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Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 Open to Public Inspection

				<del></del>
<u>A</u>	For the	2009 calendar year, or tax year beginning and ending		
В	Check if	Please C Name of organization	D Employer identific	cation number
i	applicable	Use IRS ROTARY CLUB OF SUFFOLK		
	Addres change			
F	Name	type	<sup>─</sup> 31_1	775330
F	change ∏Initial			
누	ireturn ☐Termin	See Number and street (or P.O. box if mail is not delivered to street address) Room/st		
느	lated	Instruc-	/5/-	925-3763
	Ameno	led tions City or town, state or country, and ZIP + 4	G Gross receipts \$	19,150.
	Application	SUFFOLK, VA 23439-1972	H(a) Is this a group re	eturn
	pendir	F Name and address of principal officer JAY BUTLER	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates ind	
_			<del></del>	
		empt status: X 501(c) ( 3 ) ◀ (insert no.) 4947(a)(1) or 527	<del></del>	list. (see instructions)
		e: ▶ N/A	H(c) Group exemptio	
		organization: X Corporation	ear of formation: 2001 N	State of legal domicile: VA
P	art I	Summary		
	1	Briefly describe the organization's mission or most significant activities SUPPORT	OF LOCAL AND	
Activities & Governance		INTERNATIONAL CHARITIES		
Jar		Check this box I if the organization discontinued its operations or disposed of m	acce than 25% of its not as	e e e e e e e e e e e e e e e e e e e
ē			i	10
á		Number of voting members of the governing body (Part VI, line 1a)	3	
ಷ	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	10
S	5	Total number of employees (Part V, line 2a)	5	0
Ę	6	Total number of volunteers (estimate if necessary)	6	90
衰	1	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
ĕ	1	Net unrelated business taxable income from Form 990-T, line 34	CD 70	0.
	<u> b</u>	Net difference business taxable income from Form 950-1, line 34	-	
0			Prior Year)	Current Year
ھ	8	Contributions and grants (Part VIII, line 1h)	20139, 974/2.	18,964.
<u>_</u>	9	Program service revenue (Part VIII, line 2g)		
ଞ୍ଚ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	N / / / / 51.	136.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	28/929.	50.
S	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	68/,922.	19,150.
EXERAMINED   SEROGLEZOII	10		87,725.	64,087.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	07,723	01,00,0
Ž	14	Benefits paid to or for members (Part IX, column (A), line 4)		
Z	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
Ø	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	Ь	Total fundraising expenses (Part IX, column (D), line 25)		
Ĭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	86.	41.
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	87,811.	64,128.
			-18,889.	-44,978.
		Revenue less expenses Subtract line 18 from line 12		
S			Beginning of Current Year	End of Year
Net Assets or Find Ralances	20	Total assets (Part X, line 16)	61,602.	16,624.
Z A	21	Total liabilities (Part X, line 26)		
ᆲ	22	Net assets or fund balances. Subtract line 21 from line 20	61,602.	16,624.
	art II	Signature Block		
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stateme	nts, and to the best of my knowled	ge and belief, it is true, correct,
		and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowled	idge /	
			15/1	/,-
Sig	ın			_ <i>[/-</i> 3
He	re	Signature of officer	Daily	
		JAY BUTLER, PRESIDENT		<u> </u>
		Type or print name and title		- <del> </del>
_		Preparer's Date		er's identifying number structions)
Pai	đ	signature Purtas Blanca 8-10-10	self- employed > X	
Pre	parer's	Firm's name (or CHRISTOPHER B. ROBINSON, PLLC	EIN ▶	
Use	Only	Vours if CHRISTOPHER B. ROBINSON, ILLIC	LIN P	
	-	self-employed), address, and CANDOL W. WASHINGTON STREET	DE /	757\005 2762
_		ZIP+4 SUFFOLK, VIRGINIA 23434-6102	J Phone no. ► (	757)925-3763
Ma	y the II	RS discuss this return with the preparer shown above? (see instructions)		X Yes No
932	001 02-0	LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate	instructions.	Form <b>990</b> (2009)

# ROTARY CLUB OF SUFFOLK CHARITABLE FOUNDATION

	m 990 (2009) CHARITA	ABLE FOUNDATION	31-17	75330 Page <b>2</b>
Pa	art III   Statement of Program Se			
1	Briefly describe the organization's missi			
	SUPPORT OF LOCAL AND	INTERNATIONAL CHARITIES	<del></del>	
			<del></del>	
2	Did the organization undertake any sign	ificant program services during the year which were not lis	sted on	
_	the prior Form 990 or 990-EZ?	micant program services during the year which were not no	ica on	Yes X No
	If "Yes," describe these new services or	s Schedule O		
3		or make significant changes in how it conducts, any progr	am services?	Yes X No
	If "Yes," describe these changes on Sci			
4	<del>-</del>	ents for each of the organization's three largest program s	services by expenses	
		tions and section 4947(a)(1) trusts are required to report ti		
	<del>_</del>	s, and revenue, if any, for each program service reported.	-	
			·	
4a	7 ( )		) (Revenue \$	)
	SUPPORT OF LOCAL AND	INTERNATIONAL CHARITIES		
4b	(Code: ) /Evpansos \$	including grants of \$	) (Revenue \$	<del></del>
40	(Code <sup>-</sup> ) (Expenses \$	including grants of \$	) (Havenille 2	,
			<del></del>	<del></del>
			<u> </u>	<del></del>
	<del></del>			
4c	(Code. ) (Expenses \$	including grants of \$	) (Revenue \$	)
			<del></del>	
				· · · · · · · · · · · · · · · · · · ·
				<del> </del>
	<del></del>			··
4d	Other program services (Describe in Sc	hedule O )		
Tu	• =	cluding grants of \$ ) (Revenue \$	ì	
4e	Total program service expenses ▶\$	64,087.		
	<u> </u>		· · · · · · · · · · · · · · · · · · ·	Form <b>990</b> (2009)

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# ROTARY CLUB OF SUFFOLK Form 990 (2009) CHARITABLE FOUNDATION Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	L	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? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		L
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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,			
	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			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11		X
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12		X
404	Schedule D, Parts XI, XII, and XIII.  Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No	12		
12A				
13	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
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	<u> </u>	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		Х
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		Х
20	Did the organization operate one or more hospitals? If "Yes." complete Schedule H	20		Х

# ROTARY CLUB OF SUFFOLK Form 990 (2009) CHARITABLE FOUNDATION Part IV Checklist of Required Schedules (continued)

	·		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 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	ļ		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J .	23		X
24a	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	1		
	Schedule K If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) 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
b	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	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? 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	1		
	instructions for applicable filing thresholds, conditions, and exceptions).	1		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u> </u>	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			İ
	contributions? If "Yes," complete Schedule M	30		X
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		ļ	
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		<u>X</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	ļ	X
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 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O.	38	X	
		Form	990 (	2009)

ROTARY CLUB OF SUFFOLK CHARITABLE FOUNDATION

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	т-	Т	, ,	' 3		วบ	Page	·

Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 0 U.S. Information Returns. Enter -0- if not applicable 0 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 10 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 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? За b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in 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 Х 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 the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. 5a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X 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, Disclosure by Tax-Exempt Entity Regarding Prohibited 5c Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit 6a Х any contributions that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services Х 7a provided to the payor? 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 X 7c to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7e benefit contract? 7f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g 7h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings 8 at any time during the year? Sponsoring organizations maintaining donor advised funds. 9a a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter-10a a Initiation fees and capital contributions included on Part VIII, line 12 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter. 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

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Form 990 (2009) CHARITABLE FOUNDATION 31-1775330 Page
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 in Schedule O See instructions.

sec	tion A. Governing Body and Management						
		ı	1	4.0[		Yes	No
1a	Enter the number of voting members of the governing body	1a		10			
b	· · · · · · · · · · · · · · · · · · ·	<u>1b</u>		10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other				77
	officer, director, trustee, or key employee?		_	ŀ	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the	e dired	t supervision	ŀ			7.7
	of officers, directors or trustees, or key employees to a management company or other person?			ŀ	3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Fo		J was filed?	ŀ	4		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	S?		ŀ	5		X
6	Does the organization have members or stockholders?		- 6 11-	ŀ	6_		
7a	·	mbers	s of the				v
	governing body?			ŀ	<u>7a</u>		<u>X</u>
	Are any decisions of the governing body subject to approval by members, stockholders, or other per			ŀ	.7b_		
8	Did the organization contemporaneously document the meetings held or written actions undertaken	auring	tne year				
	by the following:			ŀ		₩.	
	The governing body?			ł	8a	X	
	Each committee with authority to act on behalf of the governing body?		4.45	ł	8b	^	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	cnea	at the			Î	v
`	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		- 0-4-1		9		<u>X</u>
<del>sec</del>	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenu	e Coae)		1	Vaa	N.
	Describe account to the least shortest humaning an affiliates?			ſ	100	Yes	No X
	Does the organization have local chapters, branches, or affiliates?	chont	ore offiliates	ł	10a		
b	If "Yes," does the organization have written policies and procedures governing the activities of such	cnapt	ers, annates,		10b		
	and branches to ensure their operations are consistent with those of the organization?	lına th	o form?	ŀ		Х	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fi	iirig ii i	e ioiiir	ŀ	11		
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				100	1	Х
	Does the organization have a written conflict of interest policy? If "No," go to line 13	ماما مسا	0 5:00	}	12a		
b	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	ila giv	e rise		12b		
	to conflicts?	"Voc "	dosonha	F	IZU_		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	163,	describe		12c		
40	In Schedule O how this is done			ŀ	13		X
13	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?			ŀ	14		X
14	Did the process for determining compensation of the following persons include a review and approve	al by ir	dependent	ŀ	17		
15	_		dependent				
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				15a		Х
	The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization			ŀ	15b		X
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			ŀ	100		
164	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment v	vith a				
iva	taxable entity during the year?			İ	16a		X
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva	luate i	ts participation	ì			
D	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization						
	exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ► NONE						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1	(501)	c)(3)s only) ava	ulable	for		
	public inspection. Indicate how you make these available Check all that apply	. = /1	,,,				
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	onflict	of interest pol	ıcv. an	d fina	ncial	
.5	statements available to the public		:=: === <b>[</b> p = .	=			
20	State the name, physical address, and telephone number of the person who possesses the books a	nd rec	ords of the ord	anızat	on.	•	
LU	CHRISTOPHER B. ROBINSON, CPA - 757-925-3763		9				
	709 W. WASHINGTON STREET, SUFFOLK, VA 23434-6102						
	707 111 1111111111111111111111111111111				_	000	

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

### 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. Use Schedule J-2 if additional space is needed.

- 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. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees, highest compensated employees; and former such persons

Check this box if the organization did n (A)	(B)				<del></del>			(D)	(E)	(F)
Name and Title	Average	Position						Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	nstitutional trustee	all		Highest compensated do do		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
JAY BUTLER			-		-	- 6	_			
PRESIDENT	5.00							0.	0.	0.
KENDA COUNCIL	3.00					┢	$\vdash$	•		
VICE-PRESIDENT	5.00							0.	0.	0.
HUGH RITCHIE CROSS	3.00		$\vdash$	-		<u> </u>			<u> </u>	
SECRETARY	5.00							0.	0.	0.
WAYNE SCOTT	3.00	-				$\vdash$	_	0.	<b>.</b>	<u> </u>
TREASURER	5.00							0.	0.	0.
SUSAN BLAIR	3.00	-					_	0.		
DIRECTOR	5.00							0.	0.	0.
LINDA SMITH	3.00			$\vdash$		$\vdash$	_			
DIRECTOR	5.00							0.	0.	0.
JENNEFER AMBROSE	3.00		$\vdash$							
DIRECTOR	5.00							0.	0.	0.
TRENTON BISHOP	3.00									
DIRECTOR	5.00							0.	0.	0.
WAYNE SCOTT	3.00	-				t	_			
DIRECTOR	5.00				ŀ			o.	0.	0.
TOM POWELL	3.00								0.	
DIRECTOR	5.00							0.	0.	0.
						-				

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(A) Name and title	(B) Average	(C) Position						(D) Reportable	<b>(E)</b> Reportable		(F) Estimat	ed
וימוווט מווט נונוט	hours	-		all t			ly)	compensation	compensation from related		amount other	t of
	week	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	)     c	ompens from the organization and relation organization	ation ne ition ited
							1					
		<u> </u>	_						<del></del>	-		
										+		
											<del></del>	
		!								+		
1b Total		<u> </u>						0.		).		0.
Total number of individuals (including bu compensation from the organization	t not limited to th	nose	liste	d ab	oove	e) wh	o re	eceived more than \$100	,000 in reportable			0
3 Did the organization list any former office	er, director or tru	ıstee	, ke	y em	ploy	yee,	or h	nghest compensated en	nployee on		Yes	No
line 1a? If "Yes," complete Schedule J fo 4 For any individual listed on line 1a, is the	sum of reportab	le co							the organization	_3		X
<ul> <li>and related organizations greater than \$</li> <li>Did any person listed on line 1a receive of the organization? If "Yes," complete School</li> </ul>	or accrue compe	nsatı	ion f						ces rendered to	5		X
Section B. Independent Contractors												
1 Complete this table for your five highest the organization. NONE	compensated in	depe	ende	nt co	ontr	acto	rs tl	hat received more than	\$100,000 of comp	nsatioi	1 from	_
(A) Name and busine	ss address							(B) Description of s	ervices		(C) pensatio	nn
						_				<del>-</del>		
	<u> </u>						$\dashv$					
						·	+					
							+				<u> </u>	
Total number of independent contractors     \$100,000 in compensation from the organization.		not lir	mite	d to		se lis	ted	above) who received m	ore than			
											- aan	

Form 990 (2009) CHARITABLE FOUNDATION <u>31-17753</u>30\_ Page 9 Part VIII Statement of Revenue (D) Revenue (C) (A) (B) Related or Unrelated Total revenue excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue Contributions, gifts, grants and other similar amounts 1 a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 18,964 similar amounts not included above g Noncash contributions included in lines 1a-1f \$\_ 18,964 h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue g Total, Add lines 2a-2f Investment income (including dividends, interest, and 136. 136 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6 a Gross Rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less. cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 50. 900099 50 11 a PRINT SALES d All other revenue 50. e Total. Add lines 11a-11d 1<u>9,15</u>0. 186. 0. 0. Total revenue. See instructions.

Form 990 (2009) CHARITABLE FOUNDATION
Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	ete columns (B), (C), an (C) Management and general expenses	d (D). (D) Fundraising expenses
1	Grants and other assistance to governments and	·			
	organizations in the U.S. See Part IV, line 21	62,587.	62,587.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	1,500.	1,500.		
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)				<del></del>
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees).				
_	Management				
b					· · · · · · · · · · · · · · · · · · ·
	Accounting				
	Lobbying Professional fundraising services. See Part IV, line 17				
f	·		·- · <u>-</u> ,		
, g					
9 12	Advertising and promotion				<del></del>
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				· · · · · · · · · · · · · · · · · · ·
21	Payments to affiliates				· · · · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization	<u>_</u>			
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total				
	expenses shown on line 25 below.)	A1		41.	
	BANK FEES	41.		41.	
b					
C				·	<del></del>
d					
e f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	64,128.	64,087.	41.	0.
<u>25</u> 26	Joint costs. Check here J If following	02,2201			
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	j	1		
	educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet	DATION		<u> </u>	773330 1 ago 1 t
	•			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1	
	2	Savings and temporary cash investments		61,602.	2	<u>16,624.</u>
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, di	rectors, trustees, key			
		employees, and highest compensated employe	es Complete Part II			
		of Schedule L			5	
	6	Receivables from other disqualified persons (as	defined under section			
		4958(f)(1)) and persons described in section 49	58(c)(3)(B). Complete			
	ľ	Part II of Schedule L	, , , , ,		6	
S.	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
Ÿ	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other				
	-	basis. Complete Part VI of Schedule D	10a			
	ь	Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities		11		
	12	Investments - other securities. See Part IV, line		12		
	13	Investments - program-related. See Part IV, line			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equ	61,602.	16	16,624.	
	17	Accounts payable and accrued expenses		17		
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
က္ခ	21	Escrow or custodial account liability. Complete	Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, director				
abil		highest compensated employees, and disqualifi				
ت		of Schedule L			22	
	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelate			24	
	25	Other liabilities. Complete Part X of Schedule D	·		25	
	26	Total liabilities, Add lines 17 through 25		0.	26	0.
		Organizations that follow SFAS 117, check he	ere and complete			
S		lines 27 through 29, and lines 33 and 34.	·			
ຊ	27	Unrestricted net assets			27	
<u>a</u>	28	Temporarily restricted net assets			28	
B D	29	Permanently restricted net assets			29	
5		Organizations that do not follow SFAS 117, c	heck here 🕨 🗶 and			
<u> </u>		complete lines 30 through 34.				
ets	30	Capital stock or trust principal, or current funds		0.	30	0.
\ss(	31	Paid in or capital surplus, or land, building, or ed		0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in		61,602.	32	16,624.
ž	33	Total net assets or fund balances		61,602.	33	16,624.
_	34	Total liabilities and net assets/fund balances		61,602.	34	16,624.

Form **990** (2009)

CHARITABLE FOUNDATION Form 990 (2009)

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Pa	rt XI   Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,	1		
	review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit	1		
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		Form	990 (	2009)

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public

Inspection

Name of the organization

ROTARY CLUB OF SUFFOLK CHARITABLE FOUNDATION

**Employer identification number** 

31-1775330

Reason for Public Charity Status (All organizations must complete this part ) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III - Functionally integrated d \_\_\_ Type III - Other \_\_ Type I b Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes Νo the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	organization	in col. (i) li	organization sted in your document?	organizat	u notify the ion in col. r support?	(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support	
			Yes	No	Yes	No	Yes	No		
					!					
Total										

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 CHARITABLE FOUNDATION

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Seg	ction A. Public Support		_				
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants ")	38,042.	62,813.	82,045.	68,922.		251,822.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	38,042.	62,813.	82,045.	68,922.		251,822.
	The portion of total contributions						
-	by each person (other than a						
	governmental unit or publicly	ļ		]			
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4						251,822.
Sec	tion B. Total Support	<u></u>					<u> </u>
	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 4	38,042.	62,813.	82,045.	68,922.	(0) 2000	251,822.
	Gross income from interest,	30,012.	02,0131	02/0151	00,3220		232/0221
٠	dividends, payments received on	j					
	securities loans, rents, royalties			1			
	and income from similar sources						
۵	Net income from unrelated business						
9							
	activities, whether or not the						
40	business is regularly carried on			<del> </del>			<del></del>
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)	···-		<del></del> +			251,822.
	Total support. Add lines 7 through 10					12	231,022.
	Gross receipts from related activities,	•	=	l fourth or fifth to	v voar as a soctio		
13	First five years. If the Form 990 is for organization, check this box and stop	=	iirst, second, triiic	i, locitil, or multa.	x year as a section	11 30 1 (0)(3)	▶□
Sec	ction C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2009 (li			olumn (fl)		14	100.00 %
	Public support percentage from 2008		•	51611111 (17)		15	100.00 _%
	33 1/3% support test - 2009. If the or			line 13, and line 14	! 4 is 33 1/3% or m	<del></del>	
100	stop here. The organization qualifies	-		mio ro, ano mio r	11000 17070 01 17	0,0,0,000,000	<b>▶ X</b>
h	33 1/3% support test - 2008. If the or			e 13 or 16a, and li	ine 15 is 33 1/3%	or more, check t	
	and stop here. The organization quali	-				or more, erroen i	<b>▶</b> □
17~	10% -facts-and-circumstances test		• • •		13 16a or 16b a	nd line 14 is 10%	or more
17 a	and if the organization meets the "fac						
						the now the orga	<b>▶</b> □
L	meets the "facts-and-circumstances"	_				7a and line 15 in	10% or
D	10% -facts-and-circumstances test	_					
	more, and if the organization meets the						<b>▶</b> □
40	organization meets the "facts-and-circ		=				
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	i, 100, 1/a, or 1/b	, cneck this box a	na see instructio	ris PLJ

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 Page 3 Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total, Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract fine 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (c) 2007 (d) 2008 (e) 2009 (f) Total (a) 2005 (b) 2006 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage % 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 <u>%</u> Section D. Computation of Investment Income Percentage % 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 18 % 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and

line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

# Schedule D (Form 990)

Internal Revenue Service

Department of the Treasury

### **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

ROTARY CLUB OF SUFFOLK CHARITABLE FOUNDATION

Employer identification number 31-1775330

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	ds or Accounts. Complete if the					
	organization answered "Yes" to Form 990, Part IV, lin	e 6.						
		(a) Donor advised funds	(b) Funds and other accounts					
1	Total number at end of year							
2	Aggregate contributions to (during year)							
3	Aggregate grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	vised funds					
	are the organization's property, subject to the organization's	_	Yes No					
6								
	for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring							
	impermissible private benefit?		Yes No					
Pa	rt II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990,	Part IV, line 7.					
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).						
	Preservation of land for public use (e.g., recreation or p	oleasure) Preservation of an h	nistorically important land area					
	Protection of natural habitat	Preservation of a ce	ertified historic structure					
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	m of a conservation easement on the last					
	day of the tax year.							
			Held at the End of the Tax Year					
а	Total number of conservation easements		2a					
b	Total acreage restricted by conservation easements		2b					
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c					
ď	Number of conservation easements included in (c) acquired	after 8/17/06	2d					
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by t	he organization during the tax					
	year ▶							
4	Number of states where property subject to conservation ea	sement is located >	_					
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of							
	violations, and enforcement of the conservation easements it holds?							
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year							
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements 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)?							
9	·,							
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describe	s the organization's accounting for					
<b>D</b> -	conservation easements	CAA Historiaal Turanaanaa	Other Circiles Assets					
Pa	rt III Organizations Maintaining Collections o	•	Other Similar Assets.					
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8						
	M		belongs about wedge of and brokened					
та	If the organization elected, as permitted under SFAS 116, no							
	treasures, or other similar assets held for public exhibition, e		sublic service, provide, in Part XIV, the text of					
	the footnote to its financial statements that describes these		and a back works of out biotomore transcrives					
þ	If the organization elected, as permitted under SFAS 116, to							
	or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relative.							
	these items:		<b>~</b> ¢					
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$ ▶ \$					
_	(ii) Assets included in Form 990, Part X	and the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the same transfer of the s						
2	If the organization received or held works of art, historical tre		aai gain, provide					
	the following amounts required to be reported under SFAS 1	to relating to these items:	<b>.</b> .					
a	Revenues included in Form 990, Part VIII, line 1		<b>\$</b>					
b	Assets included in Form 990, Part X		<b>&gt;</b> \$					

31-1775330 Page 2 Schedule D (Form 990) 2009 CHARITABLE FOUNDATION Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply). Public exhibition Loan or exchange programs а Scholarly research Other Preservation for future generations С Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV | Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included No \_\_ Yes on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following table: Amount 1c c Beginning balance 1d d Additions during the year e Distributions during the year 1e 1f f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No b If "Yes," explain the arrangement in Part XIV Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 (c) Two years back (d) Three years back (e) Four years back (a) Current year (b) Prior year 1a Beginning of year balance Contributions c Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment Permanent endowment Term endowment ▶ 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization Yes No ρλ. 3a(i) (i) unrelated organizations (ii) related organizations 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b Describe in Part XIV the intended uses of the organization's endowment funds Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Part VI (c) Accumulated (d) Book value (a) Cost or other (b) Cost or other Description of investment depreciation basis (investment) basis (other)

Schedule D (Form 990) 2009

0

1a Land **b** Buildings

d Equipment Other

c Leasehold improvements

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Part VII Investments - Other Securities. See Form 990, Part X, line 12.  (a) Description of security or category (including name of security)  (b) Book value  Cost or end-of-year market value  Financial derivatives  Closely-held equity interests  Other  Other	
Closely-held equity interests	
Total (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶  Part VIII Investments - Program Related. See Form 990, Part X, line 13	
(a) Description of investment type (b) Book value (c) Method of valuation: Cost or end-of-year market value	
Total (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶  Part IX Other Assets. See Form 990, Part X, line 15	
(a) Description (b) Book value	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 )	
Part X Other Liabilities. See Form 990, Part X, line 25  1. (a) Description of liability (b) Amount	
Federal income taxes	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	

31-1775330 Page 4 Schedule D (Form 990) 2009 CHARITABLE FOUNDATION Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements 19,150. Total revenue (Form 990, Part VIII, column (A), line 12) 64,128. Total expenses (Form 990, Part IX, column (A), line 25) 2 -44.978Excess or (deficit) for the year Subtract line 2 from line 1 3 3 4 Net unrealized gains (losses) on investments Donated services and use of facilities 5 5 Investment expenses 6 6 7 7 Prior period adjustments Other (Describe in Part XIV.) 8 8 9 Total adjustments (net). Add lines 4 through 8 -44.978Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains on investments 2a 2b Donated services and use of facilities 2c c Recoveries of prior year grants d Other (Describe in Part XIV) 2d 2e e Add lines 2a through 2d 3 Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4b Other (Describe in Part XIV) c Add lines 4a and 4b Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 2a a Donated services and use of facilities 2b Prior year adjustments c Other losses 2c 2d d Other (Describe in Part XIV) e Add lines 2a through 2d 2e 3 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1. a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) 4b c Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule I (Form 990) 2009 **Employer identification number** 31-1775330 Open to Public OMB No 1545-0047 Inspection (h) Purpose of grant or assistance ∏ Yes recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 1 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 non-cash assistance (g) Description of (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, o (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ▶ Attach to Form 990. (d) Amount of 62,587 cash grant LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) IRC section ıf applıcable Enter total number of section 501(c)(3) and government organizations ROTARY CLUB OF SUFFOLK CHARITABLE FOUNDATION General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization or government Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) VARIOUS Part Part

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CHARITABLE FOUNDATION

Page 2

31-1775330

Schedule I (Form 990) 2009

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Use Part IV and Schedule I-1 (Form 990) if additional space is needed. Part III

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Part IV

### **SCHEDULE O**

(Form 990)

## Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

ROTARY CLUB OF SUFFOLK
CHARITABLE FOUNDATION

Employer identification number 31 – 1775330

CHRITABLE TOORDATION 52 27.5000
FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS PRESENTED TO THE
OFFICERS AND BOARD OF DIRECTORS AT THEIR MONTHLY MEETING AND REVIEWED
BEFORE ITS FILING.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING
DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE
AVAILABLE TO THE PUBLIC BY REQUEST AT THE OFFICES OF THE ORGANIZATION'S
BOOKKEEPER.