_				·	04683
1	•			- 1	OMB No. 1545-1150 2010
	000 57	Short Form Return of Organization Exempt From I	ncomo Tay		OMB No. 1545-1150
For	m 990-EZ	Lindor costion 501(c) 527 or 4947(a)(1) of the Internal	Revenue Code		2009
		(except black lung benefit trust or private found	dation)	must file Form	2005
		Sponsoring organizations of donor advised funds and controlling organizations as defined 990. All other organizations with gross receipts less than \$500,000 and total assets less than	an \$1,250,000 at the er	nd of the year	Open to Public
Depa Interr	rtment of the Treasury nal Revenue Service	may use this form. The organization may have to use a copy of this return to satisfy state re	porting requirements.		Inspection
•		far year, or tax year beginning $7/01$ , 2009, and e	nding 6/30		, 2010
	Check if applicable:	ar year, or tax year beginning 7/01 , 2009, and e			identification number
	Address change Use II	S REDWOOD CITY ROTARY CHARITABLE FOUND		94-26	582890
	Name change label	C/O JAMES W. NEWELL, 260 SHERIDAN #440		E Telephone	number
	Initial return type. See See Speci			650-4	62-0400
	Amended return Instru	10-		F Group E	xemption
	Application pending				
	<ul> <li>Section 501(c)</li> </ul>	χ3) organizations and 4947(a)(1) nonexempt charitable trusts httach a completed Schedule Α (Form 990 or 990-EZ).	G Accounting Other (spec		Cash Accrual
	music		H Check ► 2	if the or	ganization is <b>not</b>
	Website: ► <u>N/A</u>		required to 990-EZ, or	attach Sche 990-PF).	dule B (Form 990,
<u>J</u>	Tax-exempt status (chec	$x = \frac{1}{2} (x = 1)$ (x = 1) (x = 1) $x = \frac{1}{2} (x = 1)$ (x = 1)			not more than
n	\$25,000. A Form 990	-EZ or Form 990 return is not required, but if the organization chooses to fi	ile a return, be sur	e to file a co	mplete return.
L	Add lines 5b, 6b, ar	d 7b, to line 9 to determine gross receipts; if \$500,000 or more, file	Form 990	Þ¢	128,492.
	instead of Form 990	EZ e, Expenses, and Changes in Net Assets or Fund Balan	res (See the	instructio	
Fa	1 Contributions.	gifts, grants, and similar amounts received		1	11,481.
	2 Program servi	ce revenue including government fees and contracts		2	
		lues and assessments			
		come		4	
	5a Gross amount	from sale of assets other than inventory			
R	c Gain or (loss) from	n sale of assets other than inventory (Subtract In 5b from In 5a).			
E	6 Special events an	d activities (complete applicable parts of Schedule G). If any amount is from gaming, ch	neck here 🕨		
REVERU	a Gross revenue	e (not including \$of contributions	110		
Ĕ		ne 1)	<u>116,9</u> 23,8		
	b Less: direct ex	spenses other than fundraising expenses.       6b         ss) from special events and activities (Subtract line 6b from line 6a).       6b		A.C. SA 44-3 4613	93,129.
	7a Gross sales of	f inventory, less returns and allowances			
	b Less: cost of o	goods sold			
		r (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	<u></u>
	8 Other revenue (de	escribe ►		_) <u>8</u> ►9	104,640.
	9 Total revenue	Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 nilar amounts paid (attach schedule)SEE. S	TATEMENT 1	10	122,572.
	10 Grants and sir 11 Benefits paid	to or for members	N/ED	10	
EX	12 Salaries, othe	to or for members	I V III V	12	
EXPENSE	13 Professional f	ees and other payments to independent contractors Automet Gen		13	
S	14 Occupancy, re	ent, utilities, and maintenance	<del>~</del> · 2010 · · · · · ·	14	
S	to Thinking, publi	serieus) beerege, end empford			<u> </u>
	16 Other expenses (d 17 Total expense	lescribe ► Regis	e Truis	▶ 17	122,572.
	18 Excess or (de	ficit) for the year (Subtract line 17 from line 9)			-17,932.
A N S	19 Net assets or	fund balances at beginning of year (from line 27, column (A)) (must	agree with end-of	-year	150 254
N S E S T E T T		d on prior year's return) s in net assets or fund balances (attach explanation)			158,354.
· T S	20 Other changes 21 Net assets or	fund balances at end of year. Combine lines 18 through 20.		► 21	140,422.
Pa	rt II Balance	Sheets. If Total assets on line 25, column (B) are \$1,250,000 or m	ore, file Form 990	D instead of	
×.8		(See the instructions for Part II.)	(A) Beginning	of year	(B) End of year
22	Cash, savings, an	d investments	158,	354.22	140,422.
23	Land and building	s)		23 24	
24 25	Uther assets (des	cribe ►)	158.	354.25	140,422.
25	Total liabilities (de	escribe ► )		0.26	0.
27	Net assets or fund	escribe ►)). <b>J balances</b> (line 27 of column (B) must agree with line 21)	158,	354.27	140,422.

BAA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

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Form 990-EZ (2009)

TEEA0803L 01/30/10

Form 990-EZ (2009) REDWOOD CITY RO Part III Statement of Program Se	rvice Accomplishments	s (See the instruction			32890 Page 2 Expenses
What is the organization's primary exempt purpose? RC Describe what was achieved in carrying out th describe the services provided, the number of program title.			ncise manner, each	501 ( orga 4947 for o	uired for section c)(3) and (4) nizations and section (a)(1) trusts; optional thers.)
28 OPERATION OF ROTARY CHARD		rants, check here		28 a	122,572.
29					
(Grants \$ ) If th 30				29 a	
31 Other program services (attach schedule	is amount includes foreign g e) is amount includes foreign g		<u></u>	30 a 31 a	
32 Total program service expenses (add li Part IV List of Officers, Directors	nes 28a through 31a)		•	32	122, 572.
(a) Name and address	(b) Title and average hours per week devoted to position		(d) Contributions employee benefit plan deferred compensa	to is and	(e) Expense account
PETE LIEBENGOOD	PRESIDENT 0	0.		0.	0.
GLENN NIELSEN	PRESIDENT ELECT 0	0.		0.	0.
CAROL EBNER	SECRETARY 0	0.		0.	0.
BRAD SHEPHERD	TREASURER 0	0.		0.	0.
PAUL PICCIONE	PAST PRESIDENT 0	0.		0.	0.
<u>STEVE WEBB</u>	DIRECTOR 0	0.		0.	0.
KAREN KRUEGER	DIRECTOR 0	0.		0.	0.
ROLAND HAGA	DIRECTOR 0	0.		0.	0.
CRAIG TEMPLETON	DIRECTOR 0	0.		0.	0.
RUTH ANN GARDNER	DIRECTOR 0	0.	****	0.	0.
, JILL SINGLETON	DIRECTOR 0	0.		0.	0.

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Pa	<b>Other Information</b> (Note the statement requirements in the instrs for	r Par	<u>rtV.) S</u>	SEE STA	TEMP	EN
						Y
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' atta each activity				33	
34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a confo	rmed	copy of the ch	anges	34	
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others) attach a statement explaining why the organization did not report the income on Form 990-T.	, but no	at reported on Form	n 990-T,		
	a Did the organization have unrelated business gross income of \$1,000 or more or was it sub reporting, and proxy tax requirements?				35 a	
ł	b If 'Yes,' has it filed a tax return on Form 990-T for this year?	• • • • •			<u>35 b</u>	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition year? If 'Yes,' complete applicable parts of Schedule N	n of ne	et assets durin	g the	36	
	a Enter amount of political expenditures, direct or indirect, as described in the instructions . •				6357	
ł	b Did the organization file Form 1120-POL for this year?				37 b	
38 a	a Did the organization borrow from, or make any loans to, any officer, director, trustee, or ke any such loans made in a prior year and still outstanding at the end of the period covered b	/ empl	oyee <b>or</b> were return?		38a	
	b if 'Yes,' complete Schedule L, Part II and enter the total amount involved			N/A		
39	Section 501(c)(7) organizations. Enter:	1				
a	a Initiation fees and capital contributions included on line 9.	39a	~	N/A		
ł	b Gross receipts, included on line 9, for public use of club facilities	39b		N/A	2.00	
	a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during th					
	section 4911 ► 0.; section 4912 ► 0.; section 4912	5 <sup>°</sup> ►_		0.	976-9 1	
ł	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4 transaction during the year or is it aware that it engaged in an excess benefit transaction w prior year, and that the transaction has not been reported on any of the organization's prior 'Yes,' complete Schedule L, Part I.	Form	s 990 or 990-F	7? If	40 b	
C	c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	►		0.		197 - 197 - 197 - 197
	d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization.	►		0.	£	
	e All organizations. At any time during the tax year, was the organization a party to a prohibit shelter transaction? If 'Yes,' complete Form 8886-T				40 e	59K.)
41	List the states with which a copy of this return is filed <b>CA</b>				·,	
42 a	a The organization's books are in care of F TREASURER Located at F 260 SHERIDAN, 440, PALO ALTO, CA		Telephone no. 🕨	650-4(	62-0 <sup>.</sup>	40

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<b>b</b> At any time during the calendar year, did the organization have an interest in or a signature or other authority over a		Yes	No
<b>b</b> At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42 b		Х
If 'Yes,' enter the name of the foreign country: ►			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.			
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42 c		Х
If 'Yes,' enter the name of the foreign country: ►			

43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here		•	N/A N/A
			Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.	45		x
BAA		Form 990	-EZ	(2009)
	· ·			

Form 990-EZ (2009) REDWOOD CITY ROTARY CHARITABLE FOUND							
	Form 990-EZ (2009)	REDWOOD	CITY	ROTARY	CHARITABLE	FOUND	

94-2682890

Part VI	Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section
	501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions
	46-49b and complete the tables for lines 50 and 51.

AG	Did the exercise tion engage in direct or indirect political compaign activities on behalf of or in engocition to candidates		Yes	No
40	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 1	46		Х
	Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II.			X
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	48		X
49 a Did the organization make any transfers to an exempt non-charitable related organization?				X
	b If 'Yes,' was the related organization a section 527 organization?	49 b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
NONE				
				· ·

f Total number of other employees paid over \$100,000..... ►

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51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

	(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE			

►

d Total number of other independent contractors each receiving over \$100,000.....

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has Signature of officer Type or print name and title.	s, and to the best of my knowledge and belief, it is s any knowledge.
Paid	Preparer's James Co. Newel 11/2/10	Check if Preparer's Identifying Number (See instructions) employed ► P00049550
Pre- parer's	Firm's name for WAVRINEK, TRINE, DAY & CO., LLP	
Use	yours if self- employed), ► 260 SHERIDAN AVE., SUITE 440	EIN • 95-2648289
Only	address, and ZIP + 4 PALO ALTO, CA 94306	Phone no. ► (650) 462-0400
May the IR	S discuss this return with the preparer shown above? See instructions	►X Yes No
BAA		Form 990-EZ (2009)

Page 4

SCHEDULE A (Form 990 or 990-EZ)		Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.					Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1)							<b>09</b>	
Department of the Treasury Internal Revenue Service	► Attach	to Form 990 or Form 990-E			te instr	uctions		1992 (* 14 1993) 1994 - 1995		Public ection					
Name of the organization	<u>ا میں میں ایک ایک ایک ایک ایک ایک ایک ایک ایک ایک</u>	<u>,</u>	*				Employe	r identificat	ion number						
REDWOOD CITY F	OTARY CHARITABL	E FOUND					94-20	582890	)						
Part I Reason fo	or Public Charity Sta	tus (All organizations	must o	comple	te this	part.)	See i	nstructi	ions						
		cause it is: (For lines 1 thro													
		association of churches des					•								
2 A school des	cribed in section 170(b)(	1)(A)(ii). (Attach Schedule	E.)												
		vice organization described													
4 A medical re	search organization oper	ated in conjunction with a l	nospital	describe	d in sec	tion 17	0(b)(1)(A	<b>()(iii)</b> . En	nter the hos	spital's					
name, city, a	nd state:														
170(b)(1)(A)(	iv). (Complete Part II.)	afit of a college or universit					mmenta	l unit des	scribed in s	section					
7 An organizat	ate, or local government ion that normally receive '0(b)(1)(A)(vi). (Complete	or governmental unit descr s a substantial part of its s e Part II.)	upport fr	om a go	vernme	)(A)(V). ntal uni	t or fron	n the ger	neral public	describ	ed				
		o <b>n 170(b)(1)(A)(vi).</b> (Comple													
from activities investment in	related to its exempt func	(1) more than 33-1/3 % of its tions – subject to certain exc iness taxable income (less (Complete Part III.)	eptions.	and (2) r	io more i	than 33-	1/3 % of	its suppo	ort from gros	SS	er				
10 An organizat	ion organized and operat	ed exclusively to test for p	ublic saf	ety. See	sectior	ı 509(a)	(4).								
11 An organizat	ion organized and operat	ted exclusively for the bene is described in section 509( anization and complete line	fit of, to (a)(1) or	perform section	the fur 509(a)(	nctions of	of. or ca	rry out th <b>509(a)(3</b> )	ne purpose ). Check t	s of one he box t	or hat				
a 🗍 Type I	<b>b</b> Type					ted		d 🗌	Type III-	Other					
e By checking	this box, I certify that the	organization is not control	lled dired	tly or in	directly	by one	or more	disquali	fied perso	ns other	r				
than foundat 509(a)(2).	ion managers and other	than one or more publicly s	supporte	d organi	zations	describe	ed in se	ction 509	9(a)(1) or s	ection					
f If the organiz	zation received a written	determination from the IRS	that is a	a Type I	, Type I	l or Typ	e III sup	porting o	organizatio	n,					
g Since Augus	t 17, 2006, has the organ	ization accepted any gift	or contrib	oution fro	om any	of the fo	ollowing	persons	?						
										Yes I	No				
(i) a perso	n who directly or indirect	tly controls, either alone or e supported organization?.	togethe	with pe	ersons d	escribe	d in (ii) i	and (iii)	11 g (i)						
Delow,	the governing body of the	escribed in (i) above?		• • • • • • • • •					11g(ii)						
		son described in (i) or (ii) a							11g (iii)						
		ut the supported organizati								L					
(i) Name of Suppor Organization	1	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) organiza (i) liste	Is the tion in col. d in your erning ment?	the organ	vou notify nization in (i) of upport?	organizat	s the ion in col. zed in the S.?	(vii) Amour	nt of Suppo	rt.				
			Yes	No	Yes	No	Yes	No							
								T							
			·												
				ļ											
Total															

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

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Schedule A (Form 990 or 990-EZ) 2009

OMB No. 1545-0047

9	0		Page	2
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 Schedule A (Form 990 or 990-EZ) 2009
 REDWOOD CITY ROTARY CHARITABLE FOUND
 94-2682890

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

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

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Sec	tion A. Public Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')						
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						
4	Total. Add lines 1-through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royatties and income form similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc. (see ins	structions)				
	13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						
	tion C. Computation of Pul						
	Public support percentage for 20						<u>%</u>
	15 Public support percentage from 2008 Schedule A, Part II, line 14						
16 a	16a 33-1/3 support test – 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization						
Ŀ	<b>b 33-1/3 support test</b> – <b>2008.</b> If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization						
17 a	<b>17a 10%-facts-and-circumstances test – 2009</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ►						
b	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the 'facts-and	meets the 'facts-a	and-circumstances	s' test, check this	box and stop her	e. Explain in Part	IV how the
	Private foundation. If the organiz	zation did not che	ck a box on line,	13, 16a, 16b, 17a	, or 17b, check th	is box and see in	structions 🕨 🗌
BAA					Sch	nedule A (Form 99	90 or 990-EZ) 2009

#### Schedule A (Form 990 or 990-EZ) 2009 REDWOOD CITY ROTARY CHARITABLE FOUND

94-2682890

Page 3

Partill Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support

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	tion A. Public Support						
	ndar year (or fiscal yr beginning in)►	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	14,151.	24,414.	34,188.	24,584.	11,481.	108,818.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	100,681.	88,303.	116,682.	119,315.	116,981.	541,962.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 5	114,832.	112,717.	150,870.	143,899.	128,462.	650,780.
7 a	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the				_		_
	year	0.	0.	0.	0.	0.	0.
	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8	Public support (Subtract line						
	7c from line 6.)						650,780.
	tion B. Total Support	r					
	ndar year (or fiscal yr beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	ndar year (or fiscal yr beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	114,832.	112,717.	150,870.	143,899.	128,462.	650,780.
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form						650,780. 2,980. 0.
9 10 a E	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses	114,832.	112,717.	150,870.	143,899.	128,462.	650,780.
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	<u>114,832</u> . 635.	<u>112,717.</u> 942.	150,870. 161.	143,899. 1,212.	128,462. 30.	650,780. 2,980. 0.
9 10 a b 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is	<u>114,832</u> . 635.	<u>112,717.</u> 942.	150,870. 161.	143,899. 1,212.	128,462. 30.	650,780. 2,980. 0. 2,980. 0. 0.
9 10a b 11 12 13	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	<u>114,832</u> . 635. 635.	<u>112,717.</u> 942. 942.	150,870. 161. 161.	143,899. 1,212. 1,212.	<u>128,462.</u> <u>30.</u> <u>30.</u>	650,780. 2,980. 0. 2,980. 0. 653,760.
9 10a b 11 12 13	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	114,832. 635. 635.	112, 717. 942. 942.	150,870. 161. 161.	143,899. 1,212. 1,212.	128, 462. 30. 30.	<u>650,780.</u> <u>2,980.</u> <u>0.</u> <u>2,980.</u> <u>0.</u> <u>0.</u> <u>653,760.</u> <u>3)</u>
9 10a t 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) <b>Total support.</b> (add Ins 9, 10c, 11, and 12.) <b>First five years.</b> If the Form 990 organization, check this box and	114,832. 635. 635. 635.	112, 717. 942. 942.	150,870. 161. 161.	143,899. 1,212. 1,212.	128, 462. 30. 30.	<u>650,780.</u> <u>2,980.</u> <u>0.</u> <u>2,980.</u> <u>0.</u> <u>0.</u> <u>653,760.</u> <u>3)</u>
9 10a t 11 12 13 14 <u>Sec</u>	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	114,832. 635. 635. is for the organiza stop here blic Support P	112, 717. 942. 942. ation's first, secon ercentage	150,870. 161. 161. d, third, fourth, c	143,899. 1,212. 1,212. or fifth tax year as	128, 462. 30. 30.	650,780. 2,980. 0. 2,980. 0. 0. 653,760. 3) ►
9 10a 11 11 12 13 14 <u>Sec</u> 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	114,832. 635. 635. 635. 635. bic Support P 009 (line 8, column	942. 942. 942. 942. ation's first, secon ercentage n (f) divided by lin	150, 870. 161. 161. d, third, fourth, c	143,899. 1,212. 1,212.	128, 462. 30. 30. 30. 30.	650,780. 2,980. 0. 2,980. 0. 0. 653,760. 3) 99.5%
9 10a 11 12 13 14 <u>Sec</u> 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	114,832. 635. 635. 635. 635. 635. bic Support P 009 (line 8, column 2008 Schedule A,	<u>942.</u> 942. 942. 942. ation's first, secon ercentage n (f) divided by lin Part III, line 15.	150, 870. 161. 161. d, third, fourth, c e 13, column (f))	143,899. 1,212. 1,212.	128, 462. 30. 30. 30. 30.	650,780. 2,980. 0. 2,980. 0. 0. 653,760. 3) ►
9 10a 11 12 13 14 <u>Sec</u> 15 <u>16</u> <u>Sec</u>	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	114,832. 635. 635. 635. 635. 635. 635. 635. 635	942. 942. 942. 942. 942. ation's first, secon ercentage n (f) divided by lin Part III, line 15 <b>ne Percentage</b>	150, 870. 161. 161. d, third, fourth, c e 13, column (f))	143,899. 1,212. 1,212.	128, 462. 30. 30. 30. 30. 15. 16.	650,780. 2,980. 0. 2,980. 0. 0. 653,760. 3) ▶ □ 99.5%
9 10a 11 12 13 14 <u>Sec</u> 15 16 <u>Sec</u> 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	114,832. 635. 635. 635. 635. bic Support P 09 (line 8, column 2008 Schedule A, estment Incon or 2009 (line 10c,	942. 942. 942. 942. ation's first, secon ercentage n (f) divided by lin Part III, line 15 ne Percentage column (f) divided	150, 870. 161. 161. 4, third, fourth, controls 13, column (f)) 1 by line 13, colum	143,899. 1,212. 1,212. 0r fifth tax year as mn (f)	128, 462. 30. 30. 30. 30. 15 16 17	650,780. 2,980. 0. 2,980. 0. 0. 653,760. 3) ▶ □ 99.5% 99.5% 0.5%
9 10a 11 12 13 14 <u>Sec</u> 15 <u>16</u> <u>Sec</u> 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	114,832. 635. 635. 635. 635. bic Support P 109 (line 8, column 2008 Schedule A, estment Incon or 2009 (line 10c, rom 2008 Schedul organization did not	942. 942. 942. 942. ation's first, secon ercentage n (f) divided by lin Part III, line 15 ne Percentage column (f) divided e A, Part III, line check the box on li	150, 870. 161. 161. 161. 4, third, fourth, controls 13, column (f)) 4 by line 13, column 17	143, 899. 1, 212. 1, 212. 1, 212. or fifth tax year as mn (f)	128, 462. 30. 30. 30. 30. 15 16 	650,780. 2,980. 0. 2,980. 0. 0. 653,760. 3) ▶ 99.5% 99.5% 0.5% 0.6%
9 10a 11 12 13 14 <u>Sec</u> 15 <u>16</u> <u>Sec</u> 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	114,832. 635. 635. 635. 635. 635. 635. 635. 635	942. 942. 942. 942. ation's first, secon ercentage n (f) divided by lin Part III, line 15 ne Percentage column (f) divided e A, Part III, line check the box on li The organization d not check a box o here. The organi	150, 870. 161. 161. 161. 4 third, fourth, c 161.	143, 899. 1,212. 1,212. 1,212. 0,212. 1,2	128, 462.         30.         15.         16.         17.         18.         %, and line 17 is not organization	650, 780.         2, 980.         0.         2, 980.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.5 %         0.5 %         0.6 %

Schedule A (Form 990 or 990-EZ) 2009

Page 4

 Schedule A (Form 990 or 990-EZ) 2009
 REDWOOD CITY ROTARY CHARITABLE FOUND
 94-2682890
 Pa

 Part IV
 Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

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

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# 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 Form990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047
2009
2003
Open to Public
Inspection

Nene of the organization         Employer deadfaction number 94-2682890           Park I.         Fundations Activities. Complete if the organization answered 'Yes' to Form 990. Part IV. line 17.           Park I.         Fundations Activities. Complete if the organization answered 'Yes' to Form 990. Part IV. line 17.           Mail solicitations         Solicitation of government grants           Phone solicitations         Solicitation of government grants           Componentiations         Solicitation of government grants           Phone solicitations         Imprevention           Imprevention         Imprevention           2a Old the organization         Imprevention           ON the organization         Imprevention           Of the organization         Imprevention           Imprevention         Imprevention           On the organization         Imprevention           Or entity (fundraiser)         <
Functinging Activities Complete if the organization answered 'Yes' to Form 990, Part IV, line 17.         Part III       Form 990Z filters are not required to complete this part.         Indicate whether the organization raised funds through any of the following activities. Check all that apply.         Mail solicitations       Solicitation of government grants         Indicate whether the organization raised funds through any of the following activities. Check all that apply.         Solicitations       Solicitation of government grants         In-person solicitations       Solicitational fundraising events         In-person solicitations       Special fundraising services?.         If 'yes,' list be the highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be         Ot Nome of individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be         Ot Name of individual or or individuals or entities usotday or antities usotday or antities or entities (fundraiser)       (i) Activity         Ves       No         Ot not not individual or entities usotday or antities usotday or antities usotday or antities or entities of the program of the fundraiser is to be       (v) Amount paid to (or retained by) (or retained by) (or retained by) (or granization         Ot Name of individual or entities of the program
Part List Form 990EZ filers are not required to complete this part.         1       Indicate whether the organization raised funds through any of the following activities. Check all that apply.         Mail solicitations       Solicitation of government grants         Pronous solicitations       Solicitation of government grants         In-person solicitations       Solicitation of government grants         2a Dd the organization have written or oral agreement with any individual (including officers, directors; trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?       Ives [Ives ] No         b If Yes, Iist the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.       (v) Amount paid to (or retained by) fundraiser listed in form controlutions?         (I) Name of individual or entity (fundraiser)       (ii) Activity (iii) Did fundraiser from activity or control form activity or c
Mail solicitations       Solicitation of non-government grants         Phone solicitations       Solicitation of government grants         2a Did the organization have written or oral agreement with any individual (including officers, directors, trustees or key emblyees listed in Form 990, Part VII) or entity in connection with professional hundraising services?       Image: Constrained Solicitation of government grants         2a Did the organization have written or oral agreement with any individual (including officers, directors, trustees or key emblyees listed in Form 990, Part VII) or entity in connection with professional hundraising services?       Image: Constrained Solicitation of government grants         0) Name of individual or entities (fundraiser)       (ii) Activity       (iii) Activity or control of contrubinos       (v) Amount paid to (or retained by) control or entity (fundraiser)       (v) Amount paid to (or retained by) control or entity (fundraiser)       (v) Amount paid to (or retained by) control or entity (fundraiser)       (v) Amount paid to (or retained by) control or entity (fundraiser)         Vers       Yes       No       Image: Constrained Solicitation of government grants         Image: Constrained Solicitation of government grants       Image: Constrained Solicitation of government grants       Image: Constrained Solicitation of government grants         Image: Constrained Solicitation of government grants       Image: Constrained Solicitation of government grants       Image: Constrained Solicitation of government grants         Image: Constreleased Solicitatione of government grants
Internet and email solicitations       Solicitation of government grants         Phone solicitations       Special fundraising events         2a Did the organization have written or oral agreement with any individual (including officers, directors, frustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?       Image: Constraint of the professional fundraising services?         bit Yes; Tist the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.       (ii) Activity       (iii) Did fundraiser)       (ii) Activity have usualy or control of or oral agreements under which the fundraiser listed in contralined by for retained by organization       (i) Name of individual (iii) Did fundraiser)       (ii) Activity have usualy or control of organization       (iv) Gross receipts from activity       (v) Amount paid to (or retained by) organization         ior entity (fundraiser)       (ii) Activity       (iii) Did fundraiser is to be individuals or entities (fundraiser)       (v) Gross receipts from activity       (v) Amount paid to (or retained by) organization         Ves       No       Ves       No       Image: Control of the control
Phone solicitations     Phone solicitations     Phone solicitations     Special fundraising events     Phone solicitations     Phone solicitations     Special fundraising events     Phone solicitations     Pho
2a Did the organization have written or oral agreement with any individual (including officers, directors, trustees or key employees listed in form 990, Part VII) or entity in connection with professional fundraising services?
2a Did the organization have written or oral agreement with any individual (including officers, directors; trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?       Yes   No         b ff 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.       (ii) Activity       (iii) Activity       (iii) Activity       (iii) Activity       (iii) Activity       (iii) Activity       (iv) Gross receipts from activity       (v) Amount paid to (or retained by) organization         (i) Name of individual or entities (fundraiser have existed y or ontrol of contributions?       (v) Amount paid to (or retained by) organization       (v) Amount paid to (or retained by) organization         (ii) Name of individual or entity (fundraiser)       (iii) Activity       (v) Gross receipts from activity       (vi) Amount paid to (or retained by) organization         (iv) Amount paid to (fire addition of the entity of the en
employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?
compensated at least \$5,000 by the organization.         (i) Name of individual or entity (fundraiser)       (ii) Activity have custody or control or control of contributions?       (iv) Gross receipts from activity       (v) Amount paid to (or retained by) fundraiser listed in control or control or control of contributions?         Yes       No       Yes       No       (iii) Dif fundraiser       (iv) Gross receipts from activity       (v) Amount paid to (or retained by) fundraiser listed in control or control o
(i) Name of individual or entity (fundraiser)       (ii) Activity       (iii) bid fundraiser have used or contributions?       (iv) Gross receipts from activity       (iv) Amount paid to undraiser listed in col.(i)       (vi) Amount paid to or retained by organization         Yes       No       Yes       No       Image: state st
Or entity (fundraiser)       Avecustody or control of contributions?       fundraiser listed in col.(1)       (or retained by) organization         Yes       No         Yes       No         Image: Second S
of contributions?     col.(i)     organization       Yes     No
Total
3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration
3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration
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3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration

### Schedule G (Form 990 or 990-EZ) 2009 REDWOOD CITY ROTARY CHARITABLE FOUND

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94-2682890 Page 2

Part II	Fundraising Events.	Complete if the	organization ar	nswered 'Yes' to i	Form 990, Part IV, I	ine 18, or
	reported more than \$	615.000 on Form	990-EZ, line 6	a. List events witl	n gross receipts gre	ater than \$5,000.
						T

		reported more than \$15,000 on t		a. Elot of office inter	9.000.000.000	
			(a) Event #1 CAR RAFFLES	(b) Event #2 DINNERS	(c) Other Events	(d) Total Events (Add col. (a) through col. (c))
R E			(event type)	(event type)	(total number)	
R E V E N J E	1	Gross receipts	109,999.	6,982.		116,981.
E	2	Less: Charitable contributions				
	3	Gross income (line 1 minus line 2)	109,999.	6,982.		116,981.
	4	Cash prizes	18,000.			18,000.
	5	Noncash prizes				
D-RECT	6	Rent/facility costs				
Е С Т	7	Food and beverages				
E X P	8	Entertainment				
モメPENSES	9	Other direct expenses	2,892.	2,960.		5,852.
S	10	Direct expense summary. Add lines 4- t	hrough 9 in column (d).			23,852.
	11	Net income summary. Combine lines 3, o	column (d) and line 10.		••••••••••••••••••••••••••••••••••••••	93,129.
Par	tIII	Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a	ation answered 'Ye	s' to Form 990, Pa	rt IV, line 19, or re	ported more than
REVERUE			(a) Bingo	<b>(b)</b> Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
U E	1	Gross revenue				
D X	2	Cash prizes				
EXPENSE DIRECT	3	Non-cash prizes			· · · · · · · · · · · · · · · · · · ·	
Ś	4	Rent/facility costs				
	5	Other direct expenses.				
		· ·	Yes8	Yes8	Yes <sup>%</sup>	
	6	Volunteer labor	No	No		
	7	Direct expense summary. Add lines 2 th	rough 5 in column (d).		••••••	
	8	Net gaming income summary. Combine	lines 1, column (d) and	l line 7	•••••••••••••••••••••••••••••••••••••••	-
						YES NO
9	Ente	er the state(s) in which the organization o he organization licensed to operate gamin	perates gaming activitie	es: hese states?		9a
		lo,' explain:	g activities in each of a			
						·
	<u>.</u>	re any of the organization's gaming license		or terminated during th		10a
		re any of the organization's gaming licensi res,' explain:	es revoked, suspended	or terminated during th		
11	Doe	es the organization operate gaming activiti	es with nonmembers?	<b>_ _</b>	<b></b>	11
12	ls ti	he organization a grantor, beneficiary or tr	rustee of a trust or a m	ember of a partnership	or other entity formed	to
BAA	adn	ninister charitable gaming?	TEEA3702L		<u> </u>	orm 990 or 990-EZ) 2009

Sche	dule G (Form 990 or 990-EZ) 2009 REDWOOD CITY ROTARY CHARITABLE FOUND 94-268289	0	P	age 3
			YES	
13	Indicate the percentage of gaming activity operated in:			
	The organization's facility			
b	An outside facility			
	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 revenue?	15a	44 M 8 14 P	20.000
	If 'Yes,' enter the amount of gaming revenue received by the organization \$and the amount			
-	of gaming revenue retained by the third party \$			
c	If 'Yes,' enter name and address of the third party:			
•				
	Name: ►			
	Address: ►			
16	Gaming manager information			
	Name: ►			
	Name: ►			
	Gaming manager compensation 🕨 \$			
	Description of services provided:			
	Director/officer Employee Independent contractor			
17	Mandatory distributions			
	-		633.	
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a		
Ь	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			26.5
	organization's own exempt activities during the tax year: > \$			
BAA	TEEA3703L 02/05/10 Schedule G (Form 990	) or 99	0-EZ)	2009

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## 2009

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## FEDERAL STATEMENTS

#### **REDWOOD CITY ROTARY CHARITABLE FOUND**

94-2682890

STATEMENT 1 FORM 990-EZ, PART I, LINE 10 GRANTS AND SIMILAR AMOUNTS PAI	D	·	
DONEE'S NAME: CASH AMOUNT GIVEN:	CAREER CLOSET	\$	500.
DONEE'S NAME: CASH AMOUNT GIVEN:	HAITI RELIEF	\$	2,250.
DONEE'S NAME: CASH AMOUNT GIVEN:	FAMILY CONNECTIONS	\$	14,097.
DONEE'S NAME: CASH AMOUNT GIVEN:	CASA DE REDWOOD	\$	5,065.
DONEE'S NAME: CASH AMOUNT GIVEN:	MARINE SCIENCE INSTITUTE	\$	1,000.
DONEE'S NAME: CASH AMOUNT GIVEN:	FAIR OAKS SENIOR CENTER	\$	33.
DONEE'S NAME: CASH AMOUNT GIVEN:	POLICE ACTIVITIES LEAGUE	\$	12,165.
DONEE'S NAME: CASH AMOUNT GIVEN:	PETS IN NEED	\$	16,255.
DONEE'S NAME: CASH AMOUNT GIVEN:	ST ANTHONY'S PADUA DINING ROOM	\$	10,170.
DONEE'S NAME: CASH AMOUNT GIVEN:	SALVATION ARMY	\$	1,325.
DONEE'S NAME: CASH AMOUNT GIVEN:	KAINOS	\$	5,515.
DONEE'S NAME: CASH AMOUNT GIVEN:	BOY'S AND GIRL'S CLUB	\$	2,875.
DONEE'S NAME: CASH AMOUNT GIVEN:	SEQUOIA YMCA	\$	3,555.
DONEE'S NAME: CASH AMOUNT GIVEN:	POLIO PLUS	\$	1,767.
DONEE'S NAME: CASH AMOUNT GIVEN:	REDWOOD CITY INTERNATIONAL	\$	500.
DONEE'S NAME: CASH AMOUNT GIVEN:	RILEY'S PLACE	\$	1,500.
DONEE'S NAME: CASH AMOUNT GIVEN:	ST FRANCIS CENTER	\$	1,000.

PAGE 1

## 2009

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### FEDERAL STATEMENTS

#### **REDWOOD CITY ROTARY CHARITABLE FOUND**

94-2682890

STATEMENT 1 (CONTINUED) FORM 990-EZ, PART I, LINE 10 GRANTS AND SIMILAR AMOUNTS PAIL	)	
DONEE'S NAME: CASH AMOUNT GIVEN:	SERVICE MAN'S FAMILY	\$ 200.
DONEE'S NAME: CASH AMOUNT GIVEN:	SHELTER NETWORK	\$ 1,438.
DONEE'S NAME: CASH AMOUNT GIVEN:	TIM'S HOUSE	\$ 7,895.
DONEE'S NAME: CASH AMOUNT GIVEN:	TIM GRIFFITH MEMORIAL FUND	\$ 1,000.
DONEE'S NAME: CASH AMOUNT GIVEN:	WINGS OF HOPE	\$ 23,440.
DONEE'S NAME: CASH AMOUNT GIVEN:	DICTIONARIES FOR SCHOOLS	\$ 9,027.

#### STATEMENT 2 FORM 990-EZ, PART V REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

	DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR	
INDI	RECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?	NO
	DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR	
INDI	RECTLY, ON A PERSONAL BENEFIT CONTRACT?	NO