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Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

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

OMB No 1545 0047

Open to Public Inspection

Ā	For the 2	011 calen	dar year, or tax year beginning 7/01 , 2011, and endin	g 6/	30	, 2012	>
В	Check if app		C	<u> </u>		Identification N	
_		s change	ROTARY CLUB OF TRUCKEE, INC.		94-2	675501	
	$\vdash$	-	P.O. BOX 180		E Telephone		
	$\vdash$	change	TRUCKEE, CA 96160				
	Initial r				330-	<u>550-6003</u>	
	Termin	ated			]_	_	000 150
	Amend	led return			G Gross rec		238,170.
	Applica	ation pending	F Name and address of principal officer WES BEYER	1	a group return f		Yes X No
			SAME AS C ABOVE		affiliates includ attach a list (s		Yes No
1	Tax-exem	npt status	501(c)(3) X 501(c) ( 4 ) ◀ (insert no ) 4947(a)(1) or 527		attacira iist (s	ec mso detions)	
J	Websit	e:► WW	W.TRUCKEEROTARY.COM	H(c) Group	exemption num	ber ►	
ĸ	Form of o	rganization	X Corporation Trust Association Other► L Year of Formal	tion 197	8 M Sta	te of legal domic	cile CA
Pa		Summar	v				
			be the organization's mission or most significant activities _TO_ORGAN	TZE AN	D RUN E	VENTS AN	1D
•			ES TO RAISE FUNDS THAT ARE USED TO HELP SUPPOR				
ž		/ = · - · - ·	GD _10_14406	. <u></u>	TAT. = -74 - 2		5-T X-6-12-2-
ш							
Ş.	2 Che	eck this bo	ox If the organization discontinued its operations or disposed of mo	ore than 2	5% of its ne	et assets	
ŏ	1		oting members of the governing body (Part VI, line 1a)			3	12
တ			dependent voting members of the governing body (Part VI, line 1b)			4	12
iţe	5 Tot	tal number	r of individuals employed in calendar year 2011 (Part V, line 2a)			5	0
Activities & Governance	<b>6</b> Tot	tai number	of volunteers (estimate if necessary)			6	90
Ř	1		ed business revenue from Part VIII, column (C), line 12		_	7a	0.
	<b>b</b> Net	t unrelated	business taxable income from Form 990-T, line 34			7b	0.
				P	rior Year		rrent Year
•	8 Cor	ntributions	and grants (Part VIII, line 1h)		68,21		78,695.
ž	<b>9</b> Pro	ogram serv	vice revenue (Part VIII, line 2g)		24,06		
Revenue	1		ncome (Part VIII, column (A), lines 3, 4, and 7d)			7.	33.
ية إ	1		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-19,59		54,572.
. ~—	<b>12</b> Tot	tal revenue	e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		72,77		<u>133,300.</u>
	13 Gra	ants and s	imilar amounts paid (Part IX, column (A), lines 1-3)		97,09		76,368.
į	<b>14</b> Bei	nefits paid	I to or for members (Part IX, column (A), line 4)		2,00	7.	
9 19	15 Sal	laries, oth	er compensation, employee benefits (Part IX, column (A), lines 5-10)	L _			
Expenses	16a Pro	ofessional	fundraising fees (Part IX, column (A), line 11e)				
) ë	1		sing expenses (Part IX, column (D), line 25) ►	1405	A MARKA		
מַ כּ				8.120(E42.)2	FA 70		07 204
			ses (Part IX, column (A), lines 11a 11d, 11f-24e)	ļ	50,72		87,394.
	1		es Add lines 13-17 (must equal Part IX, column (A), vie=25		149,83		163,762.
		venue less	s expenses Subtract line 18 from line 12	<del> </del>	-77,05		-30,462.
5 0			(Bart X June 16) \( \overline{\pi} \) JAN 3 0 2013 \( \overline{\pi} \)	Beginnir	ng of Current		d of Year
Assets or d Balances	20 Tot		(Part A, line 16)	<b>——</b>	70,34		39,911.
Net A	ł		es (Part X, line 26)			0.	100.
r			r fund balances Subtract line 21 from line 205DEN LIT	<u> </u>	70,27	3.	39,811.
Pa	art II 🥞 🤉	Signatui	re Block				
Uno	der penalties	of perjury, I c	leclare that I have examined this return, including accompanying schedules and statements, and to arer (other than officer) is based on all information of which preparer has any knowledge	the best of n	ny knowledge a	nd belief, it is tri	ie, correct, and
~	ipiete Deciai	Tallon of prep	are (other than officer) is based on an information of which prepare has any knowledge		117	, ,	
			Mallpager		1.16.1	<u>,                                    </u>	
Sig	gn	Signatu	are of officer	Da	ite		
He	re	ھے ا	1/2 /eager, Treasurer				
		Туре о	print name and title				
		Print/Type p	preparer's name Preparer s sphature Date		Check	if PTIN	
Pa	id	MICHA	EL R. GRIESMER M/Jushum 12-18	1-12	self employed	P0000	6468
	eparer	Firm's name	e ► MCCLINTOCK ACCOUNTANCY CORP.				
	e Only	Firm's addre			Firm's EIN	94-2617	724
	•	5 6001	TRUCKEE, CA 96160-2468	-			7-9221
Ma	v the IRS	discuss th	nis return with the preparer shown above? (see instructions)		1.0.0		es No
				A0113L 08	/18/11		orm <b>990</b> (2011)
2	~ rv:ra	PCIMOIN	tennetion wet Motice, see the separate monactions.				

orm 990 (2011) ROTARY CLUB OF TRUCKEE, INC.	94-267550	)1 Page
Statement of Program Service Accomplishments		
Check if Schedule O contains a response to any question in this Part III	· · · · · · · · · · · · · · · · · · ·	
1 Briefly describe the organization's mission		
TO RAISE FUNDS FOR LOCAL COMMUNITY CHARITABLE NEEDS		
	-1 - 4 4	<u> </u>
2 Did the organization undertake any significant program services during the year which were not li	isted on the prior	Yes X No
Form 990 or 990-EZ?		Yes X No
If 'Yes,' describe these new services on Schedule O  Did the organization cease conducting, or make significant changes in how it conducts, any progr	rom conucos 2	Yes X No
3 Did the organization cease conducting, or make significant changes in how it conducts, any program 'Yes,' describe these changes on Schedule O	an services.	res A Re
1. Describe the organization's program service accomplishments for each of its three largest progra	m services, as measure	ed by expenses
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report others, the total expenses, and revenue, if any, for each program service reported	t the amount of grants	and allocations (
4a (Code (Expenses \$ 59,243. including grants of \$ 48,650	O.)(Revenue \$	
SUPPORT OF LOCAL COMMUNITY PROGRAMS		
	<del></del>	- <b></b>
	<del></del> -	
	<b></b> -	
4b (Code 36,960. Including grants of \$	) (Revenue \$ NTATIONS BY CON	MUNITY
SIERRA SENIOR SERVICES-MEALS ON WHEELS PROGRAM WHICH HELPS FOR THE CITIZENS IN OUR AREA	O.) (Revenue \$ EED THE LOCAL \$	SENIOR
	<b></b>	<b></b>
	. <b></b> = -	
ALON- CEE COUEDITE O		
4d Other program services (Describe in Schedule O) SEE SCHEDULE O (Expenses \$ 15,568. including grants of \$ 15,568.) (Reven	,	,
(Expenses \$ 15,568. including grants of \$ 15,568.) (Revended to the following state of \$ 15,568.) (Revended to the following grants of \$ 15,568.)	uc y	
AA TEEA0102L 07/05/11		Form <b>990</b> (201

	,		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		х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
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		X
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_	_ x	
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
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	_	Х
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		Х
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	 		 
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11a	_ X	
	<b>b</b> Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII</i>	11 b		Х
	c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c	_	X
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		X
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	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	11 f		Х
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		X
	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		<u>X</u>
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
	<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b	_	<u>X</u>
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		<u>X</u>
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	_	<u>X</u>
	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	<del></del>	<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	_ X	
	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	_	<u>X</u>
	aDid the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		<u>X</u>
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2011) ROTARY CLUB OF TRUCKEE, INC.
Pair IVE Checklist of Required Schedules (continued)

×	100.00.00.00			
	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		Х
Ł	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(	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		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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		X
ŀ	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		<u>X</u> _
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		X
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	River are so	X
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)			
á	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		<u>X</u>
ı	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
29	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  Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c 29		<u>X</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30_		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		<u>X</u> _
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		X
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and $V$ , line 1	34	-	<u>X</u>
	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u>
ı	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		<u>X</u>
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		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 Note. All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	990 (	2011)

	Check if Schedule O contains a response to any question in this Part V			
	Check it Schedule O contains a response to any question in this rait v		Yes	No
1 -	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1	13.28	
		) 3		;
	Zenter the name of the state of	7		
ď	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		X
2 =	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-		**	
26	ments, filed for the calendar year ending with or within the year covered by this return	<u> </u>	1	
t	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	والمناث المناف	Ž Ži	<u>. Ž</u>
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
ŧ	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q	3 b		
4 8	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
ŀ	o 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			<u> </u>
5 a	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a	ļ	Х
ŀ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c	ļ	
	a 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?	6 a	_x_	
ı	o If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		Х
	Organizations that may receive deductible contributions under section 170(c).	,	, , , , , ,	
ě	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
ł	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	_		
	Form 8282?	7 c		
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	<u> </u>	4/100	*
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ł	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h	rsy.	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the	*, .	7	
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.		Ú.Ig	<del>```</del>
	a Did the organization make any taxable distributions under section 4966?	9a		
	b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b	93. ·	
	Section 501(c)(7) organizations. Enter	140	13.3	,
	a Initiation fees and capital contributions included on Part VIII, line 12	٠, ١	7 03	
	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-         -	. ,	١ ,
	Section 501(c)(12) organizations. Enter  a Gross income from members or shareholders		133	46
		┤ *░ ∵	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11b	10-	3 1	
	a 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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.		.^x_ <b>\</b>	
	a Is the organization licensed to issue qualified health plans in more than one state?	13a	, .	
	Note. See the instructions for additional information the organization must report on Schedule O	**		
	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			ŧ
	c Enter the amount of reserves on hand	14-		
	a Did the organization receive any payments for indoor tanning services during the tax year?  b if 'Vos' has it filed a Form 720 to report these payments? If 'No' provide an explanation in Schedule O	14a 14b	<del>                                     </del>	Х
	h It Was I has it tildd a Farm 720 to ropart these navments ( If NO I provide an explanation in Schedule ()	1 14 D	1	t

Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a. 8b. or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1 a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 12 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Х 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Х members of the governing body? **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8a Х 8b b Each committee with authority to act on behalf of the governing body? Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a 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, affiliates, and branches to ensure their 10b operations are consistent with the organization's exempt purposes? X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c 13 Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х 15 a a The organization's CEO, Executive Director, or top management official X **b** Other officers of key employees of the organization 15b \$. If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Х 16 a . 8 b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16 t Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply |X| Upon request Another's website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year SEE SCHEDULE O State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► CARLA YEAGER 7951 FLEUR DU LAC DRIVE TRUCKEE CA 96161 530-550-6003

# Rankvill Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1 a 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

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee										
		(C)								
(A) Name and title	(B) Average hours per week	unles	s per	SOR I	s boti	nan one h an offi rustee)	box, cer	(D) Reportable compensation from the organization	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation
	(describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W 2/1099-MISC)	from the organization and related organizations
(1) WES_BEYER						·				
PRESIDENT	0							0.	0.	0.
(2) RICK MCCONN								ļ		
PRESIDENT ELECT	0	:						0.	0.	0.
(3) CARLA YEAGER										-
TREASURER	0							0.	0.	0.
(4) MARCIA BEALS										
SECRETARY	0							0.	0.	0.
(5) CATHY HENRY										
PAST PRESIDENT	0_							0.	0.	0.
(6) DOUG_WRIGHT	]									
CLUB SERVICE	0				<u> </u>			0.	0.	0.
(7) MICHAEL BROWN										
CLUB SERVICE	0				_			0.	0.	0.
(8) ADELA GONZALEZ DEL VALL										
COMMUNITY SERV	0		!					0.	0.	0.
(9) SHERILYN LAUGHLIN										
INTERNATIONAL	00					ļ		0.	0.	0.
(10) JAMES CONLEY										
INTERNATIONAL	0							0.	0.	0.
(11) ROBERT BELL	}									
<u>CLASSIFICATION</u>	0				L			0.	0.	0.
(12) TALLY BRAND										
MEMBERSHIP	0							0.	, O.	0.
(13) GREG MCDOUGALL	]									
VOCATIONAL	0							0.	0.	0.
(14) AMYE COLE		'								
VOCATIONAL	0		<u> </u>					0.	0.	0.

	(Cy	L:::	pic	ye	Ç3,	anc	nighest Coll	pensaleu Lini	ployees (cont)
hours	box	, unles	Pos heck ss pe	ition more rson	ıs botl	h an	(D) Reportable compensation from	<b>(E)</b> Reportable compensation from	<b>(F)</b> Estimated amount of other
week (describ e hours for related organi- zations	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensate employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Sch O)					e.				
. 0							0.	0	. 0.
0							0.	0	0.
0							0.		
0							0.	0	0.
									-
-									
-									
-									
	<u></u>	1. 1		<u> </u>		<b>&gt;</b>	0.		
Α						<b>&gt;</b>			. 0.
ed to th	ose	listed	d ab	ove	) wh	o re	L	\$100,000 of repo	
									Yes No
r or trus <i>ındıvıdu</i>	stee, <i>al</i>	key	em	ploy	ee,	or h	ighest compensat	ed employee	3 X
eportab than \$1	le co 50,0	mpe 1007	ensa If '}	tion ⁄es'	and com	l oth	er compensation le Schedule J for	from	4 X
comper comple	sation	on fr	om Iule	any <i>J fo</i>	unre r su	elate ch p	ed organization or person	ındıvıdual	5 X
امصر اممد		dan	+ 00	ntro	otore	· tha	at recoved more t	han \$100 000 of	_
ensation	for	the	cale	nda	r ye	ar ei	nding with or with I	in the organizatio	
ss									(C) Compensation
	_				-				
	t lım	uted	to t	hose	e list	ed a	Labove) who receiv	ed more than	
	(B) Average hours per week (describe hours for related organizations in Sch O)  0  0  0  0  1  1  1  A  ed to the ror trus individue eportab than \$1  compen comple	Average hours per week (describ related organizations in Sch O)  O  O  O  O  O  O  O  O  O  O  O  O	Average hours per week (describ related organizations in Sch O)  O  O  O  O  O  O  O  O  O  O  O  O	Average hours per week (describ e hours for related organizations in Sch O)  O  O  O  O  O  O  O  O  O  O  O  O	Average hours per week (describ e hours for related organizations in Sch O)  O  O  O  O  O  O  O  O  O  O  O  O	(do not check more than box, unless person is bot officer and a director/trus per week (describ e hours for related organizations in Sch O)  O  O  O  O  O  O  O  O  O  O  O  O	Average hours per week (describ per week (describ for related organi-zations sch O)  O  O  O  O  O  O  O  O  O  O  O  O	(B) Average by Compensation from the college of the compensation from the college of the college	(B) Average do not check more than one box, unless person is both an hour's person hours of the compensation from the direct and a director/fustee) person hours of the compensation from the director of the compensation from the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organization of the calendar year ending with or within the organi

Par	t VIII   Statement of Revenue	<del></del>	<del></del>		<del></del>
	•	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
FTS, GRANTS	1 a Federated campaigns1 ab Membership dues1 b64,043c Fundraising events1 c13,252d Related organizations1 d		, \$ ¥	**************************************	
RIBUTIONS, GI OTHER SIMILA	e Government grants (contributions)  f All other contributions, gifts, grants, and similar amounts not included above  1e  1,400		₹ <b>%</b>		: \$ /
NO ON	g Noncash contributions included in lns 1a-1f \$	78,695.	** ;		i è ti dire
<u>у</u>	h Total. Add lines 1a-1f  Business Code	78,093.	*	* ************************************	* C * *.38(?)
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	2a				
GRA	f All other program service revenue				
, RO		<b>-</b>	-	* 3	**
<del></del>	<ul> <li>Investment income (including dividends, interest and other similar amounts)</li> <li>Income from investment of tax-exempt bond proceeds</li> </ul>	33.			33.
	5 Royalties (i) Real (ii) Personal	100	<del>                                     </del>		
	6a Gross rents.  b Less rental expenses				,
	c Rental income or (loss)	7 / 1	<u> </u>	*: 3.2	
	d Net rental income or (loss)	<b>&gt;</b>			
	7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other	3 / 5	*		den's
	b Less cost or other basis and sales expenses c Gain or (loss)		1. · · · · · · · · · · · · · · · · · · ·		***
	d Net gain or (loss)	<b>→</b>			4
E E	8a Gross income from fundraising events (not including \$ 13,252.	à y	\$4.00 mm		
OTHER REVENU	of contributions reported on line 1c) See Part IV, line 18  b Less direct expenses  b 104,870	— »· »			· · ·
Ė	b Less direct expenses b 104,870 c Net income or (loss) from fundraising events	<u>.</u> 54,294.	-		54,294.
	9a Gross income from gaming activities See Part IV, line 19	31,231.		*********	\$ \$
	b Less direct expenses b				
	c Net income or (loss) from gaming activities	<b>&gt;</b>			
	10a Gross sales of inventory, less returns and allowances a		. **	**	
	b Less cost of goods sold b	<b>D</b>			
	c Net income or (loss) from sales of inventory  Miscellaneous Revenue Business Code	-	<del></del>	<u> </u>	*
	Miscellaneous Revenue Business Code  11 a OTHER INCOME	278.	. 278.		
	h				
	c				
	d All other revenue				
	e Total. Add lines 11a-11d	▶ 278.		*40,	·. /*.
	12 Total revenue. See instructions	<b>►</b> 133,300.	. 278.	0.	54,327.
BAA		EEA0109L 07/06/11			Form <b>990</b> (2011)

### Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response to any question in this Part IX									
Dо 1 6Ь,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses					
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	76,368.	76,368.							
2	Grants and other assistance to individuals in the United States See Part IV, line 22									
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16									
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.					
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.					
7	Other salaries and wages									
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)									
9	Other employee benefits.									
10	Payroll taxes									
11	Fees for services (non-employees)		1		1					
ā	Management									
ŀ	Legal Legal									
(	: Accounting									
	<b>i</b> Lobbying				<u> </u>					
	Professional fundraising services See Part IV, line 17									
	Investment management fees									
•	Other									
	Advertising and promotion	0.400		0.400						
13	Office expenses	2,490.		2,490.						
14	Information technology									
15	Royalties		<u>.</u>							
16	Occupancy									
17	Travel									
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
	Conferences, conventions, and meetings									
20	Interest				<u> </u>					
21	Payments to affiliates									
22	Depreciation, depletion, and amortization									
23 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)									
	LUNCH MEETINGS	36,960.	36,960.	***************************************						
	HOLIDAY PARTY	6,487.		6,487.						
	DUES-ROTARY INTERNATIONAL	6,455.		6,455.						
	CAFETERIA FUND	5,000.	5,000.							
	All other expenses SEE SCH. O	30,002.	5,593.	24,409.						
	Total functional expenses Add lines 1 through 24e	163,762.	123,921.	39,841.	0.					
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here									
	SOP 98-2 (ASC 958-720)									
					·					

Form 990 (2011) ROTARY CLUB OF TRUCKEE, INC.

Part X Balance Sheet 94-2675501 Page 11 (A) (B)

Beginning of y	ear	End of year
1 Cash – non-interest-bearing 59, 1	64. 1	25,732.
2 Savings and temporary cash investments	2	
3 Pledges and grants receivable, net	3	
4 Accounts receivable, net	4	
· · · · · · · · · · · · · · · · · · ·	3 1. S.	
and highest compensated employees. Complete Part II of Schedule L	5	*
6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)	6	
\$ 7 Notes and loans receivable, net	7	
7 Notes and loans receivable, net 8 Inventories for sale or use 7 9 Prepaid expenses and deferred charges	8	
s 9 Prepaid expenses and deferred charges	9	3,000.
10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		
b Less accumulated depreciation 10b 11,1		11,179.
11 Investments – publicly traded securities	11	
12 Investments – publicly traded securities  12 Investments – other securities See Part IV, line 11	12	
13 Investments – program-related See Part IV, line 11	13	<del>                                     </del>
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)		39,911.
17 Accounts payable and accrued expenses	17	100.
18 Grants payable	18	
19 Deferred revenue	19	
Ł 20 Tax-exempt bond liabilities	20	
21 Escrow or custodial account liability Complete Part IV of Schedule D	21	
21 Escrow or custodial account liability Complete Part IV of Schedule D  22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	22	
1 23 Construction of the c	23	
S 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	70. 25	
26 Total liabilities. Add lines 17 through 25	70. 26	100.
	28	
Organizations that follow SFAS 117, check here   X   and complete lines   X   27 through 29 and lines 33 and 34.		
§ 27 Unrestricted net assets 70,2		39,811.
28 Temporarily restricted net assets 5 29 Permanently restricted net assets	28	
	29	
Organizations that do not follow SFAS 117, check here   and complete		
F lines 30 through 34.		
lines 30 through 34.  Capital stock or trust principal, or current funds	30	
B 31 Paid-in or capital surplus, or land, building, or equipment fund	31	<u> </u>
32 Retained earnings, endowment, accumulated income, or other funds	32	
Retained earnings, endowment, accumulated income, or other funds  Retained earnings, endowment, accumulated income, or other funds  Total net assets or fund balances  Total liabilities and net assets/fund balances  70,3		39,811.
5 34 Total liabilities and net assets/fund balances 70,3	343. <b>34</b>	39, 911.

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Form **990** (2011)

Forr	n 990 (2011) ROTARY CLUB OF TRUCKEE, INC.	94-267 <u>5501</u>	Pa	age 12		
Ŗа	tXI* Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	<u>133,3</u>			
2	Total expenses (must equal Part IX, column (A), line 25)	2	163,7			
3	Revenue less expenses Subtract line 2 from line 1	3	-30,4			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	70,2			
5	Other changes in net assets or fund balances (explain in Schedule O)	5		0.		
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	39,8	311.		
Pa	t.XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					
			Yes	No		
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			1 . á d		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O					
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	<u>X</u>		
	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 oversigh review, or compilation of its financial statements and selection of an independent accountant?	it of the audit,	2c			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule $O$					
	d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis	sissued on a				
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single	3a	Х		
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the	e required audit	3b			

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Form **990** (2011)

#### SCHEDULE C (Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

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

► Complete if the organization is described below.

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

Open to Public Unspection

OMB No 1545-0047

Department of the 'Treasury Internal Revenue Service 
Attach to Form 990 of If the organization answered 'Yes.' to Form 990, Part IV, line

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

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

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

• 5	Section 501(c)(4), (5), or (6) o	rganizations Complete Part III			
	of organization			Employer identific	ation number
RO:	TARY CLUB OF TRUCKE	E, INC		94-267550	)1
		rganization is exempt under section	on 501(c) or is a	section 527 organi	zation.
1	Provide a description of the	organization's direct and indirect political o	ampaign activities in	Part IV	
2	Political expenditures			<b>►</b> \$	S
	Volunteer hours		- <del></del>		
Pai	<mark>付일:B》 Complete if the o</mark>	rganization is exempt under section	on 501(c)(3).	·- <u>-</u>	
1	-	ise tax incurred by the organization under		▶ \$	š
2		ise tax incurred by organization managers		<b>►</b> \$	S
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 8	Was a correction made?				Yes No
	olf 'Yes,' describe in Part IV				
		rganization is exempt under section			
1	Enter the amount directly ex	pended by the filing organization for section	on 527 exempt function	on activities > \$	S
2	Enter the amount of the filing function activities	g organization's funds contributed to other	organizations for sec	ction 527 exempt ► \$	S
3	Total exempt function expen line 17b	ditures Add lines 1 and 2 Enter here and	on Form 1120-POL,	<b>►</b> \$	5
4	Did the filing organization file	Form 1120-POL for this year?			Yes X No
5	organization made payments amount of political contributi	and employer identification number (EIN) For each organization listed, enter the ai ons received that were promptly and direct action committee (PAC) If additional spa	mount paid from the tly delivered to a sep	filing organization's fun arate political organizat	ds Also enter the tion, such as a separate
	(a) Name	( <b>b)</b> Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter 0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
 (6)					

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

Schedule C (Form 990 or 990-EZ) 2011

Schedule <b>C</b> (Form 990 or 990-EZ) 201	1 ROTARY CLUB	OF TRUCKEE, INC	·	94-267	
Part II-A Complete if section 501(		n is exempt under se	ction 501(c)(3) and	filed Form 5768 (e	lection under
A Check ► if the filir	ng organization belo	ngs to an affiliated group	(and list in Part IV each	affiliated group membe	er's name,
	•	I share of excess lobbying			
B Check ► If the filing	ng organization chec	cked box A and 'limited co	ntrol' provisions apply		
(The term	Limits on Lobbyi 'expenditures' mea	ing Expenditures ns amounts paid or incuri	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditi	ures to influence pu	blic opinion (grass roots lo	obbying).		
<b>b</b> Total lobbying expendition	ures to influence a l	egislative body (direct lobb	oying).		
c Total lobbying expenditi	,	nd 1b)			
<b>d</b> Other exempt purpose e	•				
e Total exempt purpose e	expenditures (add lin	nes 1c and 1d)			
f Lobbying nontaxable and both columns	nount Enter the am	ount from the following tal	ble in		regin
If the amount on line 1e, col	umn (a) or (b) is 7	he lobbying nontaxable a	mount is		
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1	,,	\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$	,	\$225,000 plus 5% of the excess	over \$1,500,000		
Over \$17,000,000		\$1,000,000			<u> </u>
g Grassroots nontaxable					· · · · · · · · · · · · · · · · · · ·
h Subtract line 1g from lin					
i Subtract line 1f from lin		•		,,,	
j If there is an amount ot section 4911 tax for this	ther than zero on eit s year?	her line 1h or line 1i, did t	he organization file For	m 4720 reporting	Yes No
(Som	e organizations tha	4-Year Averaging Period l t made a section 501(h) el s below. See the instructi	ection do not have to o	complete all of the five h 2f.)	
	Lobb	ying Expenditures During	4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	(e) Total
2a Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount	~ ~ ~		x * * * . * . * . * . * . * . * . * . *		
e Grassroots ceiling amount (150% of line 2d, column (e))		# 1 A # 1 A		なる。 なる。 なる。 なる。 なる。 なる。 なる。 なる。	
f Grassroots lobbying expenditures					000 000 77 000
BAA				Schedule C (Forr	n 990 or 990-EZ) 2011

Page 3

	(a)		(b)		
For each 'Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Am	ount	
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	<b>}</b>	Ź		•	
a Volunteers?			Ster.	s86e	
<ul> <li>b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</li> <li>c Media advertisements?</li> </ul>				· · · · · · · · · · · · · · · · · · ·	
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?					
i Total Add lines 1c through 1:	2 ¥	18			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				4	
<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912		7			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	i wai.	્યો			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		ue- was sari ~ i	· · · · · · · · · · · · · · · · · · ·	·%	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 50 section 501(c)(6).	1(c)(5)	, or	<u>.</u>	***	
300001 301(0)(0).			-	Yes No	
a sur a la la la la constanta de la constanta			1	X	
1 Were substantially all (90% or more) dues received nondeductible by members?			2	X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3	X	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	1/a\/E\			^	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' answered 'Yes.'	OR (b)	Part	III-A, lin	e 3, is	
1 Dues, assessments and similar amounts from members		1	, 1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political		√244 ·			
expenses for which the section 527(f) tax was paid).		adverse door dit			
expenses for which the section 527(f) tax was paid).		2 a			
expenses for which the section 527(f) tax was paid).  a Current year					
expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year		2 a			
expenses for which the section 527(f) tax was paid).  a Current year		2a 2b			
<ul> <li>expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> <li>3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po</li> </ul>	ess litical	2a 2b 2c 3		0	
<ul> <li>expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> <li>3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poexpenditure next year?</li> </ul>	ess litical	2a 2b 2c 3			
<ul> <li>expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> <li>3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poexpenditure next year?</li> <li>5 Taxable amount of lobbying and political expenditures (see instructions)</li> </ul>	ess litical	2a 2b 2c 3		0	
<ul> <li>expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> <li>3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poexpenditure next year?</li> </ul>	Part II-A	2a 2b 2c 3 4 5		0	
<ul> <li>expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> <li>3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polytical expenditure next year?</li> <li>5 Taxable amount of lobbying and political expenditures (see instructions)</li> <li>Part IV * Supplemental Information</li> <li>Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, line complete this part for any additional information</li> </ul>	Part II-A	2a 2b 2c 3 4 5		0	
<ul> <li>expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> <li>3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poexpenditure next year?</li> <li>5 Taxable amount of lobbying and political expenditures (see instructions)</li> <li>Part IV Supplemental Information</li> <li>Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, IAISO, complete this part for any additional information</li> </ul>	Part II-A	2a 2b 2c 3 4 5		0	
a Current year b Carryover from last year c Total 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 exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poexpenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)  Part IV ▼ Supplemental Information  Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, I Also, complete this part for any additional information	Part II-A	2a 2b 2c 3 4 5		0	

Schedule C (Form 990 of 990-EZ) 2011 ROTART CLOB OF TROCKEE, TNC.	34-20/3301	rage 4
Rantiv Supplemental Information (continued)		
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	_ <b> </b>	

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 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

Employer identification number

	· · · · · · · · · · · · · · · · · · ·			
RO'	TARY CLUB OF TRUCKEE, INC.			94-2675501
	Organizations Maintaining Dono the organization answered 'Yes' t	r Advised Funds or Other Similar Fur o Form 990, Part IV, line 6.	nds or Acc	
		(a) Donor advised funds	(b) F	unds 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 dor funds are the organization's property, subject	nor advisors in writing that the assets held in d to the organization's exclusive legal control?	lonor advised	Yes No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private bene	the benefit of the donor or donor advisor, or fo	ids can be or any other	Yes No
Рã	Conservation Easements. Compl	ete if the organization answered 'Yes	to Form 9	90, Part IV, line 7.
	Purpose(s) of conservation easements held by			
	Preservation of land for public use (e g , r	ecreation or education) Preservation	of an historic	ally important land area
	Protection of natural habitat	Preservation	of a certified	historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization last day of the tax year	on held a qualified conservation contribution in	the form of	a conservation easement on the
	last day of the tax year			Held at the End of the Tax Year
	a Total number of conservation easements		2a	ield at the Elid of the Tax Teal
	b Total acreage restricted by conservation ease	ments	2 b	
	Number of conservation easements on a certification		2c	
	d Number of conservation easements included i	n (c) acquired after 8/17/06, and not on a histo	oric	
	structure listed in the National Register		2d	
3	Number of conservation easements modified, tax year ▶	transferred, released, extinguished, or termina	ated by the or	ganization during the
4	Number of states where property subject to co	nservation easement is located >		
5	Does the organization have a written policy re and enforcement of the conservation easement	nts it holds?		∐ Yes ∐ No
6	Staff and volunteer hours devoted to monitorin			
7	Amount of expenses incurred in monitoring, if	especting, and enforcing conservation easeme	nts during the	e year
8	Does each conservation easement reported or 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?	n line 2(d) above satisfy the requirements of se	ection	Yes No
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote conservation easements	s conservation easements in its revenue and expe to the organization's financial statements that	nse statement describes the	, and balance sheet, and organization's accounting for
Pa	Mill Organizations Maintaining Colle	ctions of Art, Historical Treasures, o	r Other Sin	nilar Assets.
	Complete if the organization ansi	wered 'Yes' to Form 990, Part IV, line	8.	
1:	a If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finar	s held for public exhibition, education, or resea	enue stateme arch in further	nt and balance sheet works of rance of public service, provide,
١	b If the organization elected, as permitted under historical treasures, or other similar assets he following amounts relating to these items	r SFAS 116 (ASC 958), to report in its revenue ld for public exhibition, education, or research	statement a in furtherance	e of public service, provide the
	(i) Revenues included in Form 990, Part VIII,	line 1		►\$ ►\$
	(ii) Assets included in Form 990, Part X			' <del></del>
	If the organization received or held works of a amounts required to be reported under SFAS	116 (ASC 958) relating to these items	for financial (	gain, provide the following
	a Revenues included in Form 990, Part VIII, line	1		►\$
	Accests included in Form 000, Port V			▶ €

Schedule D (Form 990) 2011 ROTAF					94-2 <u>6</u> 7			Page 2
Part III Organizations Mainta	ning Collec	tions of Art	Histori	<u>cal Treasures, o</u>	r Other Similar Ass	ets (c	<u>ontınu</u>	ed)
3 Using the organization's acquisiti items (check all that apply)	on, accession,	and other reco	rds, chec	k any of the following	g that are a significant i	use of it	s collec	tion
a Public exhibition d Loan or exchange programs								
b Scholarly research e Other								
c Preservation for future gener								
4 Provide a description of the orga Part XIV						se in		
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or re ather than to b	eceive donatior se maintained a	ns of art, is part of	historical treasures, o the organization's co	or other similar illection?	Yes	Г	No
Part IV Escrow and Custodia line 9, or reported an	l Arrangeme	ents. Comple	ete if the	e organization ar		rm 990	), Part	: IV,
1 a Is the organization an agent, trus included on Form 990, Part X?					her assets not	Yes	. [	No
<b>b</b> If 'Yes,' explain the arrangement	ın Part XIV an	d complete the	following	table				
					<u> </u>	Amoun	it	
c Beginning balance					1c			
<b>d</b> Additions during the year					1d	_		
e Distributions during the year					1e			
f Ending balance		000 0 1 1	012		1f		Г	¬м-
2a Did the organization include an a		n 990, Part X,	ine 217			∐ Yes	L	No
b If 'Yes,' explain the arrangement Part V Endowment Funds. Co		o organizati	on ancu	vered 'Ves' to For	m 990 Part IV lin	<u>- 10</u>		
Partive   Endowment Funds. Co	(a) Current y		Prior year	(c) Two years bac			Four year	s hark
1 a Beginning of year balance.	(a) Current y	eai (b)	i iloi yeai	(c) I wo years bac	k (d) Three years back	1 :		
<b>b</b> Contributions						M.	£-1.85.	7.22
						, N	- 1 m	
c Net investment earnings, gains, and losses						110 1		
<b>d</b> Grants or scholarships							_	7 × 7 × 7
e Other expenditures for facilities and programs								
f Administrative expenses						ANA A	š. ·	
g End of year balance						3.1	· 17 3	\$ \$5
2 Provide the estimated percentag	e of the curren	t year end bala	nce (line	1g, column (a)) held	as			
a Board designated or quasi-endown	vment ►	%						
<b>b</b> Permanent endowment ►	%							
c Temporarily restricted endowmer	-	<sup>%</sup>						
The percentages in lines 2a, 2b,	and 2c should	equal 100%						
3a Are there endowment funds not organization by	ın the possessı	on of the orgar	nization th	at are held and adm	inistered for the		Yes	No
(i) unrelated organizations						3a(i)		<u> </u>
(ii) related organizations						3a(ii)		
<b>b</b> If 'Yes' to 3a(II), are the related of	organizations li	sted as require	d on Sch	edule R?		3b		l
4 Describe in Part XIV the intende								
Part VI Land, Buildings, and						4.5		
Description of property		a) Cost or othe (investmen		(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) 	Book va	alue
1 a Land	<u> </u>				1. A 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
<b>b</b> Buildings	Ļ							
c Leasehold improvements	-	11	170	· · · · · · · · · · · · · · · · · · ·			11	,179.
<b>d</b> Equipment	-	11,	179.					, 113.
e Other  Total. Add lines 1a through 1e (Column	nn (d) must ea	ual Form 990	Part X co	lumn (B) line 10(c)	)		11	,179.
BAA	iii (u) iiiusi eqi	<u>uai i 01111 990, 1</u>	J. C. A., CO	(D), mic 10(c)		dule <b>D</b> (f		90) 2011
					<u>=</u>	•		-

(6) (7) (8) (9) (10)(11)٧ij Total (Column (b) must equal Form 990, Part X, column (B) line 25)

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

Sch	edule D (Form 990) 2011 ROTARY CLUB OF TRUCKEE, INC.	94-26	<u>75501</u>	Page 4
Pa	Reconciliation of Change in Net Assets from Form 990 to Audited Financia	I Statements	N/A	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			
2	Total expenses (Form 990, Part IX, column (A), line 25)			
3	Excess or (deficit) for the year Subtract line 2 from line 1			
4	Net unrealized gains (losses) on investments			
5	Donated services and use of facilities			
6	Investment expenses		· · · · · · · · · · · · · · · · · · ·	
7	Prior period adjustments			
8	Other (Describe in Part XIV )		<del></del>	
9	Total adjustments (net) Add lines 4 through 8			_
		and 0		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a		N/A	
r,a	t XIIk   Reconciliation of Revenue per Audited Financial Statements	vvitii Revenue per Return	N/A	
1	Total revenue, gains, and other support per audited financial statements	# # **		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	- I		
	Net unrealized gains on investments	2a		
1	Donated services and use of facilities	2b		
	Recoveries of prior year grants	2c		
(	d Other (Describe in Part XIV)	2d		
	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 line 1	- 1		
	Investment expenses not included on Form 990, Part VIII, line 7b.	4a		
	Other (Describe in Part XIV )	4b		
	Add lines <b>4a</b> and <b>4b</b>	4c		
	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5		
	TXIII Reconciliation of Expenses per Audited Financial Statement		irn N/A	
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	<u></u>	<del></del>	-
	1	20		
	a Donated services and use of facilities	2a		
	Prior year adjustments	2b	J	
	Other losses	2c		
	d Other (Describe in Part XIV )			
	e Add lines 2a through 2d			
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIV )	4b		
	Add lines 4a and 4b	4c		
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			
	★ XIV Supplemental Information			
Part	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, line additional information	es 2d and 4b. Also complete this	part to provide	
				<b>-</b>
				<b>-</b> -
			<b></b>	
				- <b></b> -
BAA	TEEA3304L 05/25/11	Sche	dule <b>D</b> (Form 990	 ) 2011

Schedule D (Form 990) 2011 ROTARY CLUB OF TRUCKEE,  RärtiXIV: Supplemental Information (continued)	INC.	94-2675501 Page 5
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TEEA3305L 05/25/11

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Schedule **D** (Form 990) 2011

#### SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization	OF EDUCKER					94-267	7 5 5 0 1
ROTARY CLUB	OF TRUCKEE,	LNC.	nization ai	newared 'Y	'es' to Form 990 Part I		73301
Partil Form 990	)-EZ filers are not re	quired to compl	ete this p	art	es' to Form 990, Part I	v, iiile 17	
1 Indicate wheth  a Mail solice  b Internet a  c Phone so  d In-person  2 a Did the organ	her the organization itations ind email solicitations licitations solicitations ization have a writte	raised funds thi s n or oral agreer	rough any	of the folloge f	Solicitation of non- Solicitation of gove Special fundraising	all that apply government grant rnment grants events directors, trustee	
<b>b</b> If 'Yes,' list the compensated	ne ten highest paid in at least \$5,000 by th	idividuals or en ne organization	tities (fund	draisers) p	ursuant to agreements	under which the f	undraiser is to be
(i) Name and ad or entity (	dress of individual (fundraiser)	of individual (ii) Activity (iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid (or retained be fundraiser listed column (i)	y) (or retained by)	
			Yes	No			
1							
2							
3	•						
4							
5							
6	· -						
7							
8							
9							
10							
Total			'	<b>&gt;</b>			0.
3 List all states or licensing	in which the organiz	ation is register	red or lice	1			is exempt from registration
		_ <b></b>					
					- <b></b>		
				. <b>-</b>			
						<b>-</b>	

		G (Form 990 or 990-EZ) 2011 ROTARY Fundraising Events. Complete if more than \$15,000 of fundraising	the organization ar	nswered 'Yes' to Fo	94-267 rm 990, Part IV, lir on Form 990-EZ,	ne 18. or reported
R E		List events with gross receipts gr	(a) Event #1  CADILLAC BALL (event type)	(b) Event #2  NEVADA COUNTY (event type)	(c) Other events  1 (total number)	(d) Total events (add column (a) through column (c))
REVENUE	ו	Gross receipts	119,107.	24,549.	20,406.	164,062.
Ē	2	Less Charitable contributions	13,252.			13,252.
	3	Gross income (line 1 minus line 2)	105,855.	24,549.	20,406.	150,810.
	4	Cash prizes				
	5	Noncash prizes				
D I RECT	6	Rent/facility costs				
C T	7	Food and beverages				
E X P	8	Entertainment				
EXPENSES	9	Other direct expenses	75,157.	14,564.	8,805.	98,526.
Š	10	Direct expense summary Add lines 4 th	rouah 9 ın column (d)		<b>&gt;</b>	98,526.
	11	1101 1110 1110 1110 1110 1110 1110 1110			<b>•</b>	52,284.
Pai	ŧЩ	Gaming. Complete if the organize \$15,000 on Form 990-EZ, line 6a	ation answered 'Ye:	s' to Form 990, Pari	t IV, line 19, or rep	orted more than
R E V E N			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
REVENUE	1	Gross revenue	(a) Bingo	bingo/progressive	(c) Other gaming	(add column (a)
		Gross revenue  Cash prizes	(a) Bingo	bingo/progressive	(c) Other gaming	(add column (a)
E D X	2		(a) Bingo	bingo/progressive	(c) Other gaming	(add column (a)
	2	Cash prizes	(a) Bingo	bingo/progressive	(c) Other gaming	(add column (a)
E D X	3	Cash prizes  Non-cash prizes  Rent/facility costs	(a) Bingo	bingo/progressive	(c) Other gaming	(add column (a)
E X P R E	2 3 4 5	Cash prizes Non-cash prizes	Yes%	bingo/progressive	(c) Other gaming  Yes% No	(add column (a)
E D X	2 3 4 5	Cash prizes  Non-cash prizes  Rent/facility costs  Other direct expenses	Yes %	bingo/progressive bingo	Yes%	(add column (a)
E X P R E	2 3 4 5	Cash prizes  Non-cash prizes  Rent/facility costs  Other direct expenses  Volunteer labor	Yes% No rough 5 in column (d)	Yes%	Yes%	(add column (a)

Schedule G (Form 990 or 990-EZ) 2011

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

**b** If 'Yes,' explain

<u>Scne</u>	edule G (Form 990 or 990-EZ) 2011 ROTARY CLUB OF TRUCKEE, INC.	94-26/550	<u> 1                                   </u>	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity administer charitable gaming?	formed to	Yes	No
13	Indicate the percentage of gaming activity operated in			
a	The organization's facility	13a		~~~~ <u>~</u> ~
	An outside facility	13b		<del>8</del>
14	Enter the name and address of the person who prepares the organization's gaming/special events books	and records		
	Name •			
	Address •			
15 a	Does the organization have a contact with a third party from whom the organization receives gaming reve	nue?	Yes	No
t	olf 'Yes,' enter the amount of gaming revenue received by the organization > \$ and	the amount	_	_
	of gaming revenue retained by the third party • \$			
C	: If 'Yes,' enter name and address of the third party			
	Name ►		<b>-</b>	<b>-</b>
	Address ►			l t
	Address -			•
16	Gaming manager information			
	Name •			
	Gaming manager compensation ► \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to state gaming license?  Dienter the amount of distributions required under state law to be distributed to other exempt organizations	L	Yes	No
Ç	organization's own exempt activities during the tax year > \$	or spent in the		
Par	Supplemental Information. Complete this part to provide the explanations require columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as appethis part to provide any additional information (see instructions).	ed by Part I, licable. Also	, line 2 comp	b, lete
		<del></del>		

TEEA3703L 05/20/11

Schedule G (Form 990 or 990-EZ) 2011

BAA

Schedule I (Form 990) (2011) % × (h) Purpose of grant or assistance Open to Public Inspection OMB No 1545-0047 COMMUNITY 201 COMMUNITY Employer identification number SUPPORT SUPPORT 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. Yes Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to 94-2675501 (g) Description of 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 used to award the grants or assistance? (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered 'Yes' to Form 990, Part IV, lines 21 or 22. Attatch to Form 990. TEEA3901L 06/01/11 Grants and Other Assistance to Organizations, Governments, and Individuals in the United States 。 ö (e) Amount of non-cash assistance 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 11,568 12,150 (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Part II can be duplicated if additional space is needed Enter total number of other organizations listed in the line 1 table 68-0173169 501C3 68-0484075 501C3 Part I General Information on Grants and Assistance (b) EIN 1 (a) Name and address of organization (1) IRUCKEE ROTARY FOUNDATION ROTARY CLUB OF TRUCKEE, SIERRA SENIOR SERVICES or government TRUCKEE, CA 96160 TRUCKEE, CA 96162 P.O. BOX 3210 P.O. BOX 4152 Department of the Treasury nternal Revenue Service Name of the organization SCHEDULE I (Form 990) @| 3 ୍ର (S) <u>@</u> E **£**|

Schedule I (Form 990) (2011) ROTARY CLUB OF TRUCKEE, INC.

Partills Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed. 94-2675501

Page 2

(f) Description of non cash assistance	•							and any other additional information.									
(e) Method of valuation (book FMV, appraisal, other)								I, line 2,						 	 		 
(d) Amount of non cash assistance								to provide the information required in Part		 		1		,                   	,                   	; ; ; ; ; ; ; ; ;	
(c) Amount of cash grant								provide the inform		 	 	 	!                   	 	f   	} 	
(b) Number of recipients										 	 	! ! ! ! ! ! !	1 	1 	 	! ! ! ! ! ! ! !	 
(a) Type of grant or assistance		2	E	4	ıc	Q	7	Partival Supplemental Information. Complete this part			; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	 	1 1 1 1 1 1 1 1 1 1 1 1 1	 			

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Schedule I (Form 990) (2011)

#### **SCHEDULE 0** (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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.

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Employer identification number

ROTARY CLUB OF TRUCKEE, INC.	94-2675501
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION	
TRUCKEE ROTARY FOUNDATION- GRANT TO HELP SUPPORT THE FOUNDATION	N IN THEIR MISSION OF
SUPPORTING LOCAL COMMUNITY CHARITABLE NEEDS.	
FUNDING_OF_SCHOLARSHIPS_TO_LOCAL_HIGH_SCHOOL_GRADUATES	
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
PRESIDENT AND TREASURER REVIEWED THE RETURN PRIOR TO FILING.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	/AILABLE
GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS ARE AVA	ILABLE UPON REQUEST.
	<b>-</b>

2011

## **SCHEDULE O - SUPPLEMENTAL INFORMATION**

PAGE 2

ROTARY CLUB OF TRUCKEE, INC.

94-2675501

# FORM 990, PART IX, LINE 24E OTHER EXPENSES

	(A)	(B)	(C)	(D)
	TOTAL	PROGRAM SERVICES	MANAGEMENT & GENERAL	FUNDRAISING
MISCELLANEOUS	3,445.		3,445.	
CHARTER NIGHT	3,355.		3,355.	
ROTARY FOUNDATION	3,180.		3,180.	
DUES-DISTRICT	3,014.		3,014.	
CAREER DAY	2,928.	2,928.		
MEETING SITE RENT	2,535.		2,535.	
SHIRTS/HATS/PINS/APRONS/BADGES	1,829.		1,829.	
CHRIS MATTHEWS FUNDRAISER	1,395.	1,395.		
CREDIT CARD FEES	1,305.		1,305.	
STORAGE UNIT RENTAL	1,300.		1,300.	
PRINTING AND PUBLICATIONS	1,297.		1,297.	
BLOOD DRIVE	941.	941.		
NEW BABY FUND	788.		788.	
GSE EXPENSE	751.		751.	
WEBSITE & INTERNET	599.		599.	
BOARD GIFTS	528.		528.	
CLUB SERVICE	284.	284.		
CHAMBER OF COMMERCE	265.		265.	
AWARDS NIGHT	176.		176.	
SENIOR WOODCUTTING	45.	45.		
POSTAL BOX RENT	42.		42.	
TOTAL	\$ 30,002.	\$ 5,593.	\$ 24,409.	\$ 0.