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- 990 Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2009

OME No 1545-047

Open to Public Inspection

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

	A F	or the	2009 calendar year, or tax year beginning JUL 1, 2009 and ending J	UN 30, 2010	
	Во	heck if	Please C Name of organization	D Employer identifi	cation number
	а	pplicabl	use IRS		
		Addre:	s label or ROTARY INTERNATIONAL DISTRICT 7410		
		Name change		23-7	454499
]Initial return]Termir ated	See Specific Instruction 1173 CLAY AVENUE Number and street (or P 0 box if mail is not delivered to street address) Room/suite	E Telephone numbe (570	r)862–0794
		Amend		G Gross receipts \$	94,273.
		Applic		H(a) Is this a group re	eturn
		pendir	F Name and address of principal officer:THEODORE J. SILVER	for affiliates?	Yes X No
			161 NEW ROAD, MONTAGUE, NJ 07817	H(b) Are all affiliates inc	cluded? Yes No
			mpt status: X 501(c) (4) ◀ (insert no) 4947(a)(1) or 527	3	list. (see instructions)
			HTTP://WWW.ROTARYDISTRICT7410.ORG/	H(c) Group exemption	
				of formation 1957	M State of legal domicile PA
	1-8	ert [Summary	CE & EOGMED	THE IDEAL
	Activities & Governance		Briefly describe the organization's mission or most significant activities: ${\hbox{{\tt TO}}}\ {\hbox{{\tt ENCOURA}}}$ DF SERVICE TO OTHERS	GE & FUSIER	THE IDEAL
	erns	2	Check this box If the organization discontinued its operations or disposed of more	than 25% of its net a	
	Š		Number of voting members of the governing body (Part VI, line 1a)	3	5
	8		Number of independent voting members of the governing body (Part VI, line 1b)	4	5
	ies		Total number of employees (Part V, line 2a)	5	0
	ŧ		Total number of volunteers (estimate if necessary)	6	0.
	Ac	į.	Fotal gross unrelated business revenue from Part VIII, column (C), line 12	7a 7b	0.
2011		_ <u>D</u>	Net unrelated business taxable income from Form 990.T. line 34	Prior Year	Current Year
7(•	8	Contributions and grants (Part VIII, line 1h)	49,395.	47,481.
7.7	Revenue	l	Organization converse (Part VIII line 2ct)	64,852.	46,679.
- ==<	eve	10	avestment income (Part VIII column (A) lines 3 4 and 7 dv 2 2011	182.	113.
NAR	œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
₹		12	Total revenue - add lines 8 through 11 (must equal Part VIII Column (A), line 2)	114,429.	94,273.
/*		13	Grants and similar amounts paid (Part IX, column (A), Ilnes 1:3)	11,591.	11,743.
の子とをないが		1	Benefits paid to or for members (Part IX, column (A), line 4)	E 753	5 462
Ź	ses	l	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	5,753.	5,463.
25	Expenses	l	Professional fundraising fees (Part IX, column (A), line 11e)		
1	Ä		Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	90,283.	85,824.
		l	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	107,627.	103,030.
		l	Revenue less expenses. Subtract line 18 from line 12	6,802.	-8,757.
	Ces			ginning of Current Year	End of Year
	Net Assets or Fund Balances	20	Total assets (Part X, line 16)	84,744.	75,988.
	E A	21	Total liabilities (Part X, line 26)	0.4.5.4.4	55.000
			Net assets or fund balances. Subtract line 21 from line 20	84,744.	75,988.
	PE	art II	Signature Block Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements,	and to the best of my knowled	Ine and helief it is true correct
			and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge	and to the best of my knowled	ige and benefit it is true, correct,
	Sign			1 14/	EB 2011
	Her		Signature of officer	Date	
		•	► THEODORE J. SILVER, DISTRICT GOVERNOR		
			Type or print name and title		
	Paid	1	Fieldier 2	4 I/see in	rer's identifying number structions)
	-	arer's	signature 02/14/11 em	ployed 🕨 💹 📗	200182280
	-	Only	Firm's name (or yours if MCGRAIL MERKEL QUINN & ASSOCIATES, P.	C . EIN ►	
		•	self-employed), address, and CCRANITION DA 19510		570) 061 0245
	<u></u>	. 46 . "	SCRANTON, PA 18510	Phone no 🕨 (570) 961-0345 X Yes No
	ıvıa\	, ine li	RS discuss this return with the preparer shown above? (see instructions)		162 [NO

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
_	If "Yes," complete Schedule A	1_1_		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	l	i	
	public office? If "Yes," complete Schedule C, Part I	3_	- /	_X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	N/	<u>A</u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and		.,	ı
_	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		<u>X</u> _
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
	Schedule D, Part III	8		<u> </u>
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			Х
40	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	40	1	Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
''	as applicable	11		Х
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	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			
•	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			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional X			
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			v
45	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	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	45	}	Х
16	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	-+	
10	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
• •	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	ľ	Х
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
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	1	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
		Form	990 (2	2009)

Form 990 (2009) Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		l	
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<u> </u>	X
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		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	1		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		_X_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X
b	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
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 a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
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		Х
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		Х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
•	If "Yes," complete Schedule R, Part V, line 2	35		Х
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	N/	Α
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form		2009)

ROTARY INTERNATIONAL DISTRICT 7410 23-7454499 Påge **5** Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 0 1a U.S. Information Returns. Enter -0- if not applicable 0 1b **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming Х 1c (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 0 filed for the calendar year ending with or within the year covered by this return 2a 2b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? За 3b b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** 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 Foreign Bank and Financial Accounts. 5a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited 5c Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х 6a any contributions that were not tax deductible? **b** If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 7 a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services Х 7a provided to the payor? **b** If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Х 7с to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7е benefit contract? 7f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? **7**g 7h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings N/A 8 at any time during the year? Sponsoring organizations maintaining donor advised funds. N/A 9a a Did the organization make any taxable distributions under section 4966? N/A 9b **b** Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: N/A 10a a Initiation fees and capital contributions included on Part VIII, line 12 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: N/A 11a a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against

Form 990 (2009)

12a

11b

12b

amounts due or received from them.)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Part VI 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.

Sec	tion A. Governing Body and Management		<u>. </u>	
4	Enter the number of voting members of the governing body		Yes	No
		{		
Ъ		4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		}	Х
^	officer, director, trustee, or key employee?	2		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			Y
	of officers, directors or trustees, or key employees to a management company or other person?	3		X X X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		v
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	Х	
6	Does the organization have members or stockholders?	6_		
7a			х	
	governing body?	7a	X	
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Λ	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:		v	
а		8a_	X	
þ	Each committee with authority to act on behalf of the governing body?	8b	Λ.	
8	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			v
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a	X	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,		,,	
	and branches to ensure their operations are consistent with those of the organization?	10b	X	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise		•	
	to conflicts?	12b		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b	<u></u>	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	}		
	taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted 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?	16b	<u> </u>	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			_
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	e for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	incial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	ation.	_	
_	PAUL CONFORTI - (570) 424-0667			
	1298 N. NINTH STREET, STROUDSBURG, PA 18360			

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- 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. 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 the organization did not co	(B)			(0	C)		(D)	(E)	(F)	
Name and Title	Average	١	Position (check all that apply				 Reportable	Reportable	Estimated	
	hours per week	Individual trustee or director	ec struttonal frustee	c all t		Highest compensated do employee	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations	
THEODORE J. SILVER DISTRICT GOVERNOR	10.00			X			0.	0.	0.	
ROBERT WEHE	10.00	\vdash		-			 -			
DISTRICT GOVERNOR ELECT	10.00			Х			0.	0.	0.	
PAUL O'MALIA										
DISTRICT GOVERNOR NOMINE	10.00			X		_	 0.	0.	0.	
PAUL CONFORTI	10 00	1		.			0.	0.	0	
DISTRICT TREASURER PAUL F. MUCZYNSKI	10.00			X		├	 		0.	
IMMEDIATE PAST DISTRICT	10.00			х			0.	0.	0.	
	·	_	_			_				
									_	
	-									
			-							

(A) Name and title	(B) Average			Pos	C) Ition	1		(D) Reportable	(E) Reportable		Es	(F) timate	ed
	hours per week	Individual trustee or director	ec ectronal trustee	c all 1		Highest compensated a demployee		compensation from the organization (W-2/1099-MISC)	compensation from related organization (W-2/1099-MIS	i s	com fr org and	nount of other pensa om the anizati d relate inization	tion e ion ed
							_						
									· · · · · · · · · · · · · · · · · · ·			_	
Total Total number of individuals (including but compensation from the organization	not limited to th	nose	liste	ed at	oove	e) wh	no re	0. eceived more than \$100	,000 in reportable	0. e	_	,	0.
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for			, ke	y em	ploy	yee,	or h	aghest compensated en	nployee on		3	Yes	No X
 For any individual listed on line 1a, is the sand related organizations greater than \$15 Did any person listed on line 1a receive or 	sum of reportab 50,000? <i>If "Yes,</i>	le co	mple	ete S	Sche	edule	J f	or such individual			4		х
the organization? If "Yes," complete Sche Section B. Independent Contractors					arry	uiii					5		X
Complete this table for your five highest c the organization NONE	ompensated in	depe	nde	nt c	ontr	acto	ors t	hat received more than	\$100,000 of com	pensa	ation fi	om	
(A) Name and busines	s address							(B) Description of s	ervices	C	(C omper		1
					_				-				
							_						
												_	
Total number of independent contractors \$100,000 in compensation from the organ		ot lir	nite	d to	thos		ted	above) who received m	ore than	···········			
											Form 9	90 (2	009)

Form	990 (2009) ROTAR	RY INTERN	ATIONAL	DISTRICT /	410	23-/454	499 Page 9
Pa	rt VII	Statement of Rever	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इ इ	1 a	Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts	b		1b	47,481.				
₽٤	c	Fundraising events	1c	-				
£ E	ď		1d					
8.5		Government grants (contribut						
S is		All other contributions, gifts, gran	·					
돌힐	•	similar amounts not included abo		i				
들히	_							
١٤٢	g		3 18-1F \$		47,481.			
- 	<u>n</u>	Total. Add lines 1a-1f		Business Code	1,71020		1 11 11 11 11	*********
	_	DISTRICT CONFER	FNCF	900099	26,554.	26,554.	1	
<u>.</u>	2 a	ROTARY FOUNDATI		900099	6,702.	6,702.		
le g		VOLUMB EVCUNNOE		900099	5,189.			
E S	C	AWARDS DINNER	FROGRAM	900099	2,955.			
Program Service Revenue	d	PRESIDENTS-ELEC	IAT & CID. mr	900099	1,755.			
ğ	е				3,524.			
"	f	All other program service reve	enue	900099	46,679.	3,324.		
\rightarrow	9	Total. Add lines 2a-2f			40,079.		<u></u>	
	3	Investment income (including	ı dıvıdends, ınter	est, and	112	113.		
		other similar amounts)			113.	113.		
	4	Income from investment of ta	x-exempt bond	proceeds P			<u> </u>	
	5	Royalties						
			(i) Real	(II) Personal			•	
	6 a	Gross Rents					:	
	b	Less: rental expenses		ļ				
i	C	Rental income or (loss)						
	d	Net rental income or (loss)		<u> </u>				······
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
ŀ		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
ŀ	c	Gain or (loss)		<u> </u>				
ŀ	d	Net gain or (loss)		<u> </u>				
	8 a	Gross income from fundraising	ng events (not					
ᇎ		including \$	of					
ě		contributions reported on line	e 1c). See					
Other Revenue		Part IV, line 18	a	·				
Ę I	b	Less: direct expenses	t	·				
١	С	Net income or (loss) from fun-	draising events					
	9 a	Gross income from gaming a	ctivities. See					
		Part IV, line 19	ē	3				
	b	Less: direct expenses	t	·				
	С	Net income or (loss) from gar	ming activities					
	10 a	Gross sales of inventory, less	s returns		•			
		and allowances	ŧ	<u> </u>				
	b	Less: cost of goods sold	t					
		Net income or (loss) from sale	es of inventory					
		Miscellaneous Reveni		Business Code				
	11 a							
	b							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d		•				
	12	Total revenue. See instructions		•	94,273.	46,792.	0.	<u> </u>
93200								Form 990 (2009)
					A			

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and	- -			
	organizations in the U.S. See Part IV, line 21	11,743.	11,743.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22		_		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.	ı			
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	5,463.		5,463.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
¢	Accounting	1,500.		1,500.	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
9	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology	·			
15	Royalties				
16	Occupancy				····
17	Travel	4,417.	2,209.	2,208.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	50,413.	50,413.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered				
	above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total				
	expenses shown on line 25 below)		5 554		······
а	YOUTH EXCHANGE PROGRAM	7,554.	7,554.		·
b	ZONE INSTITUTE	6,269.	6,269.		
C	PETS ASSESSMENT	3,879.	3,879.		
d	FOUNDATION MISCELL ANEOUS EXPENSE	2,474.	2,474.		
e	MISCELLANEOUS EXPENSE	2,421.	2,421.	2 152	
f	All other expenses	6,897.	4,745.	2,152.	
25	Total functional expenses Add lines 1 through 24f	103,030.	91,707.	11,323.	0.
26	Joint costs Check here L if following				
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation		Į.	1	

			(A) Beginning of year		(B) End of year
			38,989.	1	30,920.
1	Cash - non-interest-bearing		44,955.	2	45,068.
2	Savings and temporary cash investments		44,933.		457000
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net			4	
5	Receivables from current and former officers, dir				
	employees, and highest compensated employee		_		
	of Schedule L			5	
6	Receivables from other disqualified persons (as				
	4958(f)(1)) and persons described in section 495	88(c)(3)(B). Complete			
i	Part II of Schedule L		6		
7	Notes and loans receivable, net		. <u> </u>	7	
8	Inventories for sale or use		000	8	
9	Prepaid expenses and deferred charges		800.	9	
10a	Land, buildings, and equipment: cost or other				
	basis Complete Part VI of Schedule D	10a			
t	Less accumulated depreciation	10b		10c	
11	Investments - publicly traded securities		11		
12	Investments - other securities. See Part IV, line 1		12	-	
13	Investments - program-related. See Part IV, line		13		
14	Intangible assets		<u> </u>	14	
15	Other assets. See Part IV, line 11		04 544	15	75 000
16	Total assets. Add lines 1 through 15 (must equal	al line 34)	84,744.	16	75,988
17	Accounts payable and accrued expenses	<u> </u>	17		
18	Grants payable			18	
19	Deferred revenue			19	
20	Tax-exempt bond liabilities			20	
21	Escrow or custodial account liability. Complete			21	
22	Payables to current and former officers, director				
	highest compensated employees, and disqualifi	ed persons Complete Part II			
	of Schedule L			22	·
23	Secured mortgages and notes payable to unrela	ated third parties		23	
24	Unsecured notes and loans payable to unrelate	d third parties		24	
25	Other liabilities. Complete Part X of Schedule D			25	
26	Total liabilities. Add lines 17 through 25		0.	26	0
	Organizations that follow SFAS 117, check he	ere X and complete			
1	lines 27 through 29, and lines 33 and 34.				
27	Unrestricted net assets		84,744.		75,988
28	Temporarily restricted net assets			28	
29	Permanently restricted net assets			29	
1	Organizations that do not follow SFAS 117, c	heck here 🕨 🔲 and			
	complete lines 30 through 34.				
30	Capital stock or trust principal, or current funds			30	
31	Paid in or capital surplus, or land, building, or ed			31	
32	Retained earnings, endowment, accumulated in			32	
33	Total net assets or fund balances		84,744.	33	75,988
34	Total liabilities and net assets/fund balances		84,744.	34	75,988

Form **990** (2009)

Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X	<u> </u>
b	Were the organization's financial statements audited by an independent accountant?	2b		X
c	trave to the control of the support to the support to the support of the sudit	2c		X
d	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			ĺ
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			x
	Act and OMB Circular A-133?	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	L	L
		Earm	aan /	2000

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

OMB No 1545-0047

Open to Publi Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

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

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

 Section 501(c)(4), (5), or (6) organiza 	tions: Complete Part III.			
Name of organization			Empl	oyer identification number
	INTERNATIONAL DI			23-7454499
Part I-A Complete if the org	ganization is exempt un	der section 501(c) or is a section 527 o	rganization.
1 Provide a description of the organization	zation's direct and indirect politi	cal campaign activities	s in Part IV	
2 Political expenditures			▶\$	
3 Volunteer hours				
Part I-B Complete if the org	ganization is exempt un	der section 501(c)(3).	
1 Enter the amount of any excise tax			▶\$	
2 Enter the amount of any excise tax			▶ \$	
3 If the organization incurred a section	n 4955 tax, did it file Form 4720) for this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV				
<u> </u>	ganization is exempt un			
1 Enter the amount directly expended	d by the filing organization for se	ection 527 exempt fund	ction activities > \$	
2 Enter the amount of the filing organ	ization's funds contributed to o	ther organizations for	section 527	
exempt function activities			▶\$	
3 Total exempt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-PO	L,	
line 17b			▶\$	
4 Did the filing organization file Form	•			Yes No
5 Enter the names, addresses and er				
For each organization listed, enter that were promptly and directly del				
(PAC). If additional space is needed			eparate segregated faile of t	2 political action committee
	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
(a) Name	(b) Address	(C) EIIV	filing organization's	contributions received and
			funds. If none, enter -0	promptly and directly
				delivered to a separate political organization.
				If none, enter -0
				-
				1
•				
		 		
		ŀ		

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

Schedule C (Form 990 or 990-EZ) 2009

LHA

Schedule C (Form 990 or 990-EZ) 2009 Part II-A Complete if the org				10 23-	7454499 Päge 2
(election under sec		mpt under section	on sor(c)(s) and m	ed romi 5/06	
	tion belongs to an aff	filested group			
, _		ind "limited control" p	rovisions anniv		
Limit	s on Lobbying Expe			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence public opinion	(grass roots lobbying)			
b Total lobbying expenditures to influ	ence a legislative bo	dy (direct lobbying)			
 Total lobbying expenditures (add lii 	nes 1a and 1b)				
d Other exempt purpose expenditure	s				
e Total exempt purpose expenditure:	s (add lines 1c and 1	d)			
f Lobbying nontaxable amount Ente	r the amount from th	e following table in bo	oth columns		
if the amount on line 1e, column (a) of	(b) is: The lot	obying nontaxable an	nount is:		
Not over \$500,000	20% of	the amount on line 1	<u> </u>		
Over \$500,000 but not over \$1,000	,000 \$100,0	00 plus 15% of the ex	cess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000 \$175,0	00 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	000,000 \$225,0	00 plus 5% of the exc	ess over \$1,500,000.		
Over \$17,000,000	\$1,000	,000.			
g Grassroots nontaxable amount (en	ter 25% of line 1f)		_		
h Subtract line 1g from line 1a. If zero	or less, enter -0-				
i Subtract line 1f from line 1c. If zero	or less, enter -0-		Ĺ	 	.l <u></u>
j If there is an amount other than zer	o on either line 1h or	line 11, did the organi	zation file Form 4720		
reporting section 4911 tax for this y	/ear?				Yes No
	ations that made a s		r Section 501(h) In do not have to comp es 2a through 2f on pa		
	Lobbying Expe	nditures During 4-Ye	ear Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount				· · · · · · · · · · · · · · · · · · ·	
b Lobbying ceiling amount					
(150% of line 2a, column(e))			 		
c Total lobbying expenditures					
d Grassroots nontaxable amount		1			
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
				· · · · · · · · · · · · · · · · · · ·	
f Grassroots lobbying expenditures		<u> </u>	<u> </u>		<u> </u>

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	 				
		(a)		(b)	
		Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
9	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities? If "Yes," describe in Part IV				
_	Total. Add lines 1c through 1i				·····
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	till-A Complete if the organization is exempt under section 501(c)(4),	on 501(c)((5), or se	ction	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	504/)/	3		X
rar	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if POTU Back III. A library 4 and 6 are represented III. III. OB if Potus				
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes."	τ III-A, III	ne 3 is ar	ıswerea	
		-			
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	aı			
	expenses for which the section 527(f) tax was paid).				
	Current year		2a		
	Carryover from last year		2b		
	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
E	expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)		4		
5 Dar	Supplemental Information		5		
		d Doet II D. I	Ina 1. Alaa		this said
	olete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; an y additional information.	u Part II-D, I	ine II. Also	, complete	this part
or ar	y additional information.				
					
					
					

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

ROTARY INTERNATIONAL DISTRICT 7410

Employer identification number 23-7454499

FORM 990, PART VI, SECTION A, LINE 6: ROTARY INTERNATIONAL DISTRICT 7410

IS AN ORGANIZATION OF BUSINESS AND PROFESSIONAL LEADERS WITH APPROXIMATELY

1,075 MEMBERS IN FORTY FOUR ROTARY CLUBS THROUGHOUT NORTHEASTERN

PENNYSLVANIA.

FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS ELECT OFFICERS AND A BOARD OF DIRECTORS ANNUALLY.

FORM 990, PART VI, SECTION A, LINE 7B: CERTAIN DECISIONS REQUIRE THE APPROVAL OF THE GENERAL MEMBERSHIP OR CLUB PRESIDENTS.

FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION'S FORM 990 IS

PREPARED BY AN INDEPENDENT ACCOUNTING FIRM. THE ORGANIZATION'S FINANCE AND

DISTRICT EXECUTIVE COMMITTEES THEN MEET WITH THE ACCOUNTING FIRM TO REVIEW

THE RETURN.

FORM 990, PART VI, SECTION C, LINE 18: ROTARY INTERNATIONAL DISTRICT 7410

MAKES ITS FORM 990 AVAILABLE TO ROTARY MEMBERS ON ITS WEBSITE AND TO THE

GENERAL PUBLIC UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19: ROTARY INTERNATIONAL DISTRICT 7410

MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO ROTARY

MEMBERS ON ITS WEBSITE. GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE

AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST. THERE IS NO WRITTEN COFLICT

OF INTEREST POLICY.

, Form 8868

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev 4-2009)

ROTARY INTERNATIONAL DISTRICT 7410 ROTARY INTERNATIONAL DISTRICT 7410 173 CLAY AVENUE City, town or post office, state, and ZIP code. For a foreign address, see instructions SCRANTON, PA 18510 Check type of return to be filed (file a separate application for each return): Form 990 Form 990-BL Form 990-T (corporation) Form 990-BL Form 990-F Form 990-T (trust other than above) Form 990-PF Form 990-F Form 0669 Form 1041-A Fax No. PA 18360 Telephone No. 570 424-0667 FAX No. 580 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the organization does not have an office or place of business in the United States, check this box I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2011 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2011 I to file the exempt organization return for the organization's return for A calendar year Or X tax year beginning JUL 1, 2009 and ending JUN 30, 2010 If this sax year is for less than 12 months, check reason: I initial return Final return Change in accounting pence tax payments made. Include any prior year overpayment allowed as a credit. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment with this form, or, if required, depost with FTD coupon, or, if required, by busing EFIPS (Electronic Federal Tax Payment System).							
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8888. Part I			· —				
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and flusts must use Form 7004 to request an extension of time to file incorne tax returns. Electronic Filing (e-file), Generally, you can electronically file Form 8968 if you want a 3-month automatic extension of time to file one of the returns on the months for a corporation required to file Form 990-T). However, you cannot file Form 8968 electronically if (1) you want the additional foot automatic) are in the additional foot automatic) are in the additional foot automatic). The provided of the form 990-T instead, which is a composite or consolidated form 990-T instead, which is a composite or consolidated form 990-T instead. The provided of the foot provided is an other foot automatic. The foot foot file of the foot foot file of the foot foot file on the foot foot file of the foot foot file of the foot foot file of file on the file of file on the foot file of file on the file of file file on the file of file on the file of file file file on the file of file file on the file of file file file on the file of file file on the file of file file on the file of file file file	-		•				
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file one of the file income tax returns.	Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed).					
to file income tax returns. Electronic Filing G-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Form 990-T hostead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.rs.gov/elle and click on - elle for Charties & Nonprofits Type or print ROTARY INTERNATIONAL DISTRICT 7410 ROTARY INTERNATIONAL		·	complete				
noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 890-B (Form 990-B) forms 990-B. (See Ablig) of Porm 990-B. (See Ablig) of Ablig) of Ablig) of Porm 990-B. (See Ablig) of Ablig) of Ablig) of Ablig) of Porm 990-B. (See Ablig) of Ablig) of Ablig) of Porm 990-B. (See Ablig) of A			t an extension of time				
ROTARY INTERNATIONAL DISTRICT 7410 23-7454499 Number, street, and room or suite no. If a P.O. box, see instructions. 1173 CLAY AVENUE City, town or post office, state, and ZIP code. For a foreign address, see instructions SCRANTON, PA 18510 Check type of return to be filed (file a separate application for each return): Form 990	noted (not a you m	I below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electi automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or nust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electroni	onically if (1) you want the additional consolidated Form 990-T instead,				
ROTARY INTERNATIONAL DISTRICT 7410 ROTARY INTERNATIONAL DISTRICT 7410 Number, street, and room or suite no. if a P.O. box, see instructions. 1173 CLAY AVENUE City, town or post office, state, and ZIP code. For a foreign address, see instructions SCRANTON, PA 18510 Check type of return to be filed (file a separate application for each return): Form 990		• •	Employer identification number				
The books are in the care of ▶ 1298 N. NINTH STREET — STROUDSBURG, PA 18360 PAUL CONFORTI The books are in the care of ▶ 1298 N. NINTH STREET — STROUDSBURG, PA 18360 Telephone No. ▶ (570) 424-0667 Telephone No. ▶ (170) 424-0667 Telephone No. ▶ (170		ROTARY INTERNATIONAL DISTRICT 7410	23-7454499				
Check type of return to be filed (file a separate application for each return): Form 990	due dat filing yo	te for Number, street, and room or suite no. If a P.O. box, see instructions.					
X Form 990		ctions City, town or post office, state, and ZIP code. For a foreign address, see instructions					
Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 5227 Form 990-EZ Form 990-T (trust other than above) Form 6069 Form 990-PF Form 1041-A Form 1041-A Form 8870 PAUL CONFORTI The books are in the care of 1298 N. NINTH STREET — STROUDSBURG, PA 18360 Telephone No. (570) 424-0667 FAX No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If this is for part of the group, check this box and attack a list with the names and EINs of all members the extension will cover I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2011, to file the exempt organization return for the organization named above. The extension is for the organization's return for Laendar year or All Laendar year or Laendar year	Chec	k type of return to be filed (file a separate application for each return):					
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