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Form 990-EZ

Short Form 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) Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other org- anizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the

OMB No 1545-1150

Depa	artment of the Treasury rnal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements	Inspection
		2000
A	For the 2008 calendar year, or tax year beginning 7/01, 2008, and ending 6/30	, 2009
B	Check if applicable	' '
H	Address change	0-3409654
Ħ	Name change label or print or print or type LAFAYETTE, LA 70508-8300 E Te	elephone number
Ħ	Termination Specific LAFAIETTE, LA 70300-0300	
	1 opcome	roup Exemption
Д	Application pending Nt.	umber •
	• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). G Accounting method Other (specify) ▶	od X Cash Accrual
	·	the organization is not n Schedule B (Form 990,
١.		т Scriedule B (Ротп 990, 'F)
J	Organization type (check only one) - [A] Sui(c) (S) - (insert no) [4947(a)(1) or [327]	<u> </u>
	\$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete retu	rn
L	Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ	▶ \$ 30,719.
Pa	art I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instri	uctions for Part I.)
	1 Contributions, gifts, grants, and similar amounts received	1 29,958.
	2 Program service revenue including government fees and contracts	2
	3 Membership dues and assessments	3 761.
	4 Investment income. 5a Gross amount from sale of assets other than inventory 5a	701.
	b Less cost or other basis and sales expenses 5b	
R	c Gain or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a) (att sch)	~ 5c
REVERU	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here	
Ė	a Gross revenue (not including \$ of contributions	
Ü	reported on line 1) 6a	
_	b Less direct expenses other than fundraising expenses 6b	
	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c
	7a Gross sales of inventory, less returns and allowances 7a	
	b Less cost of goods sold 7b	
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c
	8 Other revenue (describe >)	8
	9 Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9 30,719.
	10 Grants and similar amounts paid (attach schedule) RECEIVED	10
F	11 Benefits paid to or for members	11
E X P E	12 Salaries, other compensation, and employee benefits	12
É	13 Professional fees and other payments to independent contractors MAY 182010	13 685.
N S E	14 Occupancy, rent, utilities, and maintenance	14
Š	15 Printing, publications, postage, and shipping	15 21,794.
		16 21,794. 17 22,479.
	17 Total expenses (add lines 10 through 16)	18 8,240.
А	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	
NS E E T	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19 128,321.
'Ŧ S	1	20
	21 Net assets or fund balances at end of year Combine lines 18 through 20	21 136,561.
<u> </u> Pa	Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 inste	
	(See the instructions for Part II.) Cash, savings, and investments (A) Beginning of ye 128, 321	
22		23
23 24		24
25		. 25 136,561.
26		
27	100 201	

Form	990-EZ (2008) THE ROTARY DIST	RICT 6200 FOUNDATI	ON	20-	3409654	Page 2
Parl		rvice Accomplishments	(See the instruction	ons.)	Expens	es
What is	the organization's primary exempt purpose? SE	E STATEMENT 2		(Required for 50	
Descr	ibe what was achieved in carrying out to the services provided, the number of	he organization's exempt purp f persons benefited, or other	ooses. In a clear and corelevant information for	r each	and (4) organiza 1947(a)(1) trusts	ations and s, optional
progr	am title				or others)	
28	FINANCIAL AID & ASSISTAN AFFECTED AND/OR DISPLACE PRESENTATION OF DISASTER	D BY HURRICANES KAT		THAT WERE		
	(Grants \$) If the	his amount includes foreign gi	rants, check here		28 a	21,732.
29						
	(Grants \$) If the	nis amount includes foreign gi	rants, check here	▶ 🗍 :	29 a	
30						
	(Grants \$) If tl	nis amount includes foreign gr	rants, check here	;	30 a	
	Other program services (attach schedul					
		nis amount includes foreign gr	rants, check here		31 a	01 700
	Total program service expenses (add I		-1			21,732.
Parl	IV List of Officers, Directors		·			
	(a) Name and address	(b) Title and average hours per week devoted to position	not paid, enter -0)	(d) Contributions to employee benefit plans deferred compensation	and and other	se account allowances
	NK_BRADSHAW	CHAIRMAN			0.	0.
	3_ <u>SOUTH_COLLEGE_ROAD</u> AYETTE, LA 70503	5.00		i		
	CE LINSCOMBE	VICE CHAIRMAN	0.		0.	0.
	W MARTIAL	1.00			•	٠.
	AYETTE, LA 70508	1				
$\overline{}$	HARD DUNN	SECRETARY	0.		0.	0.
	1 APPELWOOD ROAD	1.00				
	ON ROUGE, LA 70808	1				
	HARD CHURCHMAN	DIRECTOR	0.		0.	0.
150	W PRIEN LAKE ROAD	1.00				
LAK	E CHARLES, LA 70601					
CHA	RLES SPENCER	DIRECTOR	0.		0.	0.
	LAUREL STREET	1.00				
	ON ROUGE, LA 70802					
	NA_LANDRY	DIRECTOR			0.	0.
	TOURAINE CIRCLE	1.00				
	AYETTE, LA 70501 IEL DARTEZ	DIRECTOR	0.		0.	0.
	6 N RIVER OAKS ROAD	1.00			۲.	٠.
	EVILLE, LA 70510					
]				
		-				
				 		
		1				
]				
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[Fai	Other information (Note the statement requirement in denotal instruction V.)		Yes	No
22	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of		1.03	110
	each activity	33		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes	34		
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T	-		ز
ā	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35 a		х
ŧ	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	35 b		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' complete applicable parts of Schedule N	36		x
	Enter amount of political expenditures, direct or indirect, as described in the instructions	<u> </u>	. ~-	-:
	Did the organization file Form 1120-POL for this year?	37b		X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38 a		X
t	o If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A			
39	501(c)(7) organizations Enter			! !
ā	Initiation fees and capital contributions included on line 9 N/A			
	Gross receipts, included on line 9, for public use of club facilities 39b N/A		}	1 1
40 a	501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► 0., section 4912 ► 0., section 4955 ► 0.			
	5501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the			
	year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' complete Schedule L, Part I	40 b		х
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
	year under sections 4912, 4955, and 4958 Lenter amount of tax on line 40c reimbursed by the organization 0.			
	The different of the formation of the organization			
•	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40 e	l,	X
41	List the states with which a copy of this return is filed NONE			
42 a	The books are in care of ► FRANK_BRADSHAW Telephone no ► 337-29	1-5	<u>540</u>	
	Located at ► 1373 SOUTH COLLEGE ROAD LAFAYETTE LA ZIP + 4 ► 70503			
	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a		Yes	No
	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.	l		
c	: At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42 c		<u>X</u>
	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
	and enter the amount of tax-exempt interest received or accrued during the tax year . • 43			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		<u>X</u>
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		Х
BAA		m 990	-EZ (

Form 990-F7 (2008)	THE	ROTARY	DISTRICT	6200	FOUNDATION

Page 4

Part VI	Section 501(c)(3) organization			ations must answer que	estions		.9
Tale VI	and complete the tables for line	es 50 and 51.	our (c)(o) organiza	SEE ST.	ATEMEN	T 3	•
46 Did t			ctivities on behalf of o			Yes	No
	the organization engage in direct or indire public office? If 'Yes,' complete Schedule i						X
	the organization engage in lobbying activi				47		X
	e organization operating a school as desc				48		X
	the organization make any transfers to an		related organization?)	49 a		X
b If 'Ye	es,' was the related organization(s) a sect	ion 527 organization?			49b		L
50 Com	plete this table for the five highest compe ived more than \$100,000 of compensation	ensated employees (oth n from the organization	er than officers, directly find the left of the left o	tors, trustees and key emplorer 'None'	oyees) w	ho ea	ch
(a	n) 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) Ex accour other all	pense nt and owance:	s
NONE							
Total number	r of other employees paid over \$100,000						
Total Hulliper	of other employees paid over \$100,000		<u></u>				
51 Com from	plete this table for the five highest compe the organization of there is none, enter '	ensated independent co None '	ntractors who each re	eceived more than \$100,000	of comp	ensatı	on
	(a) Name and address of each independent conti	ractor paid more than \$100,000		(b) Type of service	(c) Comp	ensatio	n
NONE							
							
Total num	ber of other independent contractors rece	uving over \$100,000	•				
Total Hall	Under penalties of perjury. I declare that I have examined, confect, and complete. Declaration of preparer (mpanying schedules and sta	tements, and to the best of my knowle	edge and be	lief, it is	;
	true contect, and complete. Declaration of preparer (other than officer) is based on	all information of which prepa	arer has any knowledge			
Cian	Early VIV -			114 ARAY 10)		
Sign Here	Signature of officer			Date			
11010	FRANK BRADSHAW			CHAIRMAN			
	Type or print name and title		-,				
Paid	Preparer's	Jim Faulle	Date		arer's Identifi		mber
Pre-	CIMIZE III THEELY		5/14/1	0 employed ► P00)17743	<u> </u>	
parer's	Firm's name (or yours if self-employed). HARTIENS & FAUL 322 HEYMANN BLV				2-1156	322	
Use Only	address, and			EIN ► /2 Phone no ► (337)	232-		
	RS discuss this return with the preparer sh		ictions		X Yes	_	No
BAA	to discuss this return with the preparer Si	TOWN ABOVE - DEC INSUL	200,0113		Form 990		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of	the	organization							Employe	r ıdentifica	tion number
			CT 6200 FOUNDA							409654	
Part		Reason for Pu	blic Charity Statu	s (All organizations	must o	comple	ete this	part.)	(see	ınstruc	tions)
The org	_	•		ise it is. (Please check o	-	-					
1 [A church, convente	on of churches or ass	ociation of churches des	cribed ir	sectio	n 170(b)	(1)(A)(i)	١.		
2				A)(ii). (Attach Schedule I							
3 [A hospital or coope	erative hospital service	e organization described	ın secti	on 170(b)(1)(A)(iii). (At	tach Sc	hedule H	1)
4	٦	A medical research	n organization operate	d in conjunction with a h	ospital (describe	ed in sec	tion 17	0(b)(1)(4)(iii) Er	nter the hospital's
_	_	name, city, and sta	ate								
5 [_	1 70(b)(1)(A)(iv). (0	Complete Part II)	of a college or university					rnmenta	l unit de	scribed in section
6 7	$\overline{\mathbf{x}}$	An organization tha	local government or one of the contract of the	governmental unit descri substantial part of its su art II)	bed in s upport fr	om a go	170(b)(1) overnme	(A)(v). ntal uni	t or fron	n the gei	neral public described
8		A community trust	described in section	170(b)(1)(A)(vi). (Comple	te Part I	H)					
9 [from activities relate investment income	d to its exempt function	more than 33-1/3 % of its is - subject to certain exce ss taxable income (less omplete Part III)	entions. a	and (2) r	no more i	lhan 33-	1/3 % of	its suppo	ort from aross
10		An organization org	ganized and operated	exclusively to test for pu	ublic safe	ety See	section	1 509(a)	(4) . (se	e instruc	ctions)
11 [more publicly supp	orted organizations d	exclusively for the bene- lescribed in section 509(eation and complete lines	a)(1) or	section	509(a)(2)	ctions o 2) See	of, or ca section	rry out tl 509(a)(3	he purposes of one or b). Check the box that
		a Type I	b Type II				ıntegrat	ted		d 🗌	Type III - Other
e [By checking this bo	ox, I certify that the or anagers and other tha	ganization is not controll n one or more publicly s	led direc	ctly or in d organi	directly zations	by one describi	or more ed in se	disqual ction 509	ified persons other 9(a)(1) or section
f		If the organization check this box	received a written det	ermination from the IRS	that is a	a Type I	, Type II	or Typ	e III sup	porting	organization,
g		Since August 17, 2	006, has the organiza	tion accepted any gift o	r contrib	ution fr	om any	of the f	ollowing	persons	
		(i) a narsan who	directly or indirectly	controls, outhor plans or	togothor	. wuth no	vrcanc d	occubo	d up (u)	and (m)	Yes No
		(i) a person who below, the go	verning body of the si	controls, either alone or upported organization?	logether	with pe	130113 U	Cacinoe	יוו נוון	and (m)	11 g (i)
		(ii) a famıly mem	ber of a person desc	ribed in (i) above?							11g (ii)
		(iii) a 35% contro	lled entity of a person	described in (i) or (ii) al	bove?						11 g (iii)
h		Provide the following	ng information about t	he organizations the org	anızatıo	n suppo	rts				
-	(1)	Name of Supported Organization	(II) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat	Is the tion in cold in your erning ment?	the organ	(i) of	organizat	s the ion in col zed in the S ?	(vii) Amount of Support
					Yes	No	Yes	No	Yes	No	
					<u> </u>						
					<u> </u>			. 	_		
Total											

Schedule A (Form 990 or 990-EZ) 2008 THE ROTARY DISTRICT 6200 FOUNDATION 20-3409654

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

	(Complete only if you check	ed the box on line	e 5, 7, or 8 of Part	1)			
Sec	tion A. Public Support						
begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')		1,625,115.	275,897.	63,471.	29,958.	1,994,441.
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
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.						0.
4	Total. Add lines 1-3	0.	1,625,115.	275,897.	63,471.	29,958.	1,994,441.
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)						65,709.
6	Public support. Subtract line 5 from line 4						1,928,732.
Sec	tion B. Total Support		,				
	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	0.	1,625,115.	275,897.	63,471.	29,958.	1,994,441.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources			15,783.	3,048.	761.	19,592.
9	Net income form unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV)						0.
11	Total support. Add lines 7 through 10						2,014,033.
12	Gross receipts from related activ	rities, etc. (see in:	structions)			12	0.
	First five years. If the Form 990 organization, check this box and	stop here		d, third, fourth, o	r fifth tax year as	a section 501(c)	(3) ► X
	tion C. Computation of Pul			11 1 10		1461	
	Public support percentage for 20			e II, column (f)		14	<u>%</u> %
	Public support percentage for 20	·	·			<u></u>	
16 a	a 33-1/3 support test — 2008. If the and stop here. The organization	e organization did qualifies as a pul	I not check the box olicly supported or	on line 13, and ganization	the line 14 is 33-	1/3 % or more, ch	neck this box ►
t	33-1/3 support test – 2007. If the and stop here. The organization	e organization did qualifies as a put	I not check a box of olicly supported or	on line 13, or 16a, ganization.	and line 15 is 33	3-1/3% or more, c	heck this box
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstances	' test, check this l	box and stop here	e. Explain in Part	IV how
	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	and-circumstances test The organiz	' test, check this t ation qualifies as	oox and stop here a publicly suppor	e. Explain in Part ted organization.	IV how the ▶
18	Private foundation. If the organiz	zation did not che	eck a box on line,	13, <u>16a, 16b,</u> 17a,			
BAA					Sch	edule A (Form 99	0 or 990-EZ) 2008

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Schedule A (Form 990 or 990-EZ) 2008 THE ROTARY DISTRICT 6200 FOUNDATION

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I)

(Complete only if you crie	cked the box on					
Section A. Public Support		r		I		
Calendar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')						
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						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1-5						
7a Amounts included on lines 1, 2, 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line						
7c from line 6)						
						
Section D. Fotal Support						
Section B. Total Support Calendar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
Calendar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
Page 10 Section 20, 1975 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
Page 10 Section 10 Section 10 Section 10 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 10b,	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 10b, whether or not the business is	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (add lins 9, 10c, 11, and 12)						
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (add lins 9, 10c, 11, and 12)						
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (add lns 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and) is for the organiz	ation's first, secon				
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (add lins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and Section C. Computation of Putal support in the sale of capital assets (Explain in Part IV)) is for the organized stop here	eation's first, secon	nd, third, fourth,	or fifth tax year a	s a section 501	(c)(3)
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Schedule A	(Form 990 or	990-EZ) 20	008 TH	IE ROTAF	Y DIST	RICT	6200	FOU	NDATION_	20-3409654	Page 4
Part IV	Supplement	ntal Infor	mation.	Complet	e this pa	art to	provide	the	explanational	n required by Part II, information. (see instr	line 10; ructions)
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Schedule A (Form 990 or 990-EZ) 2008

2008	FEDERAL STATEMENTS	PAGE 1
	THE ROTARY DISTRICT 6200 FOUNDATION	20-3409654

STATEMENT 1 FORM 990-EZ, PART I, LINE 16 OTHER EXPENSES

BANK CHARGES DISASTER SUPPLIES DISASTER WORKSHOP ROTARY FOUNDATION

62. \$ 14,687. 3,945. 3,100. 21,794. TOTAL \$

STATEMENT 2 FORM 990-EZ, PART III ORGANIZATIÓN'S PRIMARY EXEMPT PURPOSE

TO FACILITATE HURRICANE & OTHER DISASTER RELIEF EFFORTS IN COMMUNITIES IN SOUTHWEST AND SOUTH CENTRAL LOUISIANA SERVED BY THE ROTARY CLUBS OF ROTARY DISTRICT 6200

STATEMENT 3 FORM 990-EZ, PART VI REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT? (B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?

NO NO