Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047 Open to Public

22-3701514

973-226-3111

X Yes

No

Form **990** (2022)

Firm's EIN

Department of the Treasury Internal Revenue Service Inspection Go to www.irs.gov/Form990 for instructions and the latest information. For the 2022 calendar year, or tax year beginning 07/01/22, and ending 06/30/23 D Employer identification number Rotary D7475 Service Foundation Inc C Name of organization Check if applicable: A NJ NonProfit Organization Address change 46-3765577 Doing business as Name change Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite 908-227-6782 342 Rahway Ave Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/ terminated 335,775 South Plainfield NJ 07080-3741 Amended return Name and address of principal officer X No Yes H(a) Is this a group return for subordinates? Application pending Michael Hart H(b) Are all subordinates included? 553 Highland Ave NJ 07901 If "No." attach a list. See instructions Westfield **X** 501(c)(3) H(c) Group exemption number Website: Year of formation: 2013 X Corporation M State of legal domicile: Form of organization: Part I Summary 1 Briefly describe the organization's mission or most significant activities: See Schedule O Governance 2 Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 6 4 Number of independent voting members of the governing body (Part VI, line 1b) 6 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 0 6 Total number of volunteers (estimate if necessary) 1823 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 b Net unrelated business taxable income from Form 990-T, Part I, line 11 **Current Year** 8 Contributions and grants (Part VIII, line 1h) 316,842 66,283 9 Program service revenue (Part VIII, line 2g) 269,467 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 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 12) 316,856 335,775 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 203,145 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 211,372 287,493 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 414,517 287<u>,493</u> 19 Revenue less expenses. Subtract line 18 from line 12 -97,661 48,282 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 120,147 169,331 21 Total liabilities (Part X, line 26) 0 902 22 Net assets or fund balances. Subtract line 21 from line 20 120,147 168,429 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign Date Here Michael Treasurer Type or print name and title Print/Type preparer's name Preparer's signature X if Paid Lawrence M Wefferling Lawrence M Wefferling 11/20/23 self-employed P01329531 Preparer Wefferling &

Company CPAs LLC

07006-5011

35 Smull Ave Caldwell, NJ

May the IRS discuss this return with the preparer shown above? See instructions

Use Only

Firm's address

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		v
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	,		х
_	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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	-		~
Ü	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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
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, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		X
þ	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		X
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more			v
A	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	114		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
Ċ	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	İ	X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
	Schedule D, Parts XI and XII	12a		х
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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	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, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			v
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
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. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	'		
	Post VIII Sees As and Os0 KINAS II seemble Osbertile O. Post II	18		х
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			1
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	. 22		X
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		İ	v
242	employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	. 23	-	X
_ 4u	\$100,000 as of the 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 25a	24a	1	x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	1	
С	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		24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			ŀ
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			i
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	. 26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			J.
28	persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see the Schedule L,	27		X
20	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If		**********	********
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? 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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
22	complete Schedule N, Part II	. 32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	1 20		v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	. 33		X
04	or IV and Part V line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		-	X
b	If "Yes" to line 35a, 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		
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		X
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		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
00000000	19? Note: All Form 990 filers are required to complete Schedule O.	38		X
P	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		<u>.</u>	
4 -	Enter the number reported in her 2 of Form 1000 Fater 0 thank a subject to	*******	Yes	No
1a h	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1a 0 1b 2	\dashv		
b	Did the organization comply with backup withholding rules for reportable payments to vendors and	\dashv		
_	reportable gaming (gambling) winnings to prize winners?	1c	X	

	if V Statements Regarding Other IRS Filings and Tax Compliance (continu	ıea)			Yes	No
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	2a	0	_		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns? ຺຺		2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		-			
	a financial account in a foreign country (such as a bank account, securities account, or other financial	accou	ınt)?	4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccour	its (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	е				
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or				
_	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	oods				
	and services provided to the payor?			7a		
b				7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
	required to file Form 8282?			7c	*******	
d	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or	7d		7e		
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		·t	7f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file For		00 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza		* *********	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintainer					
	sponsoring organization have excess business holdings at any time during the year?			8		20000000000
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	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	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a		_		
b	Gross income from other sources. (Do not net amounts due or paid to other sources					
	against amounts due or received from them.)	11b		_		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	?	12a		
	,	12b		-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а				13a	**********	***********
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which	401				
_	the organization is licensed to issue qualified health plans	13b		-		
C 140	Enter the amount of reserves on hand	13c		44-		v
14a				14a		X
ь 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner			14b		
	excess parachute payment(s) during the year?			15		x
	If "Yes," see instructions and file Form 4720, Schedule N.					4.
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incom	e?	16	000000000000000000000000000000000000000	X
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activi	ties				
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

Form 990 (2022) Rotary District 7475 Foundation 46-3765577 Page 6 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 on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. X Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 6 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent 6 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, b 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 X The governing body? 8a Each committee with authority to act on behalf of the governing body? X 8b b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a 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 b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on 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? Х 16a 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ŊJ 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year.

Michael Townley Denville

15 Broadway

State the name, address, and telephone number of the person who possesses the organization's books and records

NJ 07834

973-620-9607

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

Check if Schedule O contains a response or note to any line in this Part VII

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. 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

K Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week	bo: off	x, unle	Pos check ess pe nd a d	rson i irecto	than or is both a or/truste	an e)	(D) Reportable compensation from the organization (W-2/	(E) Reportable compensation from related organizations (W-2/	(F) Estimated amount of other compensation from the
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations
(1)Rev Faria	1.00									
Trustee	0.00	X				\vdash		0	0	0
(2)Michael Hart	1.00	i i								
Secretary	0.00	X						0	0	0
(3) Barry Kroll	1.00									
Trustee	0.00	x						l o	o	0
(4) Christine Seacri	ist			_						
(,, ===================================	1.00									!
Trustee	0.00	X						0	0	0
(5) Joseph Steiner	2.00									
Chairman	0.00	x		x				O	o	0
(6) Michael Townley	4.00									
Treasurer	0.00	x		x				0	o	0
(7)	0.00									
(8)										
(9)										
(10)										
(11)										·

Part VII Section A. Officers	s, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	ınd Highest Compensated	d Employees (continued)				
(A) Name and title	(B) Average hours per week	Position (do not check more than on box, unless person is both a officer and a director/trustee				(do not check more than box, unless person is both officer and a director/trus			is both	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations			
· · · · · · · · · · · · · · · · · · ·													
							:						
1b Subtotal	ets to Part VII, S	Sect	ion /	4		 	 						
2 Total number of individuals (ir reportable compensation from			ed to	thos	e lis	ted a	bov	re) who received more than	\$100,000 of				
 Did the organization list any for employee on line 1a? If "Yes," For any individual listed on lin organization and related organindividual Did any person listed on line for services rendered to the organization. 	" complete Schede 1a, is the sum nizations greater acceive or acceganization? If "Y	dule of re thar 	J for eport 1 \$15	suc able 50,00 	h ind com 00? I	dividu pens f "Ye 	sations," of the sations of the sati	on and other compensation complete Schedule J for su	from the ch	3 X 4 X 5 X			
Section B. Independent Contractor1 Complete this table for your fire	ve highest comp												
compensation from the organi	ization. Report co (A) I business address	omp	ensa	tion	for t	he ca	len		nin the organization's tax ye (B) tion of services	ear. (C) Compensation			
Name and	Dusiness address	-						Descrip	ition of services	Compensation			
2 Total number of independent	contractors (inclu	ıdinc	but	not	imit	ed to	tho	se listed above) who					
received more than \$100,000								oo nated above) WIIO	0				

Form 990 (2022) Rotary District 7475 Foundation 46-3765577 Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded (B) Related or exempt Unrelated business revenue Total revenue function revenue from tax under sections 512-514 Contributions, Gifts, Grants and Other Similar Amounts 1a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e All other contributions, gifts, grants, 66,283 1f and similar amounts not included above Noncash contributions included in 1g |\$ lines 1a-1f 66,283 h Total. Add lines 1a-1f **Business Code** 182,167 182,167 Raffle Program Service Revenue 66,525 66,525 Japan Exchange District Conference 20,775 20,775 f All other program service revenue 269,467 g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 25 25 Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6a Gross rents 6a 6b **b** Less: rental expenses 6с c Rental inc. or (loss) Net rental income or (loss) Gross amount from (i) Securities (ii) Other sales of assets 7a other than inventory Other Revenue b Less: cost or other basis and sales exps. 7b c Gain or (loss) 7с d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less

0

returns and allowances

c Net income or (loss) from sales of inventory

All other revenue

b Less: cost of goods sold

Total. Add lines 11a-11d Total revenue. See instructions 10a

10b

Business Code

335,775

269,492

Form **990** (2022)

Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must on the contains a responsion of the contains a responsion of the contains and the contains are specific to the contains and the contains are specific to the contains are specific to the contains are specific to the contains are specific to the contains are specific to the contains and the contains are specific to the contains are specifically are specific to the contains are specific to the contains are specific to the contains are specific to the contains are specific to the contains are specific to the contains are specific to the contains are specific to the contains are specific to the contains are specific to the contains are specific to the contains are specific to the contains are specific to the contains are specific to the contains a			mpiete column (A).	
			this Part IX (B)	(C)	
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	Total expenses	Program service	Management and	(D) Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
•	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
3	trustees, and key employees			·	
6	Compensation not included above to disqualified				
U	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 accruals and contributions (include				
U	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
a	•				
b	Legal	150		150	·
۲. C	Accounting	130		130	
d e	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13					
14	Office expenses Information technology				
15	Royalties				
16	Occupancy				
17	Travel	53,820	53,820		
18	Payments of travel or entertainment expenses	· · · · · · · · · · · · · · · · · · ·	30,020		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Event Expenses	118,323	118,323		
b	Prizes	86,558			86,558
С	Project Expense	11,180			11,180
d	Tax Payments	5,939			5,939
е	All other expenses	11,523	5,583	4,492	
25	Total functional expenses. Add lines 1 through 24e	287,493	177,726		
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if				
DAA	following SOP 98-2 (ASC 958-720)				Form QQ0 (2022

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 139,142 Cash—non-interest-bearing 89,768 1 Savings and temporary cash investments 2 30,164 2 30,189 3 Pledges and grants receivable, net Accounts receivable, net 215 4 Loans and other receivables from any current or former officer, director. trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a **b** Less: accumulated depreciation 10b 10c Investments—publicly traded securities 11 11 Investments—other securities. See Part IV, line 11 12 12 Investments—program-related. See Part IV, line 11 13 13 14 Intangible assets 14 Other assets. See Part IV, line 11 15 15 120,147 Total assets. Add lines 1 through 15 (must equal line 33) 169,331 16 16 Accounts payable and accrued expenses 17 17 Grants payable 18 18 Deferred revenue 19 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 902 Total liabilities. Add lines 17 through 25. 26 Organizations that follow FASB ASC 958, check here **Assets or Fund Balances** and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 120,147 168,429 27 27 Net assets with donor restrictions 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 Retained earnings, endowment, accumulated income, or other funds 31 31 Total net assets or fund balances 120,147 32 168,429 32 120,147 33 Total liabilities and net assets/fund balances 33 169,331

Form **990** (2022)

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the 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 on

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

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 on Schedule O and describe any steps taken to undergo such audits ...

Form **990** (2022)

2c

3a

3b

Schedule O.

SCHEDULE A (Form 990)

Department of the Treasury

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Go to www.irs.gov/Form990 for instructions and the latest information. Rotary District 7475 Foundation A NJ NonProfit Organization

Employer identification number 46-3765577

P	art I	Reas	on for Public Charity	Status. (All organizations	must c	omplete	this part.) See instruction	ons.
The	orga	nization is not	a private foundation becaus	e it is: (For lines 1 through 12, o	check only	y one box	.)	
1		A church, coi	nvention of churches, or ass	ociation of churches described i	in sectio r	170(b)(I)(A)(i).	
2		A school des	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E (Form	n 990).)			
3		A hospital or	a cooperative hospital servi	ce organization described in sec	ction 170	(b)(1)(A)(iii).	
4		A medical res	search organization operated	d in conjunction with a hospital o	described	in sectio	n 170(b)(1)(A)(iii). Enter the h	ospital's name,
		city, and state	e:					
5		An organizati	on operated for the benefit of	of a college or university owned	or operat	ed by a g	overnmental unit described in	
		section 170(b)(1)(A)(iv). (Complete Part	II.)				
6		A federal, sta	ite, or local government or g	overnmental unit described in s	ection 17	'0(b)(1)(A	.)(v).	
7		•	on that normally receives a section 170(b)(1)(A)(vi). (C	substantial part of its support fro omplete Part II.)	om a gove	ernmenta	unit or from the general public	:
8		A community	trust described in section 1	70(b)(1)(A)(vi). (Complete Part	: II.)			
9		An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or						
		university:	· · · · · · · · · · · · · · · · · · ·	,		,	, ,	
10	X	An organizati	on that normally receives (1) more than 33 1/3% of its supp	ort from c	ontributio	ns, membership fees, and gro	SS
		•		pt functions, subject to certain				
			•	id unrelated business taxable in 0, 1975. See section 509(a)(2).	`		,	
11			J	• • • • • • • • • • • • • • • • • • • •			•	
11 12	An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of							
14	لــا	-		ons described in section 509(a	-			
	the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.							
	a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving							
	the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the							
		supportin	g organization. You must c	omplete Part IV, Sections A ar	nd B.			
	b			pervised or controlled in connec				
				ting organization vested in the s	same pers	sons that	control or manage the support	ed
	_	\neg	• •	Part IV, Sections A and C.	lin onno	otion with	and functionally integrated	ith
	C .	its suppo	rted organization(s) (see ins	upporting organization operated tructions). You must complete	Part IV,	Sections	A, D, and E.	
	d		• •	 A supporting organization ope organization generally must sa 				
				nust complete Part IV, Section	-		•	255
	е	_ `	` '	eived a written determination fro		-		
	•			n-functionally integrated support				
	f	Enter the nur	nber of supported organizati	ons				
	g	Provide the fo	ollowing information about th	e supported organization(s).				
(i		e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o		(v) Amount of monetary	(vi) Amount of
	org	ganization		(described on lines 1–10 above (see instructions))	listed in you docui	ment?	support (see instructions)	other support (see instructions)
				,	Yes	No	,	,
(A)								
(B)								
(C)						 		
(0)						İ		
(D)								
(E)								
Tota For I		work Reduction	n Act Notice, see the Instruct	ions for Form 990 or 990-EZ	1	l	<u> </u>	 Schedule A (Form 990) 2022

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support								
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	<u>?</u>	(f) Total	_
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")								_
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
3	The value of services or facilities furnished by a governmental unit to the organization without charge								_
4	Total. Add lines 1 through 3								_
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)								
6	Public support. Subtract line 5 from line 4								
Sec	tion B. Total Support							·	-
Caler	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2	(f) Total	_
7	Amounts from line 4								_
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources								_
9	Net income from unrelated business activities, whether or not the business is regularly carried on								_
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)								_
11	Total support. Add lines 7 through 10					1			_
12	Gross receipts from related activities, etc.	(see instructions)	,			L	12		_
13	First 5 years. If the Form 990 is for the or		econd, third, fourtl	n, or fifth tax year	as a section 501(c)(3)		_	_
	organization, check this box and stop her				· · · · · · · · · · · · · · · · · · ·				
	tion C. Computation of Public Su					·····			_
14	Public support percentage for 2022 (line 6					1	14	%	_
15	Public support percentage from 2021 Sch					L	15	%	-
16a	33 1/3% support test—2022. If the organ				33 1/3% or more, o	check this		_	7
	box and stop here . The organization qual							L	
b	33 1/3% support test—2021. If the organ				15 is 33 1/3% or m	ore, check		_	7
	this box and stop here . The organization							L	_
17a	10%-facts-and-circumstances test—202	_							
	10% or more, and if the organization mee				-				
	Part VI how the organization meets the fa	cts-and-circumstar	ices test. The orga	inization qualifies	as a publicly suppo	orted			٦
	organization							L	Ĺ
b	10%-facts-and-circumstances test—202	•							
	15 is 10% or more, and if the organization								
	in Part VI how the organization meets the			•		-		_	٦
46	organization			L 47_ 45				L	ل
18	Private foundation. If the organization die							_	٦
	instructions								_
	· · · · · · · · · · · · · · · · · · ·					Sol	nodulo.	A (Form 990) 2023	'n

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support	quality direct ta	10 10010 110104 15	0.0 m, p. 0000 00	p.o.co : ca. c)		
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	119,481	235,793	58,227	316,842	66,283	796,626
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	236,313	68,505	25	14	269,492	574,349
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	355,794	304,298	58,252	316,856	335,775	1,370,975
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						1,370,975
	ction B. Total Support		<u> </u>		400004	() 2222	(D = .)
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	355,794	304,298	58,252	316,856	335,775	1,370,975
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on		21,002	36,383			57,385
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	,					
13	Total support. (Add lines 9, 10c, 11, and 12.)	355,794	325,300	94,635	316,856	335,775	1,428,360
14	First 5 years. If the Form 990 is for the or organization, check this box and stop her	rganization's first, s	econd, third, fourth	n, or fifth tax year a	s a section 501(c)(3)	
Sec	ction C. Computation of Public St						
15	Public support percentage for 2022 (line 8			ın (f))		15	95.98%
16	Public support percentage from 2021 Sch						95.44%
Sec	ction D. Computation of Investme						
17	Investment income percentage for 2022 (I			, column (f))			%
18	Investment income percentage from 2021						%
19a	17 is not more than 33 1/3%, check this b	ox and stop here .	The organization of	jualifies as a public	ly supported organ	ization	<u>¥</u>
b	33 1/3% support tests—2021. If the orga						Γ
20	line 18 is not more than 33 1/3%, check the Private foundation. If the organization di						
20	riivate iounuation. Ii the organization di	a not onedra box (711 III 10 14, 19d, Of	TOD, OHEGR (IIIS DO)	vario ace matructio	11U	

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and *if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI**.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
•		
2	3000000000000000	200000000000000000000000000000000000000
3a		000000000000000000000000000000000000000
3b		
	***********	***************************************
3с		

4a		
	500000000000000000000000000000000000000	

4b		
	***********	····
4c		
**********		*************
300000000000000000000000000000000000000		
5a		
333333333		
5b		
5c		
*********	************	***************************************
6		
	***************************************	************
		NUOCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCC
7		
	000000000000000000000000000000000000000	000000000000000000000000000000000000000
8		
9a		
9a		
9a		
9a 9b		
9a 9b		
9a 9b		
9a 9b 9c		
9a 9b 9c 10a		
9a 9b 9c 10a		
9a 9b 9c 10a		

Schedu	le A (Form 990) 2022 Rotary District 7475 Foundation	46-3765577	Page 5
Par	Supporting Organizations (continued)		
			Yes No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and		
	11c below, the governing body of a supported organization?	11a	
b	A family member of a person described on line 11a above?	11b	
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,		
	provide detail in Part VI .	11c	***************************************
Sect	on B. Type I Supporting Organizations		
			Yes No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or members	shin of one or	100 110
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organizations		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization	[60000000000][600	
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than	` '	
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated	ļ	
•	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	ar. 1	
2	Did the organization operate for the benefit of any supported organization other than the supported		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		
Soot	supervised, or controlled the supporting organization.	2	
Secti	on C. Type II Supporting Organizations		
	Manage and the first of the second se		Yes No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		
	or management of the supporting organization was vested in the same persons that controlled or managed		
Socti	the supported organization(s).		
Secti	on D. All Type III Supporting Organizations		
	Pildies of the state of the sta		Yes No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior	[000000000b00	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	[
_	organization's governing documents in effect on the date of notification, to the extent not previously provided'	? 1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI he		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have		
	a significant voice in the organization's investment policies and in directing the use of the organization's		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		
C4	supported organizations played in this regard.	3	
	on E. Type III Functionally Integrated Supporting Organizations		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year ((see instructions).	
a	The organization satisfied the Activities Test. Complete line 2 below.		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.		
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental	· · · · · · · · · · · · · · · · · · ·	
2	Activities Test. Answer lines 2a and 2b below.		Yes No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		
	those supported organizations and explain how these activities directly furthered their exempt purposes,		
	how the organization was responsive to those supported organizations, and how the organization determined	!	
	that these activities constituted substantially all of its activities.	2a	
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's		
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If		
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would		
	have engaged in these activities but for the organization's involvement.	2b	
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting C	Organizat	ions	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust or		· · ·	
instructions. All other Type III non-functionally integrated supporting organizations	must comp	lete Sections A through E	•
Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection			
of gross income or for management, conservation, or maintenance of			
property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a	,	
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally integral	ated Type III	supporting organization	

Schedule A (Form 990) 2022

(see instructions).

Par	V Type III Non-Functionally Integrated 509(a)(3) S	Supporting Organiza	tions (continued)		
Sect	ion D – Distributions				Current Year
1_	Amounts paid to supported organizations to accomplish exempt purpos	ses	***************************************	1	
2	Amounts paid to perform activity that directly furthers exempt purposes	of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purposes of suppo	orted organizations		3	
4	Amounts paid to acquire exempt-use assets		**************************************	4	
5	Qualified set-aside amounts (prior IRS approval required—provide deta	ails in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organization	ition is responsive		8	
	(provide details in Part VI). See instructions.				
9	Distributable amount for 2022 from Section C, line 6			9	
_10	Line 8 amount divided by line 9 amount	V		10	
		(i)	(ii)		(iii)
Sect	on E – Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	ş	Distributable
			Pre-2022		Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022				
	(reasonable cause required-explain in Part VI). See				
	instructions.			******	
3	Excess distributions carryover, if any, to 2022				
	From 2017				
b	From 2018				
	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i_	Carryover from 2017 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from				
	Section D, line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
b	Excess from 2019				
	Excess from 2020				
d	Excess from 2021				

e Excess from 2022

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047
2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization Rotary District 7475 Foundation
A NJ NonProfit Organization

Employer identification number 46-3765577

Form 990 - Organization's Mission or Most Significant Activities To Solicit, collect and otherwise raise money for charitable purposes to support projects to assist the general public in the State of NJ, the United States and Internationally at their time of need in order to advance world understanding, goodwill, and peace through the improvement of health, the supprot of education and the alleviation of poverty and to make distributions to organization that qualify as exempt organization under Section 501 (c) (3). Form 990 - Organization's Mission To Solicit, collect and otherwise raise money for charitable purposes to support projects to assist the general public in the State of NJ, the United States and Internationally at their time of need in order to advance world understanding, goodwill, and peace through the improvement of health, the suport of education, and the alleviation of poverty and to make distributions to organizations that qualify as exempt organizations under section 501 (c) (3). Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted. Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

Form **990**

Two Year Comparison Report

06/30/23

2021 & 2022

Name

For calendar year 2022, or tax year beginning

07/01/22 , ending

Taxpayer Identification Number

Rotary	District	7475	Foundation
A NJ No	onProfit (Organi	ization

A	NJ NonProfit Organization			46-37	65577
T	, , , , , , , , , , , , , , , , , , , ,		2021	2022	Differences
-	1. Contributions, gifts, grants	1.	316,842	66,283	-250,559
]:	2. Membership dues and assessments	2.			
	3. Government contributions and grants	3.			
3 4	4. Program service revenue	4.		269,467	269,467
	5. Investment income	5.	14	25	269,467 11
1	6. Proceeds from tax exempt bonds	6.			
-	7. Net gain or (loss) from sale of assets other than inventory	7.			
	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming				
	Net gain or (loss) on sales of inventory				
	1. Other revenue	11.			
1:	2. Total revenue. Add lines 1 through 11	12.	316,856	335,775	18,919
_	3. Grants and similar amounts paid	13.	203,145	7	-203,145
	4. Benefits paid to or for members	14.	•		
	5. Compensation of officers, directors, trustees, etc.	15.			
	6. Salaries, other compensation, and employee benefits	16.			
	7. Professional fundraising fees	17.			
h	8. Other professional fees	18.	125	150	25
	9. Occupancy, rent, utilities, and maintenance	19.	1 - 2 11000		
2	Depreciation and Depletion	20.			
2	1. Other expenses	21.	211,247	287,343	76,096
2	2. Total expenses. Add lines 13 through 21	22.	414,517	287,493	-127,024
	3. Excess or (Deficit). Subtract line 22 from line 12	23.	-97,661	48,282	145,943
	4. Total exempt revenue	24.	316,856		18,919
2	5. Total unrelated revenue	25.			
2	6. Total excludable revenue	26.	14	269,492	269,478
2 2 2 3 3	7. Total assets	27.	120,147	169,331	49,184
2	8. Total liabilities	28.		902	902
2	9. Retained earnings	29.	120,147	168,429	48,282
	Number of voting members of governing body	30.	6	6	,
	Number of independent voting members of governing body	31.	6	6	
	2. Number of employees	32.	0	0	
3	3. Number of volunteers	33.	1700	1823	

Form	9	9()

Tax Projection Worksheet

2022 & 2023

Name

Rotary District 7475 Foundation A NJ NonProfit Organization

Taxpayer Identification Number

46-3765577

A	NJ NonProfit Organization			46-3	3765577
			2022	2023	Differences
	1. Contributions, gifts, grants	1.	66,283	66,283	
	2. Membership dues and assessments	2.			
	3. Government contributions and grants	3.		, , , , , , , , , , , , , , , , , , , ,	
ne	4. Program service revenue	4.	269,467	269,467	
=	5. Investment income	5.	25	25	
5	6. Proceeds from tax exempt bonds	6.			
ב ב	7. Net gain or (loss) from sale of assets other than inventory	7.			
_	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming				
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	11.			
	12. Total revenue. Add lines 1 through 11	12.	335,775	335,775	
	13. Grants and similar amounts paid	13.	•		
	14. Benefits paid to or for members	14.			
0	15. Compensation of officers, directors, trustees, etc.	15.			
,	16. Salaries, other compensation, and employee benefits	16.			
	17. Professional fundraising fees	17.			
2	18. Other professional fees	18.	150	150	
Ĺ	19. Occupancy, rent, utilities, and maintenance	19.			
	20. Depreciation and Depletion	20.			
	21. Other expenses	21.	287,343	287,343	
	22. Total expenses. Add lines 13 through 21	22.	287,493	287,493	
	23. Excess or (Deficit). Subtract line 22 from line 12	23.	48,282	48,282	
	24. Total exempt revenue	24.	335,775	335,775	
	25. Total unrelated revenue	25.			
2	26. Total excludable revenue	26.	269,492	269,492	
5	27. Total assets	27.	169,331	169,331	
	28. Total liabilities	28.	902	902	
	29 . Retained earnings	29.	168,429	168,429	
	30. Number of voting members of governing body	30.	6	6	
	31. Number of independent voting members of governing body	31.	6	6	
	32. Number of employees	32.	0	0	
	33. Number of volunteers	33.	1823	1823	

Form 990	Tax Ref	Tax Return History			2022
Name Rotary District A NJ NonProfit C	: 7475 Foundation Organization			Employer 46-3	Employer Identification Number 46-3765577
20	2018 2019	2020	2021	2022	2023
Contributions, gifts, grants	235,793	58,227	316,842	66,283	66,283
Membership dues Program service revenue	13,600			269,467	269,467
Capital gain or loss	4				J
Investment income	91	25	14	25	25
Fundraising revenue (income/loss)					
Gaming revenue (income/loss)	22,002	39,873			
Other revenue	54,814				
Total revenue	326,300	98,125	316,856	335,775	335,775
Grants and similar amounts paid	125,556		203,145		
Benefits paid to or for members					
Compensation of officers, etc.					
Other compensation					
Professional fees	100	100	125	150	150
Occupancy costs					
Depreciation and depletion					
Other expenses	174,349	13,120	211,247	287,343	١
Total expenses	300,005	13,220	414,517	287,493	287,493
Excess or (Deficit)	26,295	84,905	-97,661	48,282	48,282
Total exempt revenue	326,300	98,125	316,856	335,775	335,775
Total unrelated revenue					
Total excludable revenue	90,507		14	ı -	ı >
Total Assets	134,320	217,808	120,147	169,331	169,331
Total Liabilities	1,417				
Net Fund Balances	132,903	217,808	120,147	168,429	168,429

46-3765577	Federal Statements	
	Schedule A, Part III, Line 1(e)	
	Description	Amount
Contributions Corporate Contributions Grant Income Youth Exchange prior year Total		\$ 57,968 5,917 180 1,830 388 \$ 66,283
	Schedule A, Part III, Line 2(e)	
	Description	Amount
Taxable Interest on Savings and Temporary Cash Investments Japan Exchange District Conference Raffle Total	emporary Cash Investments	\$ 25 66,525 20,775 182,167 \$ 269,492