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# SCANNED DEC 0 3 2010

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)

OMB No 1545-0047

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

Open to Public Inspection

_ A	For t	he 2009 calendar year, or tax year beginning $$ JUL $1$ , $2009$ and ending	JUN 30, 2010	<del></del>
В	Check	C Name of organization	D Employer identific	ation number
	applica	use IRS		
	Add	ress label or KEENE ROTARY CLUB COMM. SVC FUND, INC.		
Ē	Nam char	de type	02-6	010349
一	Initia			
F	Tern	Specific C/O DEMED DONGED 60 TOLAND CODED		358-3038
ᆮ	Ame	inded tions   Other times		
_ F	lretui App		G Gross receipts \$	112,064.
_	Ition pend	ling i	H(a) Is this a group re	
		F Name and address of principal officer	for affiliates?	Yes X No
_			H(b) Are all affiliates incl	
		xempt status X 501(c) ( 3 ) ◀ (insert no ) ☐ 4947(a)(1) or ☐ 527		list (see instructions)
		Storage integral V Corporation Trust Accounting Other	H(c) Group exemption	
	art I	of organization: X Corporation Trust Association Other ► L Y Summary	/ear of formation: 1986 M	State of legal domicile: NH
Ŀ	T		V DAGED GERIT	
9	1	Briefly describe the organization's mission or most significant activities <b>COMMUNIT ORGANIZATION</b>	Y BASED SERVIO	<u> </u>
Activities & Governance				
Ver	2	gamenter de apartir de disposso de la	1 1	
ŝ	3	Number of voting members of the governing body (Part VI, line 1a)	3	12
త	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	12
ţį	5	Total number of employees (Part V, line 2a)	5	0
ξį	6	Total number of volunteers (estimate if necessary)	6	120
Ac	7a	Total gross unrelated business revenue from Part VIII ROUNDED	7a	0.
	b	Net unrelated business taxable income from Form 990-1, line 34	7b	0.
			Prior Year	Current Year
e	8	Contributions and grants (Part VIII, line 1h)	55,899.	46,733.
Revenue	9	Program service revenue (Part VIII, line 2g)	4 0 6 5	
æ	10	Investment income (Part VIII, column (A), lines 8, 4, aroxopen, UT	1,967.	990.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,667.	38,081.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	61,533.	85,804.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	59,591.	65,997.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
ë		Professional fundraising fees (Part IX, column (A), line 11e)		
Ä		Total fundraising expenses (Part IX, column (D), line 25)		
_		Other expenses (Part iX, column (A), lines 11a-11d, 11f-24f)	13,829.	13,683.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	73,420.	79,680.
<u>_ v</u>	19	Revenue less expenses. Subtract line 18 from line 12	<11,887.	6,124.
ts o			Beginning of Current Year	End of Year
Sse Bala	20	Total assets (Part X, line 16)	145,832.	<u>152,217.</u>
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)	1,796.	2,057.
		Net assets or fund balances Subtract line 21 from line 20	144,036.	<u> 150,160.</u>
Pa	art II	Signature Block	<del> </del>	
		Under penalties of perulry, I declare that I have examined this return, including accompanying schedules and statement and complete, Declaration of preparer has any knowle	nts, and to the best of my knowledg edge	e and belief, it is true, correct,
		1. My of Man Soriy & Long		
Sigi		Signature of officer	12 NOV	
Her	е	Signature of officer  1 12 12 A BRNGER SELLETAM 4 125ARM	Date	
		Type or print name and title	<del></del>	
			Charlet	
Paid		Preparer's signature Date 11/10/10	self (see inst	's identifying number ructions)
Ргер	P00426116			
Use	Only	Firm's name (or yours if ROBERT M. MUCHA, CPA, PC	EIN ► 02-0	0438927
		self-employed), address, and 59 EMERALD ST., P.O. BOX 741		
		ZIP+4 KEENE, NH 03431	Phone no	<u> 303)357-7665</u>
		RS discuss this return with the preparer shown above? (see instructions)		Yes No
	11 02-0			CAMAN LINUM 1 (OOOO)

	art III   Statement of Program Service Accomplishments	<u>;                                    </u>
1	Briefly describe the organization's mission	
	TO PROVIDE SERVICE AND TO DEVELOP SERVICE PROJECTS THAT ADDRESS	
	SEVERAL CRITICAL ISSUES IN THE COMMUNITY, IN THE WORKPLACE AND	
	THROUGHOUT THE WORLD.	
_	Did the exceptable and adult adult and adult and adult adult and adult and adult and adult adult and adult and adult adult and adult adult and adult adult adult and adult adult and adult a	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	10
_	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X N	10
	If "Yes," describe these changes on Schedule O	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported	
 4а	(Code ) (Expenses \$ 36,435. including grants of \$ ) (Revenue \$ 44,430.)	<u> </u>
	GRANTS AND ALLOCATIONS TO OTHERS IN SUPPORT OF COMMUNITY AND	• ,
	INTERNATIONAL ACTIVITIES.	
	asterial total filling.	—
		—
		—
		—
		—
		—
		—
4b	(Code ) (Expenses \$ 29,562. including grants of \$ ) (Revenue \$ 31,419.	
	FUNDING YOUTH ACTIVITIES INCLUDING EXCHANGE STUDENTS AND DIRECT	• ,
	CLOTHING ASSISTANCE	—
	<u></u>	—
		—
		—
		—
		—
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		_
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$	
		•
		_
		_
		_
		_
		_
		_
		_
4d	Other program services (Describe in Schedule O.)	_
_	(Expenses \$ including grants of \$ ) (Revenue \$ )	
<u>4e</u>	Total program service expenses ▶\$ 65,997.	

			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		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_		Х			
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Х			
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					
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			ļ			
	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,	<u> </u>					
	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		l				
	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.	1					
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		1				
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses						
	the organization's sipalities 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.	Schedule D, Parts XI, XII, and XIII	12		x			
12Δ	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No	12	-				
120	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	┪		}			
13	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		X			
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	174					
~	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	x				
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	170	-41				
15	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	13	$\vdash$	- 21			
.0	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,	16	<del> </del>	Α_			
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	47		Х			
1Ω	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17	<del> </del>	^			
18	1c and 8a? If "Yes," complete Schedule G, Part II	40	v				
10		18	X	<del> </del>			
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	40		v			
20	·	19	<del> </del>	X			
<u>20 _</u>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20					

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 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  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  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 X  36 X  36 X			ł	Yes	No
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), the 2 // 1"/cs, complete Schedule I. Parts I and III and other assistance to individuals in the United States on Part IX, column (A), the 2 // 1"/cs, complete Schedule I. Parts I and III and ofference of the organization are severed to the organization and severed the organization are severed to the organization and the organization are severed to the organization and the organization are severed to the organization are severed to the organization are severed to the organization of the organization and the severed to the organization are severed to the orga	21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
column (A), line 2? If "Yes," complete Schedule I, Parts I and III  22 X  23 Did the organization serve "Yes to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, I have a sessed after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule II I' No", or to Inne 25  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 240 through 24d and complete Schedule II I' No", or to Inne 25  25b Did the organization ministan an escrow account other than a refunding secrow at any time during the year? of the organization and an association of the organization and an association of the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I I' Sea Section 501(Kgl) and 501(Kgl) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part II I' 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 organizations tax year? If "Yes," complete Schedule I, Part II I' 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 with one of the following parties, (see Schedule I, Part II/ I' Was a complete Schedule I, Part II/ I' Was the organization receive more than \$25,000 in non-cash contributions of "I' Yes," complete Schedule I, Part II/ I' Was the organization receive more than \$25		United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
23 Dd the organization answer "Yes" to Part VII, Section A, Inio 3, 4, or 5 about compensation of the organization is current and forms officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule U and the year, that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule K. If "No", go to line 25 bd the organization mines are succount other than a returnding secroe with any time during the year to defease any tax-exempt bonds?  1 Did the organization mines are scrow account other than a returnding secroe with any time during the year?  2 Did the organization maintain an escrow account other than a returnding secroe with a return time than a secroe account other than a returnding secroe with a time than a secroe account other than a returnding secroe with a time than a secroe account other than a returnding secroe with a time than a secroe account other than a returnding secroe with a time than a secroe account other than a returnding secroe with a time than a secroe account other than a returnding secroe with a time than a secroe account other than a returnding secroe with a time than a secroe account other than a returnding secroe with a secret property of the organization and than the transaction with a disqualified person of the secret property of the organization and than the transaction with a disqualified person of the secret property of the organization and than the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization is any secret prior of former officer, director, trustee, or omplete Schedule L, Part IV  2 Did the organization party to a business transaction	22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J  24 Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24 through 24d and complete Schedule K. If "No", go to him e 25  b. Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  c. Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  d. Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  d. Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  d. Did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year of the decase any tax exempt bonds?  d. Did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year?  d. Did the organization save that 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 II  25b		column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
Schedule J 24a Dd the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25  D Dd the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Edd  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization accounts as a "on behalf of" issuer for bonds outstanding as an any tax-exempt and that the transaction with a disqualified person outstanding as of the end of the organization's por Forms 990 or 990 E22? If "Yes," complete Schedule L, Part IV as the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for a ginant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part IV instructions for applicable fining thresholds, conditions, and exceptions)  A current of former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable fining thresholds, conditions, and exceptions?  If "Yes," complete Schedule II, Part I II III III III III III III III III	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
24a Dd the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K, If "No", go to line 25  b Dd the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Dd the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Dd the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24c 24d 24d 24d 24d 25d 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 is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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 prior forms 990 or 950EZ? If "Yes," complete Schedule L, Part II is the organization provide a grant or other assistance to an officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization is tax year? If "Yes," complete Schedule L, Part II is a formal party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV is A family immember of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV is A family immember of a current or former officer, director, trustee, or key employee?		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
24a Dd 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 innex 24b through 24d and complete Schedule K. If "No", go to line 25  b Dd the organization invest amy proceeds of tax-exempt bonds beyond a temporary period exception?  Dd the organization invest amy proceeds of tax-exempt bonds beyond a temporary period exception?  Dd the organization invest amy proceeds of tax-exempt bonds beyond a temporary period exception?  Dd the organization invest amy proceeds of tax-exempt bonds outstanding at any time during the year? of the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? of the organizations. Dd the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  is the organization and the properties of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person outstandings as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II  Was a loan to or by a current of former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstandings as of the end of the organization is tax year? If "Yes," complete Schedule L, Part IV  By Was the organization aprive to a business transaction with one of the following parties, (see Schedule L, Part IV  and the organization aprive to a business transaction with one of the following parties, (see Schedule L, Part IV  A family immember of a current of former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current of former officer, director, trustee, or key employee of the orga		Schedule J	23	•	x
last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If No", go to line 25  b. Did the organization maintain an ascrive account other than a retunding escrow at any time during the year to defease any tax-evempt bonds?  d. Did the organization maintain an ascrive account other than a retunding escrow at any time during the year to defease any tax-evempt bonds?  d. Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d. Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d. Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d. Did the organization act as an "on behalf of" issuer for bonds outstanding as any time during the year?  d. Did the organization act as an "on behalf of" issuer for bonds outstanding as any time during the year?  d. Did the organization act as an "on behalf of" issuer for bonds outstanding as any time during the year?  d. Did the organization act as an "on behalf of" issuer for bonds outstanding as a transfer on the organization and that the transaction has not been reported on any of the organization with a disqualified person outstanding as a of the end of the organization's transaction have not been reported on any of the organization's pror Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part II "Yes," complete Schedule L, Part IV "Yes," complete Schedule R, Part I, IV, A, VI, No. IV, IV, IV, IV,	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
Schedule K. If *No*, go to line 25 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 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 b Is the organization has not been reported on any of the organization vith a disqualified person in a prior year, and that the transaction has not been reported on any of the organization vith a disqualified person in a prior year, and that it the properties of the end of the organization of the organization vith a disqualified person in a prior year, and that the transaction has not been reported on any of the organization vith a disqualified person in a prior year, and that the transaction has not been reported on any of the organization vith a disqualified person in a prior year, and that the transaction has not been reported on any of the organization vith a disqualified person outstanding as of the end of the organization's prior Forms 990 or 990-E27 if *Yes, *complete Schedule L, Part II					
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d 225a 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  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-E27 if "Yes," complete Schedule L, Part II  25b X  26b X  27c Did the organization aparty to a business transaction with ore of the following person outstanding as of the end of the organization is tax year? If "Yes," complete Schedule L, Part II  27c Did the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions?  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions?  b A family member of a current or former officer, director, trustee, or key employee?			24a		x
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Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  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  Was the organization related to any tax-exempt or taxable entity?  If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1  Is any related organization a controlled entity within the meaning of section 512(b)(13)?  If "Yes," complete Schedule R, Part V, line 2  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  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  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	C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
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contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  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  Was the organization related to any tax-exempt or taxable entity?  If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1  Is any related organization a controlled entity within the meaning of section 512(b)(13)?  If "Yes," complete Schedule R, Part V, line 2  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  Told 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  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	29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
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Note. All Form 990 filers are required to complete Schedule O	38	•	- J		- 42
			20	x	
					2000/

009) KEENE ROTARY CLUB COMM. SVC FUND, INC.
Statements Regarding Other IRS Filings and Tax Compliance

			ı .		Yes	No					
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of										
_	U.S Information Returns Enter 0 if not applicable	1a	1								
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0								
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ıble gamıng								
	(gambling) winnings to prize winners?			1c							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,										
	filed for the calendar year ending with or within the year covered by this return	2a	0								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?	į	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)										
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?										
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		į	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	rity over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		_X_					
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 a	and								
	Financial Accounts.										
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		<u>X</u>					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer	action?	?	5b		X					
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Region 1.	arding	Prohibited								
	Tax Shelter Transaction?			5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t	he org	anızatıon solıcıt								
	any contributions that were not tax deductible?			6a	X						
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions c	or gifts								
	were not tax deductible?			6b		X					
7	Organizations that may receive deductible contributions under section 170(c).					ł					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods	s and services								
	provided to the payor?			7a		X					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	ļ	<u> </u>					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as rec	uired								
	to file Form 8282?	1	1	7c		X					
	If "Yes," indicate the number of Forms 8282 filed during the year	7d			}						
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a	persor	al								
	benefit contract?			7e	<u> </u>	<u>X</u>					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont		•	7f_		<u> </u>					
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required		_	7 <u>g</u>		├					
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-			7h	<u> </u>						
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or	•									
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exc	ess bu	usiness noldings								
	at any time during the year?			8	<u> </u>	├──					
	Sponsoring organizations maintaining donor advised funds.										
	Did the organization make any taxable distributions under section 4966?			_9a		<del> </del>					
	Did the organization make a distribution to a donor, donor advisor, or related person?			9b							
	Section 501(c)(7) organizations. Enter.	140-	1		1						
	Initiation fees and capital contributions included on Part VIII, line 12	10a									
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b									
	Section 501(c)(12) organizations. Enter. Gross income from members or shareholders	144-	1								
	•	11a			1						
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	446									
	<i>,</i>	11b	2	10-	] .						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	İ	12a	<del>                                     </del>	<del> </del>					
<u>.,,</u>	100, Since the amount of tax exempt interest received or accrued during the year	120	L	L							

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

<u>Sec</u>	tion A. Governing Body and Management				
1a	Enter the number of voting members of the governing body 1a	1	2	_Yes_	_ <u>No</u> _
b	Enter the number of voting members of the governing body  Enter the number of voting members that are independent  1b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		4		
_	officer, director, trustee, or key employee?	irany outer	2		х
3	Did the organization delegate control over management duties customarily performed by or under the dir	ect sunervision			
•	of officers, directors or trustees, or key employees to a management company or other person?	oot super vision	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 9	90 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	00 mao moa	5		X
6	Does the organization have members or stockholders?		6		X
	Does the organization have members, stockholders, or other persons who may elect one or more members	rs of the			
	governing body?		7a	x	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons	37	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during				
	by the following	.3 ,			
а	The governing body?		8a	x	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rever	ue Code )			
				Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		10a		Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such char	oters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?		10b	L.	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing	the form?	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990				-
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	•	12a	X	<u>L</u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could g	ive rise			İ
	to conflicts?		12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes	" describe			
	ın Schedule O how this is done		12c	X	
13	Does the organization have a written whistleblower policy?		13		X
14	Does the organization have a written document retention and destruction policy?		14		X
15	Did the process for determining compensation of the following persons include a review and approval by	ındependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				}
а	The organization's CEO, Executive Director, or top management official		15a	<u> </u>	X
b	Other officers or key employees of the organization		15b	<u> </u>	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	with a			
	taxable entity during the year?	•	16a	ļ	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	= =	i		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization of the control o	ition's			
	exempt status with respect to such arrangements?		16b		
	tion C. Disclosure				
	List the states with which a copy of this Form 990 is required to be filed NH	44.140			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (50	।(c)(उ)s only) availab	е тог		
	public inspection. Indicate how you make these available. Check all that apply.	-			
40	Own website Another's website X Upon request	-4 a&			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflicted ments available to the public	ct of interest policy,	and tina	incial	
20	statements available to the public	ando of the	A		
20	State the name, physical address, and telephone number of the person who possesses the books and re PETER BRNGER - 603-847-3403	cords of the organiz	aแo∏ <b>)</b>		
	18 WEST SHORE ROAD, MUNSONVILLE, NH 03457	<u></u>			
	THE WEST SHOWE WOND, MONDONATHIE, ME 03431		Form	990	(2000)

# 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

X Check this box if the organization did not compensate any current officer, director, or trustee

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

<b>(A)</b> Name and Title	(B) Average hours	(cl		Pos		ı app	ly)	(D) Reportable compensation	<b>(E)</b> Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
JOHN RIDER	2 00									
VICE-PRESIDENT	2.00		ļ <u> </u>	X		$\vdash$		0.	0.	0.
PETER HANSEL	2 00			32				_	•	_
PRESIDENT BILL STEVENS	2.00	-		X	-	-		0.	0.	0.
PRESIDENT-ELECT	2.00			x				0.	0.	0.
PETER BRNGER	2.00			Λ				0.	0.	
SECRETARY/TREASURER	6.00			х				0.	0.	0.
GASTON PICHETTE	10.00					<u> </u>				
SERGEANT AT ARMS	4.00			x				0.	0.	0.

\$100,000 in compensation from the organization

Form 990 (2009)

Total number of independent contractors (including but not limited to those listed above) who received more than

	rt VI			CLOR COM	M. SVC FUN	D, INC.	02-6010	349 Page 9
-	—	Statement of Reve			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, -513, or 514
s s	1 2	Federated campaigns	1a		·			010, 0, 014
gifts, grants lar amounts		Membership dues		17,731.				
PE		•	1b					
fts,		Fundraising events	. <u>1c</u>	125.				
<u>2</u> <u>a</u>	d	Related organizations	.   1d					
Siris	е	3	·					
호	f	All other contributions, gifts, gran	1 1					
윤뒝		similar amounts not included abo		28,877.				
Contributions, and other simi	g	Noncash contributions included in lines	s 1a-1f \$					
<u>0 e</u>	_ <u>h</u>	Total. Add lines 1a-1f			46,733.			
- 1			ļ	Business Code				
<u>.</u>	2 a							
er.	b							
en S	С							
हूं इं	d							
Program Service Revenue	е							
٩	f	All other program service reve	enue					
	9	Total. Add lines 2a-2f		<b>&gt;</b>				
ŀ	3	Investment income (including	dividends, interes	st, and				
		other similar amounts)		▶ [	990.			990.
	4	Income from investment of ta	x-exempt bond pr	oceeds 🕨				
	5	Royalties		<b>&gt;</b>				***
			(i) Real	(ii) Personal				
	6 a	Gross Rents						
- 1	b	Less: rental expenses						
	С	Rental income or (loss)						
	d			<b>•</b>				
- 1	7 a	Gross amount from sales of	(i) Securities	(ii) Other				-
	• -	assets other than inventory	- Wassames					
	h	Less: cost or other basis						
	-	and sales expenses						
	c	Gain or (loss)						
		Net gain or (loss)						
		Gross income from fundraising	a events (not					
Other Revenue	O G	including \$1	- '					
ĕ		contributions reported on line						
٣		D-+ D/ b 40		61,948.				
힐		Less direct expenses		26,260.				
ŏ		<u></u>	_	20,200.	25 600	25 600		
		Net income or (loss) from fund	· · · · · · · · · · · · · · · · · · ·		35,688.	35,688.		
	эa	Gross income from gaming ac	1					
- 1		Part IV, line 19	a					
		Less. direct expenses	b [					
		Net income or (loss) from gam		<b>-</b>	····			
	10 a	Gross sales of inventory, less	returns					
		and allowances	a					
		Less cost of goods sold	b∐					
-	<u> </u>	Net income or (loss) from sale		<b></b>				
		Miscellaneous Revenu		Business Code				
i	11 a	EXCESS MEAL REV	ENUE	900099	2,393.			2,393.
-	b					_		-
	С					72.7		
	d	All other revenue	L					
	е	Total. Add lines 11a-11d		▶ _	2,393.	·		
	12	Total revenue. See instructions.		. •	85,804.	35,688.	0.	3,383.
932009 02-04-	10				·			Form <b>990</b> (2009)

Part IX Statement of Functional Expenses

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

	All other organizations must complete include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program-service	(C)  Management-and general expenses	(D) Fundraising
1	Grants and other assistance to governments and	<del></del>	expenses	general expenses	expenses
'	organizations in the U.S. See Part IV, line 21	21,636.	21,636.		
2	Grants and other assistance to individuals in	21,000.	21,030.		· · · · · · · · · · · · · · · · · · ·
Z	the U.S. See Part IV, line 22	29,562.	29,562.	, [	
3	Grants and other assistance to governments,	27,302.	27,302.		
J	organizations, and individuals outside the US				,
	See Part IV, lines 15 and 16	14,799.	14,799.		
4	Benefits paid to or for members	11,700.	11,700.		<del></del>
5	Compensation of current officers, directors,		<del></del>		
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
·	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages		···		
8	Pension plan contributions (include section 401(k)		**		
•	and section 403(b) employer contributions)				
9	Other employee benefits			<del></del>	
10	Payroll taxes	-			
11	Fees for services (non-employees)				
а	Management				
b	Legal				
	Accounting	350.		350.	
d	Lobbying		· ····		
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees			-	
g	Other				
12	Advertising and promotion				
13	Office expenses	755.		755.	
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	989.		989.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	310.		310.	
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.)				
а	DISTRICT & INTERNATIONA	8,863.		8,863.	
	MISCELLANEOUS	2,227.		2,227.	
С	WEBSITE HOSTING	189.		189.	
d					
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	79,680.	65,997.	13,683.	0.
26	Joint costs Check here ▶ ☐ If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

		(A) Beginning of year		(B) End of year
1	Cash - non:interest-bearing	27,290.	_1_	30,702
2	Savings and temporary cash investments	82,960.	2	84,638
i i	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II		<b> </b>	
	of Schedule L		5	
6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
	Part II of Schedule L		6	·
ទ្ឋ 7	Notes and loans receivable, net .	35,582.	7	36,877
Assets 7 8	Inventories for sale or use		8	·
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment cost or other			
	basis. Complete Part VI of Schedule D 10a	ļ		
b	Less accumulated depreciation 10b		10c	
1	Investments - publicly traded securities		11	
	Investments - other securities See Part IV, line 11		12	<del></del> -
1	Investments · program-related. See Part IV, line 11		13	
	Intangible assets	ļ	14	<u>.                                    </u>
j.	Other assets See Part IV, line 11	445 000	15	150 015
	Total assets. Add lines 1 through 15 (must equal line 34)	145,832.	16	152,217
1	Accounts payable and accrued expenses	1,796.	17	2,057
	Grants payable		18	<del></del>
	Deferred revenue		19	
	Tax-exempt bond liabilities	ļ	20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	<del></del>
= 1	Payables to current and former officers, directors, trustees, key employees,	_		
ָר <u> </u>	highest compensated employees, and disqualified persons. Complete Part II	Ì		
	of Schedule L		22	
	Secured mortgages and notes payable to unrelated third parties		23	<del>-</del>
	Unsecured notes and loans payable to unrelated third parties		24	
	Other liabilities. Complete Part X of Schedule D	1,796.	25 26	2,057
	Total liabilities, Add lines 17 through 25  Organizations that follow SFAS 117, check here and complete	1,130.	20	<u> </u>
	lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets		27	
28	Temporarily restricted net assets		28	
5   29   i	Permanently restricted net assets		29	<del></del>
= 1	Organizations that do not follow SFAS 117, check here			<del></del>
-	complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds	0.	30	0
31	Paid in or capital surplus, or land, building, or equipment fund	0.	31	0
32 F	Retained earnings, endowment, accumulated income, or other funds	144,036.	32	150,160
33	Total net assets or fund balances	144,036.	33	150,160
	Total liabilities and net assets/fund balances	145,832.		152,217

		Yes	No
1 Accounting method used to prepare the Form 990 Cash X Accrual Other			
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule (	0	1	
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		<u> </u>	_X-
b Were the organization's financial statements audited by an independent accountant?	2b		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,		
review, or compilation of its financial statements and selection of an independent accountant?	20		
If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O		
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	I on a		
consolidated basis, separate basis, or both			
Separate basis Consolidated basis Both consolidated and separate basis	-		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audıt		
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	red audit		
or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

# SCHEDULE A

(Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

| 200

**LUUJ** Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Inspection
Employer identification number

Schedule A (Form 990 or 990-EZ) 2009

	<del></del>	KEENE	ROTARY	CLUB	COMM.	SVC	FUND,	INC.		0	<u>2-6010349</u>			
Part I		for Public Ch							tructions					
The orga	nization is not	a private foundation	on because it i	is (For line	es 1 through	11, check	only one	box)						
1	A church, co	onvention of churc	hes, or associ	ation of ch	nurches desc	inbed in s	ection 17	D(b)(1)(A)(i	).					
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)													
з 🖳	A hospital o	r a cooperative hos	spital service o	organizatio	on described	ın sectio	n 170(b)(1	)(A)(iii).						
4	A medical re	esearch organizatio	on operated in	conjunction	on with a hos	spital des	cribed in s	ection 170	)(b)(1)(A)(i	ii). Enter t	the hospital's name	∍,		
	city, and sta	ite												
5	An organiza	tion operated for the	he benefit of a	college or	r university o	wned or o	perated b	y a govern	mental un	nt describ	ed in			
	section 170(b)(1)(A)(iv). (Complete Part II.)													
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).													
7 🗀	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 communit	y trust described ii	n section 170	(b)(1)(A)(v	ı). (Complete	Part II)								
9 X	An organizat	tion that normally r	receives (1) m	ore than 3	3 1/3% of its	s support	from conti	ibutions, r	nembersh	ıp fees, aı	nd gross receipts fi	rom		
											from gross investr			
											after June 30, 1975			
		509(a)(2). (Compl												
10 🖳	An organizat	tion organized and	operated exc	lusively to	test for publ	lic safety	See section	on 509(a)(	4).					
11 🔲	An organizat	tion organized and	operated exc	lusively fo	r the benefit	of, to per	form the fu	nctions of	, or to carr	y out the	purposes of one o	r		
	more publicl	y supported organ	nizations descr	nbed in se	ction 509(a)(	1) or sect	ion 509(a)(	2) See <b>se</b>	ction 509(	a)(3). Che	eck the box that			
	describes th	e type of supporti	ng organizatioi	n and com	nplete lines 1	1e throug	h 11h							
	a L Type	ı b	Type II		с 🗀 Тур	e III - Fun	ctionally in	tegrated		d 🗔	Type III - Other			
e 📖	By checking	this box, I certify t	that the organi	zation is n	not controlled	directly	or indirectl	y by one o	r more dis	qualified	persons other than	ı		
	foundation n	nanagers and othe	er than one or i	more publ	icly supporte	ed organiz	ations des	cnbed in s	section 50	9(a)(1) or	section 509(a)(2)			
f	If the organiz	zation received a w	vritten determi	nation from	m the IRS th	at it is a T	ype I, Type	II, or Typ	e III					
	supporting o	organization, check	this box											
g		st 17, 2006, has the									<del></del>			
	(ı) A perso	on who directly or i	ndirectly contr	ols, either	alone or tog	jether witl	n persons	described	ın (ıi) and (	(iii) below,	Yes	No		
		erning body of the		-							.   11g(i)			
	(ii) A famıly	member of a pers	son described	ın (i) abov	e?			-			11g(ii)			
		controlled entity of									11g(iii)			
h	Provide the f	following information	on about the s	upported	organization	(s)								
	<u> </u>	<del></del>			—- <sub>T</sub>		<del></del>		1					
(i) Name	of supported	(ii) EIN		ype of ization			n (v) Did yo		(vi) ls organizati		(vii) Amount of			
org	anızatıon		(described		in col. (i) li governing			tion in col.	(i) organiz	ed in the	support			
				RC section			1	r support?						
			(see inst	ructions))	Yes	No	Yes	No	Yes	No				
						1		1						
		<del>                                     </del>				<del> </del>	-		ļ	-	_			
		-				-	<del> </del>							
								Ì						
					<del></del>	<u> </u>	<del> </del>		ļ					
				<del>.</del> .	-				-					
			-	_					<del> </del>					
otal						1								

Form 990 or 990-EZ.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for

Sch	<u>iedule A (Form 990 or 990-EZ) 2009</u>						Page 2
Pa	art II Support Schedule for	Organizations	Described in	Sections 170	(b)(1)(A)(iv) an	d 170(b)(1)(A)(v	ri)
	(Complete only if you checked	the box on line 5	, 7, or 8 of Part I)				
Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d)-2008	(e)-2009	(f)-Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	ınclude any "unusual grants ")						
2	Tax revenues levied for the organ-						l
	ızation's benefit and either paid to						
	or expended on its behalf			<u> </u>			
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge					ļ	<del></del>
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a		-				
	governmental unit or publicly						
	supported organization) included				1		
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
_	column (f)	<del></del>			<del></del>		
<u>6</u>	Public support. Subtract line 5 from line 4 ction B. Total Support		<u> </u>		<u> </u>		
	<del></del>	(-) 000E	(L) 000C	4 ) 0007	(-0.0000	(-) 2000	(6 Total
	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
8	Gross income from interest,					<del> </del>	
0	dividends, payments received on						
	securities loans, rents, royalties				1		
	and income from similar sources						
9	Net income from unrelated business					<del> </del>	
J	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11							
12	Gross receipts from related activities,	etc (see instructi	ons)		<u> </u>	12	
13	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a section	on 501(c)(3)	
	organization, check this box and stop					_ <del>.</del>	
Sec	ction C. Computation of Publi	c Support Pe	rcentage				
14	Public support percentage for 2009 (li	ne 6, column (f) d	ivided by line 11, o	column (f))		14	%
15	Public support percentage from 2008	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2009. If the or	ganization did no	t check the box or	line 13, and line 1	14 is 33 1/3% or r	nore, check this bo	x and
	stop here. The organization qualifies a	as a publicly supp	orted organization	١	•	•	. ▶□
b	33 1/3% support test - 2008. If the or	ganization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization quali						. ▶□
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fact	s-and-circumstan	ces" test, check the	his box and stop h	nere, Explain in Pa	art IV how the organ	nization

Schedule A (Form 990 or 990-EZ) 2009

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

Schedule A (Form 990 or 990-EZ) 2009 KEENE ROTARY CLUB COMM. SVC FUND, INC. 02-6010349 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

<u>Se</u>	ction A. Public Support								
Cal	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")	53,401.	69,250.	69,321.	55,899.	40,913	. 288,784.		
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 bus-								
	iness under section 513								
4	Tax revenues levied for the organ- ization'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	53,401.	69,250.	69,321.	55,899.	40,913	. 288,784.		
72	Amounts included on lines 1, 2, and								
t	3 received from disqualified persons 2 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						0.		
,	Add lines 7a and 7b						0.		
8 Public support (Subtract line 7c from line 6)									
	ction B. Total Support				·		1 200 1 7 0 1 1		
Cal	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
	Amounts from line 6	53,401.	69,250.	69,321.	55,899.	40,913			
10 <i>a</i>	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	735.	3,222.	3,085.	1,967.	990			
b	Unrelated business taxable income (less section 511 taxes) from businesses			-					
	acquired after June 30, 1975								
_	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	735.	3,222.	3,085.	1,967.	990	9,999.		
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)								
	Total support (Add lines 9, 10c, 11, and 12)	54,136.	72,472.	72,406.	57,866.	41,903			
14	First five years. If the Form 990 is for	the organization's	first, second, third	, fourth, or fifth tax	k year as a section	n 501(c)(3) orga	nızatıon,		
Sec	check this box and stop here ction C. Computation of Publi	ic Support Per	centage			<u>.</u>			
	Public support percentage for 2009 (li			olumn (fl)		15	96.65 %		
16	Public support percentage from 2008	Schedule A, Part I	II, line 15	·		16	96.86 %		
Sec	tion D. Computation of Inves	tment Income	Percentage						
17	Investment income percentage for 20	09 (line 10c, colum	n (f) divided by line	e 13, column (f))	İ	17	3.35 %		
18	Investment income percentage from 2	2008 Schedule A, F	Part III, line 17		Į	18	3.14 %		
	33 1/3% support tests - 2009. If the	_							
	more than 33 1/3%, check this box ar 33 1/3% support tests - 2008. If the	•					▶\X		
	line 18 is not more than 33 1/3%, che						. —		
20	Private foundation. If the organization	n did not check a b	ox on line 14, 19a	, or 19b, check the	s box and see ins	tructions	<u> </u>		
					0.4	A (F	000 000 F71 0000		

# **Schedule D**

(Form 990)

Department of the Treasury Internal Revenue Service

# 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

Nam	ne of the organization		Employer identification number
		COMM. SVC FUND, INC.	02-6010349
Pa			or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)	5,400.	
3	Aggregate grants from (during year)	6,250.	
4	Aggregate value at end of year	14,160.	
5	Did the organization inform all donors and donor advisors in v		
	are the organization's property, subject to the organization's	•	Yes X No
6	Did the organization inform all grantees, donors, and donor a		
	for chantable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose co	
n	impermissible private benefit?		Yes X No
Pa			t IV, line /
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or p		rically important land area
	Protection of natural habitat	Preservation of a certific	ed historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	led conservation contribution in the form of	a conservation easement on the last
	day of the tax year		Hold at the End of the Tay Your
_	Total number of conservation easements		Held at the End of the Tax Year
a			2a
b	Total acreage restricted by conservation easements  Number of conservation easements on a certified historic stri	usture included in (a)	2b 2c
c d	Number of conservation easements included in (c) acquired a	2d	
3	Number of conservation easements modified, transferred, rel		
3	year	eased, extinguished, or terminated by the o	rganization during the tax
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	<del></del>	
•	violations, and enforcement of the conservation easements it	<u> </u>	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	•	•
7	Amount of expenses incurred in monitoring, inspecting, and e	_	
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expense s	tatement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes the	e organization's accounting for
_	conservation easements		
Pai	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116, not		
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of publi	c service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these if		
þ	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and balance	sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, or	r research in furtherance of public service, p	provide the following amounts relating to
	these items.		
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical treat	asures, or other similar assets for financial g	ain, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items:	_
	Revenues included in Form 990, Part VIII, line 1		▶ \$ ▶ \$
b	Assets included in Form 990, Part X		<b>▶</b> \$

		OTARY CLUB								
Pa	rt III   Organizations Maintaining (									
3	Using the organization's acquisition, access	ion, and other record	ds, check a	ny of the	following that	at are a s	ignificant i	use of its	collection	items
	(check all that apply):									
a			<b>:</b> Lo		hange.progr					
b	,, ·	•	e LOti	her						
C	Preservation for future generations									
4	Provide a description of the organization's c	ollections and expla	ın how they	further t	he organızat	ion's exe	mpt purpo	ose in Par	t XIV	
5	During the year, did the organization solicit of	or receive donations	of art, histo	oncal trea	sures, or oth	er sımıla	r assets		_	
-	to be sold to raise funds rather than to be m								Yes	No_
Pa	rt IV Escrow and Custodial Arran		lete if organ	ıızatıon ar	nswered "Ye	s" to Fo	m 990, Pa	rt IV, line	9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	lian or other interme	diary for co	ntribution	ns or other as	ssets no	t included		~	
	on Form 990, Part X?							L	」Yes	L∐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing tab	ole						
									Amount	
С	Beginning balance						1c			
d	Additions during the year				•		1d			
е	Distributions during the year						1e			
f	Ending balance						1f		٦	
	Did the organization include an amount on F		217					<u> </u>	」Yes	☐ No
	rt V Endowment Funds. Complete				000 B- 4	0.4.1				
Га	rt V   Endowment Funds. Complete		1		T					
	Posturator of trees halance	(a) Current year	(b) Prio	r year	(c) Iwo yea	rs back	(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance  Contributions								<del> </del>	
D									<del>                                     </del>	
C	Net investment earnings, gains, and losses Grants or scholarships		-							
a	Other expenditures for facilities				<del>                                     </del>		<del></del>		<del> </del>	
е	and programs		-							
f	Administrative expenses		<del>-</del>		<del> </del>		_	<del></del>		
	End of year balance						-		<del>                                     </del>	
g 2	Provide the estimated percentage of the year	r end halance held :	<u> </u>					-,	1	
~ a	Board designated or quasi-endowment	a cha baanee nela i	%							
b	Permanent endowment	%	_′°							
		<u>~~</u> ~								
	Are there endowment funds not in the posse	ession of the organiz	ation that a	ire held a	nd administe	ered for t	he organiz	ration		
	by:					,, ou . o	o. ga		Г	Yes No
	(i) unrelated organizations								3a(i)	- 100
	(ii) related organizations				•		•		3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Scheduk	e R?	•				3b	
_4	Describe in Part XIV the intended uses of the	· · · · · · · · · · · · · · · · · · ·				•	•			
Par	t VI Investments - Land, Building	gs, and Equipm	ent. See F	orm 990	, Part X, line	10				
	Description of investment	(a) Cost or o			or other		ccumulate	ed	(d) Book	value
		basis (investr	ment)	basis	(other)	de	preciation			
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment _									
е	Other									
Total	. Add lines 1a through 1e (Column (d) must e	gual Form 990, Part	X. column	(B). line 1	0(c))					0.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 KEENE ROTA	RY CLUB COMM.	SVC FUNI	, INC.	02-6010349 Page
Part VII Investments - Other Securities.	See Form 990, Part X, line	2		
(a) Description of security or category (including name of security)	(b) Book value			d of valuation f-year market value
Financial derivatives				
Closely-held equity interests				
Other				
			<del></del>	
	<del> </del>			
	<del> </del>			
<del></del>	<del> </del>	<del> </del>		
Tetal (Cal (h) must aqual Form 000, Port V and (D) long 10 \	<del> </del>		<del></del>	
Total (Col (b) must equal Form 990, Part X, col (B) line 12.)	0 F 000 B 11/1	1		
Part VIII Investments - Program Related.	See Form 990, Part X, line	13	4.3.14.44.4	al afficiency and a second
(a) Description of investment type	(b) Book value			od of valuation f-year market value
		<del>                                     </del>	<del></del> -	
Total (Col (b) must equal Form 990, Part X, col (B) line 13)			····	-
Part IX Other Assets. See Form 990, Part X, III	ne 15	<u> </u>		
	a) Description	2.33"		(b) Book value
<del></del>	<u> </u>			
<del></del>				
	<del></del>		<del></del>	<del></del>
Total. (Column (b) must equal Form 990, Part X, col (B) III	no 15 )			
Part X Other Liabilities. See Form 990, Part 2	( line 25			
1. (a) Description of liability	, m le 25	(b) Amount	T	
<del>````````````````````````````````````</del>		(D) Furiourit		
Federal income taxes				
		·	<b>-</b>  .	
	<del></del>	·	$\dashv$	
			$\dashv$	
			$\dashv$	
otal. (Column (b) must equal Form 990, Part X, col (B) III				
. FIN 48 Footnote in Part XIV, provide the text of the fo	otnote to the organization	s financial staten	ents that repor	ts the organization's liability for
ncertain tax positions under FIN 48				
32053 2-01-10				Schedule D (Form 990) 200

	rt XI Reconciliation of Change in Net Assets from Form 990 to A						010349	Page 4
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1			85	<u>,804.</u>
2	Total expenses (Form 990, Part IX, column (A), line 25)			2			79	<u>,680.</u>
3	Excess or (deficit) for the year Subtract line 2 from line 1			3			6	<u>,124.</u>
4	Net unrealized gains (losses) on investments			4				
5	Donated services and use of facilities			5				
6	Investment expenses			6				
7	Prior period adjustments			7				
8	Other (Describe in Part XIV)			8				
9	Total adjustments (net) Add lines 4 through 8			9		_		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and			10			6	<u>,124.</u>
Pa	t XII   Reconciliation of Revenue per Audited Financial Statemer	nts Wi	ith Reve	nue p	<u>er Ret</u>	urn		
1	Total revenue, gains, and other support per audited financial statements			-		1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1						
а	Net unrealized gains on investments	2a				-		
b	Donated services and use of facilities	2b				{		
С	Recoveries of prior year grants	2c						
ď	Other (Describe in Part XIV.)	2d						
е	Add lines 2a through 2d				2	<u>2e</u>		
3	Subtract line 2e from line 1				<u>                                     </u>	3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				ļ	-		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a						
þ	Other (Describe in Part XIV)	4b						
C	Add lines 4a and 4b					łc _		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	4- 14	FAL Free			5		
	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents w	vitii Exp	enses			1	
1	Total expenses and losses per audited financial statements				<u> </u>	1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25							
a	Donated services and use of facilities	2a				-		
b	Prior year adjustments	2b				İ		
C	Other losses	2c		-				
ď	Other (Describe in Part XIV)	2d			─┤,	.		
e	Add lines 2a through 2d					2e	<del></del>	<u>_</u>
3	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1.		•		<u> </u>	3		
*	Investment expenses not included on Form 990, Part VIII, line 7b	45						
a	Other (Describe in Part XIV)	4a						
	Add lines 4a and 4b	_ 4b	-					
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)				<b>—</b>	<del>IС</del> 5		•
	t XIV Supplemental Information		·····			<u> </u>		
Comp	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete.							e 4; Part
		_						
		<del> </del>				<del></del>		<del></del>
						_	-	
								-

### Schedule F (Form 990)

## Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990. Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Inspection Name of the organization Employer identification number KEENE ROTARY CLUB COMM. SVC FUND, INC. 02-6010349 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b For grantmakers. 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 criteria used to award the grants or assistance? Yes No For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States 3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total offices employees or (by type) (i e , fundraising, is a program service, expenditures program services, grants to in the region agents in describe specific type for region region recipients located in the region) of service(s) in region AID IN THE CONSTRUCTION OF HOUSING IN EL EL\_SALVADOR PROGRAM SERVICES SALVADOR 14,799.

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

Schedule F (Form 990) 2009

14 799.

bove that are recognized as charities by the foreign country, recognized as tax-exempt by wided a section 501(c)(3) equivalency letter		recipient who received more than \$5,000. Check this box is Use Schedule F-1 (Form 990) if additional space is needed  (a) Name of organization and EIN (if applicable)	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. List of one recipient received more than \$5,000. Check this box if no one recipient received more than \$5,000. Check this box is a second more than \$5,000. Check this box is a second more than \$5,000. Check this box is a second more than \$5,000. Check this box is a second more than \$5,00	recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Schedule F-1 (Form 990) if additional space is needed  of organization and EIN (if applicable)  (c) Region grant of cash gra	than \$5,000  (e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal other)
int organizations listed above that are recognized as chartres by the foreign country, recognized as tax-exempt by the or counsel has provided a section 501(6)(3) equivalency letter	To organizations listed above that are recognized as charities by the foreign counity, recognized as tax exempt by againzations or entitles.								
ant organizations listed above that are recognized as chantles by the foreign country, recognized as tax-exempt by the or counsel has provided a section 501(s)(3) equivalency letter.	t organizations listed above that are recognized as chamtes by the foreign country, recognized as tax exempt by tee or counsel has provided a section 501(c)(3) equivalency letter								
ent organizations listed above that are recognized as charities by the foreign country, recognized as taxexempt by anter or counsel has provided a section 501(e)(3) equivalency letter	t organizations listed above that are recognized as charities by the foreign country, recognized as tax exempt by ganizations or entities.								-
lent organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by antee or counsel has provided a section 501(c)(3) equivalency letter	th organizations listed above that are recognized as charities by the foreign counitry, recognized as tax-exempt by tee or counsel has provided a section 501(c)(3) equivalency letter								
lent organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by antee or counsel has provided a section 501(c)(3) equivalency letter	It organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by tee or counsel has provided a section 501(c)(3) equivalency letter ganizations or entities								
nent organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by antee or counsel has provided a section 501(c)(3) equivalency letter	it organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by tee or counsel has provided a section 501(c)(3) equivalency letter against the section sore entities.							1 1000	
ient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by an extremption for (c)(3) equivalency letter	it organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by tee or counsel has provided a section 501(c)(3) equivalency letter ganizations or entities								
lent organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by antee or counsel has provided a section 501(c)(3) equivalency letter	it organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by tee or counsel has provided a section 501(c)(3) equivalency letter ganizations or entities								

02-01-10

Page 3		(h) Method of valuation (book, FMV, appraisal, other)			-				Schedule F (Form 990) 2009
	IV, line 16	(g) Description of non-cash assistance							Schedule
02-6010349	to Form 990, Part	(f) Amount of non-cash assistance							
ND, INC. 02	crants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16 Use Schedule F-1 (Form 990) if additional space is needed.	(e) Manner of cash disbursement							
I. SVC FUND,	tes. Complete if the	(d) Amount of cash grant							
CLUB COM	le the United Sta	(c) Number of recipients							
KEENE ROTARY CLUB COMM.	e to Individuals Outsic f additional space is ne	(b) Region		İ					
Schedule F (Form 990) 2009 KE	- 1	(a) Type of grant or assistance							

# SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

**Supplemental Information Regarding Fundraising or Gaming Activities** 

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

OMB No. 1545-0047

Open To Public

Internal Revenue Service Inspection ➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions. Name of the organization Employer identification number KEENE ROTARY CLUB COMM. SVC FUND, INC. 02-6010349 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants а b Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events c In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b if "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name of individual (iv) Gross receipts to (or retained by) to (or retained by) (ii) Activity or entity (fundraiser) from activity fundraiser organization listed in col (i) Yes No 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

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

Schedule G (Form 990 or 990-EZ) 2009

Schedule G (Form 990 or 990-EZ) 2009 KEENE ROTARY CLUB COMM. SVC FUND, INC. 02-6010349 Page 2

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 (c) Other events (a) Event #1 (b) Event #2 (d) Total events WINTER EVENTLOBSTER NONE (add-col-(a) through-RAFFLE FEAST RAFFLE col. (c)) (total number) (event type) (event type) Revenue 62,073. 56,839 5,234 1 Gross receipts 2 Less Charitable contributions 125. 0 125. 3 Gross income (line 1 minus line 2) 56,714. 5,234 61,948. 13,750. 200 13,950. Cash prizes Noncash prizes 327 327. Direct Expenses 6 Rent/facility costs 550. 0. 550. 7 Food and beverages 7,600 7,600. 8 Entertainment 3,834. 0. 3.834. 9 Other direct expenses 26,261) 10 Direct expense summary Add lines 4 through 9 in column (d) 35,687. 11 Net income summary Combine line 3, column (d), and line 10 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 (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor No Direct expense summary Add lines 2 through 5 in column (d) Net gaming income summary Combine line 1, column (d), and line 7 Yes No 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? 9a b If "No," explain 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," explain: 11 Does the organization operate gaming activities with nonmembers? 11 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?

Schedule G (Form 990 or 990-EZ) 2009 KEENE ROTARY CLUB COMM. SVC FUND, INC. 02-	601034	9 Pa	age 3
		Yes	No
13 Indicate the percentage of gaming activity operated in			
a The organization's facility . 13a	-%_		
b An outside facility	%		
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
Name			
Address >			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount			
of gaming revenue retained by the third party > \$		İ	
c If "Yes," enter name and address of the third party		ļ	
Nama 🏲		ļ	
Name			
Address >			
16 Garning manager information			
Name >			
Garning 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?	. 17a		
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
organization's own exempt activities during the tax year > \$			l

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2009 No 1545-0047
2009
Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

TO AID IN THE DEVELOPMENT Employer identification number ž 02+6010349 S GOAL OF (h) Purpose of grant F WORLDWIDE SERVICE IN EL or assistance X Yes recipient that received more than \$5,000 Check this box if no one recipient received more than and address of organization

(b) EIN

(c) IRC section

(d) Amount of cash grant

(e) Amount of cash grant

(ii) Amount of cash assistance

(b) EIN

(c) IRC section

(d) Amount of cash assistance

(e) Amount of cash assistance

(iii) Method of cash assistance

(iv) Method of cash assistance

(iv) Method of cash assistance

(iv) Method of cash assistance

(iv) Method of cash assistance

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(iv) Purpose is needed

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(iv) Purp 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 ORGANIZATION' SERVICE WORK TO FUND THE SALVADOR ROJECTS 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 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Attach to Form 990. 4,000, 000 9 SVC FUND, KEENE ROTARY CLUB COMM. Enter total number of section 501(c)(3) and government organizations General Information on Grants and Assistance 36-3245072 36-3245072 criteria used to award the grants or assistance? Enter total number of other organizations ONE ROTARY CENTER, 1560 SHERMAN AVE ONE ROTARY CENTER, 1560 SHERMAN AVH 1 (a) Name and address of organization ROTARY FOUNDATION - INTERACT Name of the organization EVANSTON, IL 60201 EVANSTON IL 60201 ROTARY FOUNDATION Part I Part II

Schedule I (Form 990) 2009

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

Schedule I (Form 990) 2009 KEENE ROTARY CLUB COMM. SVC FUND, INC.  Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, Inne 22 Use Part IV and Schedule I-1 (Form 990) if additional space is needed	CLUB COMM. United States. Com	SVC FUND, plete if the organiza	INC. tion answered "Yes'	to Form 990, Part IV, line 22	02-6010349	Page 2
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance	sh assistance
POOD, SHELTER AND CLOTHING FOR LOW INCOME CHILDREN, ETC.	199	0	23,742,	FAIR MARKET VALUE	CLOTHING FOR CHILDREN	N
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the information	required in Part I, I	ine 2, and any other	additional information.		
THE ORGANIZATIONS PROCEDURES FOR M	FOR MONITORING	THE USE	OF GRANT FUNDS	UNDS		
INCLUDES REVIEWING THE ANNUAL REPORTS		OF THE VARIOUS	ORGANIZATIONS	IONS IT		
SUPPORTS AS WELL AS MEMBER INTERACTION		AND VOLUNTEERING	ING.			
	and the second s					
932102 02-02-10		27			Schedule I	Schedule I (Form 990) 2009

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### SCHEDULE O (Form 990)

**Supplemental Information to Form 990** 

Department of the Treasury Internal Revenue Service 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

Name of the organization  KEENE ROTARY CLUB COMM. SVC FUND, INC.	Employer identification number 02-6010349
REBNE KOTART COOR COMM. SVC FOND, INC.	02-0010349
FORM 990, PART VI, SECTION B, LINE 11: EACH MEMBER OF THE	ORGANIZATION'S
GOVERNING BODY WERE PROVIDED A COPY OF THE FINAL FORM 990	FOR REVIEW PRIOR
TO FILING IT WITH THE IRS.	
FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTERS	EST FORMS ARE
COMPLETED ON AN ANNUAL BASIS BY ALL BOARD MEMBERS.	
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MA	AKES IT'S
GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO	THE PUBLIC UPON
REQUEST.	
	<del></del>
	<del></del>