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Form **990-EZ**

Short Form
Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-1150

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2018 calendar year, or tax year beginning , 2018, and ending , 20

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

C Name of organization
Rotary International, Kirksville-Thousand Hills Rotary Club

Number and street (or P O box, if mail is not delivered to street address) | Room/suite
PO Box 887

City or town, state or province, country, and ZIP or foreign postal code
Kirksville, MO 63501

04

D Employer identification number
43-1515791

E Telephone number
660-665-1111 x221

F Group Exemption Number ▶ 0573

G Accounting Method: ☑ Cash ☐ Accrual Other (specify) ▶

I Website: ▶

J Tax-exempt status (check only one) – ☐ 501(c)(3) ☑ 501(c) (4) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

H Check ▶ ☑ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

K Form of organization: ☐ Corporation ☐ Trust ☑ Association ☐ Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are $200,000 or more, or if total assets (Part II, column (B)) are $500,000 or more, file rm 990 instead of Form 990-EZ . . . . . ▶ $

Part I **Revenue, Expenses, an Changes in Net Assets or Fund Balances** (see the instructions for Part I)

Check if the organization u d Schedule O to respond to any question in this Part I . . . . . ☐

Revenue	1	Contributions, gifts, grants, ar similar amounts received		1	5,664
	2	Program service revenue including government fees and contracts		2	
	3	Membership dues and assessments		3	14,644
	4	Investment income		4	425
	5a	Gross amount from sale of assets other than inventory	5a		
	b	Less: cost or other basis and sales expenses	5b		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	
	6	Gaming and fundraising events:			
	a	Gross income from gaming (attach Schedule G if greater than $15,000)	6a		
	b	Gross income from fundraising events (not including $ 0 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000)	6b	35,493	
	c	Less: direct expenses from gaming and fundraising events	6c	9,758	
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6d	25,735
	7a	Gross sales of inventory, less returns and allowances	7a		
	b	Less: cost of goods sold	7b		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	
	8	Other revenue (describe in Schedule O)		8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶		9	46,468
Expenses	10	Grants and similar amounts paid (list in Schedule O)		10	33,335
	11	Benefits paid to or for members		11	
	12	Salaries, other compensation, and employee benefits		12	
	13	Professional fees and other payments to independent contractors		13	479
	14	Occupancy, rent, utilities, and maintenance		14	
	15	Printing, publications, postage, and shipping		15	
	16	Other expenses (describe in Schedule O)		16	7,898
	17	**Total expenses.** Add lines 10 through 16 ▶		17	41,712
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	4,756
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	52,682
	20	Other changes in net assets or fund balances (explain in Schedule O)		20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶		21	57,438

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For Paperwork Reduction Act Notice, see the separate instructions. Cat No 10642I Form **990-EZ** (2018)

Part II Balance Sheets (see the instructions for Part II)

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

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	52,682	22	57,438
23	Land and buildings		23	
24	Other assets (describe in Schedule O)		24	
25	**Total assets**	52,682	25	57,438
26	**Total liabilities** (describe in Schedule O)		26	
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	52,682	27	57,438

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

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

What is the organization's primary exempt purpose? **Support of Rotary International and Local Charities**

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

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

28 Support of the Rotary Foundation. The Rotary Foundation is a 501(c)(3) Charitable Fund utilized to address humanitarian needs all over the world. One of the largest and most significant projects supported by the Foundation is the on-going effort to erradicate polio worldwide. Millions of people are impacted annually.
(Grants $) If this amount includes foreign grants, check here ▶ ☐ **28a** 12,972

29 Multiple local charities are supported by our organization: Inspire1, Pantry For Adair County, United Way, Foster Care program, I Think I Can Foundation, Charlton Valley Association, Moose Lodge, YMCA. NorthStar Rotary BBQ, PEACE Program, etc. Each of these programs helps hundreds of people annually.
(Grants $) If this amount includes foreign grants, check here ▶ ☐ **29a** 8,754

30 Days For Girls. This project provides feminine hygiene products in underdeveloped countries. Our club supports a local chapter that puts together the kits and sends them to Days for Girls Intl. for distribution. Since 2008, over 1,000,000 women and girls have been helped in 125 countries.
(Grants $) If this amount includes foreign grants, check here ▶ ☐ **30a** 2,500

31 Other program services (describe in Schedule O)
(Grants $) If this amount includes foreign grants, check here ▶ ☐ **31a**

32 **Total program service expenses** (add lines 28a through 31a) ▶ **32** 24,226

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)

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

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Jon Peck, President	5			
Patricia Kurtzeman, President-Elect	5			
Ernie Loft, Sergeant-At-Arms	5			
Shirley Baldwin, Secretary	5			
Terry Combs, Treasurer	5			
ALL OFFICERS SERVE WITHOUT COMPENSATION.				

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

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

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

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization

Rotary International, Kirksville-Thousand Hills Rotary Club

Employer identification number

43-1515791

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

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

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

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

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

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

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

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

		(a) Event #1 Dinner & RR (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	35493			35493
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	35493			35493
Direct Expenses	4 Cash prizes	6200			6200
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	3080			3080
	8 Entertainment				
	9 Other direct expenses	478			478
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				9758
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				25735

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____