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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

Open to Public Inspection

Name of the organization
Rotary Club of Truckee

Employer identification number

94-2675501

Pa	Organizations Maintaining Dono organization answered "Yes" to Fo	or Advised Funds or Other Similar Foorm 990. Part IV line 6.	unds or Accounts. Complete if the
	3.9a.n.za.io., and word 103 to 10	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and	donor advisors in writing that the assets	held in donor advised
	funds are the organization's property, subject		
6	Did the organization inform all grantees, dor	nors, and donor advisors in writing that g	rant funds can be used
	only for charitable purposes and not for the		
	conferring impermissible private benefit?		
Par	Conservation Easements. Comp	lete if the organization answered "Yes	
1	Purpose(s) of conservation easements held to		
	Preservation of land for public use (e.g., i		of an historically important land area
	Protection of natural habitat	· · · · · · · · · · · · · · · · · · ·	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organiza	tion held a qualified conservation contribu	ition in the form of a conservation
	easement on the last day of the tax year.		
	,		Held at the End of the Tax Ye
а	Total number of conservation easements .		2a
b	Total acreage restricted by conservation eas	sements	
c	Number of conservation easements on a cer		20
ď	Number of conservation easements includ		
-	historic structure listed in the National Regis		· · 2d
3	Number of conservation easements modified		
•	tax year ►	a, transferred, released, extinguished, or t	errimitated by the organization during the
4	Number of states where property subject to	conseniation essement is located	
5	Does the organization have a written poli		nspection handling of
•	violations, and enforcement of the conservat		
6	Staff and volunteer hours devoted to monito		□ .00 □
•	Land volunteer nours devoted to mornito	and emorcing conservati	on easements during the year
7	Amount of expenses incurred in monitoring,	inspecting and enforcing conservation as	sements during the year
•	►\$	mspecting, and emorcing conservation ea	asements curing the year
8	Does each conservation easement reported	on line 2/d) above satisfy the requirement	e of section 170(b)(A)(B)
Ū			
9	In Part XIV, describe how the organization re		[103 [] H
3	balance sheet, and include, if applicable, the		
	organization's accounting for conservation e		manda statements that describes the
Pari		ections of Art, Historical Treasures,	or Other Similar Assets
		vered "Yes" to Form 990, Part IV, line	
12	If the organization elected, as permitted und		
10	works of art, historical treasures, or other		
	public service, provide, in Part XIV, the text of		
ь.			
b	If the organization elected, as permitted un		
	works of art, historical treasures, or other public service, provide the following amount		education, or research in furtherance
		-	. .
	(i) Revenues included in Form 990, Part VIII		
_	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works		
	following amounts required to be reported u	, , ,	
а	Revenues included in Form 990, Part VIII, lin	ne 1	▶ \$
h	Assets included in Form 990, Part Y		•

Page 2

Par										
3	Using the organization's acquisition,		her record	is, c	heck any of the	e follov	ing that are a sign	gnificant	use	of its
	collection items (check all that apply):		. ~	_						
a	Public exhibition		d [_	Loan or exchar	_	-			
þ	Scholarly research		e L	_}	Other					
c	Preservation for future generation									
4	Provide a description of the organization	tion's collections a	and explai	n ho	w they further	the org	anization's exem	pt purpo	ose ir	1 Part
_	XIV.			_						
5	During the year, did the organization								_	٦
	assets to be sold to raise funds rather							Y€		
Part						answei	red "Yes" to For	m 990,	Pan	ίν,
	line 9, or reported an amour									
1a	Is the organization an agent, trustee included on Form 990, Part X?								-	٦.,
						• •		∐ Ye	es L	J No
b	If "Yes," explain the arrangement in P	art XIV and compli	ete the toll	lowi	ng table:		1 0			
	—					-		nount		
C	Beginning balance			•		1c				
ď	3 ,					1d				
e	Distributions during the year .					_1e				
f	Ending balance						┸			
2a	Did the organization include an amount		art X, line 2	21?		•		∐ Y	es L	_l No
	If "Yes," explain the arrangement in P				1437 - 114 - 5		00 D-+ 11/ U	10	<u></u>	
Par	V Endowment Funds. Compl									book.
		(a) Current year	(b) Prior	r year	(c) Two year		(d) Three years back			
1a	Beginning of year balance									
b	Contributions		<u> </u>					2.4	and the second	新教 教
c	Net investment earnings, gains, and losses							16.5		
			ļ					41.41		100
d	Grants or scholarships							200	100	
е	Other expenditures for facilities and									
	programs							24	and the	
f	Administrative expenses		_							
g	End of year balance		J					125	M. Fr	
2	Provide the estimated percentage of t			3:						
a	Board designated or quasi-endowme		%							
b	Permanent endowment ►									
C	Term endowment ► %			_4!			ininternal for the			
3a	Are there endowment funds not in the organization by:	e possession or tr	ie organiza	alioi	i mar are neiu	anu au	ministered for the	3		T 81-
								0-4	res	No
	(i) unrelated organizations			•		•		3a(i)		
L	(ii) related organizations			٠,				3a(ii)		
ь 4	If "Yes" to 3a(ii), are the related organ Describe in Part XIV the intended use:							3b	L	<u> </u>
Part										
rait					·	(-)		(4) 5		
	Description of investment	(a) Cost or of (investm		(D) C	Cost or other basis (other)		Accumulated epreciation	(d) Bo	ok valu	16
	Land	,	\dashv		,					
1a	Land	.								
b	Buildings	.								-
c	Leasehold improvements	.	15 070				4.604			11 170
d	Equipment	•	15,870				4,691			11,179
Total	Add lines 1a through 1e. (Column (d) r	nuct oqual Fare C	OO Post V		lumn (B) line 10	2/011				44 67-
i otal.	Add mies Ta through Te. (Column (d) I	nusi equal roim 9	isu, Pan X	, co	umm (b), line TC	7(C)·)	<u>▶ </u>			11,179

Part VII Investments - Other Securitie	s. See Form 990, Part X,	line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E) (F)			
(G)	·		
(H)	·		
(1)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12) ▶	•		
Part VIII Investments - Program Relate	d. See Form 990, Part X		
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(2)			
(3)			· · · · · · · · · · · · · · · · · · ·
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		三、安全	· · · · · · · · · · · · · · · · · · ·
Part IX Other Assets. See Form 990, F			
	(a) Description	(b) B	ook value
(1)			
(2)			<u> </u>
(3)	·		
(4)			
		······································	-
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X,	col. (B) line 15.)		
Part X Other Liabilities. See Form 990), Part X, line 25.		
1. (a) Description of liability	(b) Amount		
(1) Federal income taxes			
(2) Paul Harris Sustaining Mamorial	50		
(3) Truckee Rotary Foundation	20		
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶			
2. FIN 48 (ASC 740) Footnote In Part XIV, provide	te the text of the footnote to	the organization's financial statements that	reports the
organization's liability for uncertain tax positions	under FIN 48 (ASC 740).		

	de D (Form 990) 2010	Page 4
Par	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem	ents
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3
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 9	10
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return
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:	
а	Net unrealized gains on investments	
b	Donated services and use of facilities	
С	Recoveries of prior year grants	
d	Other (Describe in Part XIV)	
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1651
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIV)	
c	Add lines 4a and 4b	4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Part		
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	100 Con 100 Co
- а	Donated services and use of facilities	
b	Prior year adjustments	
c	Other losses	
ď	Other (Describe in Part XIV.)	
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	100
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIV.)	
c	Add lines 4a and 4b	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5
Part		
Comp	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;	
	', line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also con Iditional information.	ipiote tina part to provide
y u	manuscript on the second of the	
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-		······································

SCHEDULE G (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service

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.

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

OMB No 1545-0047

94-2675501

Name of the organization Employer identification number **Rotary Club of Truckee** Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

ı aı	Form 990-EZ filers are n	ot required to	complete	this part.			
1	Indicate whether the organizatio				owing activities. C	heck all that apply.	
а	☐ Mail solicitations				ion of non-governi		
b	☐ Internet and emal solicitation	าร			on of government	•	
С	Phone solicitations				fundraising events		
d	☐ In-person solicitations		3 -	_ ~ ~ ~ · · · · · · · · · · · · · · · ·			
2a	Did the organization have a writ	ten or oral agre	ement with	any individ	dual (including off	icers, directors, trus	tees
	or key employees listed in Form						
b	If "Yes," list the ten highest paid compensated at least \$5,000 by	individuals or	entities (fund				
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have r control of autions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3			-				
4						<u></u>	
5							
6							
7							
8			-				
9							
10							
Total				▶			
3	List all states in which the orga registration or licensing	ınızatıon ıs regi:	stered or lic	ensed to s	solicit contribution	ns or has been notifi	ed it is exempt fron
	···			•••			
				····			
		•••••					
		•••••			***************************************		
							·· ·
						•••••	
					•••••		
••••						•••••	
						••••	

		(Form 990 or 990-EZ) 2010				Page 2
Pa	ırt II	Fundraising Events. Com than \$15,000 of fundraisin gross receipts greater that	g event contributions			
		gross receipts greater than	(a) Event #1 Dinner Dance (event type)	(b) Event #2 County Fair Booth (event type)	(c) Other events 3 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 2	Gross receipts Less Charitable	140,384	24,067	54,696	219,420
ш.	3	contributions Gross income (line 1 minus		11,546		11,546
_		line 2)	140,384	12,521	54,696	207,874
	4	Cash prizes				
	5	Noncash prizes .			508	508
nses	6	Rent/facility costs	5,226			5,226
Direct Expenses	7	Food and beverages .	58,588	10,366	45,520	114,474
Direc	8	Entertainment .	7,650		6,150	13,800
	9	Other direct expenses	74,624		1,445	76,069
	10 11	Direct expense summary Ad Net income summary. Comb				(210,077)
Pa	rt III	Gaming. Complete if the	e organization answer		0, Part IV, line 19, or	
- anui		than \$15,000 on Form 99	90-E∠, line 6a. (a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue .			43,132	43,132
ses	2	Cash prizes			20,000	20,000
rect Expenses	3	Noncash prizes				
Direct I	4	Rent/facility costs				
	5	Other direct expenses .			7,148	7,148
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7	Direct expense summary Ac	dd lines 2 through 5 in c	olumn (d)		(27,148)
	8	Net gaming income summar	y Combine line 1, colui	nn d, and line 7 .		15,984
ę	a Is	nter the state(s) in which the or the organization licensed to o "No," explain:		in each of these states	s?	. ☑ Yes ☐ No
10			gaming licenses revoked	d, suspended or termina	ated during the tax year	? . □ Yes ☑ No

Schedu	le G (Form 990 or 990-EZ) 2010	Page 3
11 12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity	es No
13	Indicate the percentage of gaming activity operated in:	
а	The organization's facility	%
ь	An outside facility	100 %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	
	Name ► Andrew Cross	
	Address ► 255 N Sierra St #2012, Reno, NV 89501	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	′es ☑ No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the	
	amount of gaming revenue retained by the third party ► \$	
С	THE STATE OF THE S	
	Name ►	·
	Address ►	
16	Gaming manager information:	
	Name ►	
	Gaming manager compensation ▶ \$	
	Description of services provided ▶	
	☐ Director/officer ☐ Employee ☐ Independent contractor	
17 a		∕es ✓ No
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 > \$	-
Part	Supplemental Information. Complete this part to provide the explanations required by Part I, line a columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complet part to provide any additional information (see instructions).	2b, te this
	······································	

	<u> </u>	

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

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

OMB No 1545-0047 2010

> Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Open to Public Inspection Employer identification number

7 27 Schedule I (Form 990) (2010) % ☑ (h) Purpose of grant Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II or assistance Help feed seniof 5 Youth programs Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to □ Yes Local charities 94-2675501 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Cat No 50055P Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance 7,772 11,546 13,000 (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations (c) IRC section if applicable the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. General Information on Grants and Assistance can be duplicated if additional space is needed. Enter total number of other organizations (P) EIN (1) Sierra Senior Services 1 (a) Name and address of organization (3) Truckee Rotary Foundation (2) Nevada County Fair Rotary Club of Truckee Name of the organization Part Part II N 9 8 6 5 12) ₹ 9 8

(Form 990) (2010)

Schedule I (Form 990) (2010) (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance 13,728 (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients (a) Type of grant or assistance 1 Help w/medical expenses N က 4 S 9

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization
Rotary Club Of Truckee

Employer identification number 94-2675501

The Rotary Club of Truckee meets weekly to organize and run various events and activities to raise funds that are used to help support
community charitable needs.
Other Program Services: Truckee HS Project Graduation \$1000, Truckee Day \$500, Truckee Tahoe Community Chorus \$350, Alder Creek
Middle School \$500, North Lake Tahoe Leadership Program \$500, Big Brother, Big Sister \$500, Bud Fish Treelighting \$235, Donner Historical
Society \$350, Truckee Community Christmas \$2000, Truckee Elementary School \$3000, Rotarians at Work \$1863, Literacy Project \$1500,
Community Contributions \$9426, Blood Drive \$1140, Senior Luncheon \$1680, Local Community Service-other \$3947, Interact Club \$220
Rotary Youth Exchange \$1505, RYLA Camp \$1230, Scholarships \$4500, Speech/Music Contest \$1188
Policies All financial and tax related duties fall under the responsibility of the Treasurer, whom is elected to a 1-year term. Form 990 is
prepared solely by the Treasurer and only reviewed if requested.
Disclosure The Rotary Club of Truckee makes its governing documents, conflict of interest policy and financial statements available to the
public upon request only
Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees and Independent Contractors The
Rotary Club of Truckee is completely volunteer with no compensation
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