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Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**  
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

**2011****Open to Public  
Inspection****A For the 2011 calendar year, or tax year beginning 07/01/11, and ending 06/30/12**

<input type="checkbox"/> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C Name of organization</b> <div align="center"><b>ROTARY CLUB OF CONCORD CHARITABLE FOUNDATION</b></div> Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>P.O. BOX 2246</b> City or town, state or country, and ZIP + 4 <b>CONCORD NH 03302-2246</b>	<b>D Employer identification number</b> <div align="center"><b>02-0491600</b></div> <b>E Telephone number</b> <div align="center"><b>603-224-6470</b></div> <b>G Gross receipts \$</b> <div align="right"><b>690,137</b></div>
<b>F Name and address of principal officer</b>   		<b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)  <b>H(c) Group exemption number</b> ▶
<b>I Tax-exempt status</b> <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 <b>J Website</b> ▶ <b>N/A</b>		
<b>K Form of organization</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L Year of formation</b> <b>M State of legal domicile</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities <div align="center"><b>TO PROVIDE SCHOLARSHIPS TO QUALIFIED STUDENTS AND FUNDS FOR VARIOUS CHARITABLE AND CIVIC/COMMUNITY ORGANIZATIONS</b></div>																									
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets <b>3</b> Number of voting members of the governing body (Part VI, line 1a) <b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) <b>5</b> Total number of individuals employed in calendar year 2011 (Part V, line 2a) <b>6</b> Total number of volunteers (estimate if necessary) <b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 <b>7b</b> Net unrelated business taxable income from Form 990-T, line 34	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td><b>3</b></td><td align="right"><b>12</b></td></tr> <tr><td><b>4</b></td><td align="right"><b>12</b></td></tr> <tr><td><b>5</b></td><td align="right"><b>0</b></td></tr> <tr><td><b>6</b></td><td align="right"><b>0</b></td></tr> <tr><td><b>7a</b></td><td align="right"><b>0</b></td></tr> <tr><td><b>7b</b></td><td align="right"><b>0</b></td></tr> </table>	<b>3</b>	<b>12</b>	<b>4</b>	<b>12</b>	<b>5</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>7a</b>	<b>0</b>	<b>7b</b>	<b>0</b>												
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<b>Revenue</b>	<b>8</b> Contributions and grants (Part VII, line 1h) <b>9</b> Program service revenue (Part VIII, line 2g) <b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) <b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10, and 11e) <b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th align="center">Prior Year</th> <th align="center">Current Year</th> </tr> </thead> <tbody> <tr><td><b>8</b></td><td align="right"><b>0</b></td><td align="right"><b>50</b></td></tr> <tr><td><b>9</b></td><td align="right"><b>0</b></td><td align="right"><b>0</b></td></tr> <tr><td><b>10</b></td><td align="right"><b>5,504</b></td><td align="right"><b>-4,002</b></td></tr> <tr><td><b>11</b></td><td align="right"><b>42,246</b></td><td align="right"><b>59,389</b></td></tr> <tr><td><b>12</b></td><td align="right"><b>47,750</b></td><td align="right"><b>55,437</b></td></tr> </tbody> </table>		Prior Year	Current Year	<b>8</b>	<b>0</b>	<b>50</b>	<b>9</b>	<b>0</b>	<b>0</b>	<b>10</b>	<b>5,504</b>	<b>-4,002</b>	<b>11</b>	<b>42,246</b>	<b>59,389</b>	<b>12</b>	<b>47,750</b>	<b>55,437</b>						
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<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) <b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) <b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) <b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) <b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>0</b> <b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) <b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) <b>19</b> Revenue less expenses Subtract line 18 from line 12	<table border="1" style="width:100%; border-collapse: collapse;"> <tbody> <tr><td><b>13</b></td><td align="right"><b>72,740</b></td><td align="right"><b>102,333</b></td></tr> <tr><td><b>14</b></td><td align="right"><b>0</b></td><td align="right"><b>0</b></td></tr> <tr><td><b>15</b></td><td align="right"><b>0</b></td><td align="right"><b>0</b></td></tr> <tr><td><b>16a</b></td><td align="right"><b>0</b></td><td align="right"><b>0</b></td></tr> <tr><td><b>b</b></td><td align="right"><b>0</b></td><td align="right"><b>0</b></td></tr> <tr><td><b>17</b></td><td align="right"><b>19,616</b></td><td align="right"><b>16,118</b></td></tr> <tr><td><b>18</b></td><td align="right"><b>92,356</b></td><td align="right"><b>118,451</b></td></tr> <tr><td><b>19</b></td><td align="right"><b>-44,606</b></td><td align="right"><b>-63,014</b></td></tr> </tbody> </table>	<b>13</b>	<b>72,740</b>	<b>102,333</b>	<b>14</b>	<b>0</b>	<b>0</b>	<b>15</b>	<b>0</b>	<b>0</b>	<b>16a</b>	<b>0</b>	<b>0</b>	<b>b</b>	<b>0</b>	<b>0</b>	<b>17</b>	<b>19,616</b>	<b>16,118</b>	<b>18</b>	<b>92,356</b>	<b>118,451</b>	<b>19</b>	<b>-44,606</b>	<b>-63,014</b>
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<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16) <b>21</b> Total liabilities (Part X, line 26) <b>22</b> Net assets or fund balances Subtract line 21 from line 20	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th align="center">Beginning of Current Year</th> <th align="center">End of Year</th> </tr> </thead> <tbody> <tr><td><b>20</b></td><td align="right"><b>1,470,969</b></td><td align="right"><b>1,463,849</b></td></tr> <tr><td><b>21</b></td><td align="right"><b>16,125</b></td><td align="right"><b>10,500</b></td></tr> <tr><td><b>22</b></td><td align="right"><b>1,454,844</b></td><td align="right"><b>1,453,349</b></td></tr> </tbody> </table>		Beginning of Current Year	End of Year	<b>20</b>	<b>1,470,969</b>	<b>1,463,849</b>	<b>21</b>	<b>16,125</b>	<b>10,500</b>	<b>22</b>	<b>1,454,844</b>	<b>1,453,349</b>												
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**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	<b>Signature of officer</b>  <b>RUTH A CONEYS</b> Type or print name and title	<b>Date</b> <div align="center"><b>5/14/13</b></div>
	<b>TREASURER</b>	
<b>Preparer</b>	<b>Pnnl/Type preparer's name</b> <b>Herbert C. Burnham</b> <b>Firm's name</b> ▶ <b>Burnham &amp; Malmberg</b> <b>155 Manchester Street</b> <b>Concord, NH 03301</b> <b>Firm's address</b> ▶	<b>Preparer's signature</b>  <b>Date</b> <b>05/13/13</b> <b>Check <input type="checkbox"/> if self-employed</b> <b>Firm's EIN</b> ▶ <b>02-0357097</b> <b>Phone no</b> <b>603-225-7600</b>

May the IRS discuss this return with the preparer shown above? (see instructions)

☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2011)

2013 JUN 13 10:13 AM

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response to any question in this Part III ☐**1** Briefly describe the organization's mission**TO PROVIDE SCHOLARSHIPS TO QUALIFIED STUDENTS AND FUNDS FOR  
VARIOUS CHARITABLE AND CIVIC/COMMUNITY ORGANIZATIONS****2** Did the organization undertake any significant program services during the year which were not listed on theprior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any programservices? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported**4a** (Code ) (Expenses \$ **33,000** including grants of \$ **33,000** ) (Revenue \$ )**SCHOLARSHIP AWARDS ARE BASED ON RECOMMENDATIONS FROM AREA  
SCHOOL COUNSELORS, ETC. THE SCHOLARSHIP COMMITTEE MAKES  
THE FINAL REVIEW AND DECISION. ALL UNDER \$5,000.****4b** (Code ) (Expenses \$ **69,333** including grants of \$ **69,333** ) (Revenue \$ )**AMOUNTS PAID TO LOCAL CHARITIES COVERING CIVIC & COMMUNITY  
EDUCATION, HEALTH, YOUTH, ELDERLY, YOUTH ATHLETICS, YOUTH  
CAMPERSHIPS - ALL BASED ON APPLICATIONS FROM VARIOUS OR-  
GANIZATIONS -ACTED UPON BY THE CHARITIES COMMITTEE AND THE  
BOARD OF DIRECTORS. ALL ARE UNDER \$5,000 EXCEPT FRIENDLY  
KITCHEN AND C-MC SPCA.****4c** (Code ) (Expenses \$ **2,285** including grants of \$ ) (Revenue \$ )**THIS REPRESENTS THE COST OF ADVERTISING OF THE AVAILABLE NOAH AND EVELYN  
ARELL ROTARY SCHOLARSHIPS. THE EXPENSE IS CHARGED AGAINST THE INCOME OF  
THE SCHOLARSHIP FUND.****4d** Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses **104,618**

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<b>X</b>	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		<b>X</b>
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		<b>X</b>
<b>4</b> <b>Section 501(c)(3) organizations.</b> 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		<b>X</b>
<b>5</b> 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 98-19? If "Yes," complete Schedule C, Part III		<b>X</b>
<b>6</b> 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 I		<b>X</b>
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		<b>X</b>
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		<b>X</b>
<b>9</b> 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		<b>X</b>
<b>10</b> 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		<b>X</b>
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI		<b>X</b>
<b>b</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		<b>X</b>
<b>c</b> Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		<b>X</b>
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		<b>X</b>
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		<b>X</b>
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		<b>X</b>
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII		<b>X</b>
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional		<b>X</b>
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<b>X</b>
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?		<b>X</b>
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		<b>X</b>
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		<b>X</b>
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		<b>X</b>
<b>17</b> 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 (see instructions)		<b>X</b>
<b>18</b> 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	<b>X</b>	
<b>19</b> 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	<b>X</b>	
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		<b>X</b>
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>21</b> 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	<b>X</b>	
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	<b>X</b>	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		<b>X</b>
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		<b>X</b>
<b>24b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>24c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>24d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		<b>X</b>
<b>25b</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		<b>X</b>
<b>26</b> 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		<b>X</b>
<b>27</b> 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		<b>X</b>
<b>28</b> 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)		
<b>28a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		<b>X</b>
<b>28b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		<b>X</b>
<b>28c</b> 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		<b>X</b>
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		<b>X</b>
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		<b>X</b>
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		<b>X</b>
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		<b>X</b>
<b>33</b> 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		<b>X</b>
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	<b>X</b>	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?		<b>X</b>
<b>35b</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		<b>X</b>
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		<b>X</b>
<b>37</b> 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		<b>X</b>
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	<b>X</b>	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response to any question in this Part V ☐

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	<b>1a</b>	0
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	<b>1b</b>	0
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	<b>2a</b>	0
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	<b>2b</b>	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	<b>3b</b>	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4a</b>	X
<b>b</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.	<b>5a</b>	X
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5b</b>	X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5c</b>	
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>6a</b>	X
<b>6a</b>	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?	<b>6b</b>	
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>7a</b>	
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>		<b>7b</b>	
<b>a</b>	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?	<b>7c</b>	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7d</b>	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7e</b>	
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year.	<b>7f</b>	
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7g</b>	
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7h</b>	
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>8</b>	
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>9a</b>	
<b>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b>	Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<b>9b</b>	
<b>9 Sponsoring organizations maintaining donor advised funds.</b>		<b>10a</b>	
<b>a</b>	Did the organization make any taxable distributions under section 4966?	<b>10b</b>	
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?	<b>11a</b>	
<b>10 Section 501(c)(7) organizations.</b>	Enter	<b>11b</b>	
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12.	<b>12a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	<b>12b</b>	
<b>11 Section 501(c)(12) organizations.</b>	Enter	<b>13a</b>	
<b>a</b>	Gross income from members or shareholders.	<b>13b</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>13c</b>	
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b>	Is the organization filing Form 990 in lieu of Form 1041?	<b>14a</b>	X
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	<b>14b</b>	
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
<b>b</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.		
<b>c</b>	Enter the amount of reserves on hand.		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

**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**

		Yes	No
<b>1a</b>	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.		
<b>1b</b>	Enter the number of voting members included in line 1a, above, who are independent.		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		<b>X</b>
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		<b>X</b>
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<b>X</b>
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		<b>X</b>
<b>6</b>	Did the organization have members or stockholders?		<b>X</b>
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		<b>X</b>
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		<b>X</b>
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	<b>X</b>	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	<b>X</b>	
<b>9</b>	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.	<b>X</b>	

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		<b>X</b>
<b>b</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?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		<b>X</b>
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13.	<b>X</b>	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>X</b>	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	<b>X</b>	
<b>13</b>	Did the organization have a written whistleblower policy?		<b>X</b>
<b>14</b>	Did the organization have a written document retention and destruction policy?		<b>X</b>
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official.		<b>X</b>
<b>b</b>	Other officers or key employees of the organization.		<b>X</b>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		<b>X</b>
<b>b</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?		

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed: **NH**

**18** 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 for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website ☐ Another's website ☒ Upon request

**19** 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.

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **RUTH CONEYS** **128-B HALL STREET** **NH 03301** **603-224-6470**  
**CONCORD**

**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.

☒ Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOYCE BRESCIANI DIRECTOR	1.00	X						0	0	0
(2) ANNETTE FLETCHER DIRECTOR	1.00	X						0	0	0
(3) TOR BJORK DIRECTOR	1.00	X						0	0	0
(4) JENNIFER STACY DIRECTOR	1.00	X						0	0	0
(5) CHARLES G. WILLING, JR. DIRECTOR	1.00	X						0	0	0
(6) VINCENT M. TRENTO DIRECTOR	1.00	X						0	0	0
(7) DAVID CURDIE DIRECTOR	1.00	X						0	0	0
(8) RUTH A. CONEYS TREASURER	8.00			X				0	0	0
(9) PHILIP B. WALLINGFORD SECRETARY	5.00			X				0	0	0
(10) DOUGLAS E. BOHLMAN PRES. ELECT	1.00			X				0	0	0
(11) PHILIP J. CISTULLI, JR. PAST PRESIDENT	1.00			X				0	0	0
(12) DONALD M. BENNERT PRESIDENT	10.00			X				0	0	0
(13)										
(14)										



**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)										
(16)										
(17)										
(18)										
(19)										
20)										
(21)										
(22)										
(23)										
(24)										
(25)										
<b>1b Sub-total</b>										
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>										

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		<b>X</b>
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		<b>X</b>
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		<b>X</b>

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>				
	<b>b</b> Membership dues	<b>1b</b>				
	<b>c</b> Fundraising events	<b>1c</b>				
	<b>d</b> Related organizations	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	50			
	<b>g</b> Noncash contributions included in lines 1a-1f	\$				
<b>h Total. Add lines 1a-1f</b>			<b>50</b>			
<b>Program Service Revenue</b>	<b>2a</b>	Busn. Code				
	<b>b</b>					
	<b>c</b>					
	<b>d</b>					
	<b>e</b>					
	<b>f</b> All other program service revenue					
	<b>g Total. Add lines 2a-2f</b>					
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		34,306	34,306		
	<b>4</b> Income from investment of tax-exempt bond proceeds					
	<b>5</b> Royalties					
	<b>6a</b> Gross rents	(i) Real (ii) Personal				
	<b>b</b> Less rental exps					
	<b>c</b> Rental inc or (loss)					
	<b>d</b> Net rental income or (loss)					
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities (ii) Other	569,663			
	<b>b</b> Less cost or other basis & sales exps		607,971			
	<b>c</b> Gain or (loss)		-38,308			
	<b>d</b> Net gain or (loss)		-38,308	-38,308		
	<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	<b>a</b>	42,185			
	<b>b</b> Less direct expenses	<b>b</b>	12,639			
	<b>c</b> Net income or (loss) from fundraising events		29,546			29,546
	<b>9a</b> Gross income from gaming activities See Part IV, line 19	<b>a</b>	40,150			
	<b>b</b> Less direct expenses	<b>b</b>	14,090			
	<b>c</b> Net income or (loss) from gaming activities		26,060			26,060
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>a</b>					
<b>b</b> Less cost of goods sold	<b>b</b>					
<b>c</b> Net income or (loss) from sales of inventory						
<b>Miscellaneous Revenue</b>						
<b>11a</b> FRIENDLY KITCHEN RAFFLE	Busn. Code	1,953	1,953			
<b>b</b> ROTARY DIST SIMPLIFIED GRANTS		1,676			1,676	
<b>c</b> MISCELLANEOUS		154	154			
<b>d</b> All other revenue						
<b>e Total. Add lines 11a-11d</b>		3,783				
<b>12 Total revenue. See instructions</b>		55,437	-1,895	0	57,282	

**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 response to any question in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 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 U S See Part IV, line 21	69,333	69,333		
2 Grants and other assistance to individuals in the U S See Part IV, line 22	33,000	33,000		
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
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 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g 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 O.)				
a INVESTMENT FEES	13,357		13,357	
b ADVERTISING	2,285	2,285		
c MISC.	476		476	
d				
e All other expenses				
25 Total functional expenses Add lines 1 through 24e	118,451	104,618	13,833	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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

		(A) Beginning of year	(B) End of year
<b>Assets</b>	1 Cash—non-interest bearing		1
	2 Savings and temporary cash investments	28,104	2 19,212
	3 Pledges and grants receivable, net		3
	4 Accounts receivable, net		4
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5
	6 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
	7 Notes and loans receivable, net		7
	8 Inventories for sale or use		8
	9 Prepaid expenses and deferred charges		9
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	
	b Less accumulated depreciation	10b	10c
	11 Investments—publicly traded securities	1,442,865	11 1,444,637
	12 Investments—other securities See Part IV, line 11		12
	13 Investments—program-related See Part IV, line 11		13
	14 Intangible assets		14
	15 Other assets See Part IV, line 11		15
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	1,470,969	16 1,463,849	
<b>Liabilities</b>	17 Accounts payable and accrued expenses		17
	18 Grants payable		18
	19 Deferred revenue	16,125	19 10,500
	20 Tax-exempt bond liabilities		20
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22
	23 Secured mortgages and notes payable to unrelated third parties		23
	24 Unsecured notes and loans payable to unrelated third parties		24
	25 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 <b>Total liabilities.</b> Add lines 17 through 25	16,125	26 10,500
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>		
	27 Unrestricted net assets	1,444,844	27 1,443,349
	28 Temporarily restricted net assets		28
	29 Permanently restricted net assets	10,000	29 10,000
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>		
	30 Capital stock or trust principal, or current funds		30
	31 Paid-in or capital surplus, or land, building, or equipment fund		31
	32 Retained earnings, endowment, accumulated income, or other funds		32
	33 <b>Total net assets or fund balances</b>	1,454,844	33 1,453,349
34 <b>Total liabilities and net assets/fund balances</b>	1,470,969	34 1,463,849	

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	55,437
2	Total expenses (must equal Part IX, column (A), line 25)	2	118,451
3	Revenue less expenses Subtract line 2 from line 1	3	-63,014
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,454,844
5	Other changes in net assets or fund balances (explain in Schedule O)	5	61,519
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	1,453,349

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII ☐

- 1 Accounting method used to prepare the Form 990 ☒ Cash ☐ Accrual ☐ Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both  
☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a	X	
2b		X
2c	X	
3a		X
3b		

**SCHEDULE A**  
**(Form 990 or 990-EZ)****Public Charity Status and Public Support**

OMB No 1545-0047

**2011****Open to Public  
Inspection**Department of the Treasury  
Internal Revenue ServiceComplete 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.

Name of the organization

**ROTARY CLUB OF CONCORD CHARITABLE  
FOUNDATION**

Employer identification number

**02-0491600****Part I Reason for Public Charity Status** (All organizations must complete this part ) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

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

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
<b>Total</b>									

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

Schedule A (Form 990 or 990-EZ) 2011

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4</b> <b>Total.</b> Add lines 1 through 3						
<b>5</b> 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)						
<b>6</b> <b>Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>11</b> <b>Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions)					12	

**13** **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	%
<b>15</b> Public support percentage from 2010 Schedule A, Part II, line 14	<b>15</b>	%
<b>16a</b> <b>33 1/3% support test—2011.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b</b> <b>33 1/3% support test—2010.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>17a</b> <b>10%-facts-and-circumstances test—2011.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b</b> <b>10%-facts-and-circumstances test—2010.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>18</b> <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

**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**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")					50	50
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	54,362	40,959	28,971	31,414	36,413	192,119
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513			82,173	78,465	82,335	242,973
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5	54,362	40,959	111,144	109,879	118,798	435,142
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						435,142

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>9</b> Amounts from line 6	54,362	40,959	111,144	109,879	118,798	435,142
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				580	676	1,256
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	54,362	40,959	111,144	110,459	119,474	436,398
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	99.71%
<b>16</b> Public support percentage from 2010 Schedule A, Part III, line 15	<b>16</b>	89.94%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2010 Schedule A, Part III, line 17	<b>18</b>	7%

**19a 33 1/3% support tests—2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☒

**b 33 1/3% support tests—2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

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



**Part IV**

**Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

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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

**2011**Open To Public  
Inspection

Name of the organization

**ROTARY CLUB OF CONCORD CHARITABLE  
FOUNDATION**

Employer identification number

**02-0491600****Part I Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17  
Form 990-EZ filers are not required to complete this part**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** ☐ Mail solicitations **e** ☐ Solicitation of non-government grants
- b** ☐ Internet and email solicitations **f** ☐ Solicitation of government grants
- c** ☐ Phone solicitations **g** ☐ Special fundraising events
- d** ☐ In-person solicitations

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees  
or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?☐ Yes ☐ No**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be  
compensated at least \$5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(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						
5						
6						
7						
8						
9						
10						
<b>Total</b>						

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from  
registration or licensing

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>GOLF TOURNAMENT</u>		<u>None</u>	(add col (a) through col (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts	42,185			42,185
	2 Less Charitable contributions				
	3 Gross income (line 1 minus line 2)	42,185			42,185
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	12,639			12,639
	10 Direct expense summary Add lines 4 through 9 in column (d)				12,639
11 Net income summary Combine line 3, column (d), and line 10				29,546	

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(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			40,150	40,150
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses			14,090	14,090
	6 Volunteer labor	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d)				14,090
	8 Net gaming income summary Combine line 1, column d, and line 7				26,060

9 Enter the state(s) in which the organization operates gaming activities

a Is the organization licensed to operate gaming activities in each of these states?

9a ☒ Yes ☐ No

b If "No," explain

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

10a ☐ Yes ☒ No

b If "Yes," explain

- 11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☒ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☒ No
- 13 Indicate the percentage of gaming activity operated in
- |                               |     |   |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility         | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ► RUTH CONEYS

128-B HALL STREET

Address ► CONCORD

NH 03301

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☒ 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 ► \$
- c If "Yes," enter name and address of the third party

Name ►

Address ►

## 16 Gaming manager information

Name ►

Gaming manager compensation ► \$

Description of services provided ►

☐ Director/officer
 ☐ Employee
 ☐ Independent contractor

## 17 Mandatory distributions

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☒ 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 IV Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)

1

**SCHEDULE I  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

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

▶ Attach to Form 990.

OMB No 1545-0047

**2011****Open to Public  
Inspection**

Name of the organization

**ROTARY CLUB OF CONCORD CHARITABLE  
FOUNDATION**

Employer identification number

**02-0491600****Part I General Information on Grants and Assistance****1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?**2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States☒ Yes ☐ No**Part II****Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. ▶ ☐

Part II can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) C-MV SPCA 130 WASHINGTON ST. PENACOOK NH 03303		02-0239801		12,500				NEW SHELTER PLEDGE
(2) FRIENDLY KITCHEN COMMERCIAL STREET CONCORD NH 03301		02-0354057		13,018				NEW BLDG HOMELESS
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								

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

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

Schedule I (Form 990) (2011)

DAA

Schedule I (Form 990) (2011) **ROTARY CLUB OF CONCORD CHARITABLE** 02-0491600**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.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1	CONCORD COM. MUSIC SCHOOL	5	2,500			
2	FILIDES AWARD	1	500			
3	ARELL SCHOLARSHIPS	14	30,000			
4						
5						
6						
7						
<b>Part IV</b> Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information						

**Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds****PARTS II AND III RE GRANT PROCEDURES**

VARIOUS CHARITABLE AND CIVIC ORGANIZATIONS REQUEST DONATIONS/CONTRIBUTION TO THEIR GROUP FOR GENERAL AND/OR SPECIFIC PURPOSES. THE CHARITIES COMMITTEE OF THE FOUNDATION MEETS, DISCUSSES INQUIRES DEEPER, IF NECESSARY, AND VOTES TO RECOMMEND TO THE BOARD OF DIRECTORS WHO HAVE THE FINAL SAY. SCHOLARSHIP AVAILABILITY IS ADVERTISED IN THE LOCAL PAPERS, HIGH SCHOOL COUNSELORS ARE ADVISED AND APPLICATIONS ARE SUBMITTED TO THE SCHOLARSHIP COMMITTEE FOR REVIEW AND RECOMMENDATION TO THE BOARD OF DIRECTORS.

**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

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						
<b>Part IV</b>	<b>Supplemental Information.</b> Complete this part to provide the information required in Part I, line 2, and any other additional information					

**SCHEDULE O**  
(Form 990 or 990-EZ)Department of the Treasury  
Internal Revenue Service**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.

OMB No 1545-0047

**2011**Open to Public  
Inspection

Name of the organization

**ROTARY CLUB OF CONCORD CHARITABLE  
FOUNDATION**

Employer identification number

**02-0491600**

Form 990, Part VI, Line 9 - Officers Who Cannot Be Reached

JOYCE BRESCIANI

LOUDON, NH 03307

ANNETTE FLETCHER

CONCORD, NH 03301

RUTH A. CONEYS

BOW, NH 03304

PHILIP B. WALLINGFORD

HOPKINTON, NH 03329

DOUGLAS E. BOHLMAN

CONTOOCOOK, NH 03229

TOR BJORK

80 RUMFORD ST.

CONCORD, NH 03301

PHILIP J. CISTULLI, JR.

CONCORD, NH 03301

DONALD M. BENNERT

BOW, NH 03304



Name of the organization

ROTARY CLUB OF CONCORD CHARITABLE

Employer identification number

02-0491600

JENNIFER STACY

4 HOLLINS AVE.

BOSCAWEN, NH 03303

CHARLES G. WILLING, JR. ESQ

CONCORD, NH 03301

VINCENT M. TRENTO

HOPKINTON, NH 03229

DAVID CURDIE

150 RESERVOIR RD

NORTHFIELD, NH 03276

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990  
THE COMPLETED 990 IS PRESENTED TO THE BOARD OF DIRECTORS AFTER REVIEW BY  
THE TREASURER.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy  
BOARD MUST APPROVE ANY TRNSACTIONS WITH A BOARD/OFFICER DURING THE YEAR FOR  
ITEMS OVER \$500 AND UNDER \$5,000. OVER \$5,000 MUST BE PUBLISHED.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation  
ANYONE REQUESTING A COPY OF GOVERNANCE DATA IS PROVIDED WITH THE DATA.

Form 990, Part VII - Additional Information

Name of the organization

ROTARY CLUB OF CONCORD CHARITABLE

Employer identification number

02-0491600

FORM 990 - PART IV-LINE 34 AND SCHEDULE R - PARTS 11 & 5, LINE 1

THE ROTARY CLUB OF CONCORD CHARITABLE FOUNDATION AND THE ROTARY CLUB OF CONCORD NH ARE TWO SEPARATE ORGANIZATIONS WITH IDENTICAL OFFICERS AND DIRECTORS. THE OFFICERS AND DIRECTORS ARE ELECTED BY DUES PAYING MEMBERS OF THE "CLUB".

THERE ARE NO CASH OR MONETARY TRANSACTIONS BETWEEN THE "CLUB" AND THE "FOUNDATION".

NO ONE IN ANY POSITION OF THE "FOUNDATION" OR "CLUB" RECEIVES COMPENSATION, BENEFITS, EXPENSE ACCOUNTS, ETC.

**SCHEDULE R**  
**(Form 990)****Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

**2011****Open to Public Inspection**Department of the Treasury  
Internal Revenue Service

Name of the organization

**ROTARY CLUB OF CONCORD CHARITABLE  
FOUNDATION**

Employer identification number

**02-0491600****Part I Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

	(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(3)						
(4)						
(5)						

**Part II Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

One or more related tax exempt organizations owning the tax year								
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
							Yes	No
(1)	ROTARY CLUB OF CONCORD, N. H. P. O. BOX 2246 CONCORD NH 03302-2246 22-2947406	CIVIC ORG.	NH	501(C)		N/A		X
(2)								
(3)								
(4)								
(5)								

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

Schedule R (Form 990) 2011

**Part III Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Dispro- portionate alloc ?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	(k) Percentage ownership
								Yes	No			
(1)												
(2)												
(3)												
(4)												

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1)								
(2)								
(3)								
(4)								

**Part V Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?**a** Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity**b** Gift, grant, or capital contribution to related organization(s)**c** Gift, grant, or capital contribution from related organization(s)**d** Loans or loan guarantees to or for related organization(s)**e** Loans or loan guarantees by related organization(s)**f** Sale of assets to related organization(s)**g** Purchase of assets from related organization(s)**h** Exchange of assets with related organization(s)**i** Lease of facilities, equipment, or other assets to related organization(s)**j** Lease of facilities, equipment, or other assets from related organization(s)**k** Performance of services or membership or fundraising solicitations for related organization(s)**l** Performance of services or membership or fundraising solicitations by related organization(s)**m** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)**n** Sharing of paid employees with related organization(s)**o** Reimbursement paid to related organization(s) for expenses**p** Reimbursement paid by related organization(s) for expenses**q** Other transfer of cash or property to related organization(s)**r** Other transfer of cash or property from related organization(s)**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

				Yes	No
				1a	X
				1b	X
				1c	X
				1d	X
				1e	X
				1f	X
				1g	X
				1h	X
				1i	X
				1j	X
				1k	X
				1l	X
				1m	X
				1n	X
				1o	X
				1p	X
				1q	X
				1r	X
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved		
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

**Part VI Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													

**Part VII** **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

ACCOUNT # 5207477  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
SCHOLARSHIP FUND IMA

PAGE 1  
AS OF 11/07/2012  
RUN NOV 07 2012

CUSIP #/ PROPERTY DESCRIPTION	DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG	COVERED
-----	-----	-----	-----	-----	---	-----
SHORT TERM CAPITAL GAIN (LOSS)						
-----						
500 SHARES OF SCHWAB CHARLES CORP	07/18/2011 01/13/2011	7,365.91	9,289.95	(1,924.04)	89	C
350 SHARES OF SCHWAB CHARLES CORP	07/18/2011 01/31/2011	5,156.14	6,320.93	(1,164.79)	89	C
200 SHARES OF PEPSICO INC	07/25/2011 01/13/2011	12,884.73	13,388.00	(503.27)	89	C
355 SHARES OF JOHNSON CTLS INC	08/01/2011 01/13/2011	13,191.61	14,308.77	(1,117.16)	89	C
15 SHARES OF THERMO FISHER SCIENTIFIC INC	08/03/2011 01/13/2011	842.81	846.15	(3.34)	89	C
175 SHARES OF THERMO FISHER SCIENTIFIC INC	08/03/2011 01/31/2011	9,832.75	9,988.95	(156.20)	89	C
25 SHARES OF APACHE CORP	08/03/2011 01/13/2011	2,940.42	3,127.24	(186.82)	89	C
25 SHARES OF APACHE CORP	08/03/2011 03/28/2011	2,940.42	3,186.50	(246.08)	89	C
150 SHARES OF HEWLETT PACKARD CO	08/05/2011 03/15/2011	4,852.16	6,087.12	(1,234.96)	89	C
150 SHARES OF HEWLETT PACKARD CO	08/05/2011 03/24/2011	4,852.15	6,450.21	(1,598.06)	89	C
50 SHARES OF CITRIX SYSTEMS INC	08/05/2011 01/13/2011	3,220.24	3,378.06	(157.82)	89	C

GAIN AND LOSS DETAIL



CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
SCHOLARSHIP FUND IMA

ACCOUNT # 5207477  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

GAIN AND LOSS DETAIL

CUSIP #/ PROPERTY DESCRIPTION	DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG	COVERED
SHORT TERM CAPITAL GAIN (LOSS) - CONTINUED						
105 SHARES OF COGNIZANT TECHNOLOGY SOLUTIONS CORP CL A	08/05/2011 01/13/2011	7,136.97	7,833.70	(696.73)	89	C
200 SHARES OF TEVA PHARMACEUTICAL INDS LTD ADR	08/08/2011 01/13/2011	7,469.60	10,917.98	(3,448.38)	89	C
100 SHARES OF TEVA PHARMACEUTICAL INDS LTD ADR	08/08/2011 02/02/2011	3,734.80	5,543.90	(1,809.10)	89	C
40 SHARES OF NESTLE S A SPONSORED ADR REPSTG REG SHS	08/09/2011 01/25/2011	2,531.82	2,236.00	295.82	89	C
50 SHARES OF NESTLE S A SPONSORED ADR REPSTG REG SHS	08/09/2011 03/28/2011	3,164.78	2,851.50	313.28	89	C
20 SHARES OF ACCENTURE PLC IRELAND SHS CLASS A	08/23/2011 01/13/2011	996.88	995.20	1.68	89	C
85 SHARES OF ACCENTURE PLC IRELAND SHS CLASS A	08/23/2011 01/25/2011	4,236.76	4,384.30	(147.54)	89	C
55 SHARES OF ACCENTURE PLC IRELAND SHS CLASS A	09/16/2011 01/13/2011	2,993.30	2,736.79	256.51	89	C
15 SHARES OF CHECK POINT SOFTWARE TECH	09/27/2011 01/13/2011	818.04	677.67	140.37	89	C

ACCOUNT # 5207477  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
SCHOLARSHIP FUND IMA

PAGE 3  
AS OF 11/07/2012  
RUN NOV 07 2012

GAIN AND LOSS DETAIL								
CUSIP #/ PROPERTY DESCRIPTION	DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG	COVERED		
SHORT TERM CAPITAL GAIN (LOSS) - CONTINUED								
150 SHARES OF CHECK POINT SOFTWARE TECH	09/27/2011 01/31/2011	8,180.41	6,819.00	1,361.41	89	C		
155 SHARES OF YUM BRANDS	10/03/2011 01/13/2011	7,598.11	7,615.15	(17.04)	89	C		
210 SHARES OF THERMO FISHER SCIENTIFIC INC	10/07/2011 01/13/2011	10,618.45	11,846.10	(1,227.65)	89	C		
.725.59 SHARES OF TEMPLETON GLOBAL BOND FUND ADVISOR CLASS	10/20/2011 05/23/2011	9,345.60	10,005.89	(660.29)	95	N		
1014.41 SHARES OF TEMPLETON GLOBAL BOND FUND ADVISOR CLASS	11/21/2011 05/23/2011	12,791.71	13,988.71	(1,197.00)	95	N		
40 SHARES OF APACHE CORP	11/18/2011 01/13/2011	3,950.04	5,003.58	(1,053.54)	89	C		
10 SHARES OF RANGE RESOURCES CORP	11/18/2011 02/02/2011	696.25	494.40	201.85	89	C		
25 SHARES OF RANGE RESOURCES CORP	11/18/2011 03/28/2011	1,740.63	1,396.50	344.13	89	C		
100 SHARES OF JPMORGAN CHASE & CO	11/23/2011 01/25/2011	2,855.77	4,488.00	(1,632.23)	89	C		
75 SHARES OF JPMORGAN CHASE & CO	11/23/2011 01/31/2011	2,141.83	3,351.60	(1,209.77)	89	C		

ACCOUNT # 5207477  
 TAX ID 02-0491600  
 FROM 07/01/2011  
 TO 06/30/2012  
 FISCAL YEAR: 06/30

CAMBRIDGE TRUST COMPANY  
 Gain and Loss Report  
 ROTARY CLUB OF CONCORD  
 CHARITABLE FOUNDATION - THE NOAH  
 J. AND EVELYN P. ARELL  
 SCHOLARSHIP FUND IMA

PAGE 4  
 AS OF 11/07/2012  
 RUN NOV 07 2012

GAIN AND LOSS DETAIL					
CUSIP #/ PROPERTY DESCRIPTION	DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG COVERED
SHORT TERM CAPITAL GAIN (LOSS) - CONTINUED					
85 SHARES OF JPMORGAN CHASE & CO	12/07/2011 01/13/2011	2,867.73	3,785.00	(917.27)	89 C
75 SHARES OF JPMORGAN CHASE & CO	12/07/2011 01/31/2011	2,530.35	3,351.60	(821.25)	89 C
195 SHARES OF POWERSHARES INDIA PORTFOLIO	12/15/2011 01/13/2011	3,187.74	4,646.85	(1,459.11)	89 C
15 SHARES OF TRAVELERS COS INC	01/20/2012 01/31/2011	917.46	846.00	71.46	89 C
60 SHARES OF TRAVELERS COS INC	01/20/2012 03/15/2011	3,669.82	3,505.47	164.35	89 C
40 SHARES OF TRAVELERS COS INC	01/20/2012 12/22/2011	2,446.55	2,362.00	84.55	89 C
50 SHARES OF ECOLAB INC	01/20/2012 02/02/2011	3,016.59	2,515.00	501.59	89 C
125 SHARES OF JOHNSON CTLS INC	01/20/2012 01/25/2011	3,929.38	4,837.50	(908.12)	89 C
150 SHARES OF JOHNSON CTLS INC	01/20/2012 01/31/2011	4,715.27	5,689.80	(974.53)	89 C
75 SHARES OF JOHNSON & JOHNSON	02/08/2012 05/11/2011	4,889.89	4,983.96	(94.07)	89 C
25 SHARES OF UNION PACIFIC CORP	03/01/2012 11/03/2011	2,779.33	2,532.61	246.72	89 C

ACCOUNT # 5207477  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
SCHOLARSHIP FUND IMA

PAGE 5  
AS OF 11/07/2012  
RUN NOV 07 2012

GAIN AND LOSS DETAIL						
CUSIP #/ PROPERTY DESCRIPTION	DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG	COVERED
SHORT TERM CAPITAL GAIN (LOSS) - CONTINUED						
75 SHARES OF ECOLAB INC	03/01/2012 08/03/2011	4,502.79	3,702.28	800.51	89	C
50 SHARES OF PEPSICO INC	03/16/2012 03/28/2011	3,216.57	3,237.50	(20.93)	89	C
25000 UNITS OF FEDERAL HOME LOAN MORTGAGE CORP DATED 02/19/2009 2.125%	03/23/2012 03/31/2011	25,000.00	25,000.00	0.00	44	N
95 SHARES OF SEADRILL LTD	03/21/2012 04/20/2011	3,550.18	3,390.48	159.70	89	C
15 SHARES OF PROCTER & GAMBLE CO	04/19/2012 12/22/2011	998.55	994.50	4.05	89	C
25 SHARES OF JOHNSON & JOHNSON	04/19/2012 05/11/2011	1,576.05	1,661.32	(85.27)	89	C
25 SHARES OF JOHNSON & JOHNSON	04/19/2012 12/22/2011	1,576.04	1,633.25	(57.21)	89	C
60 SHARES OF MARTIN MARIETTA MATERIALS INC	05/17/2012 03/05/2012	4,039.03	5,124.64	(1,085.61)	89	C
60 SHARES OF MARTIN MARIETTA MATERIALS INC	05/17/2012 03/21/2012	4,039.02	5,331.60	(1,292.58)	89	C
190 SHARES OF BROADCOM CORP CL A	05/18/2012 08/23/2011	5,953.88	6,278.56	(324.68)	89	C

ACCOUNT # 5207477  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
SCHOLARSHIP FUND IMA

PAGE 6  
AS OF 11/07/2012  
RUN NOV 07 2012

CUSIP #/ PROPERTY DESCRIPTION	DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG	COVERED
SHORT TERM CAPITAL GAIN (LOSS) - CONTINUED						
105 SHARES OF BROADCOM CORP CL A	05/18/2012 02/15/2012	3,290.30	3,917.73	(627.43)	89	C
95 SHARES OF JPMORGAN CHASE & CO	05/18/2012 08/17/2011	3,173.05	3,478.54	(305.49)	89	C
TOTAL SHORT TERM CAPITAL GAIN (LOSS)		256,946.66	282,364.04	(25,417.38)		

CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
SCHOLARSHIP FUND IMA

ACCOUNT # 5207477  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

GAIN AND LOSS DETAIL		DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG	COVERED
CUSIP #/ PROPERTY DESCRIPTION							
LONG TERM CAPITAL GAIN (LOSS)							
70 SHARES OF JOHNSON CTLS INC		01/20/2012 01/13/2011	2,200.46	2,821.45	(620.99)	89	C
45 SHARES OF EXXON MOBIL CORP		02/07/2012 01/13/2011	3,863.69	3,445.20	418.49	89	C
100 SHARES OF EXXON MOBIL CORP		02/07/2012 01/31/2011	8,585.97	7,975.99	609.98	89	C
50 SHARES OF PEPSICO INC		02/15/2012 01/13/2011	3,164.99	3,347.00	(182.01)	89	C
45 SHARES OF PEPSICO INC		02/15/2012 01/25/2011	2,848.50	2,979.45	(130.95)	89	C
25 SHARES OF APACHE CORP		02/28/2012 01/13/2011	2,747.93	3,127.24	(379.31)	89	C
45 SHARES OF EOG RESOURCES INC		02/28/2012 02/02/2011	5,203.95	4,837.50	366.45	89	C
20 SHARES OF UNION PACIFIC CORP		03/01/2012 01/13/2011	2,223.46	1,980.80	242.66	89	C
25 SHARES OF ECOLAB INC		03/01/2012 02/02/2011	1,500.93	1,257.50	243.43	89	C
175 SHARES OF MICROSOFT CORP		03/01/2012 01/13/2011	5,617.91	4,936.75	681.16	89	C
55 SHARES OF PEPSICO INC		03/16/2012 01/25/2011	3,538.23	3,641.55	(103.32)	89	C

ACCOUNT # 5207477  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
SCHOLARSHIP FUND IMA

PAGE 8  
AS OF 11/07/2012  
RUN NOV 07 2012

CUSIP #/ PROPERTY DESCRIPTION		DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG	COVERED
-----		-----	-----	-----	-----	---	-----
LONG TERM CAPITAL GAIN (LOSS) - CONTINUED							
-----							
30 SHARES OF PRAXAIR INC		04/10/2012 02/02/2011	3,294.80	2,851.50	443.30	89	C
55 SHARES OF ACCENTURE PLC IRELAND SHS CLASS A		04/10/2012 01/13/2011	3,475.59	2,736.80	738.79	89	C
30 SHARES OF CITRIX SYSTEMS INC		04/10/2012 01/13/2011	2,215.01	2,026.83	188.18	89	C
15 SHARES OF CITRIX SYSTEMS INC		04/10/2012 01/31/2011	1,107.51	948.90	158.61	89	C
85 SHARES OF BROADCOM CORP CL A		04/10/2012 03/15/2011	3,058.03	3,346.49	(288.46)	89	C
100 SHARES OF US BANCORP DEL		04/10/2012 02/02/2011	3,039.67	2,738.98	300.69	89	C
10 SHARES OF US BANCORP DEL		04/10/2012 03/28/2011	303.97	270.10	33.87	89	C
80 SHARES OF PROCTER & GAMBLE CO		04/19/2012 01/13/2011	5,325.60	5,235.19	90.41	89	C
35 SHARES OF JOHNSON & JOHNSON		04/19/2012 01/13/2011	2,206.46	2,203.95	2.51	89	C
25 SHARES OF NESTLE S A SPONSORED ADR REPSTG REG SHS		04/26/2012 01/13/2011	1,527.03	1,350.00	177.03	89	C

GAIN AND LOSS DETAIL

GAIN AND LOSS DETAIL						
CUSIP #/ PROPERTY DESCRIPTION	DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG	COVERED
LONG TERM CAPITAL GAIN (LOSS) - CONTINUED						
60 SHARES OF NESTLE S A SPONSORED ADR REPSTG REG SHS	04/26/2012 01/25/2011	3,664.88	3,354.00	310.88	89	C
45 SHARES OF PROCTER & GAMBLE CO	05/11/2012 01/13/2011	2,872.79	2,944.80	(72.01)	89	C
55 SHARES OF PROCTER & GAMBLE CO	05/11/2012 02/03/2011	3,511.18	3,467.00	44.18	89	C
70 SHARES OF JPMORGAN CHASE & CO	05/11/2012 01/13/2011	2,609.96	3,117.06	(507.10)	89	C
75 SHARES OF BROADCOM CORP CL A	05/18/2012 03/15/2011	2,350.21	2,952.79	(602.58)	89	C
195 SHARES OF JPMORGAN CHASE & CO	05/18/2012 01/13/2011	6,513.09	8,683.23	(2,170.14)	89	C
25000 UNITS OF FEDERAL HOME LOAN BANK DATED 05/04/2008 4.875% 06/08/2012	06/08/2012 02/14/2011	25,000.00	25,000.00	0.00	44	N
75 SHARES OF ARIBA INC	06/07/2012 03/03/2011	3,338.14	2,415.29	922.85	89	C
110 SHARES OF ARIBA INC	06/07/2012 04/07/2011	4,895.94	3,579.05	1,316.89	89	C
75 SHARES OF PROCTER & GAMBLE CO	06/21/2012 02/02/2011	4,492.49	4,695.75	(203.26)	89	C



CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
SCHOLARSHIP FUND IMA

ACCOUNT # 5207477  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

GAIN AND LOSS DETAIL									
CUSIP #/ PROPERTY DESCRIPTION	DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG	COVERED			
LONG TERM CAPITAL GAIN (LOSS) - CONTINUED									
30 SHARES OF PROCTER & GAMBLE CO	06/21/2012 02/03/2011	1,796.99	1,891.09	(94.10)	89	C			
155 SHARES OF POWERSHARES INDIA PORTFOLIO	06/22/2012 01/13/2011	2,497.07	3,693.65	(1,196.58)	89	C			
150 SHARES OF POWERSHARES INDIA PORTFOLIO	06/22/2012 02/02/2011	2,416.52	3,346.49	(929.97)	89	C			
50 SHARES OF POWERSHARES INDIA PORTFOLIO	06/22/2012 03/28/2011	805.51	1,163.50	(357.99)	89	C			
TOTAL LONG TERM CAPITAL GAIN (LOSS)		133,814.46	134,362.87	(548.41)					

34

CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
SCHOLARSHIP FUND IMA

ACCOUNT # 5207477  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

GAIN AND LOSS DETAIL			
CUSIP #/ PROPERTY DESCRIPTION	DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST
		GAIN OR LOSS	REG
			COVERED
LONG TERM CAPITAL GAINS DIVIDENDS			
1909.855 BASIS SHARES OF VANGUARD INFLATION PROTECTED SECURITIES FUND		34.38	95
4476.275 BASIS SHARES OF FEDERATED BOND FUND INSTL SHS (FUND #328)		236.84	95
340 BASIS SHARES OF SPDR SERIES TRUST BARCLAYS HIGH YIELD BOND ETF		89.79	89
TOTAL LONG TERM CAPITAL GAINS DIVIDENDS	0.00	361.01	

ACCOUNT # 5207477  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
SCHOLARSHIP FUND IMA

PAGE 12  
AS OF 11/07/2012  
RUN NOV 07 2012

SUMMARY OF CAPITAL GAINS AND LOSSES

TOTAL SHORT TERM CAPITAL GAIN (LOSS)  
TOTAL SHORT TERM CAPITAL GAINS DIVIDENDS

(25,417.38)  
0.00

NET SHORT TERM CAPITAL GAIN (LOSS)

(25,417.38)

TOTAL LONG TERM CAPITAL GAIN (LOSS)  
TOTAL LONG TERM CAPITAL GAINS DIVIDENDS  
TOTAL 28% RATE CAPITAL GAINS DIVIDENDS  
TOTAL SEC 1250 CAPITAL GAINS DIVIDENDS  
TOTAL SEC 1202 CAPITAL GAINS DIVIDENDS

(548.41)  
361.01  
0.00  
0.00  
0.00

NET LONG TERM CAPITAL GAIN (LOSS)

(187.40)

NET CAPITAL GAIN (LOSS)

(25,604.78)

TOTAL GAIN/LOSS FROM SALES WITH UNKNOWN COST/ACQUISITION DATE

0.00

ACCOUNT # 5207469  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
GENERAL CHARITABLE FUND IMA

PAGE 1  
AS OF 11/07/2012  
RUN NOV 07 2012

CUSIP #/ PROPERTY DESCRIPTION	DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG	COVERED
-----	-----	-----	-----	-----	---	-----
SHORT TERM CAPITAL GAIN (LOSS)						
-----						
250 SHARES OF SCHWAB CHARLES CORP	07/18/2011 01/13/2011	3,682.95	4,644.98	(962.03)	89	C
200 SHARES OF SCHWAB CHARLES CORP	07/18/2011 01/31/2011	2,946.36	3,611.96	(665.60)	89	C
75 SHARES OF PEPSICO INC	07/25/2011 01/13/2011	4,831.77	5,020.50	(188.73)	89	C
200 SHARES OF JOHNSON CTLS INC	08/01/2011 01/13/2011	7,431.90	8,061.28	(629.38)	89	C
20 SHARES OF THERMO FISHER SCIENTIFIC INC	08/03/2011 01/13/2011	1,123.74	1,128.20	(4.46)	89	C
75 SHARES OF THERMO FISHER SCIENTIFIC INC	08/03/2011 01/31/2011	4,214.04	4,280.98	(66.94)	89	C
40 SHARES OF APACHE CORP	08/03/2011 01/13/2011	4,704.66	5,003.58	(298.92)	89	C
80 SHARES OF HEWLETT PACKARD CO	08/05/2011 03/15/2011	2,587.82	3,246.46	(658.64)	89	C
80 SHARES OF HEWLETT PACKARD CO	08/05/2011 03/24/2011	2,587.81	3,440.11	(852.30)	89	C
25 SHARES OF CITRIX SYSTEMS INC	08/05/2011 01/13/2011	1,610.13	1,689.03	(78.90)	89	C
55 SHARES OF COGNIZANT TECHNOLOGY SOLUTIONS CORP CL A	08/05/2011 01/13/2011	3,738.41	4,103.37	(364.96)	89	C

ACCOUNT # 5207469  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
GENERAL CHARITABLE FUND IMA

PAGE 2  
AS OF 11/07/2012  
RUN NOV 07 2012

CUSIP #/ PROPERTY DESCRIPTION		DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG	COVERED
SHORT TERM CAPITAL GAIN (LOSS) - CONTINUED							
100 SHARES OF TEVA PHARMACEUTICAL INDS LTD ADR		08/08/2011 01/13/2011	3,734.80	5,458.99	(1,724.19)	89	C
100 SHARES OF TEVA PHARMACEUTICAL INDS LTD ADR		08/08/2011 02/09/2011	3,734.79	5,139.99	(1,405.20)	89	C
20 SHARES OF NESTLE S A SPONSORED ADR REPSTG REG SHS		08/09/2011 01/25/2011	1,265.90	1,118.00	147.90	89	C
10 SHARES OF ACCENTURE PLC IRELAND SHS CLASS A		08/23/2011 01/13/2011	498.44	497.60	0.84	89	C
45 SHARES OF ACCENTURE PLC IRELAND SHS CLASS A		08/23/2011 01/31/2011	2,242.99	2,299.95	(56.96)	89	C
30 SHARES OF ACCENTURE PLC IRELAND SHS CLASS A		09/16/2011 01/13/2011	1,632.70	1,492.80	139.90	89	C
20 SHARES OF CHECK POINT SOFTWARE TECH		09/27/2011 01/13/2011	1,090.72	903.57	187.15	89	C
75 SHARES OF CHECK POINT SOFTWARE TECH		09/27/2011 01/31/2011	4,090.21	3,409.50	680.71	89	C
90 SHARES OF YUM BRANDS		10/03/2011 01/13/2011	4,411.81	4,421.70	(9.89)	89	C
105 SHARES OF THERMO FISHER SCIENTIFIC INC		10/07/2011 01/13/2011	5,309.23	5,923.05	(613.82)	89	C

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CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
GENERAL CHARITABLE FUND IMA

ACCOUNT # 5207469  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

GAIN AND LOSS DETAIL

CUSIP #/ PROPERTY DESCRIPTION	DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG	COVERED
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SHORT TERM CAPITAL GAIN (LOSS) - CONTINUED						
362.795 SHARES OF TEMPLETON GLOBAL BOND FUND ADVISOR CLASS	10/20/2011 05/23/2011	4,672.80	5,002.94	(330.14)	95	N
517.205 SHARES OF TEMPLETON GLOBAL BOND FUND ADVISOR CLASS	11/21/2011 05/23/2011	6,521.96	7,132.26	(610.30)	95	N
10 SHARES OF APACHE CORP	11/18/2011 01/13/2011	987.51	1,250.90	(263.39)	89	C
10 SHARES OF APACHE CORP	11/18/2011 01/25/2011	987.51	1,221.50	(233.99)	89	C
15 SHARES OF JPMORGAN CHASE & CO	11/23/2011 01/13/2011	428.37	667.94	(239.57)	89	C
75 SHARES OF JPMORGAN CHASE & CO	11/23/2011 01/25/2011	2,141.83	3,366.00	(1,224.17)	89	C
80 SHARES OF JPMORGAN CHASE & CO	12/07/2011 01/13/2011	2,699.05	3,562.36	(863.31)	- 89	C
120 SHARES OF POWERSHARES INDIA PORTFOLIO	12/15/2011 01/13/2011	1,961.68	2,859.60	(897.92)	89	C
50 SHARES OF TRAVELERS COS INC	01/20/2012 02/09/2011	3,058.19	2,927.00	131.19	89	C
30 SHARES OF ECOLAB INC	01/20/2012 01/31/2011	1,809.94	1,494.30	315.64	89	C

ACCOUNT # 5207469  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
GENERAL CHARITABLE FUND IMA

PAGE 4  
AS OF 11/07/2012  
RUN NOV 07 2012

GAIN AND LOSS DETAIL						
CUSIP #/ PROPERTY DESCRIPTION	DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG	COVERED
SHORT TERM CAPITAL GAIN (LOSS) - CONTINUED						
75 SHARES OF JOHNSON CTLS INC	01/20/2012 01/25/2011	2,357.63	2,901.75	(544.12)	89	C
100 SHARES OF JOHNSON CTLS INC	01/20/2012 01/31/2011	3,143.51	3,793.20	(649.69)	89	C
35 SHARES OF JOHNSON & JOHNSON	02/08/2012 05/11/2011	2,281.94	2,325.85	(43.91)	89	C
15 SHARES OF UNION PACIFIC CORP	03/01/2012 11/03/2011	1,667.59	1,519.57	148.02	89	C
5 SHARES OF ECOLAB INC	03/01/2012 08/03/2011	300.19	246.82	53.37	89	C
50 SHARES OF SEADRILL LTD	03/21/2012 04/20/2011	1,868.51	1,784.46	84.05	89	C
30 SHARES OF MARTIN MARIETTA MATERIALS INC	05/17/2012 03/05/2012	2,019.52	2,562.32	(542.80)	89	C
30 SHARES OF MARTIN MARIETTA MATERIALS INC	05/17/2012 03/21/2012	2,019.51	2,665.79	(646.28)	89	C
90 SHARES OF BROADCOM CORP CL A	05/18/2012 08/23/2011	2,820.26	2,974.06	(153.80)	89	C
55 SHARES OF BROADCOM CORP CL A	05/18/2012 02/15/2012	1,723.49	2,052.14	(328.65)	89	C
100 SHARES OF JPMORGAN CHASE & CO	05/18/2012 08/17/2011	3,340.04	3,661.62	(321.58)	89	C
TOTAL SHORT TERM CAPITAL GAIN (LOSS)		116,282.21	130,867.98	(14,585.77)		

CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
GENERAL CHARITABLE FUND IMA

ACCOUNT # 5207469  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

GAIN AND LOSS DETAIL		DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG	COVERED
CUSIP #/ PROPERTY DESCRIPTION							
LONG TERM CAPITAL GAIN (LOSS)							
25 SHARES OF EXXON MOBIL CORP		02/07/2012 01/13/2011	2,146.50	1,914.00	232.50	89	C
75 SHARES OF EXXON MOBIL CORP		02/07/2012 01/31/2011	6,439.48	5,981.99	457.49	89	C
50 SHARES OF PEPSICO INC		02/15/2012 01/13/2011	3,165.00	3,347.00	(182.00)	89	C
10 SHARES OF APACHE CORP		02/28/2012 01/25/2011	1,099.17	1,221.50	(122.33)	89	C
25 SHARES OF EOG RESOURCES INC		02/28/2012 02/03/2011	2,891.07	2,671.74	219.33	89	C
10 SHARES OF UNION PACIFIC CORP		03/01/2012 01/13/2011	1,111.73	990.40	121.33	89	C
45 SHARES OF ECOLAB INC		03/01/2012 01/31/2011	2,701.67	2,241.45	460.22	89	C
95 SHARES OF MICROSOFT CORP		03/01/2012 01/13/2011	3,049.72	2,679.95	369.77	89	C
50 SHARES OF PEPSICO INC		03/16/2012 01/25/2011	3,216.59	3,310.00	(93.41)	89	C
15 SHARES OF PRAXAIR INC		04/10/2012 02/09/2011	1,647.40	1,427.10	220.30	89	C
25 SHARES OF ACCENTURE PLC IRELAND SHS CLASS A		04/10/2012 01/13/2011	1,579.83	1,244.00	335.83	89	C



ACCOUNT # 5207469  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
GENERAL CHARITABLE FUND IMA

PAGE 6  
AS OF 11/07/2012  
RUN NOV 07 2012

CUSIP #/ PROPERTY DESCRIPTION		DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG	COVERED
LONG TERM CAPITAL GAIN (LOSS) - CONTINUED							
15 SHARES OF CITRIX SYSTEMS INC		04/10/2012 01/13/2011	1,107.51	1,013.41	94.10	89	C
15 SHARES OF CITRIX SYSTEMS INC		04/10/2012 01/25/2011	1,107.51	946.05	161.46	89	C
45 SHARES OF BROADCOM CORP CL A		04/10/2012 03/15/2011	1,618.95	1,771.67	(152.72)	89	C
120 SHARES OF US BANCORP DEL		04/10/2012 02/09/2011	3,647.61	3,380.40	267.21	89	C
35 SHARES OF PROCTER & GAMBLE CO		04/19/2012 01/13/2011	2,329.95	2,290.40	39.55	89	C
45 SHARES OF JOHNSON & JOHNSON		04/19/2012 01/13/2011	2,836.89	2,833.65	3.24	89	C
15 SHARES OF NESTLE S A SPONSORED ADR REPSTG REG SHS		04/26/2012 01/13/2011	916.22	810.00	106.22	89	C
30 SHARES OF NESTLE S A SPONSORED ADR REPSTG REG SHS		04/26/2012 01/25/2011	1,832.45	1,677.00	155.45	89	C
40 SHARES OF PROCTER & GAMBLE CO		05/11/2012 01/13/2011	2,553.59	2,617.59	(64.00)	89	C
10 SHARES OF PROCTER & GAMBLE CO		05/11/2012 02/03/2011	638.40	630.36	8.04	89	C

GAIN AND LOSS DETAIL

ACCOUNT # 5207469  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
GENERAL CHARITABLE FUND IMA

PAGE 7  
AS OF 11/07/2012  
RUN NOV 07 2012

GAIN AND LOSS DETAIL						
CUSIP #/ PROPERTY DESCRIPTION	DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG	COVERED
LONG TERM CAPITAL GAIN (LOSS) - CONTINUED						
35 SHARES OF JPMORGAN CHASE & CO	05/11/2012 01/13/2011	1,304.98	1,558.53	(253.55)	89	C
40 SHARES OF BROADCOM CORP CL A	05/18/2012 03/15/2011	1,253.45	1,574.82	(321.37)	89	C
45 SHARES OF JPMORGAN CHASE & CO	05/18/2012 01/13/2011	1,503.02	2,003.82	(500.80)	89	C
40 SHARES OF ARIBA INC	06/07/2012 03/03/2011	1,780.35	1,288.16	492.19	89	C
55 SHARES OF ARIBA INC	06/07/2012 04/07/2011	2,447.98	1,789.53	658.45	89	C
50 SHARES OF PROCTER & GAMBLE CO	06/21/2012 02/03/2011	2,994.99	3,151.82	(156.83)	89	C
55 SHARES OF POWERSHARES INDIA PORTFOLIO	06/22/2012 01/13/2011	886.06	1,310.65	(424.59)	89	C
125 SHARES OF POWERSHARES INDIA PORTFOLIO	06/22/2012 02/09/2011	2,013.77	2,698.75	(684.98)	89	C
TOTAL LONG TERM CAPITAL GAIN (LOSS)		61,821.84	60,375.74	1,446.10		

7

ACCOUNT # 5207469  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
GENERAL CHARITABLE FUND IMA

PAGE 8  
AS OF 11/07/2012  
RUN NOV 07 2012

GAIN AND LOSS DETAIL					
CUSIP #/ PROPERTY DESCRIPTION	DATE SOLD/ ACQUIRED	PROCEEDS OF SALE	COST	GAIN OR LOSS	REG COVERED
LONG TERM CAPITAL GAINS DIVIDENDS					
1909.855 BASIS SHARES OF VANGUARD INFLATION PROTECTED SECURITIES FUND				34.38	95
6726.501 BASIS SHARES OF FEDERATED BOND FUND INSTL SHS (FUND #328)				355.90	95
175 BASIS SHARES OF SPDR SERIES TRUST BARCLAYS HIGH YIELD BOND ETF				46.21	89
TOTAL LONG TERM CAPITAL GAINS DIVIDENDS		0.00	0.00	436.49	

ACCOUNT # 5207469  
TAX ID 02-0491600  
FROM 07/01/2011  
TO 06/30/2012  
FISCAL YEAR: 06/30

CAMBRIDGE TRUST COMPANY  
Gain and Loss Report  
ROTARY CLUB OF CONCORD  
CHARITABLE FOUNDATION - THE NOAH  
J. AND EVELYN P. ARELL  
GENERAL CHARITABLE FUND IMA

PAGE 9  
AS OF 11/07/2012  
RUN NOV 07 2012

SUMMARY OF CAPITAL GAINS AND LOSSES

TOTAL SHORT TERM CAPITAL GAIN (LOSS)  
TOTAL SHORT TERM CAPITAL GAINS DIVIDENDS

(14,585.77)  
0.00

NET SHORT TERM CAPITAL GAIN (LOSS)

(14,585.77) (14,585.77)

TOTAL LONG TERM CAPITAL GAIN (LOSS)  
TOTAL LONG TERM CAPITAL GAINS DIVIDENDS  
TOTAL 28% RATE CAPITAL GAINS DIVIDENDS  
TOTAL SEC 1250 CAPITAL GAINS DIVIDENDS  
TOTAL SEC 1202 CAPITAL GAINS DIVIDENDS

1,446.10  
436.49  
0.00  
0.00  
0.00

NET LONG TERM CAPITAL GAIN (LOSS)

1,882.59 1,882.59

NET CAPITAL GAIN (LOSS)

(12,703.18)

TOTAL GAIN/LOSS FROM SALES WITH UNKNOWN COST/ACQUISITION DATE

0.00