž		and sales expenses 7b						
Ve.	٠	c Gain or (loss) 7c						
Re	١ .	d Net gain or (loss)						
Other Revenue	8 :	a Gross income from fundraising events (not			, — .		
ਨੋ∣		including \$	of					
		contributions reported on line 1c). S	- See			4	٠,	
		Part IV, line 18	8a	4,750.				
- {		Less direct expenses	8b	8,726.				
		NI-4			-3,976.			-3,976.
		 Net income or (loss) from fundraisin Gross income from gaming activitie 	_					
	9	Part IV, line 19						
- 1		•	9a					
	'	Less direct expenses	<u>9b</u>					
		Net income or (loss) from gaming ac						
	10	a Gross sales of inventory, less return	is				1	
		and allowances	10a					J
	ı	Less cost of goods sold	10b					
		Net income or (loss) from sales of in	ventory			·- <u></u> -		
,				Business Code				
ğ,	11 a	a						
ag ag	ı	·						
Miscellaneous Revenue	(>						
is a	(d All other revenue						
		Total. Add lines 11a-11d						
	12	Total revenue See instructions			22,896.	0.	0.	6,579.

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp	lete all columns All othe	r organizations must con	nplete column (A).	
	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	20,568.	20,568.		
2	Grants and other assistance to domestic				
	Individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	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)				
7	Other salaries and wages	.,			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees)				
а	Management				<u>.</u>
b	Legal				
С	Accounting				<u> </u>
d	·			· · · · · ·	<u>.</u>
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion		· · · · · · · · · · · · · · · · · · ·		
13	Office expenses	2,488.		2,488.	
14	Information technology				
15	Royalties				
16	Occupancy	720.		720.	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	2 240		3 240	
19	Conferences, conventions, and meetings	3,249.		3,249.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	STUDENT SCHOLORSHIPS GR	26,041.	26,041.		
b	DISTRICT AND INTL DUES	8,637.	8,637.		
c	MEMBER MEALS	4,968.		4,968.	
d		4,349.	4,349.		
_	All other expenses	536.		536.	
25	Total functional expenses Add lines 1 through 24e	71,556.	59,595.	11,961.	0.
 26	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 if 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 (B) End of year Beginning of year 147,101. 219,267. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 12,212. 16,993. Accounts receivable, net Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net Assets 8 Inventories for sale or use 8 10,520. 0. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment, cost or other basis Complete Part VI of Schedule D 10a 10b 10c b Less accumulated depreciation 11 Investments - publicly traded securities 176,508. 169,513. Investments - other securities See Part IV, line 11 12 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 407,987. 344,127. Total assets. Add lines 1 through 15 (must equal line 33) 16 16 17 Accounts payable and accrued expenses 17 18 18 Grants payable 0. 2,250. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to any current or former officer, director, 22 trustee, key employee, creator or tounder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 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 2,250. 0. 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here X **Assets or Fund Balances** and complete lines 27, 28, 32, and 33. 407,987. 341,877. 27 Net assets without donor restrictions 27 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds 31 Net 407,987. 341,877. 32 32 Total net assets or fund balances 344,127. 407,987 Total liabilities and net assets/fund balances

932012 01-20-20

SCHEDULE D

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

THE ROTARY CLUB OF DOWNERS GROVE

Employer identification number 36-2867580

LPa	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		T AC	Courts. Complete if the
		(a) Donor advised funds	(k) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advised	fund	s
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ac	ivisors in writing that grant funds can be us	sed on	ıly
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose co	nferrir	ng
	impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·	_	Yes No
Pa	rt II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990, Pa	art IV, I	line 7.
1	Purpose(s) of conservation easements held by the organizatio	n (check all that appl <u>y).</u>		
	Preservation of land for public use (for example, recreate	ion or education) Preservation of a	histor	rically important land area
	Protection of natural habitat	Preservation of a	certifi	ied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form of	a con	servation easement on the last
	day of the tax year		L	Held at the End of the Tax Year
а	Total number of conservation easements		L	2a
b	Total acreage restricted by conservation easements		L	2b
С	Number of conservation easements on a certified historic stru-	cture included in (a)		2c
d	Number of conservation easements included in (c) acquired at	fter 7/25/06, and not on a historic structure	,]	
	listed in the National Register		L	2d
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or terminated by the o	rganız	ation during the tax
	year >			
4	Number of states where property subject to conservation ease	ement is located >		
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it	holds?		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing consei	vation	easements during the year
				
7	Amount of expenses incurred in monitoring, inspecting, handle	ing of violations, and enforcing conservation	n ease	ements during the year
	▶ \$			
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170(h)	(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservatio	n easements in its revenue and expense st	ateme	ent and
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's financial statemen	ts that	t describes the
	organization's accounting for conservation easements			
Pa	rt III Organizations Maintaining Collections of	•	er Si	milar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8		
1a	If the organization elected, as permitted under FASB ASC 958	s, not to report in its revenue statement and	d balar	nce sheet works
	of art, historical treasures, or other similar assets held for publ	ic exhibition, education, or research in furti	heranc	ce of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that describes these items.		
b	If the organization elected, as permitted under FASB ASC 958	, to report in its revenue statement and ba	lance :	sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthei	rance (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			> \$
2	If the organization received or held works of art, historical trea	sures, or other similar assets for financial g	aın, pı	rovide
	the following amounts required to be reported under FASB AS	C 958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1			\$
<u>b</u>				> \$
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2019

Schedule D (Form 990) 2019

Complete if the organization answered "Yes" of	on Form 990. Part IV line 1	1h See Form 990 Part Y line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end	d-of-year market value
1) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A) MUTUAL FUNDS	169,513.	END-OF-YEAR MARKET	VALUE
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	169,513.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1c See Form 990, Part X, line 13	•
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total (Col (b) must equal Form 990, Part X, col (B) line 13.)		, , , , , , , , , , , , , , , , , , , ,	
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1d See Form 990, Part X, line 15	
(a) [Description		(b) Book value
(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" of	on Form 990, Part IV, line 1	1e or 11f See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			ļ. <u></u>
(3)			
(4)			
(5)			
(6)			

Total. (Column (b) must equal Form 990, Part X. col. (B) line 25.) 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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2019

(7) (8) (9)

SCHEDULEI (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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OMB No 1545-004/	2019	

Department of the Treasury		► Attach to Form 990.	Open to Public
Internal Revenue Service	© 4 CO	to www.irs.gov/Form990 for the latest information.	· Inspection
Name of the	Name of the organization		Employer identification number
	THE ROTARY CLUB OF DOWNERS GROVE		36-2867580
Partl	Part I General Information on Grants and Assistance		
- Doe	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	sistance, the grantees' eligibility for the grants or assistance, and the selecti	
crite	criteria used to award the grants or assistance?		X Yes No

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Cor recipient that received more than \$5,000. Part II can be dublicated if additional space is needed	Nomestic Organiz 5.000. Part II can	rations and Domestic	Governments. Contact is neede	omplete if the orga	inization answered "Y	Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any cd if additional space is needed	IV, line 21, for any
-	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ROTAR	ROTARY INTERNATIONAL			8,637.	0			POLIO ERIDICATION
0 E	Enter total number of section 501(c)(3) and government organizations lenter total number of other organizations listed in the line 1 table	d government org	ons l	sted in the line 1 table				A
HA	LHA For Paperwork Reduction Act Notice, see the Instructions for Forn	see the Instructi	ons for Form 990.					Schedule I (Form 990) (2019)

Schedule I (Form 990) (2019)

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Page 2

36-2867580

THE ROTARY CLUB OF DOWNERS GROVE

Schedule I (Form 990) (2019)

SCHEDULE 0

(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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

THE ROTARY CLUB OF DOWNERS GROVE

Employer identification number 36-2867580

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
INTERNATIONAL CONTRIBUTIONS - CONTRIBUTIONS TO THE PAUL HARRIS
FELLOWSHIP PROGRAM WHICH PROMOTES GOODWILL AND ROTARY IDEALS
EXPENSES \$ 3,500. INCLUDING GRANTS OF \$ 3,500. REVENUE \$ 0.
HALLOWEEN WINDOW PAINTING - THE CLUB HAS SPONSORED THIS COMMUNITY EVENT
FOR OVER 40 YEARS. THE EVENT PROMOTES COMMUNITY GOODWILL.
EXPENSES \$ 4,349. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
ALLIANCE FOR SMILES - CHINA - THE CLUB SPONSORS THIS ORGANIZATION THAT
PROVIDES DENTAL ASSISTNANCE TO CHILDREN IN UNDERSERVED PROVINCES OF
CHINA
EXPENSES \$ 2,500. INCLUDING GRANTS OF \$ 2,500. REVENUE \$ 0.
FORM 990, PART VI, SECTION A, LINE 6:
THE ORGANIZATION HAS TWO TYPES OF MEMBERS; ACTIVE AND HONORARY. TO BE AN
ACTIVE VOTING MEMBER ONE MUST HAVE AN INTEREST IN THE MISSION OF THE
ORGANIZATION AND MUST PAY THE PRESCRIBED DUES DETERMINED BY THE BOARD.
HONORARY MEMBERS HAVE THE SAME RIGHTS AS ACTIVE MEMBERS EXCEPT THEY MAY NOT
HOLD OFFICE OR VOTE.
FORM 990, PART VI, SECTION A, LINE 7A:
THE ORGANIZATION HAS A NOMINATING COMMITTEE OF ACTIVE MEMBERS THAT ARE
APPOINTED BY THE CLUB PRESIDENT WITH APPROVAL OF THE BOARD. THE NOMINATING
COMMITTEE HAS THE DUTY TO NOMINATE FROM AMONG ACTIVE MEMBERSHIP SO MANY
MEMBERS TO BE ELECTED AS THERE ARE BOARD VACANCIES. A BALLOT IS MADE
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2019) 932211 09-06-19

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization THE ROTARY CLUB OF DOWNERS GROVE	Employer identification number 36-2867580
AVAILABLE TO ALL ACTIVE MEMBERS FOR THE ELECTION. THOSE C	ANIDDATES POLLING
THE HIGHEST VOTES WILL BE DECLARED THE WINNER FOR EACH VAC	ANCY.
FORM 990, PART VI, SECTION B, LINE 11B:	
THE FORM 990 IS PREPARED BY THE TREASURER AND ANOTHER MEMB	ER AND THEN
REVIEWED BY THE PRESIDENT.	
FORM 990, PART VI, SECTION C, LINE 19:	
DOCUMENTS ARE NOT AVAILABLE TO THE PUBLIC.	
	
•	