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DLN: 93493317021772

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)

2011

OMB No 1545-0047

2011

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

Open to Public Inspection

			lendar year, or tax year beginning 07-01-2011 C Name of organization	and ending 06-30-20	12	D Employer	identification number
_		pplicable	ROTARY INTERNATIONAL DISTRICT 7870				
Add	dress ch	nange	C/O ALAN KANEGSBERG TREASURER Doing Business As			02-0464 E Telephone	
Na	me cha	nge	,			-	
Ini	tıal retu	rn	Number and street (or P O box if mail is not deliver	ed to street address) Room/s	uite	(603) 224	
Te	rmınate	d	9 OLD COACH ROAD			G Gross receip	257,856
– _{Am}	ended i	return	City or town, state or country, and ZIP + 4				
— Ap	plication	pending	BOW, NH 033044107				
		. р =	F Name and address of principal officer				_
			r Maine and address of principal officer		H(a) Is the	s a group ret tes?	urn for
							,
					1 ' '	l affiliates incl	·
r Ta	x-exem	npt status	501(c)(3) ▼ 501(c)(4) ◀ (insert no)	4947(a)(1) or	1 -	-	st (see instructions)
		<u> </u>		+947(a)(1) 01 327	H(c) Grou	p exemption	number F
J W	ebsite	e: ► WW	W ROTARY 7870 ORG				
K For	m of org	ganızatıon	Corporation Trust 🗸 Association Cother 🕨		L Year of fo	mation	M State of legal domicile NH
Pa	rt I	Sum	mary				
	1 8	Briefly d	escribe the organization's mission or most sig	nıfıcant actıvıtıes			
a 1	<u> </u>	PROMO	TION OF SOCIAL AND HUMANITARIAN PR	O JECTS AND ASSISTA	NCE - LOCAL	AND WORLD	DWIDE
Governance	-						
Ē	-						
<u> </u>	2 0	Check th	is box 🛏 if the organization discontinued its	operations or disposed	of more than 2	5% of its net	assets
			of voting members of the governing body (Par			3	1
ර ග	1		of independent voting members of the governi			. 4	5
Activities &			mber of individuals employed in calendar year			5	0
-	1		mber of volunteers (estimate if necessary) .			6	<u> </u>
ą.	1		related business revenue from Part VIII, colu			78	9 0
	1		lated business taxable income from Form 990	` ''		71	b
				<u> </u>	Prio	r Year	Current Year
	8	Contri	butions and grants (Part VIII, line 1h)				4,893
3	9		m service revenue (Part VIII, line 2g)			152,188	
Revent	10		ment income (Part VIII, column (A), lines 3,			405	-
Ě	11		revenue (Part VIII, column (A), lines 5, 6d, 8			-20,963	
	12		evenue—add lines 8 through 11 (must equal l		ne 📗		
		12) .	<u> </u>	 		131,630	257,856
	13	Grants	and similar amounts paid (Part IX, column (A	A), lines 1–3)			0
	14		ts paid to or for members (Part IX, column (A)				0
ø	15		es, other compensation, employee benefits (P	art IX, column (A), lines			0
)Se	16-	5-10)		11a			0
Expenses	16a		sional fundraising fees (Part IX, column (A), l	melle)			0
Ĭ	Ь		ndraising expenses (Part IX, column (D), line 25)			125 127	240.702
	17		expenses (Part IX, column (A), lines 11a-11		•	135,107	· · · · · · · · · · · · · · · · · · ·
	18		expenses Add lines 13-17 (must equal Part i			135,107	· · · · · · · · · · · · · · · · · · ·
_ 07	19	keven	ue less expenses Subtract line 18 from line 1		Desirate	-3,477	8,154
Net Assets or Fund Balances						of Current ear	End of Year
9 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	20	Total	assets (Part X, line 16)			47,371	55,525
7 Z	21		iabilities (Part X, line 26)			·	0
žŽ	22		sets or fund balances Subtract line 21 from l			47,371	55,525
Pai	rt II	Sign	ature Block				•
know			erjury, I declare that I have examined this return, f, it is true, correct, and complete. Declaration of				
		****	**		20	12-11-12	
Sigr	1	Signa	ture of officer			ite	
Her		ALAN	KANEGSBERG TREASURER				
			or print name and title				
		Preparei	's L	Date	Check If		payer identification number
Paid		signatur		2012-11-12	self- employed •	(see instruction	
	arer's	Firm's n	ame (or yours BURNHAM & MALMBORG		Chiployed F		
-	Only	ıf self-eı	nployed),			EIN ▶	
	y	address,	and ZIP + 4 T 155 MANCHESTER STREET			Phono no	(603) 225-7600
		1	CONCORD NH 03301			Trione no F	(603) 225-7600

May the IRS discuss this return with the preparer shown above? (see instructions)

┌ Yes ┌ No

			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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
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		No
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions $24b-24d$ and complete Schedule K. If "No," go to line 25	24a		No
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		No
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		No
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		No
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		No
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			
	<i>IV</i>	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
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	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section $512(b)(13)$?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Form 990 (2011)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V $$.	•	. [
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
_	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note 76th and 6th and 25 or materials a 250 or materials a 6th (see materials)	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the	_		NI -
	year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	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 or securities			
	account)?	4a		Νo
ь	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
r	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
-		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
_	organization solicit any contributions that were not tax deductible?			
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		Νo
a	services provided to the payor?	/ a		NO
ь	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 to			
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			110
9	required?	7g		Νo
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		No
8	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 at any time during the year?			
		8		
9	Sponsoring organizations maintaining donor advised funds.			
_	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11				
11	Section 501(c)(12) organizations. Enter Cross upones from members or charabelders			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	,			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization	13a		
	allocated to each state	134		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the aggregate amount of reserves on hand			
•	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management			
			Yes	No
1_	Enter the number of voting members of the governing heady at the and of the tay			
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	Yes	
Se	ection B. Policies (This Section B requests information about policies not required by the Internal	'		•
Re	venue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
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		No
b	Other officers or key employees of the organization	15b		No
	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		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
10	Section 6104 requires an organization to make its Form 1022 (or 1024 if applicable) 000, and 000 T (501/c)			

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Own website Another's website V Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► ALAN KANEGSBERG
 9 OLD COACH ROAD

tt VIII 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

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organiz	•	lated o	rganı	zatio	ns (compe	nsat	ed any current or f	ormer officer, direct	or, or trustee
(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	related organizations
(1) ALAN KANEGSBERG TREASURER	6 00			Х				0	0	0
(2) JANICE MCELROY DISTRICT GOV	15 00			Х				0	0	0
(3) ANTHONY GILMORE DST GOV ELEC	6 00			х				0	0	0
(4) DAVID HOOPES DIST GOV N	6 00			Х				0	0	0
(5) SANDRA MCGONAGLE SECRETARY	6 00			х				0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per week (describe hours	unles an	on (d e tha	n on son er ai	e bo is b nd a	x, oth		Repo compo fro organiz	(D) ortable ensation m the eation (W- 9-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-		(F) Estima mount o compens from t	ited fother sation :he on and
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relati organiza	
1b	Sub-Total			<u></u>		•		<u>▶</u>						
	T 1 1 (11 !! 41 . 14)						_	 						
2	Total number of individuals (incli \$100,000 of reportable compens	udıng but not lın	nited to	thos	e lıs) who	receive	d more tha	an			
3	Did the organization list any forr on line 1a? <i>If "Yes," complete Sch</i>									t compens	ated employee		Yes	No
4	For any individual listed on line 1 organization and related organization and related organization.	.a, is the sum of	report	able	com	pens	sation	and	other cor			3 4		No
5	Did any person listed on line 1a services rendered to the organiz									anızatıon (or individual for •	5		No
Se	ction B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	the organizatio ear									ng with			
	Nan	(A) ne and business add	dress							Desc	(B) ription of services		(C Comper	
	Total number of independent conti \$100,000 of compensation from t			ot lır	nıted	l to	those	liste	d above)	who recei	ved more than			

Form 99								Page 9
Part V	<u> </u>	Statement o	f Revenue		(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
					rotarrevende	exempt function revenue	business revenue	excluded from tax under sections 512,513, or 514
nts Ets	1a	Federated camp	5	4,893				
gra	Ь	Membership due						
HS,	c	_	ents 1c					
등	d e	Related organize Government grants						
ons sin	f	_	ons, gifts, grants, and 1f					
bet Fer	g	sımılar amounts no						
Contributions, gifts, grants and other similar amounts	9	lines 1a-1f \$						
ဝမ	h		1a-1f	▶	4,893			
<u> </u>				Business Code				
ven	2a	PER CAPITA DUES,	ETC		90,090	90,090		
<u>22</u>	b	YOUTH EXCHANGE	ED CDANT EDG		34,763	34,763		
Š	c d	DISTRICT SIMPLIFI	ED GRANT FDS		14,978	14,978		-
Program Service Revenue	e							
jran	f	All other progra	m service revenue					
₹ Ž	g	Total Addines	2a-2f	L	139,831			
	3		ome (including dividen		135,031			
			aramounts)	-	340	340		
	4		tment of tax-exempt bond	· · · · · · · · · · · · · · · · · · ·				
	5	Royalties	(ı) Real	(II) Personal				\vdash
	6a	Gross rents	(i) iteai	(ii) i cissilai				
	ь	Less rental expenses						
	С	Rental income or (loss)						
	d		me or (loss)					
	_	Gross amount	(ı) Securities	(II) Other				
	7a	from sales of assets other						
	ь	than inventory Less cost or						
	ן "	other basis and sales expenses						
	С	Gain or (loss)						
	d		s)	▶				
۵ı	8a	Gross income fr events (not incl						
ž		\$	reported on line 1c)					
ěve		See Part IV, line	e 18					
- T	ь	Less direct evr	a penses b					
Other Revenue	c		loss) from fundraising	events 🕨				
_	9a		rom gaming activities					
		See Part IV, line	e 19 a					
	ь	Less direct exp	penses b					
	С		loss) from gaming activ	vities				
	10a	Gross sales of i returns and allo						
	ь	Less cost of go						
	С	Net income or (loss) from sales of inve	entory ► Business Code				
	11a	DISTRICT CON		Duamess Code	88,227	88,227		
		INCOME			2	0 ===		
	b	R I PRESIDEN			9,550 7,525	9,550 7,525		
	c d	FOUNDATION All other revenu			7,323	7,323		
	e		11a-11d		·	.,		
	12		See Instructions	▶	112,792			
	I				257,856	252,963		

Part IX Statement of Functional Expenses

combined educational campaign and fundraising solicitation

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, 3 organizations, and individuals outside the United States See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees . . . 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 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits 10 Fees for services (non-employees) 11 Management Lobbying Professional fundraising See Part IV, line 17 . . Investment management fees g Advertising and promotion . . . 12 Office expenses 13 14 Information technology 15 Royalties . . 16 17 Payments of travel or entertainment expenses for any federal, 18 state, or local public officials 19 Conferences, conventions, and meetings 20 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) HOTEL EXPENSES-FOOD, LODG 98,137 98.137 CONFERENCES/MEETINGS 38,639 38,639 YOUTH EXCHANGE 37,868 37,868 DIST SIMPLIFIED GRANT FD 14,973 14,973 d е All other expenses 60,085 5,774 54,311 25 Total functional expenses. Add lines 1 through 24f 249,702 58,615 191,087 0 Joint costs. Check here ► 🗆 If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a

Form 990 (2011) Page **11** Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 1 46,371 55.525 2 2 Savings and temporary cash investments 3 3 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 1.000 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b b Less accumulated depreciation 10c 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 15 15 47,371 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 55,525 17 Accounts payable and accrued expenses . 17 18 18 19 19 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 21 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 25 D 26 26 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 47,369 27 55,518 Unrestricted net assets 7 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 47.371 33 55.525 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 47.371 55.525 34

Pa	Check if Schedule O contains a response to any question in this Part XI			.୮	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2	257,856
2	Total expenses (must equal Part IX, column (A), line 25)	2			 249,702
3	Revenue less expenses Subtract line 2 from line 1	3			8,154
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			47,37
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6			55,525
Pai	TEXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII				
1	Accounting method used to prepare the Form 990			Yes	No
	Schedule O				1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
b	Were the organization's financial statements audited by an independent accountant?		2b		Νo
С	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O		2c		Νo
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r	equired	3b		

Additional Data

Software ID: Software Version:

EIN: 02-0464951

Name: ROTARY INTERNATIONAL DISTRICT 7870

C/O ALAN KANEGSBERG TREASURER

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code

) (Expenses \$ 1,632 including grants of \$) (Revenue \$

THE DISTRICT GRANTS SCHOLARSHIPS & AWARDS TO FURTHER EDUCATE YOUTH ABOUT THE IDEALS AND PURPOSES OF ROTARY ITEMS INCLUDED ARE FOUR-WAY TEST AWARDS OF 1,500 AND AMBASSADORIAL SCHOLARSHIP OF 132

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DLN: 93493317021772

OMB No 1545-0047

Political Campaign and Lobbying Activities

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Yes

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

- ◆ 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

Provide a description of the organization's direct and indirect political campaign activities on behalf of or

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) or Form 990-EZ, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization
ROTARY INTERNATIONAL DISTRICT 7870
C/O ALAN KANEGSBERG TREASURER

Employer identification number

02-0464951

art I-A	Complete if the or	ganization is exem	pt under section 501	(c)) or is a	section 527	organization.
---------	--------------------	--------------------	----------------------	-----	-----------	-------------	---------------

- in opposition to candidates for public office in Part IV Political expenditures
- Volunteer hours
- Part I-B Complete if the organization is exempt under section 501(c)(3).
 - Enter the amount of any excise tax incurred by the organization under section 4955
- Enter the amount of any excise tax incurred by organization managers under section 4955
- ┌ Yes 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
- Was a correction made? Yes √ No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527
- exempt funtion activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- Did the filing organization file Form 1120-POL for this year?
- Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-

Sch	edule C (Form 990 or 990-EZ) 2011					Page 2
Pa	cart II-A Complete if the organization is under section 501(h)).	s exempt under	section 501(c)(3) and fi	led Form 5768	(election
	Check If the filing organization belongs to an expenses, and share of excess lobbying the filing organization checked box A	ng expenditures)		_	oup member's name	e, address, EIN,
	Limits on Lobbying Ex (The term "expenditures" means amo	penditures			(a) Filing O rganization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public opi	nıon (grass roots lob	byıng)			
b	Total lobbying expenditures to influence a legislati	ive body (direct lobby	ring)			
c	Total lobbying expenditures (add lines 1a and 1b)					
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c a	and 1d)				
f	Lobbying nontaxable amount Enter the amount fro columns	m the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxa	ble amount is:			
	Not over \$500,000	20% of the amount on lin	e 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	1 ' ' '	\$175,000 plus 10% of the	' '	<i>'</i>		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 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-		l		
j	If there is an amount other than zero on either line section 4911 tax for this year?	1h or line 1i, did the	organization file	Form 4720 rep	orting	┌ Yes ┌ No
	4-Year Ave (Some organizations that made a se columns below. See the		ection do not	have to co		ne five
	Lobbying Exper	nditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					

d Grassroots non-taxable amount

e Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

90,090

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)).

	(6.66.6			
		(a	1)	(b)
		Yes	No	Amount
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?		Νo	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		Νo	
е	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		Νo	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo	
i	Other activities? If "Yes," describe in Part IV		No	
j	Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?		No	
b	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		ļ	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		No	

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	NO
1	Were substantially all (90% or more) dues received nondeductible by members?	1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		Νo
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		Νo

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

	1		,
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
C	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	
	i akabic amount of lobbying and political expenditures (see instructions)	, ,	

Part IV Supplemental Information

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier	Return Reference	Explanation
ADDITIONAL INFORMATION	,	DUES/ASSESSMENTS ARE RECEIVED FROM LOCAL ROTARY CLUBS IN THE DISTRICT, NOT FROM BUSINESSES ROTARY (AT DISTRICT OR LOCAL LEVELS) DOES NOT ENGAGE IN POLITICAL OR LOBBYING ACTIVITIES

1

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As Filed Data -

DLN: 93493317021772

OMB No 1545-0047

(Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service

SCHEDULE 0

ROTARY INTERNATIONAL DISTRICT 7870 C/O ALAN KANEGSBERG TREASURER

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

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization

Employer identification number

02-0464951

ldentifier	Return Reference	Explanation
ADDITIONAL INFORMATION	FORM 990	OFFICERS ARE ELECTED BY THE VARIOUS CLUBS THROUGHOUT THE DISTRICT
ALL OTHER ACCOMPLISHMENT DESCRIPTION	FORM 990, PAGE 2, PART III, LINE 4D	THE DISTRICT GRANTS SCHOLARSHIPS & AWARDS TO FURTHER EDUCATE YOUTH ABOUT THE IDEALS AND PURPOSES OF ROTARY ITEMS INCLUDED ARE FOUR-WAY TEST AWARDS OF 1,500 AND AMBASSADORIAL SCHOLARSHIP OF 132
OFFICERS WHO CANNOT BE REACHED	FORM 990, PAGE 6, PART VI, LINE 9	ALAN KANEGSBERG 9 OLD COACH ROAD BOW, NH 03304 JANICE MCELROY P O BOX 325 HENNIKER, NH 03242 ANTHONY GILMORE 1378 SOUTH ROAD HOPKINTON, NH 03229 DAVID HOOPES 1042 LANDGROVE ROAD LONDONDERRY, VT 05148 SANDRA MCGONAGLE 165 POTTER HILL ROAD GILFORD, NH 03249
ORGANIZATIONS PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM AND IS REVIEWED IN DETAIL BY THE DISTRICT TREASURER PRIOR TO FILING OF THE RETURN AND HE INDICATES THAT FACT TO THE OTHER DISTRICT OFFICERS
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	THE DISTRICT DOES NOT MAKE THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC
OTHER EXPENSES	FORM 990, PART IX, LINE 24E	GENERAL ADMIN EXPENSES 9,919 MISCELLANEOUS 8,986 FOUNDATION DINNER EXPENSE 8,830 RI PRES DINNER EXPENSE 8,134 ROTARY FOUNDATION 5,090 GROUP STUDY EXCHANGE 4,142 TRAVEL 2,453 GIFTS/AWARDS 2,015 ENTERTAINMENT & EVENTS 2,000 WEB/PORTAL/COMMUNICATION 1,548 FOUR-WAY SPEECH CONTEST 1,500 CREDIT CARD FEES 1,420 OTHER SUPPLIES & MISC 1,310 PRINTING/PROMOTION 1,201 PRINTING 1,100 PRECONFERENCE EXPENSE 305 AMBASSADORIAL SCHOLARSHIP 132

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DLN: 93493317021772

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organi ROTARY INTERNATIONA C/O ALAN KANEGSBERG	AL DISTRICT 7870						Employer 02-04649		tification number		
Part I Iden	ntification of Disregarded Entities (Comp	lete if the organizat	tion a	answered "Yes	" on Form 9	90, Part	IV, line 33.)				
Nam	(a) e, address, and EIN of disregarded entity	(b) Primary activity		(c) Legal domicile (stat or foreign country)	e Total inco	ome End	(e) -of-year assets		(f) Direct controlling entity		
Part II Iden	ntification of Related Tax-Exempt Organ ore related tax-exempt organizations during	izations (Complete the tax year.)	e ıf t	he organizatioi	n answered	"Yes" on	Form 990,	Part	: IV, line 34 becaus	e it had	one
Name,	(a) address, and EIN of related organization	(b) Primary activity		(c) gal domicile (state foreign country)	(d) Exempt Code		(e) Public charity status (if section 501(c)(3))		(f) Direct controlling entity	Section 5	g) 512(b)(13) trolled nization
(1) ROTARY DISTRICT	7070 FOLINDATION									Yes	No
9 OLD COACH ROAD 9 OLD COACH ROAD	7870 FOUNDATION	ROTA PROJ		NH	501(0	()		9	N/A		No
BOW, NH 03304 26-0197796											
For Privacy Act and	I Paperwork Reduction Act Notice, see the Instruct	ions for Form 990.	•	Cat No 5	0135Y				Schedule R (F	orm 990) 2011

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, lin	ie 34
	because it had one or more related organizations treated as a partnership during the tax year.)	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets			Disproprtionate		Disproprtionate		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or aging	(k) Percentage ownership
							Yes	No		Yes	No					

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership

Part		s" on Form 990, Par	T IV, line 34, 35, 3	35A, Or 36.)	Yes	No			
	lote. Complete line 1 if any entity is listed in Parts II, III or IV		TT TV2		res	NO			
	ing the tax year, did the orgranization engage in any of the following transactions with one or more related organ	nizations listed in Parts	S 11-1V /	1a		No			
b Gift, grant, or capital contribution to related organization(s) c. Gift, grant, or capital contribution from related organization(s)									
c Gift, grant, or capital contribution from related organization(s)									
	d Loans or loan guarantees to or for related organization(s)								
e L	oans or loan guarantees by related organization(s).			1e	+	No			
f S	sale of assets to related organization(s)			1f		No			
	exchange of assets with related organization(s)			1h		No			
	ease of facilities, equipment, or other assets to related organization(s)			1i		No			
	substantial of equipment, or earlier about to related organization (e)								
j L	j Lease of facilities, equipment, or other assets from related organization(s)								
-									
	Performance of services or membership or fundraising solicitations by related organization(s)								
m S	m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) n Sharing of paid employees with related organization(s)								
n S									
o F	Reimbursement paid to related organization(s) for expenses			10		No			
p F	Reimbursement paid by related organization(s) for expenses			1 p		No			
q	Other transfer of cash or property to related organization(s)			1 q		No			
r C	ther transfer of cash or property from related organization(s)			1r		No			
2 I	f the answer to any of the above is "Yes," see the instructions for information on who must complete this line, in	ncluding covered relati	onships and transact	cion thresholds					
	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determing Involved		unt			
1) 2)									
2)									
3)									
4)									
5)									
6)		1		I					

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	501(c)(3) organizations?		nted, partners d, section from 501(c)(3) er organizations?		(f) Share of total income (g) Share of end-of-year assets		(h) Disproprtionate allocations?		(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No					

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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
ADDITIONAL INFORMATION		SCHEDULE R PART V THERE ARE NO TRANSACTIONS BETWEEN THE FOUNDATION AND THE DISTRICT ORGANIZATIONS SCHEDULE R PART II THE FOUNDATION AND THE DISTRICT ARE RELATED IN THAT THE TREASURER DISTRICT GOVERNOR AND DISTRICT GOVERNOR NOMINEE OF THE DISTRICT ALSO SERVE THE FOUNDATION AS TREASURER SECRETARY AND DIRECTOR

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