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A For the 2009 calendar year, or tax year beginning 07-01-2009, and ending 06-30-2010				
B Check if applicable	Please use IRS label or print or type. See Specific Instructions.	C Name of organization ROTARY CLUB OF FRESNO		D Employer identification number 94-0818249
Address change		Number and street (or P O box, if mail is not delivered to street address) Room/suite 2307 N FINE AVE		E Telephone number (559) 453-2404
Name change				
Initial return		City or town, state or country, and ZIP + 4 FRESNO, CA 93727		F Group Exemption Number
Terminated				
Amended return				
Application pending				

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

I Website: FRESNOROTARY.ORG		H Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)
J Tax-Exempt status (check only one)— ☒ 501(c)(4) ☐ (insert no.) ☐ 4947(a)(1) or ☐ 527		

K Check  if the organization is not a section 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ	\$	316,294
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Part I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)
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Revenue	1	Contributions, gifts, grants, and similar amounts received	1	274,477
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	24
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming , check here  		
	a	Gross revenue (not including \$ _ of contributions reported on line 1)	6a	41,793
	b	Less direct expenses other than fundraising expenses	6b	13,563
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	28,230
	7a	Gross sales of inventory, less returns and allowances	7a	
	b	Less cost of goods sold	7b	
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe  _____)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 	9	302,731	

Expenses	10	Grants and similar amounts paid (attach schedule) 	10	110,153
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	65,621
	13	Professional fees and other payments to independent contractors	13	2,500
	14	Occupancy, rent, utilities, and maintenance	14	15,518
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe  _____)	16	104,011
	17	Total expenses. Add lines 10 through 16 	17	297,803

Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	4,928
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	280,514
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year Combine lines 18 through 20	21	285,442

Part II Balance Sheets—If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	243,058	22 231,277
23	Land and buildings		23
24	Other assets (describe )	100,158	24 109,436
25	Total assets	343,216	25 340,713
26	Total liabilities (describe )	62,702	26 55,271
27	Net assets or fund balances (line 27 of column (B) must agree with line 21) .	280,514	27 285,442

Part III Statement of Program Service Accomplishments (See the instructions for Part III)		Expenses (Required for section 501 (c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)	
What is the organization's primary exempt purpose? <u>SERVICE TO THE NEEDY IN THE LOCAL, NATIONAL & INTERNATIONAL COMMUNITY</u>			
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title			
28 COMMUNITY SERVICES THE CLUB RAISES FUNDS FOR A VARIETY OF PURPOSES- SUPPORT CONTINUES FOR A HIGHWAY BEAUTIFICATION PROJECT THAT INVOLVES LOCAL ARTISTS AND HIGH SCHOOL STUDENTS IN THE DESIGN AND PRODUCTION OF MOSAIC MURALS TO BEAUTIFY THE HIGHWAYS PROVIDE AWARDS TO COUNTY-WIDE HIGH SCHOOL SCIENCE FAIR FOR AN ENVIRONMNETAL DISPLAY/EXPERIMENT, AS WELL AS PROVIDING PARTIES FOR PEDIATRIC PATIENTS AT CHILDREN'S HOSPITAL CENTRAL CALIFORNIA (WHO ARE PAIRED WITH AN ATHLETE FROM CSU FRESNO AND A ROTARIAN IN A "BUDDY" SYSTEM) PROVIDED FUNDS TO PURCHASE T-SHIRTS FOR HIGH SCHOOL CHILDREN, FUNDS CONTINUE TO SUPPORT AN EDUCATIONAL PROGRAM PROVIDED BY THE FRESNO PHILHARMONIC FOR PERFORMANCES FOR STUDENTS AT AN INNER-CITY ELEMENTARY SCHOOL, AS WELL AS PROVIDING CAMPERSHIPS FOR YOUTH AND ADULT CEREBRAL PALSY VICTIMS, FUNDING TO SEND HIGH SCHOOL STUDENTS TO A YOUTH LEADERSHIP CAMP,FUNDS TO ASSIST AS NECESSARY REPAIRS AT ROTARY STORYLAND, FUNDS TO PROVIDE FOOD FOR THE NEEDY, CLOTHING & HYGIENE KITS FOR CHILDREN, FUNDS TO PURCHASE LARGE SCREEN TV FOR THE ELDERLY, EQUIPMENT FOR BOY SCOUTS (Grants \$ 21,438) If this amount includes foreign grants, check here . . . ☒		28a	34,896
29 INTERNATIONAL SERVICES THE CLUB RAISES MONEY TO COVER TRAVEL EXPENSES FOR VOLUNTEER DOCTORS, DENTISTS, MEDICAL TECHNICIANS AND NURSES FOR AN ANNUAL TRIP TO A REMOTE RURAL AREA OF MEXICO WHICH HAS NO OTHER MEDICAL SERVICES AVAILABLE THE CLUB ALSO PROVIDES FUNDS FOR A GROUP STUDY EXCHANGE PROGRAM AND FUNDS FOR SOLAR COOKER/ WATER PASTEURIZATION EDUCATION AND TRAINING PROJECTS IN AFRICA AND MEXICO WHICH ARE NEEDED DUE TO DEFORESTATION AND CONTAMINATED WATER SUPPLIES (Grants \$ 38,554) If this amount includes foreign grants, check here . . . ☒		29a	68,366
30 VOCATIONAL SERVICES THE CLUB RAISES FUNDS FOR GRADUATING HIGH SCHOOL STUDENTS' SCHOLARSHIPS BASED ON ACADEMIC ACHIEVEMENT, FINANCIAL NEED, FUTURE PLANS AND EXTRACURRICULAR ACTIVITIES THE CLUB SPONSORS AND SUPPORTS A SERVICE CLUB (INTERACT) AT DUNCAN POLYTECHNICAL HIGH SCHOOL FUNDS ARE ALSO USED TO HONOR AND RECOGNIZE AN OUTSTANDING TEACHER FROM JEFFERSON ELEMENTARY AND DUNCAN POLYTECHNICAL HIGH SCHOOL (Grants \$ 14,955) If this amount includes foreign grants, check here . . . ☒		30a	16,727
31 Other program services (attach schedule) (Grants \$) If this amount includes foreign grants, check here . . . ☒		31a	
32 Total program service expenses (add lines 28a through 31a)		32	119,989

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV)				
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

Part VOther Information (Note the statement requirements in the instructions for Part V.)		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	No
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	No
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033 (e) notice, reporting, and proxy tax requirements?	35a	No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶	37a	
b	Did the organization file Form 1120-POL for this year?	37b	No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on line 9	39a	
b	Gross receipts, included on line 9, for public use of club facilities	39b	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____, section 4912 ▶ _____, section 4955 ▶ _____		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	No
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____		
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	No
41	List the states with which a copy of this return is filed ▶ CA		
42a	The organization's books are in care of ▶ ROTARY CLUB OF FRESNO Telephone no ▶ (559) 453-2404 2307 N FINE AVE Located at ▶ FRESNO, CA ZIP + 4 ▶ 93727		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Yes	No
42b			No
c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country ▶ _____	42c	No
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ ☒ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44	Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of Form 990-EZ.	Yes	No
44			No
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes", Form 990 must be completed instead of Form 990-EZ.	Yes	No
45			No

Part VI

Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.
All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

46	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	Yes	No
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		
48	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		
49a	Did the organization make any transfers to an exempt non-charitable related organization?		
49b	If "Yes," was the related organization a section 527 organization?		

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

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

50(f) Total number of other employees paid over \$100,000

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

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

51(d) Total number of other independent contractors each receiving over \$100,000

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.				
	***** Signature of officer		2010-12-17 Date		
	DICK HERRINTON, TREASURER Type or print name and title				
Paid Preparer's Use Only	Preparer's signature ANTHONY J ANDRADE		Date 2010-12-22	Check if self-employed ☐	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ANDRADE & COMPANY AN ACCOUNTANCY CORP 5080 N FRUIT AVENUE SUITE 103 FRESNO, CA 93711				EIN
					Phone no (559) 226-2727
May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No					

Additional Data

Software ID:

Software Version:

EIN: 94-0818249

Name: ROTARY CLUB OF FRESNO

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
SHIRLEY GRACE  2307 N FINE AVE FRESNO, CA 93727	VICE PRES 0	0		
DICK HERRINTON  2307 N FINE AVE FRESNO, CA 93727	TREASURER 0	0		
EVERETT NORCROSS III  2307 N FINE AVE FRESNO, CA 93727	SECRETARY 0	0		
JOE THOMPSON JR  2307 N FINE AVE FRESNO, CA 93727	PRESIDENT 0	0		
DAVID GILMORE  2307 N FINE AVE FRESNO, CA 93727	PRES ELECT 0	0		
JUSTIN FORTMEYER  2307 N FINE AVE FRESNO, CA 93727	DIRECTOR 0	0		
VICTORIA GONZALES  2307 N FINE AVE FRESNO, CA 93727	DIRECTOR 0	0		
ROBERT LIPPERT  2307 N FINE AVE FRESNO, CA 93727	DIRECTOR 0	0		
DAVID SCHAAF  2307 N FINE AVE FRESNO, CA 93727	DIRECTOR 0	0		
ORAN COGDILL  2307 N FINE AVE FRESNO, CA 93727	DIRECTOR 0	0		
MICHAEL WINTON  2307 N FINE AVE FRESNO, CA 93727	DIRECTOR 0	0		
PETER KLASSEN  2307 N FINE AVE FRESNO, CA 93727	DIRECTOR 0	0		
TOM LICOURIS  2307 N FINE AVE FRESNO, CA 93727	DIRECTOR 0	0		

Form

4562

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2009

Attachment
Sequence No 67

Department of the Treasury
Internal Revenue Service

See separate instructions. Attach to your tax return.

Name(s) shown on return ROTARY CLUB OF FRESNO	Business or activity to which this form relates INDIRECT DEPRECIATION	Identifying number 94-0818249
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Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount See the instructions for a higher limit for certain businesses	1	250,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6			
6			
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 .	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	1,575

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System						
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System						
20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (see instructions)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	1,575
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?						Yes No			24b If "Yes," is the evidence written?			Yes No		
(a) Type of property (list vehicles first)		(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)		(f) Recovery period	(g) Method/ Convention		(h) Depreciation/ deduction		(i) Elected section 179 cost		
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)								25						
26 Property used more than 50% in a qualified business use														
			%											
			%											
			%											
27 Property used 50% or less in a qualified business use														
			%				S/L -							
			%				S/L -							
			%				S/L -							
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1								28						
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1										29				

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year (do not include commuting miles)			(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year														
32 Total other personal(noncommuting) miles driven														
33 Total miles driven during the year Add lines 30 through 32														
34 Was the vehicle available for personal use during off-duty hours?			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?														
36 Is another vehicle available for personal use?														

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?											Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners												
39 Do you treat all use of vehicles by employees as personal use?												
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?												
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)												
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles												

Part VI Amortization

(a) Description of costs		(b) Date amortization begins	(c) Amortizable amount		(d) Code section	(e) A mortization period or percentage		(f) A mortization for this year	
42 A mortization of costs that begins during your 2009 tax year (see instructions)									
43 A mortization of costs that began before your 2009 tax year						43			
44 Total. Add amounts in column (f) See the instructions for where to report						44			

TY 2009 Compensation Explanation**Name:** ROTARY CLUB OF FRESNO**EIN:** 94-0818249

Person Name	Explanation
SHIRLEY GRACE	
DICK HERRINTON	
EVERETT NORCROSS III	
JOE THOMPSON JR	
DAVID GILMORE	
JUSTIN FORTMEYER	
VICTORIA GONZALES	
ROBERT LIPPERT	
DAVID SCHAAF	
ORAN COGDILL	
MICHAEL WINTON	
PETER KLASSEN	
TOM LICOURIS	

TY 2009 Grants and Similar Amounts Paid Schedule**Name:** ROTARY CLUB OF FRESNO**EIN:** 94-0818249

Item No.	1
Class of Activity	WHEELCHAIRS FOR POOR
Donee's Name	WHEELCHAIR FOUNDATION
Donee's Address	3820 BLACKHAWK ROAD DANVILLE, CA 94506
Amount (FMV)	
Purpose of Payment to Affiliate	
Relationship	
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	2
Class of Activity	STUDENT SCHOLARSHIP
Donee's Name	FRESNO AREA HIGH SCHOOL
Donee's Address	1839 N ECHO AVE FRESNO, CA 93704
Amount (FMV)	
Purpose of Payment to Affiliate	
Relationship	
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	3
Class of Activity	POLIO RELIEF
Donee's Name	ROTARY INTERNATIONAL
Donee's Address	14255 COLLECTIONS CENTER DR CHICAGO, IL 60693
Amount (FMV)	
Purpose of Payment to Affiliate	
Relationship	
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	4
Class of Activity	ONGOING SUPPORT
Donee's Name	ROTARY INTERNATIONAL
Donee's Address	14255 COLLECTIONS CENTER DR CHICAGO, IL 60693
Amount (FMV)	
Purpose of Payment to Affiliate	
Relationship	
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	5
Class of Activity	
Donee's Name	DUES PAID TO ROTARY INTERNATIONAL
Donee's Address	
Amount (FMV)	
Purpose of Payment to Affiliate	
Relationship	
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	6
Class of Activity	
Donee's Name	DUES PAID TO DISTRICT 5230
Donee's Address	
Amount (FMV)	
Purpose of Payment to Affiliate	
Relationship	
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

TY 2009 Other Assets Schedule**Name:** ROTARY CLUB OF FRESNO**EIN:** 94-0818249

Description	Beginning of Year Amount	End of Year Amount
ACCOUNTS RECEIVABLE	106,013	115,819
LESS ALLOWANCE	16,000	15,500
PREPAID EXPENSES AND DEFERRED CHARGES	4,976	5,524
OFFICE FURNITURE & EQUIPMENT	4,316	10,768
LESS ACCUMULATED DEPRECIATION	1,861	7,175
COMPUTER EQUIPMENT	6,452	
LESS ACCUMULATED DEPRECIATION	3,738	
	100,158	109,436

TY 2009 Other Expenses Schedule

Name: ROTARY CLUB OF FRESNO

EIN: 94-0818249

Description	Amount
EXPENSES	
POSTAGE	4,265
TELEPHONE & FAX	1,654
BULLETINS-PRINTING	8,208
BULLETINS-POSTAGE	600
DIRECTORY	3,319
OFFICE SUPPLIES	4,074
WEBSITE EXPENSES	1,953
INTERNATIONAL CONVENTION	6,299
DISTRICT CONFERENCE	903
DISTRICT ASSEMBLY	149
CLUB ASSEMBLY-GOVENORS VISIT	1,239
CLUB ASSEMBLY-ANNUAL RETREAT	617
PRESIDENT ELECT TRAINING	608
LARGE CLUB CONFERENCE	3,245
WOMENS CONFERENCE	3,192
INSURANCE-OFFICE	7
INSURANCE-WORKERS COMPENSATIO	925
COMM.SERVICE-CAMP ROYAL	505
COMM.SERVICE-ENVIR.&ECOLO	3,269
COMM. SERVICE-LITTLE HERO	728
COMM.SERVICE-JEFFERSON EL	3,010
COMM.SERVICE-DUNCAN	2,144
VOC.SERVICE-INTERACT	600
MISS CA RECEPTION EXPENSE	487
INT'L SERVICE-PROJECT NIN	15,169
INT'L SERVICE-SOLAR COOKE	6,261
INT'L SERVICE-GROUP STUDY	12
JEFFERSON SCHOOL EXPENSES	1,168
PROJECT NINO EXPENSES	1,990

Description	Amount
SOLAR COOKER EXPENSES	206
WAPI EXPENSES	1,098
SCHOLARSHIP LUNCHEON	345
TEACHER RECOGNITION	554
LOCAL AREA PROJECTS	398
COGS EXPENSES	49
HAITI RELIEF	5,000
AMPHITHEATER	947
ROTARACT	386
AMBASSODORIAL SCHOLARS	76
POLIO PLUS EXPENSES	640
PROGRAM- LUNCHEES	795
SPEAKER GIFTS - PROGRAMS	236
PROGRAM-MUSIC	250
PROGRAM-OTHER EXPENSES	1,272
BOARD MEETINGS	690
GIFTS & DEMOTION	523
NEW MEMBER EXPENSES	3,227
MILEAGE REIMBURSEMENT	409
MISC. EXPENSES	797
CLUB SERVICE-BIRTHDAY	670
HOLIDAY PARTY EXPENSES	4,321
GAME TICKETS TAILGATE	1,789
FELLOWSHIP/HOSPITALITY	3
MEMBERSHIP DEVELOPMENT	2,348
SUNSHINE COMMITTEE	382

TY 2009 Other Liabilities Schedule**Name:** ROTARY CLUB OF FRESNO**EIN:** 94-0818249

Description	Beginning of Year Amount	End of Year Amount
ACCOUNTS PAYABLE AND ACCRUED EXPENSES	3,541	2,068
DEFERRED REVENUE	47,879	35,876
ROUNDING		
PHF-SUSTAINING QUARTERLY	11,282	16,137
PHF - BOARD		1,000
ROTARACT		190
	62,702	55,271