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Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0047 Open to Public Inspection

A	or the	2011 calendar year, or tax year beginning and	ending		
В	Check if applicabl	C Name of organization		D Employer identifi	cation number
_	∏Addre	NOTARY CLUB OF SUFFOLK			
\vdash	chang Name			21 1	775330
H	chang □linitial	Doing Business As	D / 4-		
H	return ☐Termir	,	Room/suite	E Telephone numbe	
-	_ated Amen	F.U. DUA 1972			925-3763
누	return Applic	City or town, state or country, and ZIP + 4		G Gross receipts \$	55,236.
Ш	tion pendir	SUFFOLK, VA 23439-1972		H(a) Is this a group re	eturn Yes X No
		F Name and address of principal officer: KENDA COUNCIL		for affiliates?	
		SAME AS C ABOVE		H(b) Are all affiliates ind	
		empt status: X 501(c)(3) 501(c)() ◀ (insert no.) 4947(a)(1)	or 527	7	list. (see instructions)
		te: N/A		H(c) Group exemption	
	art I	organization: X Corporation Trust Association Other Summary	L Year	or formation: 2001	M State of legal domicile: VA
		Briefly describe the organization's mission or most significant activities. SUPPO	ORT OF	LOCAL AND	
Activities & Governance		INTERNATIONAL CHARITIES			
Şe.		Check this box If the organization discontinued its operations or dispose	sed of more	than 25% of its net as	ssets
≥	1	Number of voting members of the governing body (Part VI, line 1a)		3	10
20	1	Number of independent voting members of the governing body (Part VI, line 1b)		. 4	10
_'90 _'90		Total number of individuals employed in calendar year 2011 (Part V, line 2a)		5	0
Ž	Į.	Total number of volunteers (estimate if necessary)		6	90
ڃُڙ		Total unrelated business revenue from Part VIII, column (C), line 12		7a	100.
≥	1	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
				Prior Year	Current Year
رن و	8	Contributions and grants (Part VIII, line 1h)		34,717.	55,035.
Révenue		Program service revenue (Part VIII, line 2g)		0.	0.
		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	101.
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		100.	100.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		34,817.	55,236.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	_	41,100.	41,503.
	i .	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
Ø	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	i .	Total fundraising expenses (Part IX, column (D), line 25)	0.		
Ω		Other expenses (Part Court A)/Feb 1a-110, 11f-24e)		48.	64.
	18	Total expenses: Add lines 13-17 (must equal Part IX, column (A), line 25)		41,148.	41,567.
	19	Revenue less expenses. Subtract line 18 from the 12		-6,331.	13,669.
Ses		MAY & C KUIK X	Ве	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		9,209.	23,098.
Net Assets or Fund Balances	21	Total liabilities (Part X(line 26) SM 117		0.	0.
캺	22	Net assets or fund balances Subtract line 21 from line 20		9,209.	23,098.
Pa	art II	Signature Block			
Und	er pena	Ities of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of m	ly knowledge and belief, it is
true	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparei	has any knowledge.	
		* denixorimin		511	0112
Sig	n	Signature of officer		Date	•
Her		KENDA COUNCIL, PRESIDENT			
		Type or print name and title			
		Print/Type preparer's name CHRISTOPHER B. ROBINSON, Preparer's signature CHRISTOPHER B. ROBINSON,			X PTIN
Paid	1	CHRISTOPHER B. ROBINSON, Church & and		5-7-12 If self-employ	red P00193295
Pre	arer	Firm's name CHRISTOPHER B. ROBINSON, PLLC		Firm's EIN	54-1926092
Use	Only	Firm's address 709 W. WASHINGTON STREET			
		SUFFOLK, VA 23434-6102		Phone no. (757)925-3763
May	the IF	3S discuss this return with the preparer shown above? (see instructions)			X Yes No
		3-12 LHA For Paperwork Reduction Act Notice, see the separate instruction	ons.		Form 990 (2011)

Form **990** (2011)

ROTARY CLUB OF SUFFOLK

Form 990 (2011) CHARITABLE FOUNDATION
Part IV Checklist of Required Schedules

1 Is the organization described in section 501(x)(3) or 4947(4)(1) (other than a private foundation)? 1 If 'Yes, 'complete Schedule D, Schedule D, Schedule O, Contributions' 2 Is the organization engage in derect or indirect printing and interest on behalf of or in opposition to candidates for public office? If 'Yes, 'complete Schedule C, Part II 3 X 4 X 5 Section 501(x)(3) organizations. Did the organization engage in debbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II 5 Is the organization association (50(4), 501(x)(6), 501(x)(6)				Yes	No
2 is the organization required to complete Schedule 6, Schedule of Contributions 3	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 X Section 501(e)(3) organizations engage in direct or indirect political forcy "I'ves," complete Schedule D, Part I Section 501(e)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(f) election in effect dump the tax year "I" "I'ves," complete Schedule D, Part II I Section 501(e)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(f) election in effect dump that a year "I" "I'ves," complete Schedule C, Part II I Did the organization assertion 501(f)(e)(5) 501(e)(6)(5) organization that receives membership dues, assessments, or service advice on the distribution or investment of amounts in such funds or accounts" II "I'ves," complete Schedule D, Part II Did the organization review of hold a conservation assessment, including assements to by reserve open pace, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide reviet counseling, debt management, credit repair, or debt negotation services? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide reviet counseling, debt management, credit repair, or debt negotation services? If "Yes," complete Schedule D, Part II II the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part IV, II II II the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part VI II II the organization report an amount for investments of their securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VI II II II X Did the organization report an amount for other labilities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Sche		If "Yes," complete Schedule A	1	X	
Section SOI(R) arganizations. Did the organization engage in lobbying activities, or have a section SOI(R) electron in effect during the tax year? If "Yes," complete Schedule C, Part II	2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2_		<u> X</u>
4 X X section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II I Is the organization a section 501(c)(d), 501(c)(d), 501(c)(d) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-187 If "Yes," complete Schedule C, Part III I Did the organization maintain any donor advised funds or any similar funds or accounts for which 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 II I Did the organization researce or hold a conservation assement, including assembles to pressere open space, the environment, historic land areas, or historic structure? If "Yes," complete Schedule D, Part II I Did the organization area or historic attreasures, or other similar assets? If "Yes," complete Schedule D, Part IV I Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quase-indowments? If "Yes," complete Schedule D, Part IV I II the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part V I Did the organization report an amount for investments - organization report an amount for investments - organization assets reported in Part X, line 167 If "Yes," complete Schedule D, Part V I Did the organization report an amount for investments - organization assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X I Did the organization report an amount for investments in the sax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year include a footnote that addresses the organization obtain separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X X I Did the organization obta	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98:197 If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in cluster the environment, historic land areas, or historic structures If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repar, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repar, or debt negotiation services? If "Yes," complete Schedule D, Part IV If the organization report an amount for line following questions is "Yes," then complete Schedule D, Part VI Did the organization report an amount for investments of the securities in Part X, line 101 If "Yes," complete Schedule D, Part VI Did the organization report an amount for investments - program related in Part X, line 101 If "Yes," complete Schedule D, Part XI Did the organization report an amount for or their lassification in Part X, line 101 If "Yes," complete Schedule D, Part XI Did the organization report an amount for or their lassification in Part X, line 101 If "Yes," complete Schedule D, Pa		public office? If "Yes," complete Schedule C, Part I	3_		<u> </u>
5 Is the organization a section \$01(c)(4), 501(c)(5), or \$01(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 if "Yes," complete Schedule C, Part III 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which 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 III 7 Did the organization necessor or hold a conservation easement, including asseminats to preserve opens pasce, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part IV 8 Did the organization maintain collections of works of art, historical treasures, or forther similar assets? If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in temporary restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VII 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part VII 11 Did the organization report an amount for investments - other securities in Part X, line 107 If "Yes," complete Schedule D, Part VII 12 Did the organization report an amount for investments: other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII 13 Did the organization report an amount for investments: other securities in Part X, line 167 If "Yes," complete Schedule D, Part XII 14 Did the organization report an amount for investments: other securities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part XII 15 Did the organization report an amount for investments: other securities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D,	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
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8 Dit the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV D Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V III If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V III D Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII D Did the organization report an amount for mexistements of the securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII D D Did the organization report an amount for mexistements for grogar related in Part X, line 16? If "Yes," complete Schedule D, Part VIII D D D D D D D D D D D D D D D D D	7				
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10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VI as applicable a Did the organization answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII b 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 11b X 11c X 11c D D did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11c X 11c X 11c X 11c D D did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part VII 11c X	9				
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17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 X 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 19 If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	16				7.5
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1c and 8a? If "Yes," complete Schedule G, Part II 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 18	40		1/_		
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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b	18		40		v
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20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20a X 20b	ı		40		v
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20-2	·			
					43
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ROTARY CLUB OF SUFFOLK

Form 990 (2011) CHARITABLE FOUNDATION

Part IV Checklist of Required Schedules (continued)

			T	
04	Did the executation report more than \$5,000 of exects and other resistance to any government or organization in the		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	<u> </u>	- 22	
~~	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		х
240	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	_20		
24 a	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	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	2.40		
٠	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
200	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was 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).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	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	34	<u> </u>	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<u> </u>	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			,,
	If "Yes," complete Schedule R, Part V, line 2	36	 	<u> X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			.,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37_		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	000 (<u>i</u> 2011)
		rorm	JJU (ZUII)

	ROTARI COUD OF SUFFOLK			
	990 (2011) CHARITABLE FOUNDATION 31-177	<u> 5330</u>	P	age
Ра	rt V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V			<u>,L_</u>
			Yes	No
1a		2		1
b		일		1
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			1
	(gambling) winnings to prize winners?	1c		ļ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			İ
	, , , , , , , , , , , , , , , , , , , ,	<u> </u>		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		-
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		-
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			١
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country.			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	-	-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
Þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			1
_	were not tax deductible?	6b		┢
7	Organizations that may receive deductible contributions under section 170(c).	. _		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		\vdash
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year			
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		├
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		├
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	.		
9	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	8		
a	Did the organization make any taxable distributions under section 4966?	9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:	30		\vdash
а	Initiation fees and capital contributions included on Part VIII, line 12			1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		1
11	Section 501(c)(12) organizations, Enter.	1		ļ
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
-	amounts due or received from them)			
12a	,	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	-	
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	1 !		
14a		14a		X
_	→ vi v v v v v v v v v v v v v v v v v v			

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14b

31-1775330 <u> Page</u> **6** Form 990 (2011) CHARITABLE FOUNDATION 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. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No Yes 10 1a 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 10 b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, or trustees, or key employees to a management company or other person? 3 X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X 7a more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a X 8b **b** Each committee with authority to act on behalf of the governing body? 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No X 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 1<u>1a</u> Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a X 15b **b** Other officers or key employees of the organization 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 X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available 18 for public inspection. Indicate how you made these available. Check all that apply. Own website X Upon request __ Another's website Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

VA

CHRISTOPHER B. ROBINSON, CPA - 757-925-3763

709 W. WASHINGTON STREET, SUFFOLK,

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ROTARY CLUB OF SUFFOLK

Form 990 (2011) ' CHARITABLE FOUNDATION

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

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- 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, if any 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

(A)	(B)			_ (0)			(D)	(E)	(F)
Name and Title	Average		not c		more	than		Reportable	Reportable	Estimated
	hours per week	box	, unle cer ar	ss pe id a d	rson irecto	ıs boti or/trus	h an tee)	compensation	compensation from related	amount of other
	(describe						ŕ	from the	organizations	compensation
	hours for	direc				R		organization	(W-2/1099-MISC)	from the
	related	tee or	ustee			ensat		(W-2/1099-MISC)	,	organization
	organizations	al frus	al		foyee	comp				and related
	in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Гог тег			organizations
(1) KENDA COUNCIL			_	_	_		Ī	_	_	
PRESIDENT	5.00	ļ						0.	0.	0.
(2) WAYNE SCOTT										_
VICE-PRESIDENT	5.00	ļ	<u> </u>					0.	0.	0.
(3) HUGH RITCHIE CROSS										
SECRETARY	5.00	ļ	<u> </u>		<u> </u>			0.	0.	0.
(4) BRUCE BOWLES										•
TREASURER	5.00	├	<u> </u>		ļ	_		0.	0.	0.
(5) SUSAN BLAIR	F 00								0	•
DIRECTOR	5.00			_		_		0.	0.	0.
(6) JACKIE CHERRY	F 00		1					0.	0.	0
DIRECTOR	5.00	-	\vdash	_	-			0.	<u>U.</u>	0.
(7) JENNEFER AMBROSE	5.00							0.	0.	0.
DIRECTOR (8) GINA PITRONE	3.00	-	\vdash						0.	0,•
DIRECTOR	5.00							0.	0.	0.
(9) SCOTT NASH	1 3100						_			
DIRECTOR	5.00							٥.	0.	0.
(10) BLAKE BAKER							_			
DIRECTOR	5.00							0.	0.	0.
		_								
		-								
										<u> </u>
		-	-	_		-				
									_	

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Part VII Section A. Officers, Director		mple	yee			High	est			т		<i>a</i> =>	
(A)	(B))) Pos	C) Ition	,		(D)	(E)		-	(F)	. al
Name and title	Average hours per		not cl	heck	more	than -		Reportable compensation	Reportable compensatio	- 1		imate ount (
	week					ıs bot or/trus		from	from related	1		other	01
	(describe	ctor						the	organization			ensa	tion
	hours for	r dire	[[ᇐ		organization	(W-2/1099-MIS	3C)	fro	om the	€
	related	stee o	rustee			beusa		(W-2/1099-MISC)			_	anizatı	
	organizations in Schedule	altru	onal		loyee	8 8						relate	
	O)	Individual trustee or director	Institutional trustee	Officer	ey em	Highest compensated employee	Эгте		•		orga	nızatı	ons
		_			<u> ×</u> .								
		-											
					ļ 						_	-	
		ļ			_								
													•
									·			-	_
											 -		
1b Sub-total		<u></u>						0.		0.			0.
c Total from continuation sheets to P	art VII Section A							0.		0.			0.
d Total (add lines 1b and 1c)	art vii, Section A							0.		0.			0.
Total number of individuals (including	but not limited to th	nose	liste	d al	bove	e) wh	10 r		.000 of reportab		•		
compensation from the organization												Yes	No
3 Did the organization list any former o			e, ke	y er	nplo	уөө,	or	highest compensated e	mployee on	ſ		100	
line 1a? If "Yes," complete Schedule										}	3	-	<u> </u>
4 For any individual listed on line 1a, is	·		-					•	the organization	1	4		х
and related organizations greater thanDid any person listed on line 1a received									dual for services	}	4		
rendered to the organization? If "Yes,							Gial	ed organization of indivi	dual for services		5		Х
Section B. Independent Contractors	oon,prote contest.	<u> </u>	<u></u>		<u> </u>								
1 Complete this table for your five higher										pensa	ation fr	om	
the organization Report compensation		ear e	enaii	ng v	vitn	or w	itnir		/ear		(C	`	
(A Name and bus		NO	ONE	3			į	(B) Description of s	ervices	С	omper	i isatio	n
		_											
 													
							-						
													
							_						
				.1.0				1.4			<u>-</u>		
2 Total number of independent contrac \$100,000 of compensation from the c		ot li	mited	d to		se li 0	sted	above) who received m	nore tnan				
											Form S	a <u>an //</u>	2011

Form **990** (2011)

	- VII	Statement of never	lue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
Gra Jou	b	Membership dues	1b					
P, t	С	•	1c					
اةِ ق	d	9	1d					
Sir	е	• ,						
ig je	f	, , , ,		EE 03E				
इ		similar amounts not included abo		55,035.				
g S	g		1a-1f \$		55,035.			
<u> </u>		Total, Add lines 1a-1f		Business Code	33,033.			
	2 a			Business Code				
Program Service Revenue	, u	· · · · · · · · · · · · · · · · · · ·					 	
S E	c							
e a a	d							
Par	e							
مة	f	All other program service reve	enue					
	9	Total. Add lines 2a-2f		•				
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		▶	101.	101.		
	4	Income from investment of tax	x-exempt bond p	oroceeds 🕨				
	5	Royalties .	<u></u>	<u>▶</u>				
			(i) Real	(II) Personal				
	6 a							
	b	•						
	C	, ,	L	L				
	_ d	• • •	<u> </u>	P				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	-					
	b	Less. cost or other basis and sales expenses						
	_		<u> </u>	 				
	c d		L,					
	8 a		a events (not					
ng	4 u	including \$	of					
eve		contributions reported on line		ļ				
Œ		Part IV, line 18	а					
Other Revenu	b		b					
٥			draising events					
	9 a	Gross income from gaming ac	tivities See					
		Part IV, line 19	. a]		
	b	Less: direct expenses	b					
	c	Net income or (loss) from gam	ning activities					
	10 a	Gross sales of inventory, less	returns]			-	
		and allowances	. а					
		Less cost of goods sold	b					
ł	c	Net income or (loss) from sale		▶				
}		Miscellaneous Revenu	<u>e</u>	Business Code	100		100	
		PRINT SALES	<u> </u>	900099	100.		100.	
	b			 				
	C	All adher reverse		 				
ľ	d	All other revenue Total, Add lines 11a-11d			100.		·	<u> </u>
	12	Total revenue See instructions.			55,236.	101.	100.	0

Form 990 (2011)

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a respon	ise to any question in thi	s Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	37,250.	37,250.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16	4,253.	4,253.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)	·- <u>·</u>			
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
	Management		-		
	Legal				
	Accounting				
	Lobbying				
e f	Professional fundraising services. See Part IV, line 17 Investment management fees				
-	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses		"		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest .				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	BANK FEES	64.		64.	
b	_				
С					
ď					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	41,567.	41,503.	64.	0.
26	Joint costs. Complete this line only if the organization	,			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here rif following SOP 98-2 (ASC 958-720)				

Part X | Balance Sheet (A) Beginning of year End of year Cash · non-interest-bearing 1 9,209 2 23,098. Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 Notes and loans receivable, net 7 7 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a **b** Less accumulated depreciation 10b 10c investments - publicly traded securities 11 11 Investments - other securities See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 9,209. 23,098 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 17 Accounts payable and accrued expenses 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Liabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here
and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 27 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here > X and complete lines 30 through 34. Capital stock or trust principal, or current funds 0. 0. 31 31 Paid-in or capital surplus, or land, building, or equipment fund 23,098. 209. 32 Retained earnings, endowment, accumulated income, or other funds 32 9,209 33 23,098. 33 Total net assets or fund balances 23.098. Total liabilities and net assets/fund balances

Form **990** (2011)

	ROTARY CLUB OF SUFFOLK				
Form	990 (2011) CHARITABLE FOUNDATION	31-177	<u>5330</u>	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u> 36.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	1,5	<u>67.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	1	3,6	<u>69.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		9,2	09.
5	Other changes in net assets or fund balances (explain in Schedule O)	5		2	20.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	2	3,0	<u>98.</u>
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
b	Were the organization's financial statements audited by an independent accountant?	•	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both			İ	
	Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Audit		,	
	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 requi	ired audit			

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE A.

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

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

2011

Open to Public Inspection

Name of the organization

ROTARY CLUB OF SUFFOLK CHARITABLE FOUNDATION

Employer identification number

31-1775330

Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st comple	te this par	t) See inst	tructions.		
The organ	zation is not	a private foundation	because it is (For lines 1	1 through	11, check	only one b	ox)		_	
1 🔲	A church, co	nvention of churche	s, or association of churc	ches desc	ribed in s e	ction 170	(b)(1)(A)(i)			
2 🗀	A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E)						
з 🔲	A hospital or	a cooperative hospi	tal service organization (described	n section	170(b)(1)	(A)(iii).			
4 🗀	A medical res	search organization	operated in conjunction	with a hos	pital desc	nbed in se	ction 170	(b)(1)(A)(ii	i). Enter t	he hospital's name,
	city, and stat	te.								
5 🔲	An organizat	on operated for the	benefit of a college or ur	niversity ov	vned or or	perated by	a governr	mental uni	t describe	ed in
	section 170	(b)(1)(A)(iv). (Comple	ete Part II)							
6 🔲	A federal, sta	ate, or local governm	ent or governmental unit	t described	ın sectio	n 170(b)(1	I)(A)(v).			
7 X	An organizat	on that normally rec	eives a substantial part (of its supp	ort from a	governme	ntal unit o	r from the	general p	public described in
	section 170	(b)(1)(A)(vi). (Comple	te Part II.)							
8 🗀	A community	trust described in s	ection 170(b)(1)(A)(vi). ((Complete	Part II.)					
9 🗀	An organizat	ion that normally rec	eives: (1) more than 33 1	1/3% of its	support f	rom contri	butions, m	nembershi	p fees, ar	nd gross receipts from
	activities rela	ited to its exempt fui	nctions - subject to certa	ın excepti	ons, and (2) no more	than 33 1	/3% of its	support	from gross investment
	income and i	unrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	ecquired b	y the orga	ınızatıon a	after June 30, 1975.
	See section	509(a)(2). (Complete	Part III.)							
10	An organizat	ion organized and of	perated exclusively to tes	st for publ	c safety S	See sectio	n 509(a)(4	i).		
11	An organizat	ion organized and op	perated exclusively for th	ne benefit (of, to perfo	orm the fur	nctions of,	or to carr	y out the	purposes of one or
	more publicly	y supported organiza	ations described in section	on 509(a)(⁻	l) or section	on 509(a)(2	2) See se c	tion 509(a)(3). Che	eck the box that
		e type of supporti <u>ng</u>	organization and comple	ete lines 1	1e through	11h.				1
	а 🔛 Туре					tionally int	-		d L	Type III - Other
e 📖	By checking	this box, I certify tha	it the organization is not	controlled	directly o	r indirectly	by one or	more disc	qualified (persons other than
		_	han one or more publicly		_				9(a)(1) or	section 509(a)(2)
f			ten determination from t	the IRS tha	t it is a Ty	pe I, Type	II, or Type)		_
	supporting o	rganization, check th	nis box			-				
9	Since Augus	t 17, 2006, has the c	organization accepted an	ny gift or co	ontribution	from any	of the follo	owing pers	sons?	
	(i) A perso	n who directly or ind	rectly controls, either al	one or tog	ether with	persons d	lescribed i	n (II) and (ııı) below,	
	the gove	erning body of the si	upported organization?					-		11g(i)
	(ii) A family	member of a persor	n described in (i) above?							11g(ii)
	(iii) A 35% (controlled entity of a	person described in (i) o	or (ii) above	?					11g(iii)
h	Provide the f	ollowing information	about the supported org	ganızatıon((s).					
		<u> </u>	(III) Tune of	T		I			46-	
(i) Name	of supported	(ii) EIN	(iii) Type of organization	r ,	-	(v) Did you	•	(vi) Is organizatio	tne on in col.	(vii) Amount of
orga	inization		(described on lines 1-9	governing (sted in your	(i) of your	ion in col.	(i) organız U.S	ed in the	support
			above or IRC section							
			(see instructions))	Yes	No	Yes	No	Yes	No	
						ļ			 	
						<u> </u>		<u> </u>	 	
		1		1	I		l	1	1 i	

Schedule A (Form 990 or 990-EZ) 2011 CHARITABLE FOUNDATION

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	ınclude any "unusual grants.")	82,045.	68,922.	18,151.	34,952.	<u>55,237.</u>	259,307.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	82,045.	68,922.	18,151.	34,952.	55,237.	259,307.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)	•					
6	Public support. Subtract line 5 from line 4						259,307.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	82,045.	68,922.	18,151.	34,952.	55,237.	259,307.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carned on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10	·					259,307.
	Gross receipts from related activities,	etc. (see instruction	ons)			12	<u> </u>
	First five years. If the Form 990 is for	•	•	d, fourth, or fifth ta	ax year as a section		
	organization, check this box and stor	here		·			. ▶□.
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2011 (i	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	100.00 %
15	Public support percentage from 2010	Schedule A, Part	II, line 14			15	100.00 %
16a	33 1/3% support test - 2011. If the c	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or m	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization				▶ X
b	33 1/3% support test - 2010. If the c	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check t	nis box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶∟
17a	10% -facts-and-circumstances tes	t - 2011. If the org	anization did not d	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	ns box and stop h	ere. Explain in Pai	t IV how the orgai	nization
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a	publicly supported	dorganization		ightharpoons
b	10% -facts-and-circumstances tes	t - 2010. If the org	anızation dıd not d	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th						
	organization meets the "facts-and-circ						. ▶□
18	Private foundation. If the organization						is 🕨 🗀
						dule A (Form 990	

Schedule A (Form 990 or 990-EZ) 2011 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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support	now, please com	ipiete Part II)					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2	2011	(f) Total
1 Gifts, grants, contributions, and	(2) = 2 = 2	10,1			1 1		
membership fees received (Do not					·		
include any "unusual grants.")							
2 Gross receipts from admissions,		 	··· - ·				
merchandise sold or services per-							
formed, or facilities furnished in							
any activity that is related to the		İ					
organization's tax-exempt purpose				ļ	 		
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					1		
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		<u> </u>	<u> </u>	 	+		
7a Amounts included on lines 1, 2, and							
3 received from disqualified persons				 			
b Amounts included on lines 2 and 3 received from other than disqualified persons that							
exceed the greater of \$5,000 or 1% of the				İ			
amount on line 13 for the year							
c Add lines 7a and 7b							
8 Public support (Subtract line 7c from line 6)							
Section B. Total Support							
Calendar year (or fiscal year beginning in) 🖊	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2	2011	(f) Total
9 Amounts from line 6							
10a Gross income from interest,							
dividends, payments received on					1		
securities loans, rents, royalties and income from similar sources							
b Unrelated business taxable income					1		
(less section 511 taxes) from businesses							
acquired after June 30, 1975							
· · · · · · · · · · · · · · · · · · ·				<u> </u>	<u> </u>		
c Add lines 10a and 10b 11 Net income from unrelated business	· -			 	 		
activities not included in line 10b,							
whether or not the business is							
regularly carried on				ļ			
12 Other income. Do not include gain							
or loss from the sale of capital assets (Explain in Part IV)					<u> </u>		
13 Total support (Add lines 9, 10c, 11, and 12)							
14 First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	ation,
check this box and stop here							ightharpoons
Section C. Computation of Publi	c Support Pe	rcentage					
15 Public support percentage for 2011 (lii	ne 8, column (f) d	livided by line 13, o	olumn (f))		15		%
16 Public support percentage from 2010	Schedule A, Part	III, line 15		•	16		%
Section D. Computation of Inves				<u> </u>			
17 Investment income percentage for 20	11 (line 10c, colur	mn (f) divided by lir	e 13, column (f))		17		%
18 Investment income percentage from 2			• • • • • • • • • • • • • • • • • • • •		18		%
19a 33 1/3% support tests - 2011. If the			on line 14, and line	e 15 is more than		and line 1	
more than 33 1/3%, check this box an	_					•	. ▶□
b 33 1/3% support tests - 2010. If the		_				33 1/3%, a	and
line 18 is not more than 33 1/3%, chec	k this box and s	top here. The orga	ınızatıon qualifies	as a publicly supp	orted org	anızatıon	▶□
20 Private foundation. If the organization	ı did not check a	box on line 14, 19	a, or 19b, check tl	his box and see in	structions	3	
							

SCHEDULE'D

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

2011
Open to Public Inspection

OMB No 1545-0047

ROTARY CLUB OF SUFFOLK

Employer identification number 31-1775330

	CHARITABLE FOUNDAT	HARITABLE FOUNDATION 31-1775330 Waintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the			
Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts. Complete if the		
	organization answered "Yes" to Form 990, Part IV, lin				
		(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 for	unds		
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No		
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be used	d only		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose conf	ferring		
	impermissible private benefit?		Yes No		
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, Part I	V, line 7.		
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).			
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an historic	ally important land area		
	Protection of natural habitat	Preservation of a certified	historic structure		
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	conservation easement on the last		
	day of the tax year.				
			Held at the End of the Tax Year		
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c		
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure			
	listed in the National Register		2d		
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the org	anization during the tax		
	year >				
4	Number of states where property subject to conservation ea	sement is located >			
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of			
	violations, and enforcement of the conservation easements i	t holds?	L Yes L No		
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements during	the year		
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the	year ► \$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4))(B)(i)		
	and section 170(h)(4)(B)(ii)?		L_ Yes L_ No		
9	In Part XIV, describe how the organization reports conservat				
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes the o	organization's accounting for		
<u> </u>	conservation easements	(A.t. Historical Turnsuman on Other	- Circilar Assats		
Par	 -		r Similar Assets.		
	Complete if the organization answered "Yes" to Form				
1a	If the organization elected, as permitted under SFAS 116 (AS				
	historical treasures, or other similar assets held for public ext		of public service, provide, in Part XIV,		
	the text of the footnote to its financial statements that descr				
D	If the organization elected, as permitted under SFAS 116 (AS				
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public s	service, provide the following amounts		
	relating to these items:		•		
	(i) Revenues included in Form 990, Part VIII, line 1		S		
^	(ii) Assets included in Form 990, Part X		> \$		
2	If the organization received or held works of art, historical tre	· · · · · ·	η, ρισνίαθ		
_	the following amounts required to be reported under SFAS 1	to (ASC 336) relating to these trems	~ ¢		
	Revenues included in Form 990, Part VIII, line 1	•			
D	Assets included in Form 990, Part X		• • <u> </u>		

	ROTARV	CLUB OF SU	FFOLK '	•				
Sche		BLE FOUNDA			31-17	7533	0 Pa	age 1
	rt III Organizations Maintaining C			reasures, or Oth				
3	Using the organization's acquisition, access							
-	(check all that apply).	,	.,,		.			
а	Public exhibition	c	Loan or exc	change programs				
b	Scholarly research	e	Other					
c	Preservation for future generations	•						
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.							
5	During the year, did the organization solicit of							
	to be sold to raise funds rather than to be m					Yes		No
Pa	rt IV Escrow and Custodial Arran	gements. Compl	ete if the organizati	on answered "Yes" to	o Form 990, Part IV,	line 9, or		
	reported an amount on Form 990, Pa	ut X, line 21.	_					
1a	is the organization an agent, trustee, custod	lian or other intermed	diary for contributio	ns or other assets no	ot included			
	on Form 990, Part X?					Yes		No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing table:					
						Amoun	t	
С	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance							
2a	Did the organization include an amount on F	form 990, Part X, line	21?			Yes		No
<u>b</u>	If "Yes," explain the arrangement in Part XIV							
Pa	rt V Endowment Funds. Complete	if the organization ar	swered "Yes" to Fo	orm 990, Part IV, line	10.	т		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four	years	<u>back</u>
1a	Beginning of year balance							
b	Contributions			ļ	<u> </u>	↓		
С	Net investment earnings, gains, and losses			<u> </u>		ļ		
d	Grants or scholarships .					 		
е	Other expenditures for facilities							
	and programs				<u> </u>	ļ		
f	Administrative expenses					 		
g	End of year balance					<u> </u>		
2	Provide the estimated percentage of the cur	rent year end baland	•	a)) held as				
	Board designated or quasi-endowment		_%					
	Permanent endowment	%						
С	Temporarily restricted endowment	%						
	The percentages in lines 2a, 2b, and 2c show	•						
За	Are there endowment funds not in the posse	ession of the organiz	ation that are held a	and administered for	tne organization	1	,,	
	by.					0-0	Yes	<u>No</u>
	(i) unrelated organizations	•				3a(i)		
	(ii) related organizations					3a(ii)		

_4	Describe in Part XIV the intended uses of t	the organization's endowment	funds		
Pa	rt VI Land, Buildings, and Equip	ment. See Form 990, Part X	, line 10		
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land				
b	Buildings				
С	Leasehold improvements				
d	Equipment .				
е	Other				
Tota	l. Add lines 1a through 1e (Column (d) mus	t equal Form 990, Part X, colur	nn (B), line 10(c).))	0.

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

Schedule D (Form 990) 2011

3b

ROTARY CLUB OF SUFFOLK 31-1775330 Page 3 Schedule D (Form 990) 2011 CHARITABLE FOUNDATION Part VII Investments - Other Securities. See Form 990, Part X, line 12. (a) Description of security or category (c) Method of valuation. (b) Book value Cost or end-of-year market value (including name of security) (1) Financial derivatives (2) Closely-held equity interests Other (A)(B) (C) (D) (E) (F) (G) (H) (I) Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related. See Form 990, Part X, line 13 (c) Method of valuation: (a) Description of investment type (b) Book value Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) Other Assets. See Form 990, Part X, line 15 (b) Book value (a) Description (1) (2) (3) (4) (5) (6) (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 (a) Description of liability (b) Book value (1) Federal income taxes (2)(3)(4) (5) (6) (7)(8) (9)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under 2. FIN 48 (ASC 740)

(10)

ROTARY CLUB OF SUFFOLK 31-1775330 Page 4 Schedule D (Form 990) 2011 CHARITABLE FOUNDATION Part XI' Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements 55,236. Total revenue (Form 990, Part VIII, column (A), line 12) <u>41,567</u>. 2 Total expenses (Form 990, Part IX, column (A), line 25) 2 13,669. 3 Excess or (deficit) for the year Subtract line 2 from line 1 3 4 4 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 5 6 Investment expenses 6 220. 7 Prior period adjustments 7 8 Other (Describe in Part XIV.) 8 220 9 Total adjustments (net). Add lines 4 through 8 9 13,889 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 Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains on investments 2a b Donated services and use of facilities 2b c Recoveries of prior year grants 2c 2d d Other (Describe in Part XIV.) e Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1. a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a **b** Prior year adjustments 2b c Other losses 2c Other (Describe in Part XIV) 2d e Add lines 2a through 2d 2e Subtract line 2e from line 1 3 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV.) 4b c Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2c; Part V, line 4; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
ions

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ROTARY CLUB OF SUFFOLK

CHARITABLE FOUNDATION

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed Schedule I (Form 990) (2011)

Page 2

31-1775330

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Part IV Schedule I (Form 990) (2011) 132102 01-27-12

SCHEDULE O' (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service 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

Name of the organization

ROTARY CLUB OF SUFFOLK CHARITABLE FOUNDATION

Employer identification number 31-1775330