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Return of Organization Exempt From Income Tax

OMB No 1545-0047 2011

Department of the Treasury Internal Revenue Service

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

Open to Public

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Inspection For the 2011 calendar year, or tax year beginning July 1 2011, and ending June 30 20 12 C Name of organization ROTARY INTERNATIONAL DISTRICT 5020 Check if applicable: D Employer identification number Doing Business As Address chance 35-2361984 Number and street (or P O box if mail is not delivered to street address) E Telephone number Name change 12243 CROSSRIDGE AVENUE NW Initial return 360-731-9958 City or town, state or country, and ZIP + 4 Terminated SILVERDALE, WA 98383 Amended return G Gross receipts \$ DAVID STOCKS, DISTRICT GOVERNOR F Name and address of principal officer. Application pending H(a) is this a group return for affiliates? Yes No 3129 FLANNAGAN PLC, VICTORIA, B.C. V9B 5K6 CANADA H(b) Are all affiliates included? 🔲 Yes 🗹 No If "No," attach a list. (see instructions) ₹ 501(c) (501(c)(3) 4) ◄ (Insert no.) ☐ 4947(a)(1) or ☐ 527 Tax-exempt status: www.rotary5020.org Websita: ▶ H(c) Group exemption number > L Year of formation M State of legal domicile: WA Part I Summary Bnefly describe the organization's mission or most significant activities: Assist the Rotary Clubs in our District to provide service to others, to promote high ethical standards, and Activities & Governance to advance world understanding, goodwill and peace through the fellowship of all Rotarians. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a). Number of independent voting members of the governing body (Part VI, line 1b) 4 29 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 0 Total unrelated business revenue from Part VIII, column (C), line-12 7a 7a 0 Net unrelated business taxable income from Form 990-T, line 34 7b 0 FFB 1 9 2013 Prior Yes Current Year Contributions and grants (Part VIII, line 16) 110,000 n Program service revenue (Part VIII, line 2g) 308,381 311,648 Investment income (Part VIII, column (A), lines 3, 4, and 7c) 10 2.281 4,921 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 O Total revenue-add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 420,662 316,569 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 102,686 30,705 14 Benefits paid to or for members (Part IX, column (A), fine 4) . O 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 O 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . ٥ 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ h 317,460 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 268,030 370.716 348,165 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 49.946 19 (31,596)Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 261,863 230,267 Total liabilities (Part X, line 26) . 21 Net assets or fund balances. Subtract line 21 from line 20 261,863 230,267 Signature Block Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and beliaf, it is true, correct, and complete. Declaration of preparer (other-than officer) is based on all information of which preparer has any knowledge Sign Here Type or print name and title Print/Type preparer's name Preparer's signature Date Check [] if **Paid** Preparer Firm's EIN 🕨 Firm's name **Use Only** Phone no Firm's address >

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

For Paperwork Reduction Act Notice, see the separate instructions.

Yes No Form 990 (2011)

Cat. No. 11282\

For 22	00 (004)	
	90 (2011) Pag	<u>∤</u> e 2
Part	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III	$\overline{}$
1	Briefly describe the organization's mission:	닏
	Support and strengthen the 87 Rotary Clubs in Rotary District 5020 by providing officer training, encouraging local	
	clubs to achieve and exceed established goals, enhancing public image and awareness of Rotary throughout the	
	District, and increasing humanitarian service, both locally and worldwide.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
2.	prior Form 990 or 990-EZ?	lo
_	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	۱.
	services?	Ю
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 grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 188,866 including grants of \$) (Revenue \$ 186,831)	
	District Administration and Expense Reimbursement - \$114,934	
	District Activities and Meetings - \$31,607	
	District Committees, Publications and Youth Exchange Support - \$42,325	
	District Committees, Fubications and Touri Exchange Support - \$72,025	
4b	(Code:) (Expenses \$ 128,280 including grants of \$) (Revenue \$ 124,817)	
	District Leadership Training Assembly - \$32,062	
	District Conference - \$96,218	
	(Victoria, BC Venue Rental, Meals, Programming Expense)	
4c	(Code:) (Expenses \$ 31,019 including grants of \$ 30,705) (Revenue \$ 0)	
	5'-10 A 5 1-i- 0 (O 1-i-15 1010 2010)	
	Final Gates Foundation Grants (Carried forward from 2010-2012) • \$7,000 Travel Expense to DLTA to promote Club participation in Homeless Initiative - \$314	
	Travel Expense to DETA to promote ordo participation in Tromotoss influtive - 4014	
	Refunds to District Clubs to decrease Unrestricted Funds Balance - \$23,705	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	

\$348,165

4e Total program service expenses ▶

Part	IV Checklist of Required Schedules			Page 3
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	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	5	1	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	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.			
а	D. I. I	11a		1
b		11b		1
C	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	11c		1
d	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	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		1
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	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
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	14b	1	
15	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.	15		1
16	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	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a		20a		1
b		20b		

Checklist of Required Schedules (continued)

Part IV

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	√	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	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	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		√
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		√
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	<u> </u>

Form **990** (2011)

Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any guestion in this Part V		·	
	Onder it Contacted C Contains a responde to any question in this rate V	•••	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1	ļ	1
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
	reportable gaming (gambling) winnings to prize winners?	1c		1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a]		ļ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		<u>L</u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	L	1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			ľ
	account)?	4a	✓	
b	If "Yes," enter the name of the foreign country: ► Canada See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
E -		F-		,
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		/
b	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	<u> </u>	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		├ ─
-	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		ļ	
	gifts were not tax deductible?	6b	1	1
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	Ì		ĺ
	and services provided to the payor?	7a		L.
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1		1
	required to file Form 8282?	7c		ļ
d	If "Yes," indicate the number of Forms 8282 filed during the year	1		1
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f	ļ	
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7h		
4	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	ŀ	
9	Sponsoring organizations maintaining donor advised funds.	<u>├</u>	-	
a	Did the organization make any taxable distributions under section 4966?	9a	1	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12]]	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	Į	1	
b	Gross income from other sources (Do not net amounts due or paid to other sources			
46-	against amounts due or received from them.)	1	l	l
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		├
12	· · · · · · · · · · · · · · · · · · ·	1		ĺ
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a	-	┼
а	Note. See the instructions for additional information the organization must report on Schedule O.	1.00	 	
b	Enter the amount of reserves the organization is required to maintain by the states in which	1	ĺ	1
_	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
h	If "Vos." has it filed a Form 720 to report those payments? If "No." provide an explanation in Schedule O	14h	1	1

Part \	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	ee ins	truct	ions.
<u> </u>	Check if Schedule O contains a response to any question in this Part VI	···	• .	<u>. [4]</u>
Section	on A. Governing Body and Management		-	
4.	Takes the assume of setime manufacture of the assuming body of the analysis the territory	r	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 29			
	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.			1
_	Enter the number of voting members included in line 1a, above, who are independent . 1b 29			ĺ
2	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?	2_		✓
3	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? .	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓_
6	Did the organization have members or stockholders?	6		✓
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	✓	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			1
	stockholders, or persons other than the governing body?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			1
	the year by the following:			
	The governing body?	8a	✓	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	✓	L
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		_	1
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9_	√	<u>L</u>
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		✓ ,
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			٠ , ا
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		/
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40.		
	describe in Schedule O how this was done	12c	ļ	 ,
13	Did the organization have a written whistleblower policy?	13		1
14	Did the organization have a written document retention and destruction policy?	14		├
15	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?	1		
		4		•
а	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	130		
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	İ		
· va	with a taxable entity during the year?	16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			+
D	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			ļ
	organization's exempt status with respect to such arrangements?	16b		1
Section	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
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	f inte	rest p	oolicy,
	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: ► Brian Beagle, 12243 Crossridge Ave NW, Silverdale, WA 98383 Telephone: (360) 731-9956			

Form	990	(2011)	
	330	20111	

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

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

- 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 not	r any relate	d org	aniz	atio	n c	ompe	nsa	ted any currer	t officer, director	r, or trustee.
		(C)								
(A)	(B)	(do n	Position (do not check more than or				nne	(D)	(E)	(F)
Name and Title	Average hours per week	box, unless person is both an				is both or/trust	an tee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) DAVID STOCKS						ļ				
District Governor	40			✓		<u> </u>		0	0	0
(2) JUDY BYRON										
District Governor Elect	20			✓	<u> </u>		L	0	0	0
(3) PETE TAYLOR		i			ļ		ŀ			
District Governor Nominee	15		L	✓		<u> </u>	L	0	0	0
(4) ROBERT J. MARTIN		}						1		
Past District Governor	5		<u> </u>	✓	L			0	0	0
(5) DENNIS SUTTON					l	İ				
District Secretary	5	<u> </u>		✓				0	0	0
(6) DICK SIMS]		1		ł	ł		ł	ł	
District Treasurer	8		<u> </u>	✓			<u> </u>	0	0	0
(7)						<u> </u>	ļ			
(8)	-				<u> </u>					
(9)				-						
(10)	-									
(11)				<u> </u>		-				
(12)			-							
(13)	-					 				
(14)				T	<u> </u>	<u> </u>				

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees			lighe	st C	ompensated E	mployees (con	tinued)		
	(A) Name and title	(B) Average hours per	Son, amood parcent is sent					an	(D) Reportable compensation from	(E) Reportable compensation froi	(F) Estimated m amount of other		nated unt of	
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from from organ and r	ensation n the ization elated zations	
(15)														
(16)														
(17)														
(18)														
(19)														
(20)														
(21)														
(22)										·				-
(23)														
(24)														
(25)														-,
1b c d	Sub-total			•	•			→ →						
2	Total number of individuals (including but reportable compensation from the organic	t not limited				ted	abov	e) w	ho received m	ore than \$100,	000 o	f		
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc	ctor, o	or ti	rust	ee, livid	key ual	emp	oloyee, or high	nest compensa	ated	3	Yes	No ✓
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re	porta	ble	con	npe	nsatio	on a es,"	and other comp complete Sch	pensation from nedule J for s	the uch	4		
5	Did any person listed on line 1a receive of the services rendered to the organization									zation or individual		5		<u>√</u>
Section	on B. Independent Contractors	: 11 100,	COMP	, c.c		-	<u> </u>		oden percen		<u></u>			<u> </u>
1	Complete this table for your five highest compensation from the organization. Repyear.													ıx
	(A) Name and business add	tress							(B) Description of s	services	Co	(C) mpens	ation	
	NONE							F						
								1						
				,				+						
2	Total number of independent contractor							o tl	hose listed ab	ove) who			-	

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
its its	1a	Federated campaigns 1	а				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1	b				
S, E	С	Fundraising events 1	С				
3ift ar /	d	Related organizations 1	d		1	İ	
is, (е	Government grants (contributions)	е	1			
r S	f	All other contributions, gifts, grants,			1		
t e		and similar amounts not included above	lf				
d d	g	Noncash contributions included in lines 1a-1f.	\$				
a C	<u>h</u>	Total. Add lines 1a-1f	<u></u> . ▶				
ne			Business Code				
Ven	2a	District Club Dues & Assessments	561000	186,831	186,831	0	0
8	b	District Training Assembly	561000	45,376	45,376	0	0
Program Service Revenue	C	District Conference	561000	79,441	79,441	0	0
Ser	d		_				
Ë	е						
g	f	All other program service revenue					
<u> </u>	g	Total. Add lines 2a-2f		311,648			
,	3	Investment income (including di					
		and other similar amounts)		4,921	4,921	0	o
ļ	4	Income from investment of tax-exemp	t bond proceeds ►	0	0	0	0
	5	Royalties	<u> ▶</u>	0	0	0	0
		(i) Real	(II) Personal		ļ		
	6a	Gross rents			ľ		
	b	Less: rental expenses		İ			
	С	Rental income or (loss)					
	d	<u> </u>	<u> ▶</u>	0	0	0	0
	7a	Gross amount from sales of (i) Securities assets other than inventory	(ii) Other				
	Ь	Less: cost or other basis and sales expenses .					
	C	Gain or (loss)					
	d			0	0	0	0
venue	8a	Gross income from fundraising events (not including \$					
Other Rev	1	of contributions reported on line 1c). See Part IV, line 18	a				
¥	b	Less: direct expenses	b		ļ		
•	c	Net income or (loss) from fundraisi	ng events . >	O		0	0
	9a	Gross income from gaming activitie See Part IV, line 19					
	Ь	Less: direct expenses	Ь		}		
	c	Net income or (loss) from gaming a	activities >	o	o	0	0
	1	Gross sales of inventory, les returns and allowances	s				
	b	Less: cost of goods sold Net income or (loss) from sales of	b inventory		0	0	0
	۳	Miscellaneous Revenue	Business Code				·
	11a				İ		
	ь		-				
	6						
	d	All other revenue		0	0	0	0
	e	Total. Add lines 11a–11d	<u> </u>	0			
	12	Total revenue See instructions		316 560	316 560		

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respon	se to any question	in this Part IX		🗀
	ot include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
_	organizations in the United States. See Part IV, line 21	30,705	30,705		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors,	0	0		
3	trustees, and key employees	0	0	0	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	0	0	0	0
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	0	0	0	0
11	Fees for services (non-employees):				
а	Management	0	0	0	0
b	Legal	0	0	0	0
C	Accounting	0	0	0	0
đ	Lobbying	0			0
e f	Investment management fees	0	0	0	0
g	Other	0	0	0	0
12	Advertising and promotion	0	0	0	0
13	Office expenses	0	0	0	0
14	Information technology	0	0	0	0
15	Royalties	0	0	0	0
16	Occupancy	0	0	0	0
17	Travel	314	314	0	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	o
19	Conferences, conventions, and meetings .	128,280	128,280	0	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	0	0	0	0
23	Insurance	0	0	0	0
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.)				
а	District Administration & Expense Reimb	114,934	114,934	0	0
b	District Activities & Meetings	31,607	31,607	0	0
c	District Committees/Youth Exchg Support	35,032	35,032	0	0
d	District P/R and Communications	7,293	7,293	0	0
е	All other expenses	0	9	9	9
25	Total functional expenses. Add lines 1 through 24e	348,165	348,165	0	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 If following SOP 98-2 (ASC 958-720)				

•	90 (20 't X	Balance Sheet			Page 11
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	61,132	1	43,236
	2	Savings and temporary cash investments	171,923	2	176,831
	3	Pledges and grants receivable, net	0	3	(
- 1		Accounts receivable, net	0	4	(
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	(
S	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)	0	6	O
Assets	7	Notes and loans receivable, net	0	7	0
&		Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	28,808	9	10,200
1	10a	Land, buildings, and equipment: cost or			
ļ		other basis. Complete Part VI of Schedule D 10a 0			
	b	Less: accumulated depreciation 10b 0	0	10c	0
1	11	Investments—publicly traded securities	0	11	0
1	12	Investments—other securities. See Part IV, line 11	0	12	0
] 1	13	Investments—program-related. See Part IV, line 11	0	13	0
1	14	Intangible assets	0	14	0
1	15	Other assets. See Part IV, line 11	0	15	0
1	16	Total assets. Add lines 1 through 15 (must equal line 34)	261,863	16	230,267
1	17	Accounts payable and accrued expenses	0	17	0
1	18	Grants payable	0	18	0
1	19	Deferred revenue	0	19	0
2	20	Tax-exempt bond liabilities	0	20	0
2	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0	21	0
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
<u> </u>	23	Secured mortgages and notes payable to unrelated third parties	0	23	
_ •	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X	0		0
		of Schedule D		25	
- 2	26	Total liabilities. Add lines 17 through 25	0	26	0
Ces		lines 27 through 29, and lines 33 and 34.			
<u> </u>	27	Unrestricted net assets	181,925		157,644
88 2	28	Temporarily restricted net assets	79,938		72,623
Net Assets or Fund Balances	29	Permanently restricted net assets	0	29	0
8 3	30	Capital stock or trust principal, or current funds	o	30	0
8 S	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
S S	32	Retained earnings, endowment, accumulated income, or other funds .	0	32	0
ĕ ĕ	33	Total net assets or fund balances	261,863	_	230,267
	34	Total liabilities and net assets/fund balances	261,863		230,267

Form 99	90 (2011)			Pa	ige 12
Pari	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		· · ·	<u></u>	
_	T. 1. 1	اما			c 560
1	Total revenue (must equal Part VIII, column (A), line 12)	1			6,569
2	Total expenses (must equal Part IX, column (A), line 25)	2			8,165
3	Revenue less expenses. Subtract line 2 from line 1	3		`- -	1,596)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		26	1,863
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0
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		23	0,267
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	<u> </u>	<u> </u>		
				Yes	No
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," ex	plain in			1
	Schedule O.				Ì
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓
b	Were the organization's financial statements audited by an independent accountant?		2b		1
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o	versight			
	of the audit, review, or compilation of its financial statements and selection of an independent account	untant?	2c		j
	If the organization changed either its oversight process or selection process during the tax year, ex	kplain in			
	Schedule O.		1		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year	ear were]	
_	issued on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		1		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in	1	1	
Od.	the Single Audit Act and OMB Circular A-133?		3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	erao the	30	 	
b	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
	. oquilor accidi, orphani miy mi ocidente o and accidente and accidente			- 000	/2011\

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.
 See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.

Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A

	1 / 1	" to Form 990, Part IV, line 5 (Proxy '		• • •	·
	organization answered - res ection 501(c)(4), (5), or (6) orga		iax) or Form 990-E	Z, Part V, line 350 (Proxy 18	ix), men
Name	of organization	ilizations. Complete Part III.		Employer ider	ntification number
	RY INTERNATIONAL DISTR	ICT 5020			35-2361984
Part	I-A Complete if the	e organization is exempt und	er section 501(c) or is a section 527 of	organization.
1		the organization's direct and indire			
2	Political expenditures .			▶ \$	
3	Volunteer hours				
Part	****	e organization is exempt und			
1		excise tax incurred by the organization)
2		excise tax incurred by organization			·
3	_	ed a section 4955 tax, did it file Fo			Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part	ार. e organization is exempt und	er section 501/	c) except section 501	(c)(3)
1 1	Enter the amount direct	ly expended by the filing organization	ration for section	527 exempt function	(0)(0).
•	activities			▶ \$	
2	Enter the amount of the	filing organization's funds contrib			
		vities			
3	Total exempt function e	expenditures. Add lines 1 and 2	. Enter here and	on Form 1120-POL,	
	line 17b			▶ \$	
4	Did the filing organization	n file Form 1120-POL for this year	?		Yes No
5	Enter the names, address	ses and employer identification nu	mber (EIN) of all s	ection 527 political organi	zations to which the filing
	organization made payme	ents. For each organization listed,	enter the amount	paid from the filing organ	ization's funds. Also enter
	the amount of political co	ontributions received that were pro	mptly and directly	delivered to a separate p	political organization, such
	as a separate segregated	fund or a political action committ	ee (PAC). If addition	nai space is needed, prov	Toe information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
				,	delivered to a separate
					political organization If none, enter -0-
				<u> </u>	
(1)			•		
(2)					
(3)					
(5)					
(4)			_		
			<u> </u>		
(5)		ļ	-[
					<u> </u>
(6)			-		

Part	(election under section 501(c)(3) and has NOT (election under section 501(c)(3) and has NOT (iled	Forn	n 5768		
		(a	a)	T .	(b)	
	ch "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description lobbying activity.	Yes	No	† · · · · ·	nount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of:					
a	Volunteers?		ļ	-		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?		ļ	1		
C	Media advertisements?	-		 	—	
d e	Publications, or published or broadcast statements?		 -	 		
f	Grants to other organizations for lobbying purposes?			 		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			<u> </u>		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
i	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912		_	1		
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
_ d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part)(5), c	or se	ection		
	501(c)(6).				т	
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	✓	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	✓	
3 Part	Did the organization agree to carry over lobbying and political expenditures from the prior year? . III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)			3		<u> </u>
rait	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" O				ne 3,	, is
	answered "Yes."					
1	Dues, assessments and similar amounts from members	•	1	ļ		,
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts	of				
	political expenses for which the section 527(f) tax was paid).		_			
a	Current year	•	2a	 		
ь	Carryover from last year		2b	<u> </u>		
С	Total		2c	ļ <u>.</u>		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3_	<u> </u>		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of		İ	ĺ		
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobble and political expenditure next year?	yirig		Į.		
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5	 		
Pari		•		.L		
	lete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5;	Part I	I-A: a	nd Part	II-B. li	ine
	o, complete this part for any additional information.					
		 -				
						

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ROTARY INTERNATIONAL DISTRICT 5020

Employer identification number 35-2361984

	Form 990, Part IV, line	140.				
1	For grantmakers. Does the assistance, the grantees' eligrants or assistance?					
2	For grantmakers. Describe assistance outside the Unite		the organization	on's procedures for monit	oring the use of its grant	s and other
3	Activities per Region. (The fo	ollowing Part	I, line 3 table o	an be duplicated if addition	nal space is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	VICTORIA, B.C., CANADA	0	0	PROGRAM SERVICES	LEADERSHIP TRAINING	32,062
(2)	VICTORIA, B.C., CANADA	0	0	PROGRAM SERVICES	DISTRICT CONFERENCE	96,218
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)	-					
(12)						
(13)	·					
(14)						
(15)		ļ				
(16)						
(17)						
За	Sub-total					128,280
b	Total from continuation sheets to Part I					0
С	Totals (add lines 3a and 3b)					128,280

Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	☐ Yes	✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	☐ Yes	☑ No

SCHEDULE 1 (Form 990)

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

OMB No. 1545-0047 00

			, alla lilalvia		its, and mulyiduals in the United States	ı.	<u> </u>
Department of the Treasury		Complete if the orga	nization answered	"Yes" to Form 990,	organization answered "Yes" to Form 990, Part IV, line 21 or 22.		Open to Public
Internal Revenue Service			► Attach to	► Attach to Form 990.			Inspection
Name of the organization		١ ١				Emplo	Employer identification number
Ĺ	ROTARY INTERNATIONAL DISTRICT	DISTRICT 5020	(35-2361984
Part General Inform	General Information on Grants and Assistance	d Assistance					
1 Does the organization	maintain records to su	bstantiate the amou	unt of the grants or	assistance, the g	rantees' eligibility fo	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	
2 Describe in Part IV the	the selection criteria used to award the grants of assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	s or assistance? ures for monitoring	the use of grant fu	betin I ett in spr	States		· · · Yes
Part II Grants and Of	Grants and Other Assistance to Governments	Overnments and	Organizations	in the United St	otates.	and Ornanizations in the United States. Complete if the executation and and and accompany	() () () () () () () ()
	art IV, line 21, for any	recipient that rec	seived more than	\$5,000. Check	this box if no one	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.	vered "Yes" re than \$5.000.
Part II can be o	Part II can be duplicated if additional space is needed	Il space is needec		•			A
1 (a) Name and address of organization or government	zation (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,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Kingston-No Kitsap Rotary, Kingston,	ap20-2960627		\$7,000		(1)		Drop-In Center for
(2)							
(6)							
(0)							
(4)							
(5)							
				•			
(9)							
<u>(a)</u>							
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of s	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	Vernment organizat	ions listed in the li	ne 1 table			1
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	lotice, see the Instruction	ns for Form 990.		Cal	Cat. No. 50055P		Schedule I (Form 990) (2011)

Schedule I (Form 990) (2011)

Schedule I (Fc	Schedule I (Form 990) (2011)					Раде
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.	ividuals in the U	inited States. Com	plete if the organiza	ition answered "Yes" to	Form 990, Part IV, line 22.
	(a) Type of grant or assistance		(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
-						
2						
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7						
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	e this part to prov	vide the information	n required in Part I,	line 2, and any other add	litional information.
Th	This is the final grant from the Gat	e.Gates.Foun	dation of Gra	nt of \$110,000	es Foundation of Grant of \$110,000 received in November, 2010.	ber, 2010.
The	The Kingston-North Kitsap Rotary Club matched this \$7,000, and along with other service organizations	y Club match	ed this \$7,00	0, and along w	ith other service	organizations
Ö	opened "Coffee OasisWhere the Cold	. Cold Street	Streets Meet a Warm Welcom"	Welcom" a	a gathering place that provides	at provides
ď	positive.and.safe.activities.for.hom	or homeless youth.	outh.			
∀	-A.Grant-Approval.Committee.reviewed	dde-and-abb	and.approved.this.application.	plication.		
	11	1	4			

Schedule I (Form 990) (2011)

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 Open to Public Inspection

Name of the organization

ROTARY INTERNATIONAL DISTRICT 5020

Employer identification number 35-2361984

Part VI, Section A, Line 7a:

The District Governor makes appointments for Area Assistant Governors and for all Committee Chairs.

Part VI, Section A, Line 9:

Names and addresses of officers:

David Stocks

3129 Flannagan Place

District Governor

Victoria, BC V9B 5K6

Canada

Judy Byron

522 Nootka Road

District Governor Elect

North Saanich, BC V8L 5K5

Canada

Pete Taylor

6002 Bayview Drive NE

District Governor Nominee

Tacoma, WA 98422

Gary Glein

3515 Harborview Drive, #1

Chair, District Finance Committee Gig Harbor, WA 98332

Part VI, Section B, Lines 11 a,b:

The completed form was e-mailed on February 10 to all of the above-noted officers for their review and approval.

Part VI, Section C, Line 19:

At the present time, no process has been established to make the governing documents and Forms 990 available to the public.