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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 black lung benefit trust or private foundation)

OMB No 1545-1150

2008**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

- ▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.
- ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2008 calendar year, or tax year beginning **7/01/08**, and ending **6/30/09**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization ROTARY CLUB OF DURANGO DAYBREAK	D Employer identification number 76-0703464
		Number and street (or P O box, if mail is not delivered to street address) Room/suite 150 EAST 9TH STREET, # 300	E Telephone number 970-259-8000
		City or town, state or country, and ZIP + 4 DURANGO CO 81301	F Group Exemption Number 0573

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method ☒ Cash ☐ Accrual
Other (specify) ▶

I Website: ▶ **N/A****J** Organization type (check only one) ☒ 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** Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **70,121****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)**

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	21,526
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	10,500
	4 Investment income	4	7
	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) (attach sch)	5c	
	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
	a Gross revenue (not including \$ 18,941 of contributions reported on line 1)	6a	38,088
b Less direct expenses other than fundraising expenses	6b	20,109	
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	17,979	
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 ▶)	8		
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	50,012	
Expenses	10 Grants and similar amounts paid (attach schedule)	10	22,907
	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	
	14 Occupancy, rent, utilities, and maintenance	14	1,999
	15 Printing, publications, postage, and shipping	15	
	16 Other expenses (describe ▶ SEE STATEMENT 3)	16	12,243
	17 Total expenses. Add lines 10 through 16	17	37,149
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	12,863
Net Assets	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	10,203
	20 Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 4	20	6,231
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	29,297

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	10,203	23,066
23 Land and buildings		
24 Other assets (describe ▶ SEE STATEMENT 5)		6,231
25 Total assets	10,203	29,297
26 Total liabilities (describe ▶)	0	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	10,203	29,297

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

Form 990-EZ (2008)

28

Expenses
 incurred for 501(c)(3)
) organizations
 947(a)(1) trusts,
 al for others)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N	36	X
37a Enter amount of political expenditures, direct or indirect, as described in the instr	37a	
b Did the organization file Form 1120-POL for this year?	37b	X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations Enter		
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911, section 4912, section 4955		
b Section 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I	40b	X
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d Enter amount of tax on line 40c reimbursed by the organization		
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	40e	X
41 List the states with which a copy of this return is filed	NONE	
42a The books are in care of	BRAD TAFOYA	
	150 EAST 9TH STREET, #300	
Located at	DURANGO, CO	
	Telephone no 970-259-8000	
	ZIP + 4 81301	
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)?	42b	X
If "Yes," enter the name of the foreign country		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c At any time during the calendar year, did the organization maintain an office outside of the U S ?	42c	X
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	43	
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	X

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

	Yes	No
46 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	46	
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b If "Yes," was the related organization(s) a section 527 organization?	49b	

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Total number of other employees paid over \$100,000				

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
Total number of other independent contractors each receiving over \$100,000		

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying 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.		
	Signature of officer <i>Bred A. Taylor</i>	Date <i>5/16/2010</i>	
Paid Preparer's Use Only	Type or print name and title <i>Bred A. Taylor, Past-President 2008-2009</i>		
	Preparer's signature	Date	Preparer's Identifying Number (See instr.)
	Firm's name (or yours if self-employed), address, and ZIP + 4	Check if self-employed <input type="checkbox"/>	EIN
	THIS TAX RETURN PREPARED BY A NON-PAID PREPARER.		Phone

May the IRS discuss this return with the preparer shown above? See instructions

Yes No

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1 RED BALL EXPRES (event type)	(b) Event #2 WESTERNDAY (event type)	(c) Other Events NONE (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1	Gross receipts	35,871	21,158	57,029
	2	Less: Charitable contributions	11,000	7,941	18,941
	3	Gross revenue (line 1 minus line 2)	24,871	13,217	38,088
Direct Expenses	4	Cash prizes	8,000		8,000
	5	Non-cash prizes			
	6	Rent/facility costs			
	7	Other direct expenses	5,419	6,690	12,109
	8	Direct expense summary. Add lines 4 through 7 in column (d)			20,109
	9	Net income summary. Combine lines 3 and 8 in column (d)			17,979

Part III Gaming. Complete if the organization answered "Yes" to 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			
	2	Cash prizes			
Direct Expenses	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	7	Direct expense summary. Add lines 2 through 5 in column (d)			
	8	Net gaming income summary. Combine lines 1 and 7 in column (d)			

9 Enter the state(s) in which the organization operates gaming activities

a Is the organization licensed to operate gaming activities in each of these states?

b If "No," Explain

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," Explain

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

	Yes	No
9a		X
10a		X
11		X
12		X

13 Indicate the percentage of gaming activity operated in**a** The organization's facility**b** An outside facility

		Yes	No
13a	%		
13b	%		

14 Provide the name and address of the person who prepares the organization's gaming/special events books and recordsName ► **BRAD TAFOYA****150 EAST 9TH STREET, #300**Address ► **DURANGO****CO 81301****15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue?**b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$**c** If "Yes," enter name and address

Name ►

Address ►

16 Gaming manager information

Name ►

Gaming manager compensation ► \$

Description of services provided ►

☐ Director/officer☐ Employee☐ Independent contractor**17** Mandatory distributions**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?**b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$**15a** **X****17a** **X**

Federal Statements**Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments**

<u>Description</u>	<u>Amount</u>
MEMBERSHIP ANNUAL DUES	\$ 10,500
TOTAL	\$ 10,500

3920000 ROTARY CLUB OF DURANGO DAYBREAK
76-0703464
FYE: 6/30/2009

5/17/2010 2:14 PM

Statement 2 - Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid

Name and Address	Description of Property	Cash Contribution	Noncash Contribution	Relationship to Organization	Class of Activity	Book Value	Book Value Explanation	FMV Explanation	Purpose
DURANGO HIGH NOON ROTARY PO BOX 3058 DURANGO, CO 81302		5,119		ROTARY					25% REDBALL EXPRESS
DURANGO ROTARY CLUB PO BOX 38 DURANGO, CO 81302		5,119		ROTARY					25% REDBALL EXPRESS
PINE RIVER VALLEY CENTENNIAL 395 BAYFIELD CENTER DRIVE BAYFIELD, CO 81122		5,119		ROTARY					25% REDBALL EXPRESS
THE ROTARY FOUNDATION 1560 SHERMAN AVENUE EVANSTON, IL 60201		7,550		ROTARY					VARIOUS GRANTS
TOTAL		22,907							

Federal Statements**Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses**

Description	Amount
EXPENSES	\$
CLUB SERVICE COMMITTEE	4,127
VOCATIONAL ENTREPRENEUR	675
ROTARY YOUTH LEADERSHIP	700
COMMUNITY SERVICE COMMITTEE	5,047
INTERNATIONAL COMMITTEE	494
ROTARY YOUTH EXCHANGE	1,200
TOTAL	\$ 12,243

Statement 4 - Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
INTERACT CLUB ACCOUNT (FISCAL AGENT)	\$ 6,231
TOTAL	\$ 6,231

Statement 5 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beginning of Year	End of Year
INTERACT CLUB ACCOUNT (FISCAL AGENT)	\$	\$ 6,231
		6,231

Federal Statements**Statement 6 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose****Description**

HUMANITARIAN SERVICE ORGANIZATION WHOSE FOCUS IS TO ENCOURAGE AND FOSTER THE IDEAL OF SERVICE AS A BASIS OF WORTHY ENTERPRISE AND, IN PARTICULAR, TO ENCOURAGE AND FOSTER:

- 1) THE DEVELOPMENT OF ACQUAINTANCE AS AN OPPORTUNITY FOR SERVICE;
- 2) HIGH ETHICAL STANDARDS IN BUSINESS AND PROFESSIONS; THE RECOGNITION OF THE WORTHINESS OF ALL USEFUL OCCUPATIONS; AND THE DIGNIFYING OF EACH ROTARIAN'S OCCUPATION AS AN OPPORTUNITY TO SERVE SOCIETY.
- 3) THE APPLICATION OF THE IDEAL OF SERVICE IN EACH ROTARIAN'S PERSONAL, BUSINESS AND COMMUNITY LIFE;
- 4) THE ADVANCEMENT OF INTERNATIONAL UNDERSTANDING, GOODWILL AND PEACE THROUGH A WORLD FELLOWSHIP OF BUSINESS AND PROFESSIONAL PERSONS UNITED IN THE IDEAL OF SERVICE.

Statement 7 - Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments**Description**

CLUB SERVICE - FOCUSES ON STRENGTHENING FELLOWSHIP AND ENSURING THE EFFECTIVE FUNCTIONING OF THE CLUB. DURING THE YEAR, THE CLUB SERVICE COMMITTEE HELD SEVERAL FELLOWSHIP FUNCTIONS, HELD TWO FIRESIDE CHATS WHERE THE IDEALS OF ROTARY AND SERVICE WERE DISCUSSED, DISTRIBUTED A WEEKLY NEWSLETTER AND DISCUSSED CLUB SERVICE AT WEEKLY MEETINGS.

CLUB SERVICE COMMITTEE ALSO ARRANGED FOR SPEAKERS AT EACH WEEKLY MEETING WHERE MEMBERS LEARN MORE ABOUT THEIR COMMUNITY AND ROTARY.

Statement 8 - Form 990-EZ, Part III, Line 29 - Statement of Program Service Accomplishments**Description**

VOCATIONAL SERVICE ENCOURAGES ROTARIANS TO SERVE OTHERS THROUGH THEIR VOCATIONS AND PRACTICE HIGH ETHICAL STANDARDS. THE CLUB SUPPLIED SPEAKERS FOR THE LOCAL HIGH SCHOOL ENTREPRENEUR CLASS AND AT THE END OF EACH SEMESTER JUDGED EACH STUDENT'S BUSINESS PLAN PRESENTATIONS. THIS PROGRAM ALLOWS THE STUDENTS TO LEARN FROM EACH PRESENTER ABOUT THEIR VOCATION.

THE CLUB ALSO SPONSORED TWO STUDENTS AT THE ROTARY YOUTH LEADERSHIP AWARDS CONFERENCE WHERE HIGH SCHOOL STUDENTS LEARN LEADERSHIP SKILLS, ETHICS AND THE IMPORTANCE OF SERVICE.

AT EACH CLUB MEETING, CLUB MEMBERS TAKE TURNS GIVING BRIEF SUMMARIES OF THEIR VOCATION AND RECITE ROTARY'S FOUR WAY TEST. THE FOUR WAY TEST IS AN IMPORTANT ETHICAL STANDARD THAT ALL ROTARIANS TRY TO FOLLOW IN THEIR PERSONAL AND BUSINESS LIVES.

Federal Statements**Statement 9 - Form 990-EZ, Part III, Line 30 - Statement of Program Service Accomplishments****Description**

COMMUNITY SERVICE COVERS THE PROJECTS AND ACTIVITIES THE CLUB UNDERTAKES TO IMPROVE LIFE IN ITS COMMUNITY. THE SERVICE COMMITTEE AWARDED SEVERAL SMALL GRANTS TO WORTHY ORGANIZATIONS IN THE LOCAL COMMUNITY. SOME OF THESE INCLUDE SUPPORT OF THE BOYS AND GIRLS CLUB, AMERICAN CANCER RELAY FOR LIFE, ESCALANTE MIDDLE SCHOOL GREENHOUSE, ADULT EDUCATION CENTER, DURANGO PUBLIC LIBRARY AND MANY MORE. THE SERVICE COMMITTEE ALSO ARRANGED FOR SEVERAL "HANDS-ON" WORK PROJECTS WHERE MEMBERS WORK TOGETHER TO IMPROVE THE LOCAL COMMUNITY. THESE INCLUDE HABITAT FOR HUMANITY, FIREWOOD DELIVERY PROJECT, WRAPPING AND DISTRIBUTION OF DICTIONARIES TO LOCAL THIRD GRADERS, RED BALL EXPRESS, HIGHWAY CLEAN-UP AND MANY MORE.

THE COMMITTEE AND THE CLUB ALSO SPONSOR, ADVISE AND SUPPORT THE LOCAL INTERACT CLUB, A HIGH SCHOOL VERSION OF ROTARY.

Statement 10 - Form 990-EZ, Part III, Line 31 - Statement of Program Service Accomplishments**Description**

INTERNATIONAL SERVICE COMMITTEE ENCOMPASSES ACTIONS TAKEN TO EXPAND ROTARY'S HUMANITARIAN REACH AROUND THE GLOBE AND PROMOTE WORLD UNDERSTANDING AND PEACE.

THE INTERNATIONAL COMMITTEE AWARDED SEVERAL GRANTS THROUGH THE ROTARY FOUNDATION WHICH HELPED PROMOTE WORLD PEACE AND UNDERSTANDING. THESE INCLUDED BUT ARE NOT LIMITED TO:

1) LAGOS NIGERIA PROJECT - PROJECT TO DELIVER MOSQUITO NETS AND POLIO VACCINES IN LAGOS NIGERIA = \$500

2) JUAREZ CAMPESTRE ORPHANAGE PROJECT WILL BENEFIT HANDICAPPED ORPHANS BY PROVIDING SOLAR PANELS AND GENERATORS. = \$2,000

3) ECUADOR WATER PROJECTS - TWO DIFFERENT PROJECTS IN ECUADOR TO SUPPLY SAFE DRINKING WATER AND IRRIGATION WATER = \$2,000.

4) 3H GRANT - PARTICIPATING IN A HEALTH, HUMANITY AND HUNGER GRANT TO FUND 13 ADULT EDUCATION CENTERS IN MEXICO CITY. = \$3,000

THE CLUB ALSO HOSTED ROTARY YOUTH EXCHANGE STUDENTS AND GROUP STUDY EXCHANGE TEAMS. BOTH OF THESE ACTIVITIES ALLOWED MEMBERS TO LEARN FROM DIFFERENT CULTURES, DEVELOP INTERNATIONAL ACQUAINTANCES, THEREBY PROMOTING WORLD PEACE AND UNDERSTANDING.

**Application for Extension of Time To File an
Exempt Organization Return**

OMB No 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization Rotary Club of Durango Daybreak	Employer identification number 76 : 0703464
	Number, street, and room or suite no. If a P.O. box, see instructions. 150 East Ninth Street, Suite 300	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Durango, CO	

Check type of return to be filed (file a separate application for each return):

- | | | |
|---|---|------------------------------------|
| <input type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input checked="" type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ► **Brown Wheeldon Tafoya and Barrett PC**

Telephone No. ► (**970**) **259-8000** FAX No. ► ()

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **February 15**, 20**10**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ☐ calendar year 20 or
► ☒ tax year beginning **July 1**, 20 **08**, and ending **June 30**, 20 **09**.

2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box. ☒ **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization		Employer identification number
	Rotary Club of Durango Daybreak		76-0703464
	Number, street, and room or suite no. If a P.O. box, see instructions.		For IRS use only
	150 E. 9th Street, Suite 300		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
	Durango CO 81301		

Check type of return to be filed (File a separate application for each return):

- | | | | |
|---|---|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 8870 |
| <input checked="" type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 5227 | |

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of **Brown Wheeldon Tafoya and Barrett PC**
Telephone No. **(970)259-8000** FAX No.
- If the organization does not have an office or place of business in the United States, check this box. ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box. ☐. If it is for part of the group, check this box. ☐ and attach a list with the names and EINs of all members the extension is for.

- 4** I request an additional 3-month extension of time until **5/15/2010**.
- 5** For calendar year , or other tax year beginning **7/1/2008**, and ending **6/30/2009**.
- 6** If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7** State in detail why you need the extension **More time is requested to acquire all information needed to complete and file an accurate return.**

8 a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$ 0

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature

Title

Date

Form **8868** (Rev. 4-2009)