

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

OMB No 1545-0047 20**1**1

benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Open to Public Inspection

Department of the Treasury Internal Revenue Service July 1 2011, and ending 20 12 For the 2011 calendar year, or tax year beginning C Name of organization Rotary International District 5950. Inc. D Employer identification number Check if applicable 41-6031318 Doing Business As Address change E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite П Name change 763.553.1604 11251 Red Fox Drive Initial return City or town, state or country, and ZIP + 4 Terminated Maple Grove, MN 55369-6328 G Gross receipts \$ П Amended return H(a) Is this a group return for affiliates? Yes No F Name and address of principal officer Application pending **Chuck Berg, District Governor** If "No," attach a list (see instructions) 501(c)(3) Tax-exempt status www.rotary5950.org H(c) Group exemption number ▶ Website: ▶ Form of organization 🗸 Corporation 🗌 Trust M State of legal domicile Association ☐ Other ▶ L Year of formation Part I Summary Briefly describe the organization's mission or most significant activities: The organizations primary mission is to support the activities of the Rotary Clubs within the District by providing leadership training program materials, and hosting meetings and Activities & Governance conferences. The district also administers grants for local and international projects sponsored by clubs in the District and partially funded by The Rotary Foundation. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 Number of voting members of the governing body (Part VI, line 1a) . . . 3 8 4 8 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 1 Total number of volunteers (estimate if necessary) 6 62 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 7a Net unrelated business taxable income from Form 990-T, line 34 7b 0 Current Year Contributions and grants (Part VIII, line 1h). 189.665 8 187,378 Revenue Program service revenue (Part VIII, line 2g) 124,116 9 98,937 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 801 10 356 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 11 0 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 314,582 12 286,671 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 13 132.711 93,490 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 68,360 69.870 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 0 Total fundraising expenses (Part IX, column (D), line 25) のなるでは、 b Other expenses (Part IX, column (A), lines 1 ta 1 (10-11) -24e) 17 91.908 102,577 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 292,979 265,937 18 19 Revenue less expenses. Subtract line 18 from line 12 21,603 20.734 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 221,364 240,922 21 Total liabilities (Part X, line 26) 38,177 37,001 Net assets or fund balances. Subtract line 22 183,187 203,921 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 Sign Here Type or print name and title Print/Type preparer's name Preparer's signature Date Paid Check | If self-employed Preparer Firm's name Firm's FIN ▶ **Use Only** Firm's address_ Phone no 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

Cat No 11282Y

orm 99	0 (2011) Page 2
Part l	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: The organizations primary mission is to support the activities of the Rotary Clubs within the District(64 clubs) by providing leadership training program materials, and hosting meetings and conferences. The district also administers grants for local and international projects sponsored by clubs in the District and partially funded by the Rotary Foundation.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O. 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.
4 a	(Code:) (Expenses \$ 66,246 including grants of \$ 66,246) (Revenue \$ 64,910) District Simplified GrantsEach year The Rotary Foundation allocates each Rotary District a portion of previously donated funds from district members. These funds can be applied for by District Members (Rotary Clubs) to be used for a wide range of humanitarian, educational and public good projects.
4b	(Code:) (Expenses \$
7.0	Fast-for-HopeEach year clubs ask their members to forego one meal and contribute the proceeds to a fund titled "Fast for Hope". Rotary Clubs in the District can then apply for these funds for the purpose of doing small Neighborhood Community Service Projects.
4c	(Code:) (Expenses \$ 18,441 including grants of \$ 18,441) (Revenue \$ 18,441) Warm Hands, Heads & Heartslach year Rotary Clubs in the District are ask to contribute funds to purchase stocking hots and knitted gloves. These hat and gloves are then distributed to the Clubs to be distributed to local schools for distribution to needy children in the school.
4d	Other program services (Describe in Schedule O.)
4e	(Expenses \$ 57,353 including grants of \$ 0) (Revenue \$) Total program service expenses ▶ 150,844

a <u>r</u> t	Checklist of Required Schedules		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	163	-NO
_	complete Schedule A	2		<u> </u>
2 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		<u>▼</u>
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		
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		✓
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		✓
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		✓_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
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, VIII, IX, or X as applicable.			
	complete Schedule D, Part VI	11a		1
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		✓
	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
	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
	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		√ √
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		√
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		✓
14 a		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		√
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	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	l	<u></u>

Part	V Checklist of Required Schedules (continued)			
			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		✓
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		✓
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		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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	25a		✓
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		✓
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		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		√
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
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		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M ,	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
22	complete Schedule N, Part II	32		✓
33	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	\	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			1
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		✓
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	
		Eor	~ aan	(2011)

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V	<u> </u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1h 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 Did the organization comply with backup withholding rules for reportable payments to vendors and			
С	reportable gaming (gambling) winnings to prize winners?	1c	/	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		Ė	
Lu	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	$\overline{}$	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u> </u>
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			1
_	account)?	4a	المستقد	✓
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.			
5 0	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	! <u>.</u>	√
5a b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		7
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			l
	gifts were not tax deductible?	6b		
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 and services provided to the payor?	7a		√
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		
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
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		/
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		\vdash
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoning			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
þ	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	-		
11	Section 501(c)(12) organizations. Enter:		:	(i
''a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	46		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
ь	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
D	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		√
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		
		Forr	n 990	(2011)

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 th	rough 7b belov	i, and	for a	"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change				
	Check if Schedule O contains a response to any question in this Part VI	<u> </u>	<u> </u>		
Secti	on A. Governing Body and Management			Yes	No
4	Enter the number of voting members of the governing body at the end of the tax year	1a	8	103	
1a	If there are material differences in voting rights among members of the governing body, or	ıa			
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent .	1b	8		,
2	Did any officer, director, trustee, or key employee have a family relationship or a business	elationship with			
	any other officer, director, trustee, or key employee?		2		✓_
3	Did the organization delegate control over management duties customarily performed by or				,
4	supervision of officers, directors, or trustees, or key employees to a management company or other Did the organization make any significant changes to its governing documents since the prior Form 99		3		<u>/</u>
4 5	Did the organization become aware during the year of a significant diversion of the organization		5		1
6	Did the organization have members or stockholders?		6	1	'
7a	Did the organization have members, stockholders, or other persons who had the power to		:		
	one or more members of the governing body?		7a	✓	
b	Are any governance decisions of the organization reserved to (or subject to approva		, [1	
	stockholders, or persons other than the governing body?		7b		
8	Did the organization contemporaneously document the meetings held or written actions un	dertaken during			7
	the year by the following:		0-		
a	The governing body?		8a 8b	V	
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be the section of the governing sody?			_	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		9		1
Secti	on B. Policies (This Section B requests information about policies not required by th	e Internal Reve	nue C	ode.)	<u> </u>
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	1	
b	If "Yes," did the organization have written policies and procedures governing the activities o	•			
110	affiliates, and branches to ensure their operations are consistent with the organization's exeme Has the organization provided a complete copy of this Form 990 to all members of its governing body before		10b	-	
11a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		11a		
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	e rise to conflicts?		Ė	1
С	Did the organization regularly and consistently monitor and enforce compliance with the	policy? If "Yes,"	,		
	describe in Schedule O how this was done		12c		/
13	Did the organization have a written whistleblower policy?		13 14	<u> </u>	/
14 15	Did the process for determining compensation of the following persons include a review a				V
	independent persons, comparability data, and contemporaneous substantiation of the deliberation				
а	The organization's CEO, Executive Director, or top management official		15a		√
b	Other officers or key employees of the organization		15b		✓
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similarly with a taxable entity during the year?				
h	If "Yes," did the organization follow a written policy or procedure requiring the organization		16a		✓
b	participation in joint venture arrangements under applicable federal tax law, and take steps				
	organization's exempt status with respect to such arrangements?		16b		
Secti	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ► Minnesota				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	ınd 990-T (Secti	on 501((c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.				
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization made its governing doci	imente conflict	of inte	root -	odio.
13	and financial statements available to the public during the tax year.	amento, connict	or litter	cot þ	oncy,
20	State the name, physical address, and telephone number of the person who possesses the b	ooks and record	ls of the	•	
	organization: ▶ Diane Confer, 11251 Red Fox Drive, Maple Grove, MN 55369 (763) 553-1604				

Form	ggn	(2011)	

Page **7**

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 no	r any relate	d org	anız	atio	n c	ompe	nsa	ted any currer	t officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week	box,	unles	Pos neck ss pe d a d	rson	e than o is both or/trust	an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) 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) Chuck Berg, District Governor	25	1		1				0	0	0
(2) Larry Zilliox, Past DG	2	1		✓				0	0	0
(3) Sandra Schley, Past DG	2	1		1				0	0	0
(4) Bob Stowell, DG Elect	10	1		1				0	0	0
(5) Dìann Kirby, DG Nominee	2	1		1				0	0	0
(6) Jim Nelson, DG Nominee, Nominee	2	1		1				0	0	0
(7) Lee Ashfeld, CFO	10	1		1				0	0	0
(8) San Asato, Corporate Secretary	2	1		/				0	O	0
(9)	-			-		İ				
(10)										
(11)	-									
(12)										
(13)		_				_	-			
(14)										

Part	VII Section A. Officers, Directors, Trust (A) Name and title	(B) Average hours per week	(do n box, t office	ot ch	Pos neck is pe d a d	c) ition more rson	than o	one an ee)	(D) Reportable compensation from	(E) Reportable compensation related	,	(F) 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)	organization (W-2/1099-MI		compensation from the organization and related organizations
(15)		_										
(16)			-							,		
(17)				 i								
(18)			···-									
(19)												
(20)						_						
(21)												
(22)												
											+	
					_	_						
(25)											\dashv	
C	Sub-total	VII, Section		<u>.</u>				>	0		0	O
<u>d</u> 2	Total (add lines 1b and 1c)	t not limited	to th					e) w	/ho received m		0 0,000	0 0 of
3	Did the organization list any former of employee on line 1a? If "Yes," complete	fficer, direc	tor, c					emp	oloyee, or high	nest comper	sate	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual					? /		s, "				е Помер
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or indi		
Section	on B. Independent Contractors								•			
1	Complete this table for your five highest compensation from the organization. Rej year.											
	(A) Name and business add	dress							(B) Description of s	services		(C) Compensation
N/A		_										
								\vdash				
2	Total number of independent contractor received more than \$100,000 of compen							o ti	nose 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
ts ts	1a	Federated campaigns 1a				
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues 1b 139,87	2			
	С	Fundraising events 1c				
	d	Related organizations 1d 47,50	6			
S, E	e	Government grants (contributions) 1e				
ion	f	All other contributions, gifts, grants,				
the Et		and similar amounts not included above 1f				
d di	g	Noncash contributions included in lines 1a-1f \$	7			
a Co	h	Total. Add lines 1a–1f	187,378			
		Business Code				
ven	2a	The Rotary Foundation	64,910			
8	b	Fast for Hope	15,586			
vice.	С	Warm Heads, Hands & Hearts	18,441			
Ser	d					
틆	е					
Program Service Revenue	f	All other program service revenue .				
<u>~</u> _	g	Total. Add lines 2a–2f	98,937	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
	3	Investment income (including dividends, interest,				
	_	and other similar amounts)	356			
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties		,		
	6-		-			
	6a b		-			
	C	Less' rental expenses Rental income or (loss)	-			
	d	Net rental income or (loss)				
	7a	Gross amount from sales of (i) Securities (ii) Other	 			
		assets other than inventory	1			
	ь	Less cost or other basis	-			
		and sales expenses .				
	С	Gain or (loss)				
	d	Net gain or (loss)				
•						
Revenue	8a	Gross income from fundraising	ŀ			
¥e		events (not including \$				1
		of contributions reported on line 1c).			1	
Other	١.	See Part IV, line 18 a	4			- [
δ	b	Less: direct expenses b	ļ			
	C	Net income or (loss) from fundraising events . Gross income from gaming activities.		<u> </u>	<u> </u>	
	34	See Part IV, line 19 a				1
	ь	Less: direct expenses b	╡			
	c	Net income or (loss) from gaming activities	 	ļ		
	-	Gross sales of inventory, less				
		returns and allowances a				
	b	Less: cost of goods sold b	1	1		
	С	Net income or (loss) from sales of inventory ▶				
		Miscellaneous Revenue Business Code				
	11a					
	b					
	С					
	d	All other revenue				
	е	Total. Add lines 11a–11d ▶				
	12	Total revenue. See instructions ▶	286,671			

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				
	t include amounts reported on lines 6b, 7b, , 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	93,490	93,490		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				<u> </u>
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 8	Other salaries and wages	47,834 8,650	23,917 4,325	23,917 4,325	
9	Other employee benefits	9,480	4,740	4,740	
10	Payroll taxes	3,906	1,953	1,953	
11	Fees for services (non-employees):				
а	Management		•		
b	Legal				
C	Accounting	13	6	7	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	11,473	7,587		3,887
13	Office expenses	10,229	5,115	5,114	
14	Information technology	4,421	4,421		
15	Royalties	6,300	2 150	2 150	
16 17	Occupancy	11,506	3,150 3,069	3,150 8.437	
18	Travel	11,300	3,009	0,437	
19	Conferences, conventions, and meetings .	36,927	36,927		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance	1,282	641	641	
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	Youth Exchange Services	20,426	20,426		
b	***************************************				_
c					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	265,937	209,767	52,283	3,887
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 following SOP 98-2 (ASC 958-720)				

	990 (20 rt X	Balance Sheet			
			(A)		(B)
_			Beginning of year		End of year
	1	Cash—non-interest-bearing	,	1	
	2	Savings and temporary cash investments	205,841	_2	192,185
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	14,523	4	48,562
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	LO LANGE TO MAKE	5	s
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)		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	1,000	9	175
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b		10c	
-	11	Investments—publicly traded securities		11	
-	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	Total assets. Add lines 1 through 15 (must equal line 34)	221,364	16	240,922
	17	Accounts payable and accrued expenses	38,177	17	37,001
-	18	Grants payable		18	
•	19	Deferred revenue		19	
2	20	Tax-exempt bond liabilities		20	
2	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
؛ ا ٿ	23	Secured mortgages and notes payable to unrelated third parties		23	
- 1	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	Total liabilities. Add lines 17 through 25	38,177	26	37,001
ces		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets		27	
Ba	28	Temporarily restricted net assets		28	
밑	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ► ✓ and complete lines 30 through 34.			
ts :	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-ın or capital surplus, or land, building, or equipment fund		31	
Ž :	32	Retained earnings, endowment, accumulated income, or other funds .		32	
§	33	Total net assets or fund balances	183,187	33	203,921
1:	34	Total liabilities and net assets/fund balances	221,364	34	240,922

Form 99	90 (2011)			Pa	age 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		<u></u>	<u>-:</u>	
	Tatal variables (result agree) Doct VIII. column (A) line 10)	1		28	6,671
1	Total revenue (must equal Part VIII, column (A), line 12)	2	·		5,937
2 3	Revenue less expenses. Subtract line 2 from line 1	3			0,734
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			3,187
5	Other changes in net assets or fund balances (explain in Schedule O)	5			5,107
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
0	column (B))	6		20	3,921
Part	XII Financial Statements and Reporting	, - ,			
	Check if Schedule O contains a response to any question in this Part XII				
_				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain in			
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
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for of the audit, review, or compilation of its financial statements and selection of an independent accounts.		2c		
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	oplain in			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the yearsued on a separate basis, consolidated basis, or both:	ar were			
	☐ 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 the Single Audit Act and OMB Circular A-133?	forth in	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
			Forn	990	(2011)

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047 Open to Public Inspection 201

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

▶ Attach to Form 990.

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Describe in Part IV the organization of grants and Organizations are described in Part II can be duplicated it additional space is needed organization and part IV line 21, for any recipient trate received more than \$5,000. Check this box if no one recipient received more than \$6,000. Check this box if no one recipient received more than \$6,000. Check this box if no one recipient received more than \$6,000. Check this box if no one recipient received more in the part II can be duplicated if additional space is needed in the intervent of the procedure of the procedure in the part II can be duplicated if additional space is needed in the intervent of the procedure in the part II can be duplicated if additional space is needed in the intervent of the procedure in the section of the procedure in the part II can be duplicated if additional space is needed in the intervent of the procedure in the part II can be duplicated if additional space is needed in the intervent of the procedure in the part II can be duplicated if additional space is needed in the intervent of the procedure in the part II can be duplicated in the intervent part in the part II can be duplicated in the part II can be duplicated in the intervent of the part in the part II can be duplicated in the part I table in the part II can be duplicated in the part I table in the part I table in the part II table in the part	and One sections to the section of t							A1.6031318
Does the organization maintain records to substitute the amount of the grants or assistance, the grants or displainty for the grants or assistance and the selection chemical and to award the grants or assistance? Describe in Part Vit be organization's procedures for monitoring the selection of the united States. Describe in Part Vit be organization's procedures for monitoring the use of grant funds in the United States. Complete if the organization answere to Form 990, Part II can be duplicated if additional space is needed organizations in the United States. Complete if the organization answere to Fart II can be duplicated if additional space is needed organizations in the United States. Complete if the organization answere to grant and Organizations is needed organizations in the United States. Complete if the organization answere to grant and Orland and Orland Space is needed organizations in the United States. Complete if the organization answere to grant and Orland Orland Anders of Orland Orland Orland Orland Anders of Orland Orla	Port Conoral Information	on Grante and	Assistance			:		
Does the organization rand the gants or assistance, and the selection criteria used to award the gants or assistance, and the selection criteria used to award the gants or assistance. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Completed if the organization is procedures for monitoring the use of grant funds in the United States. Completed if the organization is needed to Fowerments and Organizations in the United States. Tall Grants and Other Assistance to Governments and Organizations in the United States. The Completed if additional space is needed to form the capital of the complete of th	Zelte General Information	on Grants and	Assistance					-
Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Tell Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answers 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 \$	 Does the organization mainta the selection criteria used to 	ain records to sub: award the grants	stantiate the amou or assistance?	nt of the grants or	assistance, the g	rantees' eligibility for	or the grants or assistan	
Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answere to Foreign that received more than \$5,000. Check this box if no one recipient that received more than \$5,000. Check this box if no one recipient that received more than \$5,000. Check this box if no one recipient ecewed more than \$5,000. Check this box if no one recipient ecewed more than the application is packed. (a) Name and address of organization in [b) EIN		nization's procedur	es for monitoring t	he use of grant fu	nds in the United	States,		l
Part I can be duplicated if additional space is needed (a) Name and address of organization (b) Rare and address of organization (c) Fic section (d) Amount of cash assistance (e) Amount of cash assistance (e) Amount of cash assistance (e) Amount of cash assistance (f) Amount of cash assistance (g) Am		ssistance to Go	vernments and	Organizations i	n the United St	tates. Complete	f the organization and	swered "Yes"
Particular Par	Part II can be duplica:	ille 21, 101 ally 1 sted if additional	space is needed					
Enter total number of other organizations listed in the line 1 table	(a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable		(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
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	(1)							
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	(2)							
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	(3)							
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	(4)							
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	(9)							
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table								
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	(I)							
Enter total number of other organizations listed in the line 1 table	(8)							
Enter total number of other organizations listed in the line 1 table	(6)							
Enter total number of other organizations listed in the line 1 table	(10)							
Enter total number of other organizations listed in the line 1 table	(11)							
nizations listed in the line 1 table	(12)							
		n 501(c)(3) and govorganizations listed	vernment organization the line 1 table	ions listed in the l	ine 1 table			A 29
For Danarwork Boduction Act Notice see the Instructions for Form 990	For Panerwork Beduction Act Notice	see the Instruction	e for Form 990			at No 50055P		Schedule 1 (Form 990) (2011)

Page 2	(2011)
	Schedule I (Form 990) (2011)
Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, Ine 22. Part III can be duplicated if additional space is needed. Incomplete the property of the property	Schedule I
Scorption Commun.	
(f) Di ditional ditional s. Any fe	
Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, I Caribe duplicated if additional space is needed. Part III can be duplicated if additional space is needed. Part III can be duplicated if additional space is needed. Part III can be duplicated if additional space is needed. Part III can be duplicated if additional book. Part III can be duplicated in the morphole in the information required in Part I, line 2, and any other additional information. Part III can be duplicated in the success and use of funds. Any funds not used in other duplication of the project as to the success and use of funds. Any funds not used in other duplication of the project as to the success and use of funds. Any funds not used in other duplication of the project as to the success and use of funds. Any funds not used in other duplication of the project as the success and use of funds. Any funds not used in other duplication of the project as the prior grant requirements have been met.	
vered " of valuation opraisal, o d any o d any o s and us.	
ion answered "Yes" to fell Method of valuation (book, FMV, appraisal, other) The two types of grants. e success and use of fun	
anizatic de le	
ete if the organ (d) Amount of non-cash assistance equired in Part ach grant authori of the project as	
plete if	
S. Completic for met.	
d States. (e) Amount of cash grant the Informate procedu. It on the control ave been measure bee	
s in the United States. C s needed. where of cash grant cash grant cash grant art to provide the informe or compliance and procedure requirements have been met.	
s in the University of complian	
riduals in the pace is need (b) Number of recipients to this part to clubs for con rigrant requirer grant requirer.	
tional stripplete	
ion. Co	
sistance sistance format wen to in wen to in awarde	
be dup	
Grants and Other Assistance to Individuals Part III can be duplicated if additional space i (a) Type of grant or assistance (b) Numerory Supplemental Information. Complete this p monitors all grants given to individual Rotary Clubs f orhood Community Service) grants. Each grant recigion future grants are awarded unless the prior grant	
Sup ict moni	
Part III Gane say (2011) Part III Canne say (2011) Part III Canne say (2011) Part III Canne say (2011) Part III Canne be duplicated if additional space is needed. Part III can be duplicated if additional space is needed. Part III can be duplicated if additional space is needed. Part III can be duplicated if additional space is needed. Part III can be duplicated if additional space is needed. Part III can be duplicated if additional space is needed. Part III can be duplicated in the capacity of the ca	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Employer identification number

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

Open to Public Inspection

Rotary International District 5950, Inc.	41-6031318	
Part III Statement of Program Service Accomplishments (continued)		
Youth Exchange Services\$20,426A program where American Youth and Foreign Youth can visit each	ch others country and study the	
others culture. Conferences, conventions and meetings for training and educational purposes through	nout the Rotary year\$36,927	
Part VIThe annual filing of the IRS Form 990 is completed by the Organization CFO and reviewed by	at least 2 other District Officers	
prior to submission to the IRS. Subsequently, The District has specific corporate policies and procedu	ıres governing	
control procedures for disbursements and reimbursements. The District has an annual conference wh	erein the annual business meeting is	
conducted. Each member club is asked to send delegate(s) appointed by the club president to vote or	such business matters as election of	
Governing Board and District Officers, approval of financial reports and budget for the following year. There may be other new or old		
business discussed and/or voted on at this meeting. There are currently 64 member clubs in the organization and each member club has		
one or more votes depending on membership of the member club. The Articles of Incorporation and By-Laws were approved by Rotary		
International prior to filing with the Secretary of the State in Minnesota.		
Part VI Section C 19The organization makes its governing documents available to any member request at the annual conference. All		
governing documents must be pre-approved by Rotary International. All governing document including	g any conflict of interest policies	
and procedure must be consistent with the Rotary International Code of Policies.		
,		

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization	Employer identification number
	·
,	
	•
·	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

► See separate instructions. ▶ Attach to Form 990.

Open to Public 201

OMB No 1545-0047

Inspection

(g) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2011 ŝ Employer identification number (f) Direct controlling Identification of Related Tax-Exempt Organizations (Complete of 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.) Yes 41-6031318 (f)
Direct controlling
entity (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) (d) Total income Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) 501c4 (d) Exempt Code section 501c3 (c)
Legal domicile (state
or foreign country) Cat. No. 50135Y (c)
Legal domicile (state
or foreign country) (b) Primary activity IL, USA IL, USA (b) Primary activity **Philanthropy Philanthropy** For Paperwork Reduction Act Notice, see the Instructions for Form 990. (a) (a) Name, address, and EIN of disregarded entity (a) Name, address, and EIN of related organization Rotary International District 5950, Inc. (1) Rotary International 36-1707667 (2) The Rotary Foundation Name of the organization Parti Part II € ଷ Œ 9 <u>a</u> O 9 ල 4 9

Schedule R (Form 990) 2011

(h) Percentage ownership (k) Percentage ownership 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.) 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.) (9) Share of end-of-year assets (J) General or managing partner? ŝ Yes Code V—UBI amount in box 20 of Schedule K-1 (f) Share of total income (Form 1065) (e)
Type of entity
(C corp. S corp,
or trust) (h)
Disproportionate
allocations? ŝ Yes (g) Share of end-of-(d)
Direct controlling
entity (f) Share of total income Legal domicile (state or foreign country) (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) Primary activity (d)
| Direct controlling entity (c) Legal domicile (state or foreign country) (a)
Name, address, and EIN of related organization Primary activity (a) Name, address, and EIN related organization Part III Part IV Ξ 2 ල **₹** Œ 9 E 2 ල Œ (S) 9 Ε Ξ

Schedule R (Form 990) 2011

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) Schedule R (Form 990) 2011

Part V Transactio

					Yes	<u>e</u>
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?	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				E		>
b Gift, grant, or capital contribution to related organization(s)				9		>
c Gift, grant, or capital contribution from related organization(s)				2	>	
				7		>
loans or loan quarantees by related organization(s)		• •		- 4		
	•	•	•			
f Sale of assets to related organization(s)				≠		>
q Purchase of assets from related organization(s)	•			19		>
				₽		>
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).	(s)uc			<u>*</u>	>	
l Performance of services or membership or fundraising solicitations by related organization(s).	(s)u			<u>=</u>	>	
$m{m}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				Ę		>
n Shanng of paid employees with related organization(s)				=		>
				<u>우</u>] :		>
p reimbursement paid by related organization(s) for expenses				-	>	
q Other transfer of cash or property to 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.	st complete this lin	e, including covered	relationships and tran	saction th	reshol	ds.
(a) Name of other construction		(b) Transaction	(c)	(d) Method of determinate	(d)	Ç
Marine of Other Organization		type (a-r)		атоп	amount involved	ב ב
The Rotary Foundation (1)						
Rotary International (2)						
(3)						
(4)						
(5)						
(9)						
			Sche	Schedule R (Form 990) 2011	rm 990	2011

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

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.

(B) (J) (e) (D) (c) (q) (e)	(q)	(0)	(D)	(e)	E		Ξ	3		3
Name, address, and EIN of entry	Primary activity	(state or foreign	Predominant income (related, incolated excluded	Section 501(c)(3)	onare or total income	onare or end-of-year assets	allocations?	amount in box 20	managing partner?	ownership
		(f	from tax under	organizations?				(Form 1065)		
			section 512-514)	Yes No			Yes No		Yes No	
(1)	•									
(2)										
(6)								:		
(4)								•		:
(5)										
(9)										
(2)										
(8)										
(6)										
(10)										
(11)										
(12)										
(13)										
(14)	,									
(15)										
(16)										
								Sche	Schedule R (Form 990) 2011	m 990) 2011

Part VII	Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).
Rotary Inte	ernational District 5950 members make tax deductible gifts to The Rotary Foundation. The Rotary Foundation makes grants
available t	o District 5950 Clubs to promote and enhance humanitarian, philanthropic and charitable activities.
	·