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)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

Α	For t	he 2019 calendar year, or tax year beginning , 2019, and ending , 2019, and ending		1	
В	Check	If applicable C	Employe	er identification number	
=		s change   STILLWATER ROTARY CLUB	73-6102792		
$\mathbb{H}$	Name	2 STEVEN CUNDIFF		ne number	
H	Initial r	PO BOX 1451	405-372-4822		
H		ISTILLWATER, OK /4U/6-1451	F Group Exemption		
H		ation pending	Numbe		
G	Acco	unting Method X Cash Accrual Other (specify) ► H Check	► X if t	he organization is <b>not</b>	
1		site: N/A required		ch Schedule B	
J	Tax-ex	tempt status (check only one) — $\bigcirc$ 501(c)(3) $\bigcirc$ 501(c)(4) $\bigcirc$ (insert no) $\bigcirc$ 4947(a)(1) or $\bigcirc$ 527 (Form 9)	90, 990	·EZ, or 990-PF)	
	Form of organization Corporation Trust Association Other				
L	Add I asset	ines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if test (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ		10,301.	
Pa	rt I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instri	uctions	s for Part I)	
	١ ـ	Check if the organization used Schedule O to respond to any question in this Part I	<del></del>	X 202	
S	1	Contributions, gifts, grants, and similar amounts received	1 2	4,893.	
8	2	Program service revenue including government fees and contracts	3	14 004	
	; 3	Membership dues and assessments	4	14,094.	
N	4	Investment income  Gross amount from sale of assets other than inventory  a	<del>  -</del>		
Z	o a	Less cost or other basis and sales expenses  5b			
3		Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5	 c	
۵	6	Gaming and fundraising events	<del></del>		
쌜	a	Gross income from gaming (attach Schedule G if greater than \$15,000)  6 a			
2	ь	Gross income from fundraising events (not including \$ of contributions			
PREABILIED JUN 2 9 2020		from fundraising events reported on line 1) (attach Schedule G if the sum			
F		of such gross income and contributions exceeds \$15,000)  6 b		İ	
	С	Less direct expenses from gaming and fundraising events  6 c			
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6	d	
	7 a	Gross sales of inventory, less returns and allowances 7 a			
	ł	Less cost of goods sold 7b			
	С	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)	7	c c	
	8	Other revenue (describe in Schedule O)	8		
	9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	▶ 9	18,987.	
	10	Grants and similar amounts paid (list in Schedule O)  Benefits paid to or for members  Salaries, other compensation, and employee benefits	10		
	11	Benefits paid to or for members  Seleves of their components and ampleyes basefits	11	<del> </del>	
<b>,</b>	12	2071 101	13		
ses	13	Professional fees and other payments to independent contractors	14		
Expenses	14		15	<del>                                     </del>	
	15	Printing, publications, postage, and shipping Other expenses (describe in Schedule O)	16	21,372.	
	16   17	Total expenses. Add lines 10 through 16	► 1 <del>7</del>	21,372.	
	18	Excess or (deficit) for the year (subtract line 17 from line 9)	18	-2,385.	
ets		Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-y	<del> </del>	2,303.	
Net Assets	19	figure reported on prior year's return).	19	18,069.	
	20	Other changes in net assets or fund balances (explain in Schedule O)	20		
Z	21	Net assets or fund balances at end of year Combine lines 18 through 20	▶ 21	15,684.	

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2019)

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Form 990-EZ (2019)

the instructions for Part V ) Check if the organization used Schedule O to respond to any question in this	Part V		
33 Did the organization engage in any significant activity not previously reported to the IRS?		Yes	No
If 'Yes,' provide a detailed description of each activity in Schedule O  Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents is	of they reflect		X
a change to the organization's name Otherwise, explain the change on Schedule O. See instructions	34		Х
35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities			
(such as those reported on lines 2, 6a, and 7a, among others)?	35 a		Χ
<b>b</b> If 'Yes' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Sch			
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III	35 c		Х
36 Did the organization undergo a liquidation, dissolution, termination, or significant			<u> </u>
disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36		X
<b>37a</b> Enter amount of political expenditures, direct or indirect, as described in the instructions <b>b</b> Did the organization file <b>Form 1120-POL</b> for this year?	0. 37b		لتنت
<b>38 a</b> Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee, <b>or</b> were	3/6		<u>X</u> ندن
any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38 a		Χ
b If 'Yes,' complete Schedule L, Part II, and enter the total amount involved 38 b	0.		3.1
39 Section 501(c)(7) organizations Enter	<del></del>	·	. 1
a Initiation fees and capital contributions included on line 9	0.	`	.,
<b>b</b> Gross receipts, included on line 9, for public use of club facilities 39b	0.		
40 a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under N/	/A	<u> </u>	٠.
section 4911 ► 0 . , section 4912 ► 0 . , section 4955 ►	<u> </u>	4	, ,
b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 ex benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has no	cess		احيانا
reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	40 b		X
c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. ▶	0.	in A	
d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed	—— <u>U</u>	, * · · ·	
by the organization	0.	7	
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40 e		X
41 List the states with which a copy of this return is filed None	400		
41 List the states with which a copy of this return is filed None  42 a The organization's books are in care of STEVEN CUNDIFF Telephone no Located at PO BOX 187 STILLWATER OK  ZIP + 4	► 405-372-4		No No
41 List the states with which a copy of this return is filed None  42 a The organization's books are in care of STEVEN CUNDIFF  Telephone no	► 405-372-4 ► 74076-018	7	
42 a The organization's books are in care of STEVEN CUNDIFF Located at PO BOX 187 STILLWATER OK  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a	► 405-372-4 ► 74076-018	7 Yes	X
42 a The organization's books are in care of STEVEN CUNDIFF  Located at PO BOX 187 STILLWATER OK  b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If 'Yes,' enter the name of the foreign country	405-372-4 74076-018	7 Yes	
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42 a The organization's books are in care of STEVEN CUNDIFF Located at PO BOX 187 STILLWATER OK  b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country  See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  c At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country   43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year  44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  c Did the organization creeive any payments for indoor tanning services during the year?  d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments?  If 'No,' provide an explanation in Schedule O	43 44 44 45 a	Yes	X X X N/A No X X X

Form 990	EZ (2019) STILLWATER ROTARY (	CLUB		73-610	2792	Р	age <b>4</b>
46 Did to	the organization engage, directly or indire	ctly, in political campa e Schedule C, Part I	ign activities on behalf o	of or in opposition to	46	Yes	No X
Part VI	Section 501(c)(3) Organizations All section 501(c)(3) organization for lines 50 and 51	s Only	juestions 47-49b and	d 52, and complete	the table	:s	<del></del> -
	Check if the organization used Schedul	le O to respond to any	question in this Part VI				П
	he organization engage in lobbying activities plete Schedule C, Part II	or have a section 501(h	) election in effect during	the tax year? If 'Yes,'	47	Yes	No
	e organization a school as described in se	ection 170(b)(1)(A)(ii)?	' If 'Yes.' complete Sche	dule E	48		
	the organization make any transfers to an				49 a		
<b>b</b> If 'Ye	es,' was the related organization a section	n 527 organization?			49 b		
	plete this table for the organization's five high oyees) who each received more than \$100,0				ey		
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099 MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimate other com		
							,
							_
		00.000	<u></u>				
51 Comi	I number of other employees paid over \$1 plete this table for the organization's five high pensation If there is	nest compensated inden-	endent contractors who ea	ach received more than \$	100,000 of		
	(a) Name and business address of each independent co	ontractor	<b>(b)</b> Type (	of service	(c) Comp	ensation	,
<b>52</b> Did t	I number of other independent contractors he organization complete Schedule A? <b>N</b> o pleted Schedule A	•		ttach a	► ∏Yes		No
Under penaltie true, correct, a	es of perjury, I declare that I have examined this regum, and complete Declaration of preparer (other than of ice	including accompanying scheol) is based on all information of	dules and statements, and to the	best of my knowledge and beli edge	ef it is		
Sign	Signature of officer			2-4-20 Date			
Here	STEVEN CUNDIFF Type or print name and title	2/2//		TREASURER			
Paid	Print/Type preparer's name STEVEN F CUNDIFF	Preparer signature STEVEN F CUNDI	Date     2 - 4 - 2	Check 🗀 if	<sup>TIN</sup> 0125820	 6	/
Preparer Use Only	Firm's name ► Steven F. Cundi:	ff, CPA Inc.			73-1289		
<u> </u>	Stillwater, OK			Phone no (40)			
	S discuss this return with the preparer sh	own above? See instri	uctions		► X Yes	<u> </u>	No
BAA					Form <b>990</b>	1-EZ (2	2019)

### 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. ► Attach to Form 990 or 990-EZ.

2019

OMB No 1545-0047

Open to Public Inspection '

Department of the Treasury Internal Revenue Service

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

Name of the organization STILLWATER ROTARY CLUB	Employer identification number
% STEVEN CUNDIFF	73-6102792
Form 990 F7 Part I Line 16	

#### orm 990-EZ, Part I, Line 16 Other Expenses

DUES KIDS BACKPACK PROGRAM MEALS Office Expenses	\$	2,725. 3,876. 7,763. 853.
ROTARY FOUNDATION ROTARY MATCHING GRANT ROTARY YOUTH LEADERSHIP		4,058. 750. 950.
WINGS OF ROTARY	Total \$	397. 21,372.

## Form 990-EZ, Part III - Organization's Primary Exempt Purpose

TO ADV. AWARENESS & DEV OF DIST LEARN

# Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

The organization is a Rotary club. Our goal is world peace through understanding. We sponsor foreign exchanges of students and adults through out the world. We support the eradication of polio, purchase dictionaries for all third grade students in the school district, send students to leadership conferences, recognize outstanding citizens, in our community, and raise awareness for environmental protection.