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990

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black

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

lung benefit trust or private foundation)

OMB No 1545-0047 2011

Open to Public Inspection

Form **990** (2011)

01 , 2011, and ending Jun 30.2012 For the 2011 calendar year, or tax year beginning Jul Check if applicable C Name of organization Rotary Int'l District 7610 D Employer identification number Doing Business As 54-1434124 Address change Room/Suite Number and street (or P O box if mail is not delivered to street address) E Telephone number Name change P O Box 1609 703-257-8220 Initial return City or town, state or country, and ZIP + 4 G Gross receipts 200539 Terminated \$ FREDERICKSBURG VA 22402-1609 Amended return H(a) Is this a group return Application PDG Jon Allan F Name and address of principal officer for affiliates? pending 6417 Spring La BURKE VA 22015-H(b) Are all affiliates included? If "No", attach a list X 501(c)A) **∢** (insert no) 501(c)(3) Tax-exempt status 4947(a)(1) or Yes No (see instructions) Website: ▶ www.rotary7610.org H(C) Group exemption number X Association L Year of formation 1988 K Form of organization Corporation Trust M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities Rotary is an organization of business and professional persons Activities & Governance worldwide who provide humanitarian services and encourage high ethical standards 2 Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets 1 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) ... 1 Total number of individuals employed in calendar year 2011 (Part V. line 2a) . 5 6 100 Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VIII, column (C), line 12. 7a b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 132540. 136640. Contributions and grants (Part VIII, line 1h) Revenue 74881. 62084. Program service revenue (Part VIII, line 2g) ... 976. 1365. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 2297. 450. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 210694. 200539. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 38617 34400. Grants and similar amounts paid (Part IX, column (A), lines 1-3). Benefits paid to or for members (Part IX, column (A), line 4) 32460 33107. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses, (Part IX, column (D), line 25)▶ 136320. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) CEIVED

18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line-25) 136156. 207397. <u>20366</u>3. 3297. -3124. Revenue less expenses Subtract line 18 from line 12, Beginning of Current MNWDS Net Assets or Fund Balances 2012 **End of Year** 94932. 94269. 20 Total assets (Part X, line 16) 2241. 4702. 21 Total liabilities (Part X, line 26) OGDEN. UT. 22 Net assets or fund balances Subtract line 21 from line 20 92691. 89567. 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 prepare (other than officer) abased on all information of which preparer has any knowledge 11/10/2012 0 Sian Signature of officer Date 20 Here Jon Allań District Governor 2011-12 Type or print name and title Paid Print /Type preparer's name Preparer's signature Date Check | I If PTIN John F Weeks CP11/05/2012|self-employed P00716538 John F Weeks CPA Preparer **Use Only** Firm's name Firm's EIN▶ 134 Ruffed Grouse Ct Firm's address ▶ Phone no FRONT ROYAL VA 22630-2061 540-508-0267 May the IRS discuss this return with the preparer shown above? (See instructions) . . . Yes

For Paperwork Reduction Act Notice, see the separate instructions.

BCA

	1990 (2011) Rotary Int'l District 7610	54-1434124	Page 2
Pai	t III Statement of Program Service Accomplishments		•
	Check if Schedule O contains a response to any question in this Part III.		П
1	Briefly describe the organization's mission:		
	1 - development of acquantances as an opportunity f	or service 2 -	high
	ethical standards in business & professions 3- appl		
	of service 4 - advance international understanding		
		goodiii u pou	
2	Did the organization undertake any significant program services during the year which were not listed or		
_	the prior Form 990 or 990-EZ?		X No
		Yes	X No
_	If "Yes," describe these new services on Schedule O		ਰ
3	Did the organization cease conducting, or make significant changes in how it conducts, any program ser	rvices? 📙 Yes	X No
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program service		ses
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the an	nount of grants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a	(Code 900099) (Expenses \$ 88642. including grants of \$) (Revenue \$ 6	2084.
			
	Conferences, committee and training meetings held to	carry out the	
	objectives of Rotary International - Attendees are		
	officers, club members and district officers and co		
	eritoria, eras membera ana arberrae orritecta ana co	HERITECCE MEMBET	<u> </u>
			
4b	(Code 90099) (Expenses \$ 31542. Including grants of \$ 7500.) (Revenue \$	
	Various committee activities including Group Study	Exchanges, pub	lic
	relations, disaster relief, and high school scholar	ships in the a	reas
	music, public speaking, and writing of essays		
			 -
	24400		
4c	(Code 90099) (Expenses \$ 34400. including grants of \$ 34400.) (Revenue \$	
	Contributions from the Rotary Foundation to support	simplified gra	<u>ants</u>
	to clubs, within District 7610, and expenditures in	grants, not	
	exceeding 1,500 each to 42 individual clubs to supp	ort their loca	1
	and international community service projects		
			•
			
			
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$)(Revenue \$)	
4e	Total program service expenses ► 154584.		
		Form 99	0 (2011)

			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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	X	
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		Х
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	Х	
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	_	Χ
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		Χ
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
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		X
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		X
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	L _[· · · · · · · · · · · · · · · · · · ·	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	ا ـ ما	х	
ь	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more	11a	^	
	of its total assets reported in Dart V. time 400 If IIVan II assemblate Oaks dule D. Dart VIII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more	110		
-	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	-10		
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Χ	
f	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	11f	1	Χ
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			_
	Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statement 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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
þ	fundraising, business, investment, and program service activities outside the United States, or aggregate			
45	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			v
16	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II and IV	15		X
10	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, Part III and IV.	46		v
17	to individuals located outside the United States? If "Yes," complete Schedule F, Part III and IV	16		<u>X</u>
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	47	}	Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		
. •	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	-'3		
-	If "Yes," complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		$\frac{X}{X}$
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			000	

Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to any government or organization Χ 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 Χ United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's 23 current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," 23 Χ complete Schedule J 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 Х 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? . Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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 Χ 25a 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 Χ 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 X 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 Χ of any of these persons? If "Yes", complete Schedule L, Part III . 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) Χ a 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 Χ 28b c 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 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified Χ 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? Χ If "Yes," complete Schedule N, Part II 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning Χ of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 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 Х 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 Χ 19? Note. All Form 990 filers are required to complete Schedule O

	Check if Schedule O contains a response to any question in this Part V.	<u> </u>		···· <u> </u>
	5-4		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		i .	í I
	Enter the Hamber of Commerce 25 milested and milested 25 milested and 15 milested 25 miles	LI	·	L
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		v	
_	gaming (gambling) winnings to prize winners?	1c	X	í
	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 1			L
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	لــــا	'I	<u> </u>
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,		1	37
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>	- 1	X
	If "Yes," enter the name of the foreign country			
	See the instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts		i	
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	-	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		Х
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		X
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	·	
	Organizations that may receive deductible contributions under section 170(c).		1	I
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			<u> </u>
	and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	, ,	X
	If "Yes," indicate the number of Forms 8282 filed during the year		L	L
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required	? 7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		-
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	.	!	I
	organizations Did the supporting organization, or a donor advised fund maintained by a sponsoring organization,	Ĺ	الــــــا	<u> </u>
	have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.	ــــا		!
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	(` 1	,
	Section 501(c)(7) organizations. Enter.	1		
	Initiation fees and capital contributions included on Part VIII, line 12	, ,	į Į	i
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	: 1	i	
	Section 501(c)(12) organizations. Enter	!		
	Gross income from members or shareholders	!	į)
а (!		,
a (Gross income from other sources (Do not net amounts due or paid to other sources) l		L
a (against amounts due or received from them)		L	
a (b (2a :	against amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
a (b (2a \$ b	against amounts due or received from them) 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		<u></u>
a (b (2a \$ b 3 \$	against amounts due or received from them) 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 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a (b (2a \$ b 3 \$ a	against amounts due or received from them) 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 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	12a		
a (b (a 2a 5 b) 3	against amounts due or received from them) 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 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O			
a (b (2a ; b 3 ; a b	against amounts due or received from them) 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 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 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			
a (b (2a	against amounts due or received from them) 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 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 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 the organization is licensed to issue qualified health plans			
a (b (c l) a (against amounts due or received from them) 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 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 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			X

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response to any question in this Part VI. Section A. Governing Body and Management

3601	IOI A. Governing Body and management		-	
			Yes	No
та	Enter the number of voting members of the governing body at the end of the tax year	1	: {	
	If there are material differences in voting rights among members of the governing body, or if the governing		!]	1
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O		· .]	;
_	Enter the number of voting members included in line 1a, above, who are independent			·
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			ليا
_	any other officer, director, trustee, or key employee?	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct			3.7
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a				
	members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons	7b		X
	other than the governing body?	.	1	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:		البيا	
	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u>X</u>
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		L	لــــا
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Χ	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990		.,	
	Did the organization have a written conflict of interest policy? If "No", go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
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	-	<u>X</u>
13	Did the organization have a written whistleblower policy?	13	77	X
14	Did the organization have a written document retention and destruction policy?.	14	X	- 1
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?	الب		
	The organization's CEO, Executive Director, or top management official	15a		<u>X</u>
b	Other officers or key employees of the organization.	15b	ااسا	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		}	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	الـــا		<u></u>
_	with a taxable entity during the year?	16a	,,	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		;	1
	its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard	الــــا	الــــا	
	the organization's exempt status with respect to such arrangements?	16b		
	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
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			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest			
	policy, and financial statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	~ -	^ ^	200
	organization ▶District Exec 2403 Fall FREDERICKS VA 22402-1609 540	-37	U-0	300

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

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

X

- Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless
 of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000
 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers; key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee (C) Position (do not check more than one (A) (B) box, unless person is both an (D) (E) (F) Name and Title Average officer and a director/trustee) Reportable Reportable **Estimated** Officer amount of hours per Highest compensated employee compensation compensation Individual trustee or director Institutional trustee Key employee Former from from related other week compensation (describe the organizations hours for organization (W-2/1099-MISC) from the related (W-2/1099-MISC) organization organizations in and related Sch O) organizations (1)Jon Allan Governor 11-12 20 0 0 (2)Jim Gates 5 0 0 Secretary 11-2 (3)Dave Mercer Treasurer 11-2 8 0 0 (4)(5) (6) (7) (8) (9) (10)(11)(12)(13)(14)

(A) Name and title	(B) Average hours per week (describe hours for related organiza- tions in Sch (O)	(do no	Fot che	(C Posit ck m pers	ion nore	the box Highest compensated employee	one n an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related
(15)						ted				organizations
(16)						-				
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)									· · · · · · · · · · · · · · · · · · ·	
	·									
(24)	-									
(25)									,,,	
1b Sub-total	/II, Sectio			 			> > >	0 0 0	0 0 0	0 0 0
2 Total number of individuals (including but if from the organization ▶	not limited	to thos	e liste	ed at	ove	e) who	rec	eived more than \$10	0,000 of reportable	compensation
 3 Did the organization list any former officer employee on line 1a? If "Yes," complete S 4 For any individual listed on line 1a, is the s the organization and related organizations individual 5 Did any person listed on line 1a receive or 	chedule J sum of repo greater th accrue co	for suc ortable an \$15 mpens	h indivicomp 0,000 ation t	vidua ensa ? If ' from	al ation "Yes any	and of anothere.	othe	r compensation from te Schedule J for suc d organization or indi	ch 	Yes No 3 X 4 X
services rendered to the organization? If " Section B. Independent Contractors	Yes," comp	olete S	chedu	le J	for :	such p	erso	on	· · · · · · · · · · · · · · · · · · ·	5 X
1 Complete this table for your five highest co										
compensation from the organization Repo	ort compen	sation	tor the	e cal	lend	ar yea	r en	ding with or within the (B)	e organization's tax	year. (C)
Name and busines	s address							Description of s	services	Compensation
						_				
Total number of independent contractors (\$100,000 in compensation from the organ.)	_	out not	limite	d to	thos	se liste	d at	pove) who received n	nore than	
BCA			U	S990	\$\$ 8					Form 990 (2011)

Fair	. 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
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a					
e i	ь		89640.	'			
Ĕ,	C	Fundraising events 1c					
i i	<u>ر</u>		41900.		i		
 G ; E	ď	Covernment greats	41900.	{			
Sir	e	(contributions) 1e		į			
iž ē	f	All other contributions, gifts, grants, and similar amounts					ŀ
5 달	_	not included above	5100.				
g b	9	included in lines 1a-1f\$					
ਹ ਫ਼	h	Total. Add lines 1a-1f	▶	136640.			
			Business Code				
ė	2a	District Conference	900099	41347.	41347.		
Ž	Ь-	Foundation Seminar	900099	5730.	5730.		
Se	c -	Leadership Conferenc	900099	4243.	4243.		
E P	l	Awards Dinner	900099	8446.	8446.	<u></u>	
Re	-	Leadership training	900099	2318.			
Program Service Revenue	e -		900099	2318.	2318.		
_	f	All other program service revenue					
	g	Total. Add lines 2a-2f		62084.			
	3	Investment income (including dividends,	interest, and				
		other similar amounts)	. ▶ [1365.	1365.		
	4	Income from investment of tax-exempt bond proceeds	▶				
	5	Royalties	▶ [
			ıı) Personal				
	6a	Gross rents					
	ь	Less rental					
	C	expenses · · · · · · · · · · · · · · · · · ·					
					<u> </u>		L
	d	Gross amount from	. ▶				1
	7a	sales of assets (I) Securities	(II) Other				
		other than inventory .			}		
	b	Less cost or other basis and sales					
		expenses			L		
	С	Gain or (loss)					
	d	Net gain or (loss)	. •			1	
	8a	Gross income from fundraising events					
ne		(not including \$	#		ļ		
en		of contributions reported on line 1c)	i i	1	Ì		
Š		See Part IV, line 18a		ì			
-	.	Less direct expenses b					
Other Revenue							
١		Net income or (loss) from fundraising eve	nts▶				
	9a	Gross income from gaming		į			
		activities See Part IV, line 19 . a					
	b	Less direct expenses b					
	С	Net income or (loss) from gaming activities	es▶				
	10a	Gross sales of inventory, less					
		returns and allowances .a	li li				
	b	Less cost of goods sold .b					
	1	Net income or (loss) from sales of invento	ory ▶		<u></u>		i
	_ <u> </u>		Business Code		,		r
ŀ	110	Other income	900099	450.	450.		L
		O CITCE THEOME	200033	450.	450.		
	b					·	
	С						
	d	All other revenue					
İ	е	Total. Add lines 11a-11d	🕨	450.		1	
	12	Total revenue	Γ				
		See instructions	▶	200539.	63899.		

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response to any question in this Part IX							
Do I	not include amounts reported on lines 6b,	Total avanage	(B)	(C)	(D) Fundraising		
7b,	3b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	expenses		
1	Grants and other assistance to governments and org						
	anizations in the United States. See Part IV, line 21.	34400.	34400.				
2	Grants and other assistance to individuals in						
	the United States See Part IV, line 22	İ					
3	Grants and other assistance to governments,						
	organizations, and individuals outside the			<u> </u>			
	United States See Part IV, lines 15 and 16						
4	Benefits paid to or for members		_				
5	Compensation of current officers, directors,						
	trustees, and key employees						
6	Compensation not included above, to disqualified						
	persons (as defined under section 4958(f)(1)) and						
	persons described in section 4958(c)(3)(B)						
7	Other salaries and wages	30383.		30383.			
8	Pension plan accruals and contributions (include						
	section 401(k) and 403(b) employer contributions)	i					
9	Other employee benefits	243.		243.			
10	Payroll taxes	2481.		2481.			
11	Fees for services (non-employees)						
а	Management						
þ	Legal						
C	Accounting	-					
d	Lobbying						
e	Professional fundraising services See Part IV, line 1	7					
f	Investment management fees						
g	Other						
12	Advertising and promotion	10000.	10000.				
13	Office expenses	9469.		9469.			
14	Information technology						
15	Royalties						
16	Occupancy						
17	Travel						
18	Payments of travel or entertainment expenses						
	for any federal, state, or local public officials						
19	Conferences, conventions, and meetings	88642.	88642.				
20	Interest						
21	Payments to affiliates						
22	Depreciation, depletion, and amortization	369.		369.			
23	Insurance	528.		528.			
24	Other expenses Itemize expenses not covered			1			
	above (List miscellaneous expenses in line 24e If		1	. -			
	line 24e amount exceeds 10% of line 25, column	, 1			,		
	(A) amount, list line 24e expenses on Schedule O)						
а	Committee expense	21542.	21542.				
þ	Bank charges	1010.		1010.			
C	Governors Administra	3160.		3160.			
d	Website	1436.		1436.			
0	All other expenses						
<u>25</u> _	Total functional expenses. Add lines 1 through 24e	203663.	154584.	49079.			
	Joint costs. Complete this line only if the organization		j				
	reported in column (B) joint costs from a combined						
	educational campaign and fundraising solicitation						
_	Check here if following SOP 98-2 (ASC 958-720)						
BC/		US990\$10			Form 990 (2011)		

Part X Balance Sheet (A) (B) End of year Beginning of year 38893. 38948. Cash - non-interest-bearing 1 50098. 52036. 2 2 Savings and temporary cash investments Pledges and grants receivable, net 3 3 3410. 4 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key 5 5 employees, and highest compensated employees. Complete Part II of Sch. L. 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 6 of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 7 7 Notes and loans receivable, net Assets 8 Inventories for sale or use 8 1977. 3100. Prepaid expenses and deferred charges ... 9 Land, buildings, and equipment cost or other 10a 1847. basis Complete Part VI of Schedule D 10a 1662.554. 185. 10c 10b Less accumulated depreciation b 11 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 ... 13 14 14 Intangible assets 15 Other assets See Part IV, line 11 15 94269 94932. 16 16 Total assets Add lines 1 through 15 (must equal line 34) 2890. 326. Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 19 Deferred revenue . 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified 22 persons Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties..... Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X 1915. 25 1812. of Schedule D 2241. 4702. 26 Total liabilities Add lines 17 through 25 26 complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 78245. 79995. 27 27 Unrestricted net assets ... 11322. 12696. 28 28 Temporarily restricted net assets . 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34.

Form 990 (2011)

89567

94269.

30

31

32

33

34

92691

94932.

30

31

32

33

Capital stock or trust principal, or current funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

, 	990 (2011) Rotary Int'l District 7610	E 4 1 /	1741	24		4.0
Par		<u>54-14</u>	341	<u> 24</u>	Paç	ge 12
	*Check if Schedule O contains a response to any question in this Part XI		<u> </u>		···· ·	<u>. []</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	2	005	39.
2	Total expenses (must equal Part IX, column (A), line 25)			2	036	63.
3	Revenue less expenses Subtract line 2 from line 1				-31	24.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		İ		926	91.
5	Other changes in net assets or fund balances (explain in Schedule O)		 			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))				895	67.
Par	XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					П
1	Accounting method used to prepare the Form 990				Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
b	Were the organization's financial statements audited by an independent accountant?			2b		X
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of the				†
	audit, review, or compilation of its financial statements and selection of an independent accountant?			2c		
	If the organization changed either its oversight process or selected process during the tax year, explain in				,	<u> </u>
	Schedule O				;	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements of the year were			. 1	<u> </u>	
	issued on a separate basis, consolidated basis, or both			í II	! !	
	Separate basis Consolidated basis Both consolidated and separate basis			<u> </u>		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in					

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

3b

the Single Audit Act and OMB Circular A-133?

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

2011

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below.

Open to Public Inspection

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 E01/a\(\alpha\) arganizations that have NOT filed Form E769 (alastic

ame of organization	7610			identification number
Rotary Int'l Dist				1434124
	ne organization is exempt under s			organization.
	ganization's direct and indirect political camp	paign activities in Part IV		
		• • • • • • • • • • • • • • • • • • • •	▶\$_	
3 Volunteer hours				
Part I-B Complete if the	ne organization is exempt under s	ection 501/c\/3\		
dit 12	10 organization to exempt under a		 	
1 Enter the amount of any excise	e tax incurred by the organization under sect	ion 4955	▶\$	
	e tax incurred by organization managers und		_	
	section 4955 tax, did it file Form 4720 for this		_	Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV				
Part I-C Complete if the	ne organization is exempt under s	ection 501(c), exc	ept section 501	(c)(3).
1 Enter the amount directly expe	ended by the filing organization for section 52	27 exempt function activi	ties ▶\$ _	
2 Enter the amount of the filing of	organization's funds contributed to other orga	anizations for section 527	7	
exempt function activities .			► ¢	
O =			- -	
 । otal exempt function expendi 	tures Add lines 1 and 2 Enter here and on I			
	tures Add lines 1 and 2 Enter here and on l	Form	· <u>-</u>	
1120-POL, line 17b		Form	· <u>-</u>	. Yes No
1120-POL, line 17b 4 Did the filing organization file F		Form 		
1120-POL, line 17bDid the filing organization file FEnter the names, addresses a	Form 1120-POL for this year?	Form		the filing organization
 1120-POL, line 17b Did the filing organization file F Enter the names, addresses a payments For each organization 	Form 1120-POL for this year? nd employer identification number (EIN) of a	Form	ganizations to which	the filing organization nt of political contributi
 1120-POL, line 17b Did the filing organization file in the filing organization file in the filing organization file in the filing organization file in the filing organization file. Enter the names, addresses a payments. For each organization file. For each organization f	Form 1120-POL for this year? nd employer identification number (EIN) of a lion listed, enter the amount paid from the filli	Form Il section 527 political or or or or or or or or or or or or or	ganizations to which	the filing organization nt of political contributi
 1120-POL, line 17b Did the filing organization file Information Enter the names, addresses a payments For each organization For each organization	Form 1120-POL for this year? nd employer identification number (EIN) of a ion listed, enter the amount paid from the filling directly delivered to a separate political or	Form Il section 527 political or or or or or or or or or or or or or	ganizations to which Also enter the amou parate segregated fu	the filing organization nt of political contributi and or a political action (e) Amount of political
 1120-POL, line 17b Did the filing organization file In the file In the	Form 1120-POL for this year? Ind employer identification number (EIN) of a non-listed, enter the amount paid from the filing directly delivered to a separate political or space is needed, provide information in Par	Form Il section 527 political or or organization's funds a ganization, such as a set t IV	ganizations to which Also enter the amou parate segregated fu	the filing organization nt of political contributi und or a political action (e) Amount of political contributions received
 1120-POL, line 17b Did the filing organization file In the state of the	Form 1120-POL for this year? Ind employer identification number (EIN) of a non-listed, enter the amount paid from the filing directly delivered to a separate political or space is needed, provide information in Par	Form Il section 527 political or or organization's funds a ganization, such as a set t IV	ganizations to which Also enter the amou parate segregated fu	the filing organization int of political contribution or a political action (e) Amount of political contributions received and promptly and directly
 1120-POL, line 17b Did the filing organization file In the file In the fil	Form 1120-POL for this year? Ind employer identification number (EIN) of a non-listed, enter the amount paid from the filing directly delivered to a separate political or space is needed, provide information in Par	Form Il section 527 political or or organization's funds a ganization, such as a set t IV	ganizations to which Also enter the amou parate segregated fu (d) Amount paid from filing organization's	the filing organization nt of political contributi und or a political action (e) Amount of political contributions received
 1120-POL, line 17b Did the filing organization file In the state of the	Form 1120-POL for this year? Ind employer identification number (EIN) of a non-listed, enter the amount paid from the filing directly delivered to a separate political or space is needed, provide information in Par	Form Il section 527 political or or organization's funds a ganization, such as a set t IV	ganizations to which Also enter the amou parate segregated fu (d) Amount paid from filing organization's funds If none,	the filing organization int of political contribution or a political action (e) Amount of political contributions received and promptly and directly delivered to a separate
1120-POL, line 17b	Form 1120-POL for this year? Ind employer identification number (EIN) of a non-listed, enter the amount paid from the filing directly delivered to a separate political or space is needed, provide information in Par	Form Il section 527 political or or organization's funds a ganization, such as a set t IV	ganizations to which Also enter the amou parate segregated fu (d) Amount paid from filing organization's funds If none,	the filing organization int of political contribution or a political action (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
 1120-POL, line 17b Did the filing organization file If Enter the names, addresses a payments For each organization received that were promptly an committee (PAC). If additional 	Form 1120-POL for this year? Ind employer identification number (EIN) of a non-listed, enter the amount paid from the filing directly delivered to a separate political or space is needed, provide information in Par	Form Il section 527 political or or organization's funds a ganization, such as a set t IV	ganizations to which Also enter the amou parate segregated fu (d) Amount paid from filing organization's funds If none,	the filing organization int of political contribution or a political action (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
1120-POL, line 17b 4 Did the filing organization file F 5 Enter the names, addresses a payments For each organizati received that were promptly a committee (PAC) If additional (a) Name	Form 1120-POL for this year? Ind employer identification number (EIN) of a non-listed, enter the amount paid from the filing directly delivered to a separate political or space is needed, provide information in Par	Form Il section 527 political or or organization's funds a ganization, such as a set t IV	ganizations to which Also enter the amou parate segregated fu (d) Amount paid from filing organization's funds If none,	the filing organization int of political contribution or a political action (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
1120-POL, line 17b Did the filing organization file F Enter the names, addresses a payments For each organization received that were promptly and committee (PAC). If additional (a) Name	Form 1120-POL for this year? Ind employer identification number (EIN) of a non-listed, enter the amount paid from the filing directly delivered to a separate political or space is needed, provide information in Par	Form Il section 527 political or or organization's funds a ganization, such as a set t IV	ganizations to which Also enter the amou parate segregated fu (d) Amount paid from filing organization's funds If none,	the filing organization int of political contribution or a political action (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
1120-POL, line 17b 4 Did the filing organization file F 5 Enter the names, addresses a payments For each organizati received that were promptly ar committee (PAC) If additional (a) Name	Form 1120-POL for this year? Ind employer identification number (EIN) of a non-listed, enter the amount paid from the filing directly delivered to a separate political or space is needed, provide information in Par	Form Il section 527 political or or organization's funds a ganization, such as a set t IV	ganizations to which Also enter the amou parate segregated fu (d) Amount paid from filing organization's funds If none,	the filing organization int of political contribution or a political action (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
1120-POL, line 17b 4 Did the filing organization file F 5 Enter the names, addresses a payments For each organizati received that were promptly ar committee (PAC) If additional (a) Name	Form 1120-POL for this year? Ind employer identification number (EIN) of a non-listed, enter the amount paid from the filing directly delivered to a separate political or space is needed, provide information in Par	Form Il section 527 political or or organization's funds a ganization, such as a set t IV	ganizations to which Also enter the amou parate segregated fu (d) Amount paid from filing organization's funds If none,	the filing organization int of political contribution or a political action (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
1120-POL, line 17b Did the filing organization file F Enter the names, addresses a payments For each organization received that were promptly and committee (PAC). If additional (a) Name	Form 1120-POL for this year? Ind employer identification number (EIN) of a non-listed, enter the amount paid from the filing directly delivered to a separate political or space is needed, provide information in Par	Form Il section 527 political or or organization's funds a ganization, such as a set t IV	ganizations to which Also enter the amou parate segregated fu (d) Amount paid from filing organization's funds If none,	the filing organization int of political contribution or a political action (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
1120-POL, line 17b 4 Did the filing organization file F 5 Enter the names, addresses a payments For each organizati received that were promptly ar committee (PAC) If additional (a) Name	Form 1120-POL for this year? Ind employer identification number (EIN) of a non-listed, enter the amount paid from the filing directly delivered to a separate political or space is needed, provide information in Par	Form Il section 527 political or or organization's funds a ganization, such as a set t IV	ganizations to which Also enter the amou parate segregated fu (d) Amount paid from filing organization's funds If none,	the filing organization int of political contribution or a political action (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
1120-POL, line 17b Did the filing organization file F Enter the names, addresses a payments For each organizati received that were promptly ar committee (PAC) If additional (a) Name	Form 1120-POL for this year? Ind employer identification number (EIN) of a non-listed, enter the amount paid from the filing directly delivered to a separate political or space is needed, provide information in Par	Form Il section 527 political or or organization's funds a ganization, such as a set t IV	ganizations to which Also enter the amou parate segregated fu (d) Amount paid from filing organization's funds If none,	the filing organization int of political contribution or a political action (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.

Part	Complete if the organization is exempt under section 501(c)(3) and has 5768 (election under section 501(h)).	NOT	filed	Form	
For ea	h "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the	(a	9)	(b)	
lobbyin	gactivity	Yes	No	Amoun	nt
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			-	
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?			<u>-</u> .	
d	Mailings to members, legislators, or the public?				
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?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	_			
i	Other activities?		,		
j	Total Add lines 1c through 1i	لــــا	<u> </u>		
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			·	
þ	If "Yes," enter the amount of any tax incurred under section 4912	:	!		
С.	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		<u>ˈ</u>		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		<u> </u>	× 	
Part	Complete if the organization is exempt under section 501(c)(4), section section 501(c)(6).	501(0	:)(5), (or 	
				Ye	
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				X
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?				X
Part	II-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered ``N line 3, is answered ``Yes."				
1	Dues, assessments and similar amounts from members		141		
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	•••	. 1		
_	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year	•	2b		
c	Total	• • • •	2c	 -	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues			 .	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess d		·	-	
·	the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	005			
	· · · · · · · · · · · · · · · · · · ·		4		
5			<u>-</u>		
		• • • • • •	<u></u>		
	expenditure next year?	····· <u>·</u>	. 5	3, line 1 Also,	

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Rotary Int'l District 7610

Employer identification number 54-1434124

Schedule D (Form 990) 2011

Pa	rt I Organizations Maintaining Donor Adv	vised Funds or Other Similar I	Funds or Accounts.	
	Complete if the organization answered "Yes" to F	Form 990, Part IV, line 6		
		(a) Donor advised funds	(b) Funds and other accounts	
1	Total number at end of year			
2	Aggregate contributions to (during year)	· · · · · · · · · · · · · · · · · · ·		
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors	in writing that the assets held in donor	advised funds	
6	are the organization's property, subject to the organization Did the organization inform all grantees, donors, and done for charitable purposes and not for the benefit of the dono impermissible private benefit?	or advisors in writing that grant funds ma	ay be used only	0
Pa	rt II Conservation Easements. Complete if t	he organization answered "Yes" to For	m 990, Part IV, line 7	
1	Purpose(s) of conservation easements held by the organization	······································		
	Preservation of land for public use (e.g., recreation or		vation of an historically important land are	a
	Protection of natural habitat		vation of certified historic structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qu	ualified conservation contribution in the	form of a conservation easement on the	
	last day of the tax year			
			Held at the End of the Ta	х Yr.
а	Total number of conservation easements			
b	Total acreage restricted by conservation easements			
c	Number of conservation easements on a certified historic			
	Number of conservation easements included in (c) acquire	` '		
_	structure listed in the National Register	•	. 2d	
3	Number of conservation easements modified, transferred		<u> </u>	
•	the tax year	, rorososs, oxungarorres, er terrimates i	by the eigenization during	
4	Number of states where property subject to conservation	easement is located.		
5	Does the organization have a written policy regarding the	· · · · · · · · · · · · · · · · · · ·	ng of violations	
	and enforcement of the conservation easements it holds?	·		o
6	Staff and volunteer hours devoted to monitoring, inspectir			•
7	Amount of expenses incurred in monitoring, inspecting, at			-
8	Does each conservation easement reported on line 2(d) a	_		
·	and section 170(h)(4)(B)(ii)?	-		0
9	In Part XIV, describe how the organization reports conser			
3	include, if applicable, the text of the footnote to the organi			•
	conservation easements	zation's illiandar statements that descri	ibes the organization's accounting for	
Pa	rt III Organizations Maintaining Collection	s of Art Historical Treasures	or Other Similar Assets	
1 4	Complete if the organization answered "Yes" to F	•	, or other onliner Assets.	
1 2	If the organization elected, as permitted under SFAS 116,		and halance sheet works of art. historical	
	treasures, or other similar assets held for public exhibition			
	text of the footnote to its financial statements that describ	•	or public service, provide, in Fait XIV, the	•
	text of the footbote to its infancial statements that describ	es these items		
	If the organization elected, as permitted under SFAS 116,	to report in its revenue statement and	halance sheet works of art, historical trea	
	sures, or other similar assets held for public exhibition, ed	-		
		ideation, or research in furtherance or p	dolic service, provide the following arriod	IIIS
	relating to these items		► ¢	
	(i) Revenues included in Form 990, Part VIII, line 1		> 5	
_	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historical		nancial gain, provide the following amoun	ts
	required to be reported under SFAS 116 relating to these	items		
	Revenues included in Form 990, Part VIII, line 1		> \$	
k	Assets included in Form 990, Part X		▶ \$	

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

Pa	· (continue	zations Maintainin _! d)	g Collections of Ai	t, Historical Treası	ıres, or Other Simi	lar Assets	1
3	Using the organizatio	n's acquisition, accession	n, and other records, che	ck any of the following th	at are a significant use o	of its collection	n items
	(check all that apply)	•			· ·		
а	Public exhibition			d Loan or exchang	ge programs		
b	Scholarly researc	h		e Other			
С	H .	uture generations					_
4	_	of the organization's coll	ections and explain how	they further the organiza	tion's exempt purpose in	Part XIV	
5		he organization solicit or					
		han to be maintained as					No
Pa		and Custodial Arı					
		ed an amount on Form 99		·		, , ,	·
1a		agent, trustee, custodia		or contributions or other a	issets not included		
	on Form 990, Part X?					Yes	□No
b		rrangement in Part XIV a				ш	
		•	•			Amou	ınt
c	Beginning balance .				1c		
		rear					
		ne year			1.1		
f					1f		
2a		nclude an amount on For				Yes	X No
b	If "Yes," explain the a	rrangement in Part XIV					
Pa	rt V Endow	ment Funds. Comp	olete if the organization a	inswered "Yes" to Form	990, Part IV, line 10.		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four y	ears back
1a	Beginning of year				-		
	balance						
b	Contributions						
С	Net investment earn-						
	ings, gains, and losse	s					
d	Grants or scholarships						
е	Other expenditures						
	for facilities and			İ			
	programs						
f	Administrative						
	expenses						
g	End of year balance						
2	Provide the estimated	percentage of the year	end balance (line 1g) hel	d as			
а	Board designated or o	quasi-endowment 🕨	0.00 %				
b	Permanent endowme	nt ▶ <u>0.00</u>	. %				
С	Temporarily restricted	l endowment \triangleright 0.	00 %			_	
	•	nes 2a, 2b, and 2c should	•				
3a	Are there endowment	funds not in the possess	sion of the organization th	hat are held and administ	tered for the organization	by	Yes No
	• •	ations				3a(i)	
	(ii) related organization						
b	If "Yes" to 3a(II), are t	he related organizations	listed as required on Sch	nedule R?		3 b	
4		he intended uses of the o					
Pa	rt VI Land, E	Buildings, and Equ	ipment. See Form 9	90, Part X, line 10			
	Description of	investment	(a) Cost or other	(b) Cost or other	(c) Accumulated	(d) Bool	k value
			basis (investment)	basis (other)	Depreciation		
	Land .						
þ	Buildings						
С	Leasehold improvement	ents					
	Equipment			1,847.	1,662.		185.
	Other		!				
Total	. Add lines 1a through	1e (Column (d) must eq	ual Form 990, Part X, co	lumn (B), line 10(c))	· · · · · · · · · · · · · · · · · · ·		185.
					Sched	lule D (Form	990) 2011

Part VII	Investments - Other Securities.	See Form 990, Part X, line 12	
1	(a) Description of security or category	(b) Book value	(c) Method of valuation.
	(including name of security)		Cost or end-of-year market value
	derivatives		
	eld equity interests	<u> </u>	
(3) Other			
(A) (B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(l)			
	n (b) must equal Form 990, Part X, col (B) line 12		
Part VIII	Investments - Program Related.	See Form 990, Part X, line 13	
	(a) Description of investment type	(b) Book value	(c) Method of valuation
/1\			Cost or end-of-year market value
(1)			
(3)			
<u>(4)</u>			
<u>(</u> 5)			
(6)			
(7)			
(8)			
<u>(9)</u>			
<u>(10)</u>	(h)		
Part IX	Other Assets. See Form 990, Part X, col (B) line 13		
raitin		scription	(b) Book value
(1)	(a) 50	Scription	(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
<u>(9)</u>			
(10)	n (b) must equal Form 990, Part X, col (B) line 15	5.)	
Part X	Other Liabilities. See Form 990, Part		
1	(a) Description of Liability	(b) Book value	
(1) Federal In	come Taxes		
(2) Payro	ll tax liabilities	1,812.	
(3)			
(4)			
<u>(5)</u>		,	
(6)			
(7)			
(8)			
(9)			
(10) (11)			
	n (b) must equal Form 990, Part X, col. (B) line 2	<u>1,812.</u>	
	SC 740) Footnote In Part XIV. provide the text of		

organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Sche	dule D (Form 990) 2011 Rotary Int'l District 7610			54-1	43	4124	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	o Aud	ited Finan	cial S	tate	ments	<u></u>
1	Total revenue (Form 990, Part VIII, column (A), line 12)						,539.
2	Total expenses (Form 990, Part IX, column (A), line 25)						,663.
3	Excess or (deficit) for the year Subtract line 2 from line 1						,124.)
4	Net unrealized gains (losses) on investments			_			
5	Donated services and use of facilities			_			
6	Investment expenses				1		
7	Prior period adjustments			· -			
8	Other (Describe in Part XIV)						
9	Total adjustments (net) Add lines 4 through 8						
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9					(3	,124.)
Pa	Reconciliation of Revenue per Audited Financial Statement						
1	Total revenue, gains, and other support per audited financial statements				1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12						
а	Net unrealized gains on investments	. 2a			1		
b	Donated services and use of facilities	. 2b			1		
С	Recoveries of prior year grants	2c			1		
d	Other (Describe in Part XIV)	2d			1		
е	Add lines 2a through 2d				2e		
3	Subtract line 2e from line 1				3		·
4	Amounts included on Form 990, Part VIII, line 12, but not on line1						
а	Investment expenses not included on Form 990, Part VIII, line 7b.	4a			1		
b	Other (Describe in Part XIV)						
С	Add lines 4a and 4b				. 4c		
5	Total revenue Add lines 3 and 4c (This must equal Form 990, Part I, line 12.)				5		
Pa	t XIII Reconciliation of Expenses per Audited Financial Staten	ments	With Expe	enses	per	Return	
1	Total expenses and losses per audited financial statements				1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25						
а	Donated services and use of facilities	. 2a			\$ \$		
b	Prior year adjustments	2b					
С	Other losses	. 2c			╢╢		
d	Other (Describe in Part XIV)	2d					
е	Add lines 2a through 2d				2е		
3	Subtract line 2e from line 1				3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1						
а	·	. 4a]		
b	Other (Describe in Part XIV)	. 4b			┸		
С	Add lines 4a and 4b				4c		
5	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)		···· · · ·	<u></u>	5		
	t XIV Supplemental Information				_		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lin						
Part	X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also cor	mplete	this part to pro	ovide an	y add	ditional inforr	mation
			 -	_			
				_	_		
							
							

SCHEDULE I (Form 990)

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

OMB No 1545-0047 2011

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⊠. Schedule I (Form 990) (2011) Employer identification number 54-1434124(h) Purpose of grant Open to Publid Inspection or assistance Yes X Complete if the organization answered "Yes" to non-cash assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria (g) Description of : Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Check this box if no one recipient received more than \$5,000 Part II (e) Amount of non-cash (f) Method of valuation (book, FMV, appraisal, Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. other) Grants and Other Assistance to Governments and Organizations in the United States. assistance ▶ Attach to Form 990. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.. grant General Information on Grants and Assistance For Paperwork Reduction Act Notice, see the Instructions for Form 990. if applicable (c) IRC section Enter total number of other organizations listed in the line 1 table. can be duplicated if additional space is needed used to award the grants or assistance? Int'l District 7610 (p) EIN (1)42 Simple grants 99999 VA VA organization or government 1 (a) Name and address of Name of the organization Department of the Treasury Internal Revenue Service ex Rotary Part II Part I Not 3 E 3 (4) (5) 9 9 <u>®</u> 6 6

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 **2011**

> Open to Public Inspection

Employer identification number

Rotary Int 1 District 7610	54-1434124
Form 990, Part VI, Section B, line 11: Tax return at di	irection of the
Finance committee, provided to the immediate prior past	year District
Governor for review and signature.	
Form 990, Part VI, Section C, line 19: Financial states	ments, conflict
of interest policy, and govering documents provided on a	request.
Available to all club presidents, in order to facilitate	e requests
by the general membership.	
Form 990, Part VII. Contact addresses for officers:	
Jon Allan - 6417 Spring Lake Drive, Burke, VA 22015	
Jim Gates - 11303 Fieldstone Lane, Reston, VA 20191	
Dave Mercer - 5906 Merritt Pl., Falls Church, VA 22041	