			EXTENDE	ED TO MAY 16, 20	22		
	<u>_</u>		Return of Organia			ncome Tax	OMB No. 1545-0047
Form	, 99	NU I	Under section 501(c), 527, or 4947(a	•			3 2020
				urity numbers on this form a			Open to Public
Depar Interna	ment of th	e Treasury Service	Go to www.irs.gov/Fo	orm990 for instructions and t	the latest i	nformation.	Inspection
AF	or the 2	020 calenda	r year, or tax year beginning JUL	1, 2020 and e	nding JU	NN 30, 2021	
B Ch ap	eck if plicable:	C Name of	organization			D Employer identific	cation number
	Address change Name	ROTARY	INTERNATIONAL				
	change Initial	¥	siness as			36-1707667	
	return Final return/		and street (or P.O. box if mail is not delive IERMAN AVENUE	ered to street address)	loom/suite	E Telephone number (847) 866-30	
[termin- ated Amended		wn, state or province, country, and ZI N, IL 60201-3698	P or foreign postal code		G Gross receipts \$ H(a) Is this a group re	116,345,033. turp
	return Applica- tion		d address of principal officer: JULIE	BURKE		for subordinates	
L	pending	SAME AS				H(b) Are all subordinates in	
I Ta	ax-exem	pt status:	501(c)(3) X 501(c) (4)	(insert no.) 4947(a)(1) or	527		list. See instructions
		WWW.RO			<u> </u>	H(c) Group exemption	
				ciation Other ►	L Year o		State of legal domicile: IL
Pa		Summary		MCCORE DE L		1.0	r otato or logar dormento.
T			the organization's mission or most sig	nificant activities: ROTARIAN	NS PROMO	TE INTEGRITY,	MMM
Activities & Governance			ND PEACE THROUGH FELLOWSHIP				
nar	2 Ch	neck this boy	if the organization disconting	nued its operations or dispose	d of more	than 25% of its net ass	ets.
ver			ng members of the governing body (Pa			3	19
3			ependent voting members of the gover	· · · · · · · · · · · · · · · · · · ·			17
න්			f individuals employed in calendar yea				343
itie			f volunteers (estimate if necessary)				1162763
ž			business revenue from Part VIII, colur				288,415.
¥			ousiness taxable income from Form 99			7a 7b	0.
	DINC	or annotated i			1	Prior Year	Current Year
	8 Co	ontributions :					Current real
ne	0 00		and grants (Part VIII line 1h)			82 164 041	81 529 258
	9 Pr					82,164,041. 6 292 504.	<u>81,529,258.</u> 6 621 720.
ver		ogram servic	e revenue (Part VIII, line 2g)			6,292,504.	6,621,720.
Revenue	10 inv	ogram servic vestment inc	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, ar	nd 7d)		6,292,504. 3,508,697.	6,621,720. 2,851,839.
Rever	10 inv 11 Oti	ogram servic vestment inc ther revenue	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9d	nd 7d) c, 10c, and 11e)	·····	6,292,504. 3,508,697. 2,918,021.	6,621,720. 2,851,839. 5,359,396.
Rever	10 Inv 11 Oti 12 To	ogram servic vestment inc her revenue otal revenue -	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9 add lines 8 through 11 (must equal Pa	nd 7d) c, 10c, and 11e) art VIII, column (A), line 12)		6,292,504. 3,508,697. 2,918,021. 94,883,263.	6,621,720. 2,851,839. 5,359,396. 96,362,213.
Rever	10 Inv 11 Oti 12 To 13 Gr.	ogram servic vestment inc ther revenue <u>tal revenue -</u> rants and sim	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9 add lines 8 through 11 (must equal Pa ilar amounts paid (Part IX, column (A),	nd 7d) c, 10c, and 11e) art VIII, column (A), line 12) lines 1-3)		6,292,504. 3,508,697. 2,918,021. 94,883,263. 2,433,562.	6,621,720. 2,851,839. 5,359,396. 96,362,213. 7,695,462.
	 Inv Ott To To Gr Be 	ogram servic vestment inc ther revenue <u>stal revenue -</u> rants and sim enefits paid t	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9 add lines 8 through 11 (must equal Pa illar amounts paid (Part IX, column (A), o or for members (Part IX, column (A), 1	nd 7d) c, 10c, and 11e) art VIII, column (A), line 12) lines 1-3) ine 4)	· · · · · · · · · · · · · · · · · · ·	6,292,504. 3,508,697. 2,918,021. 94,883,263. 2,433,562. 0.	6,621,720. 2,851,839. 5,359,396. 96,362,213. 7,695,462. 0.
	 Inv Ott To To Gr Gr Be Sa 	ogram servic vestment inc ther revenue <u>stal revenue -</u> ants and sim enefits paid t alaries, other	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9 add lines 8 through 11 (must equal Pa illar amounts paid (Part IX, column (A), o or for members (Part IX, column (A), 1 compensation, employee benefits (Par	nd 7d) c, 10c, and 11e) art VIII, column (A), line 12) lines 1-3) ine 4) t IX, column (A), lines 5-10)		6,292,504. 3,508,697. 2,918,021. 94,883,263. 2,433,562. 0. 42,559,591.	6,621,720. 2,851,839. 5,359,396. 96,362,213. 7,695,462. 0. 40,730,890.
lses	 Inv Ott To To To To Gr Gr Be Sa Sa Pre 	ogram servic vestment inc ther revenue tal revenue - rants and sim enefits paid t alaries, other ofessional fu	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9 add lines 8 through 11 (must equal Pa ilar amounts paid (Part IX, column (A), o or for members (Part IX, column (A), I compensation, employee benefits (Par ndraising fees (Part IX, column (A), line	nd 7d) c, 10c, and 11e) art VIII, column (A), line 12) lines 1-3) ine 4) t IX, column (A), lines 5-10)		6,292,504. 3,508,697. 2,918,021. 94,883,263. 2,433,562. 0.	6,621,720. 2,851,839. 5,359,396. 96,362,213. 7,695,462. 0.
lses	 Inv Ott To To Gr. Gr.	ogram servic vestment inc ther revenue tal revenue - rants and sim enefits paid t alaries, other ofessional fu stal fundraisir	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9 add lines 8 through 11 (must equal Pa ilar amounts paid (Part IX, column (A), 1 compensation, employee benefits (Part indraising fees (Part IX, column (A), line g expenses (Part IX, column (D), line 2	nd 7d) c, 10c, and 11e) <u>int VIII, column (A), line 12)</u> lines 1-3) ine 4) t IX, column (A), lines 5-10) t 11e)	0.	6,292,504. 3,508,697. 2,918,021. 94,883,263. 2,433,562. 0. 42,559,591. 0.	6,621,720. 2,851,839. 5,359,396. 96,362,213. 7,695,462. 0. 40,730,890. 0.
	 Inv 11 Ott 12 To 13 Gr. 14 Be 15 Sa 16a Pro b To 17 Ott 	ogram servic vestment inc ther revenue tal revenue - rants and sim enefits paid t alaries, other ofessional fu otal fundraisin ther expense	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9: add lines 8 through 11 (must equal Pa ilar amounts paid (Part IX, column (A), o or for members (Part IX, column (A), I compensation, employee benefits (Par indraising fees (Part IX, column (A), line g expenses (Part IX, column (D), line 2 s (Part IX, column (A), lines 11a-11d, 1	nd 7d) c, 10c, and 11e) <u>int VIII, column (A), line 12)</u> lines 1-3) ine 4) t IX, column (A), lines 5-10) t 11e) (5) ▶	0.	6,292,504. 3,508,697. 2,918,021. 94,883,263. 2,433,562. 0. 42,559,591. 0. 46,299,067.	6,621,720. 2,851,839. 5,359,396. 96,362,213. 7,695,462. 0. 40,730,890. 0. 37,956,816.
lses	 Inv 11 Ott 12 To 13 Gr. 14 Be 15 Sa 16a Pro 16a To 17 Ott 18 To 	ogram servic vestment inc ther revenue ants and sim enefits paid t alaries, other ofessional fu otal fundraisii ther expense tal expenses	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9 add lines 8 through 11 (must equal Pa illar amounts paid (Part IX, column (A), o or for members (Part IX, column (A), I compensation, employee benefits (Part ndraising fees (Part IX, column (A), line g expenses (Part IX, column (D), line 2 s (Part IX, column (A), lines 11a-11d, 1 . Add lines 13-17 (must equal Part IX, o	nd 7d) c, 10c, and 11e) int VIII, column (A), line 12) lines 1-3) ine 4) t IX, column (A), lines 5-10) t 11e) 5) ▶	0.	6,292,504. 3,508,697. 2,918,021. 94,883,263. 2,433,562. 0. 42,559,591. 0. 46,299,067. 91,292,220.	6,621,720. 2,851,839. 5,359,396. 96,362,213. 7,695,462. 0. 40,730,890. 0. 37,956,816. 86,383,168.
Expenses	 Inv 11 Ott 12 To 13 Gr. 14 Be 15 Sa 16a Pro 16a To 17 Ott 18 To 	ogram servic vestment inc ther revenue ants and sim enefits paid t alaries, other ofessional fu otal fundraisii ther expense tal expenses	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9: add lines 8 through 11 (must equal Pa ilar amounts paid (Part IX, column (A), o or for members (Part IX, column (A), I compensation, employee benefits (Par indraising fees (Part IX, column (A), line g expenses (Part IX, column (D), line 2 s (Part IX, column (A), lines 11a-11d, 1	nd 7d) c, 10c, and 11e) int VIII, column (A), line 12) lines 1-3) ine 4) t IX, column (A), lines 5-10) t 11e) 5) ▶	0.	6,292,504. 3,508,697. 2,918,021. 94,883,263. 2,433,562. 0. 42,559,591. 0. 46,299,067. 91,292,220. 3,591,043.	6,621,720. 2,851,839. 5,359,396. 96,362,213. 7,695,462. 0. 40,730,890. 0. 37,956,816. 86,383,168. 9,979,045.
Expenses	 Invite 11 Otting 12 Toting 13 Gr. 14 Bernary 15 Saria 16a Product 16 Toting 17 Otting 18 Toting 19 Restance 	ogram servic vestment inc ther revenue tal revenue ants and sim enefits paid t alaries, other ofessional fu tal fundraisir ther expense tal expenses evenue less e	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9 add lines 8 through 11 (must equal Pa illar amounts paid (Part IX, column (A), o or for members (Part IX, column (A), 1 compensation, employee benefits (Part ndraising fees (Part IX, column (A), line 19 expenses (Part IX, column (A), line 19 expenses (Part IX, column (A), line 19 expenses (Part IX, column (D), line 2 s (Part IX, column (A), lines 11a-11d, 1 . Add lines 13-17 (must equal Part IX, or xpenses. Subtract line 18 from line 12	nd 7d) c, 10c, and 11e) art VIII, column (A), line 12) lines 1-3) ine 4) t IX, column (A), lines 5-10) t 11e) 55) ▶ 11-24e) column (A), line 25)	0. Beg	6,292,504. 3,508,697. 2,918,021. 94,883,263. 2,433,562. 0. 42,559,591. 0. 46,299,067. 91,292,220. 3,591,043. inning of Current Year	6,621,720. 2,851,839. 5,359,396. 96,362,213. 7,695,462. 0. 40,730,890. 0. 37,956,816. 86,383,168. 9,979,045. End of Year
Expenses	 Inv 11 Ott 12 To 13 Gr. 14 Be 15 Sa 16a Pro 16 To 17 Ott 18 To 19 Re 20 To 	ogram servic vestment inc ther revenue tal revenue - ants and sim enefits paid t alaries, other ofessional fu tal fundraisir ther expense tal expenses evenue less e	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9 add lines 8 through 11 (must equal Pa illar amounts paid (Part IX, column (A), o or for members (Part IX, column (A), I compensation, employee benefits (Par ndraising fees (Part IX, column (A), line g expenses (Part IX, column (A), line g expenses (Part IX, column (A), line g expenses (Part IX, column (D), line 2 s (Part IX, column (A), lines 11a-11d, 1 ⁻ . Add lines 13-17 (must equal Part IX, o xpenses. Subtract line 18 from line 12 art X, line 16)	nd 7d) c, 10c, and 11e) int VIII, column (A), line 12) lines 1-3) ine 4) t IX, column (A), lines 5-10) t 11e) 5) ▶	0. Beg	6,292,504. 3,508,697. 2,918,021. 94,883,263. 2,433,562. 0. 42,559,591. 0. 46,299,067. 91,292,220. 3,591,043. inning of Current Year 181,437,265.	6,621,720. 2,851,839. 5,359,396. 96,362,213. 7,695,462. 0. 40,730,890. 0. 37,956,816. 86,383,168. 9,979,045. End of Year 194,654,881.
Expenses	 Inv 11 Ott 12 To 13 Gr. 14 Be 15 Sa 16a Pro b To 17 Ott 18 To 19 Re 20 To 21 To 	ogram servic vestment inc ther revenue tal revenue - ants and sim enefits paid t alaries, other ofessional fu tal fundraisir ther expense val expenses evenue less e	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9 add lines 8 through 11 (must equal Pa illar amounts paid (Part IX, column (A), o or for members (Part IX, column (A), I compensation, employee benefits (Par ndraising fees (Part IX, column (A), line g expenses (Part IX, column (A), line g expenses (Part IX, column (D), line 2 s (Part IX, column (A), lines 11a-11d, 1 ⁻ . Add lines 13-17 (must equal Part IX, o xpenses. Subtract line 18 from line 12 art X, line 16) Part X, line 26)	nd 7d) c, 10c, and 11e) urt VIII, column (A), line 12) lines 1-3) ine 4) t IX, column (A), lines 5-10) t 11e) 5) ▶ 11-24e) column (A), line 25)	0. Beg	6,292,504. 3,508,697. 2,918,021. 94,883,263. 2,433,562. 0. 42,559,591. 0. 46,299,067. 91,292,220. 3,591,043. inning of Current Year 181,437,265. 31,677,359.	6,621,720. 2,851,839. 5,359,396. 96,362,213. 7,695,462. 0. 40,730,890. 0. 37,956,816. 86,383,168. 9,979,045. End of Year 194,654,881. 34,016,833.
Net Assets or Expenses	 Inv 11 Ott 12 To 13 Gr. 14 Be 15 Sa 16a Pro b To 17 Ott 18 To 19 Re 20 To 21 To 22 Ne 	ogram servic vestment inc ther revenue tal revenue - ants and sim enefits paid t alaries, other ofessional fu tal fundraisir ther expense val expenses evenue less e	e revenue (Part VIII, line 2g) pome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9 add lines 8 through 11 (must equal Pa illar amounts paid (Part IX, column (A), p or for members (Part IX, column (A), I compensation, employee benefits (Part ndraising fees (Part IX, column (A), line g expenses (Part IX, column (A), line g expenses (Part IX, column (A), line g expenses (Part IX, column (D), line 2 s (Part IX, column (A), lines 11a-11d, 1 ⁻¹ . Add lines 13-17 (must equal Part IX, expenses. Subtract line 18 from line 12 art X, line 16) Part X, line 26) und balances. Subtract line 21 from line	nd 7d) c, 10c, and 11e) urt VIII, column (A), line 12) lines 1-3) ine 4) t IX, column (A), lines 5-10) t 11e) 5) ▶ 11-24e) column (A), line 25)	0. Beg	6,292,504. 3,508,697. 2,918,021. 94,883,263. 2,433,562. 0. 42,559,591. 0. 46,299,067. 91,292,220. 3,591,043. inning of Current Year 181,437,265.	6,621,720. 2,851,839. 5,359,396. 96,362,213. 7,695,462. 0. 40,730,890. 0. 37,956,816. 86,383,168. 9,979,045. End of Year 194,654,881.
Der Assets or Expenses Expenses	 Inv 11 Oti 12 To 13 Gr. 14 Be 15 Sa 16a Pro b To 17 Oti 18 To 19 Re 20 To 21 To 22 Ne 11 S 	ogram servic vestment inc ther revenue tal revenue - ants and sim enefits paid t alaries, other ofessional fu tal fundraisir ther expense tal expenses evenue less e tal assets (P tal liabilities at assets or f Signature	e revenue (Part VIII, line 2g) pome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9 add lines 8 through 11 (must equal Pa illar amounts paid (Part IX, column (A), p or for members (Part IX, column (A), I compensation, employee benefits (Part ndraising fees (Part IX, column (A), line g expenses (Part IX, column (A), line g expenses (Part IX, column (A), line g expenses (Part IX, column (D), line 2 s (Part IX, column (A), lines 11a-11d, 1 ⁻¹ . Add lines 13-17 (must equal Part IX, expenses. Subtract line 18 from line 12 art X, line 16) Part X, line 26) und balances. Subtract line 21 from line	nd 7d) c, 10c, and 11e) urt VIII, column (A), line 12) lines 1-3) ine 4) t IX, column (A), lines 5-10) t 11e) 5) ▶ 11-24e) column (A), line 25) e 20	0. Bec	6,292,504. 3,508,697. 2,918,021. 94,883,263. 2,433,562. 0. 42,559,591. 0. 46,299,067. 91,292,220. 3,591,043. inning of Current Year 181,437,265. 31,677,359. 149,759,906.	6,621,720. 2,851,839. 5,359,396. 96,362,213. 7,695,462. 0. 40,730,890. 0. 37,956,816. 86,383,168. 9,979,045. End of Year 194,654,881. 34,016,833. 160,638,048.
Net Assets or Expenses	10 Inv 11 Ott 12 To 13 Gr. 14 Be 15 Sa 16a Pro b To 17 Ott 18 To 19 Re 20 To 21 To 22 Ne till S	ogram servic vestment inc ther revenue tal revenue - ants and sim enefits paid t alaries, other ofessional fu tal fundraisir ther expenses exenue less e tal assets (P tal labilities at assets or f Signature es of perjury, I	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9 add lines 8 through 11 (must equal Pa illar amounts paid (Part IX, column (A), o or for members (Part IX, column (A), I compensation, employee benefits (Par ndraising fees (Part IX, column (A), line g expenses (Part IX, column (A), line g expenses (Part IX, column (D), line 2 s (Part IX, column (A), lines 11a-11d, 1 ⁻ . Add lines 13-17 (must equal Part IX, o xpenses. Subtract line 18 from line 12 art X, line 16) Part X, line 26) und balances. Subtract line 21 from line Block	nd 7d) c, 10c, and 11e) art VIII, column (A), line 12) lines 1-3) ine 4) t IX, column (A), lines 5-10) 11e) 11e) (5) ▶ 11-24e) column (A), line 25) e 20 cluding accompanying schedules a	0. Beg	6,292,504. 3,508,697. 2,918,021. 94,883,263. 2,433,562. 0. 42,559,591. 0. 46,299,067. 91,292,220. 3,591,043. inning of Current Year 181,437,265. 31,677,359. 149,759,906.	6,621,720. 2,851,839. 5,359,396. 96,362,213. 7,695,462. 0. 40,730,890. 0. 37,956,816. 86,383,168. 9,979,045. End of Year 194,654,881. 34,016,833. 160,638,048.
Net Assets or Expenses	10 Inv 11 Ott 12 To 13 Gr. 14 Be 15 Sa 16a Pro b To 17 Ott 18 To 19 Re 20 To 21 To 22 Ne till S	ogram servic vestment inc ther revenue ants and sim enefits paid t alaries, other ofessional fu thal fundraisin ther expenses avenue less of tal assets (P stal liabilities at assets or f Signature and complete	e revenue (Part VIII, line 2g) pome (Part VIII, column (A), lines 3, 4, ar (Part VIII, column (A), lines 5, 6d, 8c, 9 add lines 8 through 11 (must equal Pa illar amounts paid (Part IX, column (A), p or for members (Part IX, column (A), I compensation, employee benefits (Part ndraising fees (Part IX, column (A), line g expenses (Part IX, column (A), line g expenses (Part IX, column (A), line g expenses (Part IX, column (D), line 2 s (Part IX, column (A), lines 11a-11d, 1 . Add lines 13-17 (must equal Part IX, or xpenses. Subtract line 18 from line 12 art X, line 16) Part X, line 26) und balances. Subtract line 21 from line Block declare that I have examined this return, inc peclaration of preparer (other thap officer) i	nd 7d) c, 10c, and 11e) art VIII, column (A), line 12) lines 1-3) ine 4) t IX, column (A), lines 5-10) 11e) 11e) (5) ▶ 11-24e) column (A), line 25) e 20 cluding accompanying schedules a	0. Beg	6,292,504. 3,508,697. 2,918,021. 94,883,263. 2,433,562. 0. 42,559,591. 0. 46,299,067. 91,292,220. 3,591,043. inning of Current Year 181,437,265. 31,677,359. 149,759,906.	6,621,720. 2,851,839. 5,359,396. 96,362,213. 7,695,462. 0. 40,730,890. 0. 37,956,816. 86,383,168. 9,979,045. End of Year 194,654,881. 34,016,833. 160,638,048.
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Preparer	Firm's name DELOTTE TAX LLP	Firm's EIN 🕨 🛚 🛚	6-1065772					
Use Only	Firm's address 岁 50 SOUTH SIXTH STREET, SUITE 2800							
	MINNEAPOLIS, MN 55402	Phone no.(612)	397 4000					
May the IRS discuss this return with the preparer shown above? See instructions								
032001 12-23	LHA For Paperwork Reduction Act Notice, see the separate instructions.		Form 990	(2020)				

(Rev. January 2020)

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

Department of the Treasury Internal Revenue Service File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Is For Code Is For Code Form 990 or Form 990 rForm 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041.A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-FF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 DORIS YUXUE XIE 05 Form 6069 11 Form 990-T (trust other than above) 06 Fax No. ► ► • The books are in the care of ▶ 1550 SHERNAN - EVANSTON, IL 60201 Telephone No. ▶ 847-866-3000 Fax No. ► ► • If the organization does not have an office or place of business in the United States, check this box ► □ If this is for af Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box box ▶ □ . If it is for part of the group, check this box ▶ □ and attach a list with the names and TINs of all members the extension is for. 1 I request an automatic 6-month extension is for the organization's return for:	Type or	Name of exempt organization or other filer, see instru	Taxpayer	Taxpayer identification number (TIN)						
File by the deater for the set of	print	26_170 ⁷								
Instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. EVANSTON, IL 60201-3698 0201-3698 Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1 Application Return Application Return Is For Code Is For Code Gorm 990 or Form 990-EZ 01 Form 990 T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 990-FF 04 Form 5927 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 DORTS VUXUE XIE 05 Form 8870 12 It this is for part of the granup, check this box Fax No.	due date for filing your	Number, street, and room or suite no. If a P.O. box, s	ee instruct	ions.		30 17070				
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b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 3b \$ (0) estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ (0) c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by 3c \$ (0) using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$ (0) Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment			, ,		3a	\$	Ο.			
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using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$ Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment										
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	Caution	If you are going to make an electronic funds withdrawal			153-EO an	d Form 8879-E0) for payment			

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)

	990 (2020) ROTARY INTERNATIONAL	36-1707667	Page 2
ar	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
	Briefly describe the organization's mission:		
	ROTARY INTERNATIONAL PROVIDES SERVICE TO OTHERS, PROMOTES INTEGRITY,		
	AND ADVANCES WORLD UNDERSTANDING, GOODWILL, AND PEACE THROUGH OUR		
	FELLOWSHIP OF BUSINESS, PROFESSIONAL, AND COMMUNITY LEADERS.		
	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	··	res 🛛 No
	If "Yes," describe these new services on Schedule O.		
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	·'	res 🛛 No
	If "Yes," describe these changes on Schedule O.		
	Describe the organization's program service accomplishments for each of its three largest program services, as me	asured by expens	ses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, t	he total expense	s, and
	revenue, if any, for each program service reported.		
3	(Code:) (Expenses \$8,014,416. including grants of \$) (Revenue \$)
	DISTRICT GOVERNORS - THE DISTRICT GOVERNOR IS THE OFFICER OF ROTARY		
	INTERNATIONAL (RI) FOR EACH GROUPING OF CLUBS THAT FORM A DISTRICT.		
	THE DISTRICT GOVERNOR PROVIDES LEADERSHIP AND ASSISTANCE TO CLUBS		
	WITHIN THE DISTRICT. IN ADDITION, THE GOVERNOR ENSURES CONTINUITY IN		
	ALL PROGRAMS AND RELATED OPERATIONS WITHIN THE DISTRICT AND ACTS AS A		
	LIAISON BETWEEN RI AND THE DISTRICT. IN FY21 RI HAD 529 DISTRICT		
	GOVERNORS.		
)	(Code:) (Expenses \$2, 222, 579. including grants of \$) (Revenue \$		797,824.)
	INTERNATIONAL CONVENTION - THE INTERNATIONAL CONVENTION IS THE ANNUAL		
	BUSINESS MEETING OF RI AND IS DESIGNED TO INSPIRE AND INFORM ROTARIANS		
	AT AN INTERNATIONAL LEVEL WHILE ADVANCING THE STRATEGIC GOALS OF RI AND		
	ITS FOUNDATION. THE CONVENTION IS HELD IN DIFFERENT LOCATIONS EACH		
	ITS FOUNDATION. THE CONVENTION IS HELD IN DIFFERENT LOCATIONS EACH		
	ITS FOUNDATION. THE CONVENTION IS HELD IN DIFFERENT LOCATIONS EACH YEAR, BOTH DOMESTIC AND INTERNATIONAL. IN 2021, THE CONVENTION WAS TO		
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	ITS FOUNDATION. THE CONVENTION IS HELD IN DIFFERENT LOCATIONS EACH YEAR, BOTH DOMESTIC AND INTERNATIONAL. IN 2021, THE CONVENTION WAS TO		
:	ITS FOUNDATION. THE CONVENTION IS HELD IN DIFFERENT LOCATIONS EACH YEAR, BOTH DOMESTIC AND INTERNATIONAL. IN 2021, THE CONVENTION WAS TO		7,499.)
;	ITS FOUNDATION. THE CONVENTION IS HELD IN DIFFERENT LOCATIONS EACH YEAR, BOTH DOMESTIC AND INTERNATIONAL. IN 2021, THE CONVENTION WAS TO BE HELD IN TAIPAI, BUT WAS HELD VIRTUALLY DUE TO THE PANDEMIC.		7,499.)
;	ITS FOUNDATION. THE CONVENTION IS HELD IN DIFFERENT LOCATIONS EACH YEAR, BOTH DOMESTIC AND INTERNATIONAL. IN 2021, THE CONVENTION WAS TO BE HELD IN TAIPAI, BUT WAS HELD VIRTUALLY DUE TO THE PANDEMIC. (Code:)(Expenses \$685,659. including grants of \$) (Revenue \$		7,499.)
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	ITS FOUNDATION. THE CONVENTION IS HELD IN DIFFERENT LOCATIONS EACH YEAR, BOTH DOMESTIC AND INTERNATIONAL. IN 2021, THE CONVENTION WAS TO BE HELD IN TAIPAI, BUT WAS HELD VIRTUALLY DUE TO THE PANDEMIC. (Code:) (Expenses \$685,659. including grants of \$) (Revenue \$ INTERNATIONAL ASSEMBLY - THE INTERNATIONAL ASSEMBLY IS AN ANNUAL TRAINING MEETING OF RI DESIGNED TO INSPIRE AND MOTIVATE ROTARY OFFICERS AND LEADERS FOR THE INCOMING ROTARY YEAR. THE TRAINING ALLOWS INCOMING		7,499.)
;	ITS FOUNDATION. THE CONVENTION IS HELD IN DIFFERENT LOCATIONS EACH YEAR, BOTH DOMESTIC AND INTERNATIONAL. IN 2021, THE CONVENTION WAS TO BE HELD IN TAIPAI, BUT WAS HELD VIRTUALLY DUE TO THE PANDEMIC. (Code:)(Expenses\$		7,499.)
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	ITS FOUNDATION. THE CONVENTION IS HELD IN DIFFERENT LOCATIONS EACH YEAR, BOTH DOMESTIC AND INTERNATIONAL. IN 2021, THE CONVENTION WAS TO BE HELD IN TAIPAI, BUT WAS HELD VIRTUALLY DUE TO THE PANDEMIC. (Code:) (Expenses \$685,659. including grants of \$) (Revenue \$ INTERNATIONAL ASSEMBLY - THE INTERNATIONAL ASSEMBLY IS AN ANNUAL TRAINING MEETING OF RI DESIGNED TO INSPIRE AND MOTIVATE ROTARY OFFICERS AND LEADERS FOR THE INCOMING ROTARY YEAR. THE TRAINING ALLOWS INCOMING LEADERS TO INTERPRET AND IMPLEMENT THE PRESIDENT-ELECT'S PRIORITIES AND INITIATIVES, AND ALSO PROVIDES AN OPPORTUNITY TO DISCUSS AND PLAN THEIR ACTIVITIES DURING THE YEAR. THE INTERNATIONAL ASSEMBLY IS HELD ONCE A		7,499.)
-	ITS FOUNDATION. THE CONVENTION IS HELD IN DIFFERENT LOCATIONS EACH YEAR, BOTH DOMESTIC AND INTERNATIONAL. IN 2021, THE CONVENTION WAS TO BE HELD IN TAIPAI, BUT WAS HELD VIRTUALLY DUE TO THE PANDEMIC. (Code:)(Expenses \$685,659. including grants of \$) (Revenue \$ INTERNATIONAL ASSEMBLY - THE INTERNATIONAL ASSEMBLY IS AN ANNUAL TRAINING MEETING OF RI DESIGNED TO INSPIRE AND MOTIVATE ROTARY OFFICERS AND LEADERS FOR THE INCOMING ROTARY YEAR. THE TRAINING ALLOWS INCOMING LEADERS TO INTERPRET AND IMPLEMENT THE PRESIDENT-ELECT'S PRIORITIES AND INITIATIVES, AND ALSO PROVIDES AN OPPORTUNITY TO DISCUSS AND PLAN THEIR ACTIVITIES DURING THE YEAR. THE INTERNATIONAL ASSEMBLY IS HELD ONCE A YEAR EVERY JANUARY, IN ORLANDO FLORIDA. IN 2021 THE INTERNATIONAL		7,499.
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	ITS FOUNDATION. THE CONVENTION IS HELD IN DIFFERENT LOCATIONS EACH YEAR, BOTH DOMESTIC AND INTERNATIONAL. IN 2021, THE CONVENTION WAS TO BE HELD IN TAIPAI, BUT WAS HELD VIRTUALLY DUE TO THE PANDEMIC. (Code:)(Expenses \$685,659. including grants of \$) (Revenue \$ INTERNATIONAL ASSEMBLY - THE INTERNATIONAL ASSEMBLY IS AN ANNUAL TRAINING MEETING OF RI DESIGNED TO INSPIRE AND MOTIVATE ROTARY OFFICERS AND LEADERS FOR THE INCOMING ROTARY YEAR. THE TRAINING ALLOWS INCOMING LEADERS TO INTERPRET AND IMPLEMENT THE PRESIDENT-ELECT'S PRIORITIES AND INITIATIVES, AND ALSO PROVIDES AN OPPORTUNITY TO DISCUSS AND PLAN THEIR ACTIVITIES DURING THE YEAR. THE INTERNATIONAL ASSEMBLY IS HELD ONCE A YEAR EVERY JANUARY, IN ORLANDO FLORIDA. IN 2021 THE INTERNATIONAL		7,499.)
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	ITS FOUNDATION. THE CONVENTION IS HELD IN DIFFERENT LOCATIONS EACH YEAR, BOTH DOMESTIC AND INTERNATIONAL. IN 2021, THE CONVENTION WAS TO BE HELD IN TAIPAI, BUT WAS HELD VIRTUALLY DUE TO THE PANDEMIC. (Code:)(Expenses \$685,659. including grants of \$) (Revenue \$ INTERNATIONAL ASSEMBLY - THE INTERNATIONAL ASSEMBLY IS AN ANNUAL TRAINING MEETING OF RI DESIGNED TO INSPIRE AND MOTIVATE ROTARY OFFICERS AND LEADERS FOR THE INCOMING ROTARY YEAR. THE TRAINING ALLOWS INCOMING LEADERS TO INTERPRET AND IMPLEMENT THE PRESIDENT-ELECT'S PRIORITIES AND INITIATIVES, AND ALSO PROVIDES AN OPPORTUNITY TO DISCUSS AND PLAN THEIR ACTIVITIES DURING THE YEAR. THE INTERNATIONAL ASSEMBLY IS HELD ONCE A YEAR EVERY JANUARY, IN ORLANDO FLORIDA. IN 2021 THE INTERNATIONAL ASSEMBLY WAS HELD VIRTUALLY DUE TO THE PANDEMIC		7,499.)
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ROTARY INTERNATIONAL

Par	TIV Checklist of Required Schedules		-	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
	Is the organization required to complete Schedule B, Schedule of Contributors?	. 2		X
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			X
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		
	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? <i>If</i> "Yes," <i>complete Schedule C, Part III</i>	. 5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part	/ 6		
	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
		8		x
	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	8		
	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
	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	Ť		
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
	as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
	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	х	
с	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	. <u>11c</u>		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			X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	. <u>11e</u>		X
	5			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	. 11f	X	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	<u>12a</u>		X
	Was the organization included in consolidated, independent audited financial statements for the tax year?	101	х	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		~	x
	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i> Did the organization maintain an office, employees, or agents outside of the United States?		x	
	Did the organization maintain an office, employees, or agents outside of the United States?	. 14a		
	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	х	
	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
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
	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		x
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	. 18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III			X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	. 20 a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	. 20b		
	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	Х	1

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ROTARY INTERNATIONAL

Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	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 employees? If "Yes," complete			
	Schedule J	23	Х	
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 lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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	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), 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			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	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 persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 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," 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	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
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	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
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 in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pa	rt V 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>		X
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 223	3		
		ז		

1c

Form	990 (2020) ROTARY INTERNATIONAL 36-170	07667	Р	age 5				
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)							
			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	343						
b	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?							
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)							
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х					
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, securities account, or other financial account)?	4a	х					
b	If "Yes," enter the name of the foreign country ESE SCHEDULE O	_						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (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?	5b		X				
С	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 organization solicit							
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>	X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?	6b	X					
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 goods and services provided to the pay	or? 7a						
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
	to file Form 8282?	7c						
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	_						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0	C? 7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
-	sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.							
a	Did the sponsoring organization make any taxable distributions under section 4966?							
b	Did the sponsoring 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	_						
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:							
	Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against 11a							
b								
120	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 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	IZd						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	_						
		13a						
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	15a						
h	Enter the amount of reserves the organization is required to maintain by the states in which the							
5	organization is licensed to issue qualified health plans							
с	Enter the amount of reserves on hand							
14a		14a		x				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	·····						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			<u> </u>				
	excess parachute payment(s) during the year?	15		х				
	If "Yes," see instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х				
	If "Yes," complete Form 4720, Schedule O.							
	· · ··································		000					

Form **990** (2020)

Form	990 (2020) ROTARY INTERNATIONAL		36-170766		Р	age 6
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 th	rough	7b below, and for a	"No" re	spons	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O					
	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion 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	1a	19			
	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 0.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	17			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship		ny other	1		
-	officer director tructor or key employee?			2		x
3	Did the organization delegate control over management duties customarily performed by or under the	direct	supervision			
U				3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		x
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		x
6	Did the organization become aware during the year of a significant diversion of the organization's ass Did the organization have members or stockholders?	613 !		6	x	
	Did the organization have members, stockholders, or other persons who had the power to elect or ap	noint /				
7a				7-	x	
	more members of the governing body?			7a	А	<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st					x
•	persons other than the governing body?			7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	-	-		v	
a	The governing body?			<u>8a</u>	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?			8b	X	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					
800	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)			
					Yes X	No
	Did the organization have local chapters, branches, or affiliates?			<u>10a</u>	А	
D	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	, amiliates,	104	х	
	and branches to ensure their operations are consistent with the organization's exempt purposes?		a filing the form?	10b	X	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ Deloi		<u>11a</u>		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			10-	х	
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a 12b	x	<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise					<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	,		10-	х	
40	in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	A	
15	Did the process for determining compensation of the following persons include a review and approva	l by inc	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			4-	v	
a	The organization's CEO, Executive Director, or top management official			15a	X 	<u> </u>
b	Other officers or key employees of the organization			15b	X	
40	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 arrangen	nent w	ith a			v
_	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ			101		
Sec	exempt status with respect to such arrangements?			16b		
	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright SEE SCHEDULE 0					
17			T (Castion E01(a)(2)		ovoilo	hla
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	ia 990	- (Section 501(C)(3)	s only)	avallä	nie
	for public inspection. Indicate how you made these available. Check all that apply.	-				
40	X Own website Another's website X Upon request Other (explain)		,	firmer		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	ntiict c	interest policy, and	i tinano	al	
00	statements available to the public during the tax year.		l un no suel n			
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks and	a recoras 📂			
	DORIS YUXUE XIE - 847-866-3000 1560 SHERMAN, EVANSTON, IL 60201					
	1000 SUEMMAN, EVANDION, III 00201					

Form 990 (2	2020) ROTARY INTERNATIONAL	36-1707667	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest C	ompensated	
	Employees, and Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		X
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Comple	te this table for all persons required to be listed. Benort compensation for the calendar year ending	with or within the organization'	s tax vear

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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

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

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do	not c		ition more		one	Reportable	Reportable	Estimated
	hours per	box, unless person is officer and a directo			s both	n an	compensation	compensation	amount of	
	week					1/ 1/ 1/ 1/ 1/ 1/)	from	from related	other
	(list any hours for	directo				_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	e or (stee			Isated		(W-2/1099-MISC)	(112/1000/11100)	organization
	organizations	truste	al tru:		yee	nper				and related
	below	Individual trustee or director	Institutional trustee	er	Key employee	lest co	ner			organizations
	line)	Indiv	Insti	Officer	Key	Highest compensated employee	Former			
(1) HOLGER KNAACK	40.00									
PRESIDENT	0.00	Х		х				18,684.	0.	8,368.
(2) SHEKHAR MEHTA	40.00									
PRESIDENT ELECT (BEG. 7/1/20)	0.00	Х		х				15,141.	0.	5,578.
(3) JOHRITA SOLARI	20.00									
VICE PRESIDENT	0.00	Х		х				٥.	0.	0.
(4) BHARAT S. PANDYA	20.00									
TREASURER	0.00	Х		х				٥.	0.	0.
(5) AIKATERINI KOTSALI-PAPADIMITRIO	20.00									
DIRECTOR (BEG. 7/1/20)	0.00	х						0.	0.	0.
(6) CHANG-GON YIM	20.00									
DIRECTOR (BEG. 3/19/21)	0.00	х						٥.	0.	0.
(7) FLOYD A. LANCIA	20.00									
DIRECTOR	0.00	Х						٥.	0.	0.
(8) JAN LUCAS KET	20.00									
DIRECTOR	0.00	Х						٥.	0.	0.
(9) KYUN KIM	0.00									
DIRECTOR (END. 3/9/21)		Х						٥.	0.	0.
(10) KAMAL SANGHVI	20.00									
DIRECTOR	0.00	Х						٥.	0.	0.
(11) KATSUHIKO TATSUNO	20.00									
DIRECTOR (BEG. 7/1/20)	0.00	Х						٥.	0.	0.
(12) MARIO CESAR MARTINS DE CAMARGO	20.00									
DIRECTOR	0.00	Х						0.	0.	0.
(13) PETER R. KYLE	20.00									
DIRECTOR (BEG. 7/1/20)	0.00	Х						0.	0.	0.
(14) ROGER LHORS	20.00									
DIRECTOR (BEG. 7/1/20)	0.00	Х						0.	0.	0.
(15) STEPHANIE A. URCHICK	20.00									
DIRECTOR	0.00	Х						0.	0.	0.
(16) CHI-TIEN LIU	20.00									
DIRECTOR (BEG. 7/1/20)	0.00	х						0.	0.	0.
(17) SUSAN C. HOWE	20.00									
DIRECTOR (BEG. 7/1/20)	0.00	Х						0.	0.	0.

032007 12-23-20

Form 990 (2020) ROTARY INTERN	IATIONAL								36-1707	667		Page 8
Part VII Section A. Officers, Directors, Trust	ees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)			(0				(D)	(E)		(F)	
Name and title	Average	(do		Posi		ا than o	ne	Reportable	Reportable		Estima	ted
	hours per	box, unless person is both an officer and a director/trustee)			s both	an	compensation	compensation		amoun	t of	
	week		cer an	a a a	recto	or/trust	ee)	from	from related		othe	r
	(list any	rector						the	organizations		compens	
	hours for related	or dir	e			ated		organization	(W-2/1099-MISC)		from t	
	organizations	ustee	trustee		æ	bens		(W-2/1099-MISC)			organiza	
	below	ual tr	ional		ploye	t com					and rela organiza	
	line)	ndividual trustee or director	In stitutio nal 1	Officer	(ey employee	Highest compensated employee	Former				organiza	10115
(18) TONY (JAMES ANTHONY) BLACK	20.00	-		0	×	±υ	<u></u>			+		
DIRECTOR	0.00	х						0.		0.		0.
(19) VALERIE K.WAFER	20.00											
DIRECTOR (BEG. 7/1/20)	0.00	х						0.		0.		0.
(20) VIRPI HONKALA	20.00											
DIRECTOR (BEG. 7/1/20)	0.00	х						0.		0.		0.
(21) JOHN HEWKO	24.80											
CHIEF EXECUTIVE OFFICER	15.20			Х				353,307.	216,34	8.	60	,369.
(22) JULIE BURKE	19.60											
CHIEF FINANCIAL OFFICER	20.40			Х				137,954.	141,80	1.	66	,995.
(23) DAVID ALEXANDER	33.60											
CHIEF COMMUNICATIONS OFFICER	6.40				х			206,007.	38,13	2.	56	,966.
(24) ERIC JONES	2.80											
CHIEF INVESTMENT OFFICER	37.20				х			23,590.	301,79	<u>o.</u>	61	,792.
(25) FAIZ HANIF	22.00							100.101	400 54			
CHIEF INFORMATION OFFICER	18.00				X			120,404.	100,51	5.	46	,498.
(26) JAMES BARNES	29.60				v			205 422	71 10	。	FC	250
CHIEF PROGRAMS & MEMBER SVS OFFICER	10.40				X			205,433.	71,18	_		,350.
1b Subtotal								1,080,520.	869,77			,916.
c Total from continuation sheets to Part VI								1,081,640. 2,162,160.	970,28			,334.
d Total (add lines 1b and 1c)								; ;	1,840,06	· ·	//0	,230.
2 Total number of individuals (including but no	ot limited to th	ose	liste	o ap	ove	e) who	o re	eceived more than \$100,	000 of reportable			88
compensation from the organization											Yes	
3 Did the organization list any former officer,	director truct			mol	0.10	o or	hio	host componented omn				
c i	-		•	•							3 X	
line 1a? If "Yes," complete Schedule J for su											3 X	
4 For any individual listed on line 1a, is the su											4 X	
and related organizations greater than \$1505 Did any person listed on line 1a receive or a	,									· –	4 X	
rendered to the organization? If "Yes," com											5	x
Section B. Independent Contractors		<u>; </u>	JI SU	CIŢ	Jers	011				<u>. </u>	•	
1 Complete this table for your five highest cor	npensated ind	epe	nder	nt co	ontra	actor	s tł	hat received more than \$	100.000 of comper	satio	n from	
the organization. Report compensation for t	-	-								- Cullo		
(A)				<u>g</u>				(B)			(C)	
Name and business	address							Description of s	ervices	Con	npensati	on
HURON CONSULTING SERVICES												
550 W VAN BUREN STREET, CHICAGO, IL 6	50607							CONSULTING SERVICE	S		3,413	,778.
TEKSYSTEMS INC												
7437 RACE ROAD, HANOVER, MD 21076								STAFFING			1,798	,743.
MICROSOFT CORPORATION												
.950 N STEMMONS FWY, DALLAS, TX 75207 SOFTWARE LICENSING 1,662,016.												
AMAZEE LABS LLC									_			
3108 N LAMAR BLVD, AUSTIN, TX 78705								CONSULTING SERVICE	S		1,520	,023.
THOUGHTWORKS INC	601								_		1 440	070
200 E RANDOLPH STREET, CHICAGO, IL 60601 CONSULTING SERVICES 1,442,972. 2 Total number of independent contractors (including but not limited to those listed above) who received more than 1,442,972.							, 512.					
 Total number of independent contractors (ir \$100,000 of compensation from the organiz 	•	JL IIN	med	101	tnos 59		ed	above) who received mo				

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VII Section A. Officers, Directors, T	rustees, Key Er	nplo	yee	s, an	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)			(C				(D)	(E)	(F)
Name and title	Average	Position (check all that apply)						Reportable	Reportable	Estimated
	hours	(Cl	necł I	all t	hat	app	y)	compensation	compensation	amount of
	per week					e		from the	from related organizations	other compensatior
	(list any	ctor				n ploye		organization	(W-2/1099-MISC)	from the
	hours for	r direc				ed en		(W-2/1099-MISC)		organization
	related	stee o	rustee			ensat				and related
	organizations	al trus	onal tr		loyee	comp				organizations
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
	line)	Inc	Ĕ	0ŧ	ξ.	Hi	ß			
27) KRISTOPHER NEWBAUER	22.00							101 010	101 107	20.00
CHIEF HUMAN RESOURCES OFFICER 28) MICHELE BERG	18.00				X			121,218.	101,197.	38,009
DEPUTY GENERAL SECRETARY	15.20				x			200,649.	122,867.	60,572
(29) STEVEN ROUTBURG	29.20				^			200,049.	122,007.	00,572
SENERAL COUNSEL	10.80				x			176,298.	64,380.	64,576
(30) THOMAS THORFINNSON	20.00									
CHIEF STRATEGY OFFICER	20.00				x			123,218.	123,218.	44,604
(31) ANDREW G MCDONALD	26.80							,	,	,
DEPUTY GENERAL COUNSEL	13.20					х		129,740.	63,902.	40,83
(32) CRISTIAN DOWNEY	26.80									
DIRECTOR - IT INFRASTRUCTURE	13.20					х		134,074.	53,552.	48,99
(33) JONATHAN SOUTH	2.80									
INVESTMENT OFFICER	37.20					х		14,886.	190,444.	47,318
(34) MICHAEL PATOCK	2.80									
INVESTMENT OFFICER	37.20					х		14,726.	188,388.	27,699
(35) RICHARD PLOCINIK	26.40									
DIRECTOR OF ENTERPRISE PROJECTS	13.60					х		123,744.	62,337.	33,562
(36) MARK MALONEY	20.00									
PAST PRESIDENT (END. 6/30/20)	0.00						X	43,087.	0.	7,16
					_					
				1						

				nine e reen-	ncc	or noto to any line -	in this Dort VIII			1
		Check if Schedule O	conta	ains a respo	nse	or note to any line	(A) (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue exclu from tax und sections 512 -
S	1 a	Federated campaigns		1a						
and Other Similar Amounts	b	Membership dues		1b		81,529,258.				
4 W	с	Fundraising events		1c						
ar /	d	Related organizations		1d						
Ē	е	Government grants (contr	ibuti	ons) 1e						
ž	f	All other contributions, gifts,	gran	ts, and						
Ĩ		similar amounts not included	abov							
	•	Noncash contributions included in			5		04 500 050			
a	h	Total. Add lines 1a-1f					81,529,258.			
	_	NA CARTAIN				Business Code	F 407 00F	E 240 (12	50,402	
		MAGAZINE				541800	5,407,095.	5,348,612.	58,483.	
an	b	INTL CONVENTION INFOTECH INCOME				900099 900099	797,824.	797,824.		
ven	C L	OPEN WORLD LEADERSH	тр			900099	277,696. 94,928.	277,696. 94,928.		
Hevenue	d	MEETING REVENUE	τr			900099	44,177.	44,177.		
	•		rour	200		500099	±±,±//•	<u>++</u> ,⊥//•		
		All other program service					6,621,720.			
	<u>g</u> 3	Total. Add lines 2a-2f Investment income (includ		dividends ir			-,-21,,20,			
	U	other similar amounts)	•			·	2,324,523.			2,324,5
	4	Income from investment of					, ,			
	5	Royalties					813,220.			813,2
	•			(i) Real		(ii) Personal	,			,
	6 a	Gross rents	6a	7,897,4	34.					
		Less: rental expenses	6b	5,877,9						
		Rental income or (loss)	6c	2,019,4	84.					
		Net rental income or (loss)			>	2,019,484.		229,932.	1,789,5
	7 a	Gross amount from sales of		(i) Securit	ies	(ii) Other				
		assets other than inventory	7a	14,370,3	57.	250,231.				
	b	Less: cost or other basis				1				
		and sales expenses		13,836,1		257,093.				
	с	Gain or (loss)	7c	534,1	78.	-6,862.				
		Net gain or (loss)				▶	527,316.			527,3
	8 a	Gross income from fundraisi	ng ev	ents (not						
		including \$		of						
		contributions reported on		,						
		Part IV, line 18			8a	<u>├</u> ────┤				
		Less: direct expenses			8b					
		Net income or (loss) from		•		▶				
	эa	Gross income from gamin			1					
	h	Part IV, line 19			9a 9b					
		Net income or (loss) from		ina activities						
		Gross sales of inventory, I			<u> </u>					
	u	and allowances			10a	7,430.				
	b	Less: cost of goods sold			10b					
		Net income or (loss) from					-4,168.	-4,168.		
T	-				,	Business Code				
1	11 a	INSURANCE - US CLUB	s			524298	1,559,069.			1,559,0
		CURRENCY EXCANGE GA	IN		_	900099	591,314.			591,3
š	с	SERVICE INCOME				900099	247,426.	247,426.		
Revenue								400.054		
ĥ	d	All other revenue				900099	133,051.	133,051.		

ROTARY INTERNATIONAL

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Form 990 (2020) ROTARY INTERNATIONAL Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX

	Check if Schedule O contains a respons			(0)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	7,695,462.	7,695,462.		
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,				
	trustees, and key employees	1,781,051.	877,474.	903,577.	
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	29,495,118.	19,344,715.	10,150,403.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	2,685,059.	1,775,972.	909,087.	
9	Other employee benefits	4,265,819.	2,788,618.	1,477,201.	
10	Payroll taxes	2,503,843.	1,648,194.	855,649.	
11	Fees for services (nonemployees):				
а	Management	1,026,206.	727,500.	298,706.	
	Legal	498,172.	6,621.	491,551.	
	Accounting	229,308.	50,149.	179,159.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	440,736.		440,736.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	3,074,675.	1,778,797.	1,295,878.	
12	Advertising and promotion	1,367,957.	1,072,482.	295,475.	
13	Office expenses	913,617.	699,953.	213,664.	
14	Information technology	8,732,587.	6,222,532.	2,510,055.	
15	Royalties	4 125 005	0.001.445	1 005 000	
16		4,137,285.	2,931,447.	1,205,838.	
17	Travel	81,684.	51,848.	29,836.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1 007 700	1 470 120	227 (50	
19	Conferences, conventions, and meetings	1,807,789.	1,470,139.	337,650.	
20					
21	Payments to affiliates	1 420 222	1 017 714	420 500	
22	Depreciation, depletion, and amortization	1,438,223.	1,017,714.	420,509.	
23		3,154,875.	1,780,471.	1,374,404.	
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 0.)				
а	DI GEDI GOVERNOD	7,818,056.	7,036,250.	781,806.	
b	ROTARIAN MAGAZINE	3,104,734.	2,483,787.	620,947.	
с	EQUIPMENT RENT & MAINT	68,486.	39,990.	28,496.	
d	BOOKS & PERIODICALS	47,230.	5,657.	41,573.	
е	All other expenses	15,196.	4,233.	10,963.	
25	Total functional expenses. Add lines 1 through 24e	86,383,168.	61,510,005.	24,873,163.	0
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 following SOP 98-2 (ASC 958-720)				

33

Total liabilities and net assets/fund balances

	<u>1 990 (</u> rt X	(2020) ROTARY INTERNATIONAL Balance Sheet				36-	1707667 Page	11
I U		Check if Schedule O contains a response or not	o to an	v lipp in this Part V				7
					(A) Beginning of year		(B) End of year	
	1	Cash - non-interest-bearing			5,739,294.	1	5,451,44	7.
	2	Savings and temporary cash investments			16,035,436.	2	17,289,09	
	3	Pledges and grants receivable, net			3	_ , , ,	_	
	4				10,297,001.	4	6,375,87	6.
	5	Accounts receivable, net Loans and other receivables from any current or					•,•,•,•,•,	
	5	-						
		trustee, key employee, creator or founder, subst				5		
	6	controlled entity or family member of any of thes		· · · · · · · · · · · · · · · · · · ·		5		
	6	Loans and other receivables from other disqualit				c		
	-	under section 4958(f)(1)), and persons described			1,013,209.	6	914,86	9
ets	7	Notes and loans receivable, net	1,013,205.	7	514,00	<u> </u>		
Assets	8	Inventories for sale or use			7,789,764.	8 9	8,034,35	<u></u>
	9				1,105,104.	9	0,034,33	<u> </u>
	10a	Land, buildings, and equipment: cost or other	10-	173 547 578				
		basis. Complete Part VI of Schedule D		173,547,578. 111,208,087.	52,267,947.	10.	62 330 40	1
		Less: accumulated depreciation			75,959,492.		62,339,493 75,734,95	
	11	Investments - publicly traded securities			8,001,211.		13,423,58	_
	12	Investments - other securities. See Part IV, line 1		Г	2,419,667.		2,701,77	_
	13	Investments - program-related. See Part IV, line		·····	2,419,007.		2,701,77	· ·
	14	Intangible assets			1,914,244.	14	2,389,43	<u></u>
	15	Other assets. See Part IV, line 11	181,437,265.		194,654,88			
	16	Total assets. Add lines 1 through 15 (must equa			24,816,416.		26,768,91	
	17	Accounts payable and accrued expenses		I	24,010,410.		20,700,91	<u>.</u>
	18	Grants payable			6,860,943.	18	7,247,92	 1
	19	Deferred revenue			0,000,543.	19	7,247,52	<u>.</u>
	20	Tax-exempt bond liabilities				20		
	21	Escrow or custodial account liability. Complete I				21		
ies	22	Loans and other payables to any current or form						
iabilities		trustee, key employee, creator or founder, subst controlled entity or family member of any of thes				- 00		
Lial	22		•			22		
	23 24	Secured mortgages and notes payable to unrela Unsecured notes and loans payable to unrelated				23 24		
	24 25	Other liabilities (including federal income tax, pa				24		
	25	parties, and other liabilities not included on lines	-					
			,			25		
	26				31,677,359.	25 26	34,016,83	3
	20	Organizations that follow FASB ASC 958, che				20	51,010,000	<u> </u>
S		and complete lines 27, 28, 32, and 33.						
ů	27				149,759,906.	27	160,638,04	8
Fund Balances	27				,,,	27		••
ЫE	20	Organizations that do not follow FASB ASC 9		eck here		20		
Ъп		and complete lines 29 through 33.	, une					
P	29	Capital stock or trust principal, or current funds				29		
ets	30	Paid-in or capital surplus, or land, building, or ec				30		
Net Assets or	31	Retained earnings, endowment, accumulated in				31		_
let /	32	Total net assets or fund balances			149,759,906.	32	160,638,04	8.
z					, ,	<u> </u>		

31 149,759,906. 160,638,048. 32 181,437,265. 194,654,881. 33 Form 990 (2020)

Form	n 990 (2020) ROTARY INTERNATIONAL	36-170766	7	Pa	_{ge} 12
	rt XI Reconciliation of Net Assets				2
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	96,	362,	213.
2	Total expenses (must equal Part IX, column (A), line 25)	2	86,	383,	168.
3	Revenue less expenses. Subtract line 2 from line 1	3	9,	979,	045.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	149,	759,	906.
5	Net unrealized gains (losses) on investments	5		419,	492.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9		479,	605.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	160,	638,	048.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule ().			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit			1
	Act and OMB Circular A-133?		3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	X 000	L

Form **990** (2020)

SCHEDULE	D
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Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.



Name	of the organization					Employer identification number
Par	ROTARY INTERNATIONAL	Funda ar Oth	- 6	milor Fund		36-1707667
Par			91 3 1		S OF AC	Counts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line			الحين مام		
_		(a) Donor ac	ivised	a funds	, (r	b) Funds and other accounts
-	Total number at end of year					
2	Aggregate value of contributions to (during year)					
	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in w	-				
_	are the organization's property, subject to the organization's ex					
6	Did the organization inform all grantees, donors, and donor ad					
	for charitable purposes and not for the benefit of the donor or					ľ – –
Par	impermissible private benefit?	······································				Yes No
				" on Form 990), Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organization		oly).			
	Preservation of land for public use (for example, recreation	on or education)				rically important land area
	Protection of natural habitat			Preservation	of a certif	ied historic structure
•	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualifie	d conservation cor	ntridu	tion in the fori	n of a con]	
-	day of the tax year.				ł	Held at the End of the Tax Year
	Total number of conservation easements					2a
					r	2b
	Number of conservation easements on a certified historic struc					2c
a	Number of conservation easements included in (c) acquired aff	•				
~	listed in the National Register					2d
3	Number of conservation easements modified, transferred, relea	ased, extinguished,	orte	ininated by t	le organiz	ation during the tax
4	year	mont is located				
	Number of states where property subject to conservation ease Does the organization have a written policy regarding the peric		nocti	on bandling c		
5	violations, and enforcement of the conservation easements it h	- 1-1-0				Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h			d enforcina co		
U		and ing of violation	5, an			reasonients during the year
7	Amount of expenses incurred in monitoring, inspecting, handlin	ng of violations an	d enf	orcina conser	vation eas	ements during the year
•		ig of violations, an			adon cao	emente danng the year
8	Does each conservation easement reported on line 2(d) above	satisfy the requirer	nents	s of section 17	0(h)(4)(B)(i)
•	and section 170(h)(4)(B)(ii)?	•				
9	In Part XIII, describe how the organization reports conservatior					
•	balance sheet, and include, if applicable, the text of the footno					
	organization's accounting for conservation easements.					
Par		Art, Historical	Trea	asures, or (Other Si	milar Assets.
	Complete if the organization answered "Yes" on Form 9	90, Part IV, line 8.				
1a	If the organization elected, as permitted under FASB ASC 958	, not to report in its	reve	nue statemen	and bala	nce sheet works
	of art, historical treasures, or other similar assets held for publi	c exhibition, educa	tion,	or research in	furtherand	ce of public
	service, provide in Part XIII the text of the footnote to its financ	ial statements that	desc	ribes these ite	ems.	
b	If the organization elected, as permitted under FASB ASC 958	, to report in its rev	enue	statement and	d balance	sheet works of
	art, historical treasures, or other similar assets held for public ϵ	xhibition, educatio	n, or	research in fu	rtherance	of public service,
	provide the following amounts relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1					▶ \$
	(ii) Assets included in Form 990, Part X					▶ \$
2	If the organization received or held works of art, historical treas	sures, or other simi	ar as	sets for financ	ial gain, p	rovide
	the following amounts required to be reported under FASB AS					
а	Revenue included on Form 990, Part VIII, line 1					▶ \$
	Assets included in Form 990, Part X					► \$
	For Paperwork Reduction Act Notice, see the Instructions					Schedule D (Form 990) 2020

Sche	dule D (Form 990) 2020 ROTARY INTE						6-1707		Pa	age 2
Par	t III Organizations Maintaining Co	ollections of Ar	t, Historical Tre	easures, or	Other S	imilar A	ssets	(continu	ied)	
3	Using the organization's acquisition, accessio	n, and other records	s, check any of the	following that r	make signi [.]	ficant use	of its		,	
	collection items (check all that apply):									
а	Public exhibition	d	Loan or exc	change prograr	n					
b	Scholarly research	е		0.0						
с	Preservation for future generations									
4	Provide a description of the organization's col	lections and explair	how they further t	he organizatior	n's exempt	purpose i	n Part X	an.		
5	During the year, did the organization solicit or	-	-	-	-					
•	to be sold to raise funds rather than to be mai			-				Yes		No
Par	t IV Escrow and Custodial Arrang									
	reported an amount on Form 990, Part						urer e , m	10 0, 01		
1a	Is the organization an agent, trustee, custodia		iary for contribution	is or other asse	ts not incl	uded				
ia	on Form 990, Part X?							Yes		No
h	If "Yes," explain the arrangement in Part XIII a						ட	103	L	
D			iowing table.					Amount		
~	Reginning balance					1c		Amount		
	Additions during the year					1d				
	Additions during the year					1e				
-	Distributions during the year					1f				
f 20	Ending balance Did the organization include an amount on Fo							Yes		No
	If "Yes," explain the arrangement in Part XIII.				-		L	Tes]
Par										<u> </u>
		(a) Current year	(b) Prior year	(c) Two years		Three year	s hack	(a) Four y	/eare	
10	Beginning of year balance	(a) Ourrent year	(b) Thoryean			Thice year	3 Dack		104131	Jack
b	Contributions									
0	Net investment earnings, gains, and losses									
с А	Grants or scholarships									
d										
е	Other expenditures for facilities									
	and programs									
t	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curre	•		a)) neid as:						
a	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
с	Term endowment	-								
0-	The percentages on lines 2a, 2b, and 2c shou		4							
3a	Are there endowment funds not in the posses	sion of the organiza	ition that are held a	na administere	a for the o	rganizatio	n	5		
	by:								Yes	No
	(i) Unrelated organizations							3a(i)		
_	(ii) Related organizations							3a(ii)		
	If "Yes" on line 3a(ii), are the related organizat							3b		
4 Dai	t VI Land, Buildings, and Equipme		wment funds.							
1 41			Dort IV line 11e (Soo Form 000	Dort V line	10				
	Complete if the organization answered									
	Description of property	(a) Cost or o basis (investn	• • •	t or other (other)	• •	imulated ciation		(d) Book	value)
	Land	· · ·	,	2,230,725.	depre	GIALION			20 .	725
	Land				6.5	002 424	n			725.
	Buildings		92	2,947,034.	00	<u>,902,430</u>		26,0		
	Leasehold improvements			401,064.		250,288				776.
	Equipment			7,931,679.	44	,024,473		33,9		
	Other			37,076.		30,896	_			180.
Tota	. Add lines 1a through 1e. (Column (d) must eq	ual Form 990, Part .	X, column (B), line 1	10c.)		🕨	•	62,3	\$39,4	1 91.

Schedule D (Form 990) 2020

36-1707667	Page 3
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Schedule D (Form 990) 2020 ROTARY INTERNATI	ONAL		36-1707667 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) ALTERNATIVE INVESTMENTS	13,423,581.	END-OF-YEAR MARKET VALUE	
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	13,423,581.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990. Part IV. line 1	1d. See Form 990. Part X. line 15.	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X, col. (B) line Part X Other Liabilities.	e <u>15.)</u>		
Complete if the organization answered "Yes"	on Form 000 Port IV line 1	1. or 11f Soc Form 000 Port V line	05
(a) Description of lightlifty	on Form 990, Fart IV, line 1	The of The See Form 990, Part A, line a	(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 25.)		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2020 ROTARY INTERNATIONAL		36-1707667 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial State	ements With Reven	ue per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
с	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Pa	t XII Reconciliation of Expenses per Audited Financial Sta	tements With Exper	nses per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.	
1	Total expenses and losses per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
с	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	.)	
Pa	t XIII Supplemental Information.		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

ROTARY INTERNATIONAL AND THE FOUNDATION HAVE EACH RECEIVED A FAVORABLE

DETERMINATION LETTER FROM THE IRS STATING THAT EACH IS EXEMPT FROM FEDERAL

INCOME TAXES UNDER THE PROVISIONS OF SECTIONS 501(C)(4) AND 501(C)(3),

RESPECTIVELY, OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED, EXCEPT FOR

INCOME TAXES PERTAINING TO UNRELATED BUSINESS INCOME.

PPH FILES A CORPORATION INCOME TAX RETURN, BUT IS NOT TREATED AS AN

INSURANCE COMPANY FOR FEDERAL INCOME TAX PURPOSES AS IT IS A CAPTIVE

INSURANCE COMPANY. ACCORDINGLY, PREMIUMS (FROM ROTARY) AND LOSSES AND

LOSS ADJUSTMENT EXPENSES ARE EXCLUDED FROM THE CALCULATION OF TAXABLE

INCOME. THERE WAS NO LIABILITY FOR INCOME TAX AS OF 30 JUNE 2021 AND

ROTARY INTERNATIONAL

Part XIII Supplemental Information (continued)

2020.

INFOTECH IS A PRIVATE LIMITED COMPANY REGISTERED IN INDIA AND, AS SUCH, IS

TAXABLE CORPORATION IN INDIA. UNDER U.S. TAX REGULATIONS, INFOTECH IS

TREATED AS A FOREIGN PARTNERSHIP AND ALL OPERATIONS ARE INCLUDED IN

ROTARY'S U.S. TAX FILINGS.

TAX EFFECTS FROM UNCERTAIN POSITIONS ARE RECOGNIZED IN THE CONSOLIDATED

FINANCIAL STATEMENTS ONLY IF THE POSITION IS MORE LIKELY THAN NOT TO BE

SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY.

MANAGEMENT HAS DETERMINED THERE ARE NO MATERIAL UNCERTAIN POSITIONS THAT

REQUIRE RECOGNITION IN THE CONSOLIDATED FINANCIAL STATEMENTS.

ADDITIONALLY, NO PROVISION FOR INCOME TAXES IS REFLECTED IN THE

CONSOLIDATED FINANCIAL STATEMENTS AND THERE IS NO INTEREST OR PENALTIES

RECOGNIZED IN THE STATEMENT OF ACTIVITIES IN THE CONSOLIDATED FINANCIAL

STATEMENTS NOR THE CONSOLIDATING FINANCIAL STATEMENTS; HOWEVER, THE LAST

THREE TAXABLE YEARS REMAIN OPEN TO FEDERAL AND STATE AUDIT.

Statement of Activities Outside the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

Form 990, Part IV	/ line 14b		•	č	
		maintain recor	ds to substantiate the amount of its gra	ints and other assistance	
=	-		the selection criteria used to award the		Yes No
the grantees engionity it	or the grants of a		the selection chiefla used to award the		
2 For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of its	arants and other assistance out	side the
United States.		organization o			
	ae following Part	I line 3 table ca	an be duplicated if additional space is n	eeded)	
(a) Region	(b) Number of			(e) If activity listed in (d)	(f) Total
(1)	offices	employees,	(by type) (such as, fundraising, pro-	is a program service,	expenditures
	in the region	agents, and independent	gram services, investments, grants to	describe specific type	for and investments
		contractors in the region	recipients located in the region)	of service(s) in the region	in the region
		in the region			
EAST ASIA AND THE					
PACIFIC	3	21	PROGRAM SERVICES	MEMBER SUPPORT	1,108,506.
EUROPE (INCLUDING					
ICELAND & GREENLAND)	1	29	PROGRAM SERVICES	MEMBER SUPPORT	4,803,153.
					1,000,100.
SOUTH AMERICA	2	8	PROGRAM SERVICES	MEMBER SUPPORT	322,734.
SOUTH ASIA	1	21	PROGRAM SERVICES	MEMBER SUPPORT	738,122.
SOUTH ASIA	1	160	PROGRAM SERVICES	IT SUPPORT	3,005,386.
CENTRAL AMERICA AND					
THE CARIBBEAN	0	0	INVESTMENTS		5,256,841.
3 a Subtotal	8	239			15,234,742.
b Total from continuation					, , ,
sheets to Part I	0	0			0.
c Totals (add lines 3a					
and 3b)	8	239			15,234,742.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2020

Name of the organization

Department of the Treasury Internal Revenue Service

ROTARY	INTERNATIONAL	

36-1707667 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

SCHEDULE F (Form 990)

Inspection

Open to Public

OMB No. 1545-0047

Employer identification number

Schedule F (Form 990) 2020	ROTARY	INTERNATIONAL

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			l ecognized as charities by the f			1		1
			or counsel has provided a sect					
3 Enter total number of	other organizations of	or entities				🕨		

Schedule F (Form 990) 2020

36-1707667

Schedule	F (Form 990) 2020	ROTARY
Part III	Grants and Other A	ssistance to l

ROTARY INTERNATIONAL

Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

i art in can be duplicated i ac	annonal opuoe io needee	<i>.</i>					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Page 3

Schedule F (Form 990) 2020

36-1707667

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)</i>	X Yes	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)</i>	X Yes	No No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	X Yes	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X Yes	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</i>	X Yes	No

Schedule F (Form 990) 2020

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 3

THE AMOUNTS REPORTED IN SCHEDULE F WERE DETERMINED USING THE ACCRUAL

METHOD OF ACCOUNTING.

SCHEDULE I (Form 990)		Go	irants and Oth vernments, an ete if the organizatio	nd Individual	s in the Ŭni [.]	ted States		OMB No. 1545-0047	
Department of the Treasury Internal Revenue Service	 Attach to Form 990. Go to www.irs.gov/Form990 for the latest information. 								
Name of the organization	ON ROTARY INTERNA	ATIONAL	, i					Employer identification number 36-1707667	
Part I General In	formation on Grants a	nd Assistance							
criteria used to a	ation maintain records t ward the grants or assis	stance?	-			-			
	IV the organization's pro		<u>u</u> <u>u</u>				(
	d Other Assistance to I	-				anization answered "Y	es" on Form 990, Parl	IV, line 21, for any	
1 (a) Name and ad	nat received more than dress of organization vernment	(b) EIN	(if applicable)	(d) Amount of cash grant	ed. (e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
THE ROTARY FOUNDA INTERNATIONAL - 1 AVENUE - EVANSTON	560 SHERMAN	36-3245072	501(C)(3)	195,462.	0.			POLIOPLUS FUND	
THE ROTARY FOUNDA INTERNATIONAL - 1 AVENUE - EVANSTON	560 SHERMAN	36-3245072	501(C)(3)	7,500,000.	0.			GLOBAL GRANTS	
2 Enter total numb	er of section 501(c)(3) a	nd government ord	anizations listed in the	e line 1 table			1	1.	
	er of other organizations				·····		·····	0.	
LHA For Paperwork	Reduction Act Notice,	, see the Instruction	ons for Form 990.					Schedule I (Form 990) 2020	

Schedule I (Form 990) 2020 ROTARY INTERNATIONAL

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

ROTARY INTERNATIONAL ISSUED TWO GRANTS IN FISCAL YEAR ENDED 30 JUNE 2021 TO

THE ROTARY FOUNDATION OF ROTARY INTERNATIONAL [501(C)(3)]. ROTARY

INTERNATIONAL RELIES ON THE GRANT-MONITORING PROCEDURES OF THE ROTARY

FOUNDATION OF ROTARY INTERNATIONAL FOR THE POLIOPLUS FUND AND GLOBAL

GRANTS.

SC	HEDULE J	Compens	sation Information	(OMB No. 1	545-004	47
	rm 990)	_	ors, Trustees, Key Employees, and Highest		20	20	
			pensated Employees answered "Yes" on Form 990, Part IV, line 23.		20	ZU	J
Depar	tment of the Treasury	► At	tach to Form 990.		Open to		ic
Intern	al Revenue Service		0 for instructions and the latest information.		Inspe		
Nam	e of the organization			Employer iden		on nui	mber
De		ROTARY INTERNATIONAL		36-1707	667		
Pa		s Regarding Compensation					
	O I I I I					Yes	No
1a			of the following to or for a person listed on Form	990,			
	· · ·	line 1a. Complete Part III to provide any rele					
	X First-class or c		X Housing allowance or residence for perso				
	X Travel for com		Payments for business use of personal re-				
	_	ation and gross-up payments					
		pending account	X Personal services (such as maid, chauffer	ir, chet)			
Ŀ	If any of the here-	n line to are checked, did the arresting	follow a written policy recording as weather				
a		•	follow a written policy regarding payment or		41-	х	
0			ove? If "No," complete Part III to explain		1b	л	
2			or allowing expenses incurred by all directors,		2	х	
	trustees, and onice	s, including the CEO/Executive Director, re	garding the items checked on line 1a?		2		
2	Indicate which if a	w of the following the organization used to	establish the compensation of the organization's				
3			y boxes for methods used by a related organization				
		tion of the CEO/Executive Director, but exp		51110			
	X Compensation						
			Written employment contract X Compensation survey or study				
		ompensation consultant		ommittoo			
		her organizations	X Approval by the board or compensation c	Ommittee			
4	During the year did	any person listed on Form 990, Part VII, Se	ection A line 1a with respect to the filing				
•	organization or a re		outer ra, warrespeet to the ming				
а	-	e payment or change-of-control payment?			4a		x
b		eive payment from a supplemental nonqual			4b		x
		eive payment from an equity-based comper			4c		x
		es 4a-c, list the persons and provide the ap					
	j						
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organization	s must complete lines 5-9.				
5			the organization pay or accrue any compensatio	n			
	contingent on the r						
а	The organization?				5a		х
					5b		X
		r 5b, describe in Part III.					
6	For persons listed of	n Form 990, Part VII, Section A, line 1a, did	the organization pay or accrue any compensatio	'n			
	contingent on the n	et earnings of:					
а					6a		X
					6b		X
		r 6b, describe in Part III.					
7			the organization provide any nonfixed payments	i			
					7		X
8			ued pursuant to a contract that was subject to th				
	initial contract exce	ption described in Regulations section 53.4	958-4(a)(3)? If "Yes," describe in Part III		8		X
9	If "Yes" on line 8, d	d the organization also follow the rebuttable	e presumption procedure described in				
			· · ·	<u></u>	9		
LHA		eduction Act Notice, see the Instructions		Schedule	J (Forn	n 990)) 2020

36-1707667

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(i)-(D)	reported as deferred on prior Form 990
(1) JOHN HEWKO	(i)	353,307.	0.	0.	22,313.	15,129.	390,749.	0.
CHIEF EXECUTIVE OFFICER	(ii)	216,348.	Ο.	0.	13,662.	9,265.	239,275.	0.
(2) JULIE BURKE	(i)	137,954.	0.	0.	17,740.	15,297.	170,991.	0.
CHIEF FINANCIAL OFFICER	(ii)	141,801.	0.	0.	18,235.	15,723.	175,759.	0.
(3) DAVID ALEXANDER	(i)	203,641.	0.	2,366.	22,288.	25,781.	254,076.	0.
CHIEF COMMUNICATIONS OFFICER	(ii)	37,694.	0.	438.	4,126.	4,771.	47,029.	0.
(4) ERIC JONES	(i)	23,590.	0.	0.	2,441.	2,039.	28,070.	0.
CHIEF INVESTMENT OFFICER	(ii)	301,790.	0.	0.	31,231.	26,081.	359,102.	0.
(5) FAIZ HANIF	(i)	120,404.	0.	0.	9,854.	15,488.	145,746.	0.
CHIEF INFORMATION OFFICER	(ii)	100,516.	0.	0.	8,226.	12,930.	121,672.	0.
(6) JAMES BARNES	(i)	201,671.	0.	3,762.	26,441.	15,407.	247,281.	0.
CHIEF PROGRAMS & MEMBER SVS OFFICER	(ii)	69,884.	0.	1,304.	9,162.	5,340.	85,690.	0.
(7) KRISTOPHER NEWBAUER	(i)	117,005.	0.	4,213.	14,792.	5,923.	141,933.	0.
CHIEF HUMAN RESOURCES OFFICER	(ii)	97,679.	0.	3,518.	12,348.	4,946.	118,491.	0.
(8) MICHELE BERG	(i)	200,649.	0.	0.	21,165.	16,403.	238,217.	0.
DEPUTY GENERAL SECRETARY	(ii)	122,867.	0.	0.	12,960.	10,044.	145,871.	0.
(9) STEVEN ROUTBURG	(i)	172,970.	0.	3,328.	25,243.	22,059.	223,600.	0.
GENERAL COUNSEL	(ii)	63,165.	0.	1,215.	9,218.	8,056.	81,654.	0.
(10) THOMAS THORFINNSON	(i)	123,218.	0.	0.	17,294.	5,008.	145,520.	0.
CHIEF STRATEGY OFFICER	(ii)	123,218.	0.	٥.	17,294.	5,008.	145,520.	٥.
(11) ANDREW G MCDONALD	(i)	127,349.	0.	2,391.	21,131.	6,228.	157,099.	٥.
DEPUTY GENERAL COUNSEL	(ii)	62,724.	0.	1,178.	10,408.	3,067.	77,377.	٥.
(12) CRISTIAN DOWNEY	(i)	134,074.	0.	٥.	18,433.	16,648.	169,155.	٥.
DIRECTOR - IT INFRASTRUCTURE	(ii)	53,552.	0.	0.	7,359.	6,556.	67,467.	0.
(13) JONATHAN SOUTH	(i)	14,886.	0.	٥.	1,393.	2,037.	18,316.	٥.
INVESTMENT OFFICER	(ii)	190,444.	0.	٥.	17,831.	26,057.	234,332.	٥.
(14) MICHAEL PATOCK	(i)	14,726.	0.	0.	1,927.	81.	16,734.	0.
INVESTMENT OFFICER	(ii)	188,388.	0.	0.	24,655.	1,036.	214,079.	0.
(15) RICHARD PLOCINIK	(i)	121,451.	0.	2,293.	11,647.	10,672.	146,063.	0.
DIRECTOR OF ENTERPRISE PROJECTS	(ii)	61,182.	0.	1,155.	5,867.	5,376.	73,580.	0.
(16) MARK MALONEY	(i)	43,087.	0.	0.	0.	7,164.	50,251.	0.
PAST PRESIDENT (END. 6/30/20)	(ii)	0.	0.	0.	0.	0.	0.	٥.

Schedule J (Form 990) 2020

Schedule J (Form 990) 2020	ROTARY	INTERNATIONAL
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Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

FORM 990, SCHEDULE J, PART I, LINE 1A - FIRST CLASS TRAVEL

UNCOMPENSATED VOLUNTEER LEADERS CONDUCT EXTENSIVE INTERNATIONAL TRAVEL

ON BEHALF OF THE ORGANIZATION. ROTARY INTERNATIONAL PROVIDES

BUSINESS-CLASS AIRFARE FOR THE BOARD OF DIRECTORS AND THE GENERAL

SECRETARY. BUSINESS-CLASS TRAVEL IS AVAILABLE IN MOST MARKETS, BUT IF

IT IS NOT, FIRST-CLASS OR ECONOMY AIRFARES ARE SUBSTITUTED. THE

PRESIDENT AND PRESIDENT-ELECT ARE PERMITTED TO USE FIRST-CLASS TRAVEL,

ALTHOUGH THEY MAY CHOOSE BUSINESS-CLASS OR ECONOMY.

FORM 990, SCHEDULE J, PART I LINE 1A - HOUSING ALL. OR RES. FOR PERSONAL USE

FOR EFFICIENCY, RESIDENCES NEAR RI HEADQUARTERS ARE PROVIDED FOR THE

ROTARY INTERNATIONAL PRESIDENT AND PRESIDENT-ELECT. PERSONAL USE OF

THE RESIDENCES IS REPORTED AS TAXABLE INCOME TO THE RECIPIENTS. IN

ADDITION, RI REIMBURSES THE PRESIDENT AND PRESIDENT-ELECT FOR CERTAIN

COSTS ASSOCIATED WITH MAINTAINING THEIR PERSONAL RESIDENCES WHILE THEY

ARE TRAVELLING ON BEHALF OF THE ASSOCIATION. THESE EXPENSE

REIMBURSEMENTS ARE TAXABLE TO THE RECIPIENT.

FORM 990, SCHEDULE J, PART 1, LINE 1A - TRAVEL FOR COMPANIONS

Page 3

Schedule J (Form 990) 2020	ROTARY	INTERNATIONAL

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

ROTARY INTERNATIONAL PROVIDES FOR SPOUSE TRAVEL IF SPOUSE PARTICIPATION

ASSISTS THE ORGANIZATION IN ACHIEVING ITS MISSION. THE ROTARIAN AND

SPOUSE ARE REQUIRED TO SUBMIT DOCUMENTATION DETAILING THE ACTIVITIES

AND SUPPORTING THE BONA FIDE BUSINESS PURPOSE OF THE TRAVEL.

MANAGEMENT REVIEWS THE DOCUMENTATION DURING THE EXPENSE REIMBURSEMENT

APPROVAL PROCESS

FORM 990, SCHEDULE J, PART I, LINE 1A - TAX INDEMNIFICATION AND GROSS UP PAY

ROTARY INTERNATIONAL DOES NOT COMPENSATE THE PRESIDENT AND PRESIDENT

ELECT'S SERVICES OTHER THAN THE REIMBURSEMENT OF CERTAIN PERSONAL

EXPENSES RELATED TO THEIR SERVICES (I.E. THE COST TO MAINTAIN THEIR

PERSONAL RESIDENCE, HEALTH INSURANCE, ETC.) AS DEFINED IN THE ROTARY

CODE OF POLICIES. THE EXPENSE REIMBURSEMENTS ARE TAXABLE TO THE

RECIPIENTS. IT IS THE BOARD POLICY TO PAY THE PRESIDENTS FOR THE TAXES

ASSOCIATED WITH THIS INCOME.

FORM 990, SCHEDULE J, PART I, LINE 1A - HEALTH OR SOCIAL CLUB DUES

FOR THE PRESIDENT AND PRESIDENT-ELECT, EXPENSES RELATED TO MAINTAINING

CLUB MEMBERSHIPS ARE INCLUDED UNDER THE ROTARY CODE OF POLICES FOR

Schedule J (Form 990) 2020

Pag<u>e 3</u>

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PERSONAL EXPENSE REIMBURSEMENT. THESE EXPENSE REIMBURSEMENTS ARE

TAXABLE TO THE RECIPIENT.

FORM 990, SCHEDULE J, PART I, LINE 1A - PERSONAL SERVICES

FOR ANY PRESIDENT OF ROTARY INTERNATIONAL. WHO IS NOT A UNITED STATES

CITIZEN. EXPENSES RELATED TO INCOME TAX PREPARATION ARE INCLUDED UNDER

THE ROTARY CODE OF POLICY. THESE EXPENSES ARE TAXABLE TO THE

RECIPIENT.

FORM 990. SCHEDULE J. PART I LINE 1A - HIGHEST COMPENSATED EMPLOYEES

ROTARY INTERNATIONAL HAS A HIGHEST COMPENSATED EMPLOYEE AT ITS OFFICE

IN ZURICH. SWITZERLAND. WHICH IS CURRENTLY UNDISCLOSED DUE TO POTENTIAL

INFRINGEMENT OF LOCAL DATA PRIVACY LAWS. SALARIES FOR STAFF AT THE

INTERNATIONAL OFFICES ARE ESTABLISHED IN THEIR LOCAL CURRENCY AND

TRANSLATED TO US DOLLARS FOR REPORTING PURPOSES RESULTING IN

POTENTIALLY LARGE FLUCTUATIONS IN THE US DOLLAR REPORTABLE EQUIVALENT

FOR COMPENSATION

SCHEDULE O	
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(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

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. ▶ Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.



Employer identification number 36–1707667

ROTARY INTERNATIONAL

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER PROGRAM SERVICES ARE IN PLACE TO COORDINATE AND DIRECT THE

ACTIVITIES OF ROTARY INTERNATIONAL AND SUPPORT THE OBJECT OF ROTARY.

THE OBJECT OF ROTARY IS TO ENCOURAGE AND FOSTER THE IDEAL OF SERVICE AS

A BASIS OF WORTHY ENTERPRISE. THESE OTHER PROGRAM SERVICES SUPPORT THE

OBJECT OF ROTARY BY HELPING ROTARY CLUBS AND DISTRICTS ACHIEVE THEIR

SERVICES GOALS, EXPAND ROTARY MEMBERSHIP, AND PROMOTE THEIR ACTIVITIES

TO THE MEDIA AND GENERAL PUBLIC.

EXPENSES \$ 50,587,351. INCL GRANTS OF \$ 7,695,462. REVENUE \$ 5,816,397.

FORM 990, PART V, LINE 2A

NUMBER OF EMPLOYEES ON $W\!-\!3$

THE NUMBER OF EMPLOYEES REPORTED IS THE TOTAL EMPLOYEE COUNT FROM THE

FILING ORGANIZATION. WHILE ROTARY INTERNATIONAL IS THE COMMON

PAYMASTER FOR ROTARY INTERNATIONAL AND THE ROTARY FOUNDATION OF ROTARY

INTERNATIONAL (TRF), THE NUMBER OF EMPLOYEES DOES NOT INCLUDE THE

EMPLOYEE COUNT FOR TRF.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

ARGENTINA, AUSTRALIA, BANGLADESH, BRAZIL,

CANADA, SRI LANKA, CHILE, COLOMBIA,

DENMARK, EGYPT, ETHIOPIA, GERMANY,

INDIA, JAPAN, SOUTH KOREA, NIGERIA,

NORWAY, NEPAL, PERU, PAKISTAN,

PHILIPPINES, SOUTH AFRICA, SWEDEN, SWITZERLAND,

THAILAND, UNITED KINGDOM, UKRAINE, VENEZUELA

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032211 11-20-20

Schedule O	(Form 990	or 990-EZ) 2020
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Name of the organization

ROTARY INTERNATIONAL

Page 2 Employer identification number 36-1707667

FORM 990, PART V, LINE 6B

EXPRESS STATEMENT THAT SUCH CONTRIBUTIONS OR GIFTS WERE NOT TAX

DEDUCTIBLE ROTARY INTERNATIONAL DOES NOT DIRECTLY SOLICIT CONTRIBUTIONS

FROM THE GENERAL PUBLIC. THE MEMBER CLUBS OF ROTARY INTERNATIONAL,

ALSO SECTION 501(C)(4) ENTITITES, PAID MEMBERSHIP DUES WHICH ARE

REPORTED ON FORM 990, PART VIII, LINE 18 AS CONTRIBUTION REVENUE. AS

SUCH, ROTARY INTERNATIONAL DOES NOT DIRECTLY PROVIDE AN EXPRESS

STATEMENT.

FORM 990, PART VI, SECTION A, LINE 6:

THE MEMBERSHIP OF ROTARY INTERNATIONAL CONSISTS OF ROTARY CLUBS ORGANIZED

AND OPERATING IN ACCORDANCE WITH THE RI CONSTITUTION AND BYLAWS.

FORM 990, PART VI, SECTION A, LINE 7A:

THE PROCEDURES FOR THE SELECTION OF ROTARY INTERNATIONAL (RI) OFFICERS ARE

STATED IN THE RI BYLAWS. NOMINATING COMMITTEES SELECT NOMINEES FOR THE

BOARD OF DIRECTORS, INCLUDING THE PRESIDENT. DIRECTOR NOMINATING

COMMITTEES IN EACH OF THE 34 WORLDWIDE RI ZONES NOMINATE A DIRECTOR FROM

THE MEMBERSHIP OF THE CLUBS IN THAT ZONE EVERY FOURTH YEAR ACCORDING TO A

SCHEDULE ESTABLISHED BY THE RI BOARD. ADDITIONALLY, A 17 MEMBER NOMINATING

COMMITTEE FOR PRESIDENT NOMINATES A PRESIDENT EACH YEAR (ON A ROTATING

BASIS EACH ZONE ELECTS A MEMBER OF A CLUB IN THE ZONE TO SERVE ON THE

NOMINATING COMMITTEE). THERE ARE OPPORTUNITIES FOR CLUBS TO PUT FORWARD

CANDIDATES TO CHALLENGE THE NOMINATED CANDIDATES.

FORM 990, PART VI, SECTION B, LINE 11B:

ROTARY INTERNATIONAL'S FORM 990 IS PREPARED BY AN INDEPENDENT CERTIFIED

Schedule O (Form 990 or 990-EZ) 2020 Name of the organization	Page 2 Employer identification number
ROTARY INTERNATIONAL	36-1707667
PUBLIC ACCOUNTING FIRM. A DRAFT OF THE FOMR 990 IS REVIEWED BY THE	
DIRECTOR OF FINANCE AND THE CHIEF FINANCIAL OFFICER. UPON COMPLETION OF	
THE REVIEW PROCESS, THE RETURN IS PROVIDED TO THE BOARD OF DIRECTORS,	
SIGNED BY THE CFO AND FILED WITH THE IRS.	
FORM 990, PART VI, SECTION B, LINE 12C:	
ALL DIRECTORS MUST DISCLOSE ANY FAMILY OR BUSINESS RELATIONSHIPS WITH OTHER	
DIRECTORS, TRUSTEES OF THE ROTARY FOUNDATION, KEY EMPLOYEES, OR HIGHEST	
COMPENSATED INDEPENDENT CONTRACTORS OF ROTARY INTERNATIONAL AND THE ROTARY	
FOUNDATION AS IDENTIFIED ANNUALLY BY THE GENERAL SECRETARY. TO COMPLY WITH	
THIS POLICY, DIRECTORS SUBMIT AN ANNUAL POTENTIAL CONFLICT OF INTEREST	
STATEMENT, ON WHICH THEY REPORT ANY PREVIOUSLY UNDISCLOSED POTENTIAL	
CONFLICTS OF INTEREST. THE RI EXECUTIVE COMMITTEE REVIEWS THESE REPORTS	
AND WORKS TO RESOLVE ANY ACTUAL OR POTENTIAL CONFLICTS. IF NO RESOLUTION	
IS REACHED, THE COMMITTEE REFERS THE MATTER TO THE BOARD OF DIRECTORS AND	
AN APPROPRIATE ACTION WILL BE TAKEN. A POTENTIAL CONFLICT OF INTEREST IS	
DEEMED TO EXIST IF A MAJORITY OF DIRECTORS VOTING REACH AN AFFIRMATIVE	
DECISION. THE DIRECTOR WITH THE POTENTIAL CONFLICT OF INTEREST SHALL NOT	
BE PRESENT FOR THE VOTE. IN ADDITION, THE OPERATIONS REVIEW COMMITTEE	
MONITORS COMPLIANCE WITH THE CODE OF CONDUCT AND CONFLICT OF INTEREST	
POLICY. KEY EMPLOYEES AND OTHER EMPLOYEES IN A POSITION OF INFLUENCE ARE	
ALSO REQUIRED TO MAKE ANNUAL CONFLICT OF INTEREST DISCLOSURES.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE PROCESS FOR DETERMINING COMPENSATION FOR THE GENERAL SECRETARY DEPUTY	

THE PROCESS FOR DETERMINING COMPENSATION FOR THE GENERAL SECRETARY, DEPUTY $% \left({{\left[{{{\left[{{{C_{{\rm{B}}}}} \right]}} \right]}} \right)$

GENERAL SECRETARY AND GENERAL MANAGERS WAS LAST REVIEWED IN FISCAL YEAR

2020. RI'S GLOBAL PEOPLE & TALENT TEAM COLLECTS DATA ON TOTAL COMPENSATION

(IE BASE SALARY AND BENEFITS) FROM SEVERAL SOURCES, INCLUDING INDEPENDENT

Schedule O (Form 990 or 990-EZ) 2020 Name of the organization	Employer identification number
ROTARY INTERNATIONAL	36-1707667
COMPENSATION CONSULTANTS, SALARY SURVEYS, PROFESSIONAL PUBLICATIONS, AND	
INFORMATION FROM SIMILAR ORGANIZATIONS IN THE SAME GEOGRAPHIC AREA. PEOPLE	
& TALENT PROVES A SALARY RANGE FOR THE GENERAL SECRETARY, DEPUTY GENERAL	
SECRETARY, AND GENERAL MANAGERS POSITIONS AND THE OPERATIONS REVIEW	
COMMITTEE (ACTING AS A COMPENSATION ADVISORY COMMITTEE) AND THE EXECUTIVE	
COMMITTEE OF THE BOARD OF DIRECTORS REVIEW SALARY RANGES AND SALARY	
INCREASE PARAMETERS FOR REASONABLENESS. THE GENERAL SECRETARY'S	
COMPENSATION IS BASED ON THE TERMS IN THE GENERAL SECRETARY'S CONTRACT.	
THE GENERAL SECRETARY APPROVES SALARY INCREASES FOR THE EXECUTIVE	
MANAGEMENT TEAM WITHIN THE SALARY RANGES APPROVED BY THE EXECUTIVE	
COMMITTEE OF THE BOARD OF DIRECTORS. THIS PROCESS IS CONTEMPORANEOUSLY	
DOCUMENTED.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:	
AL, AR, CA, FL, GA, HI, IL, KS, KY, MA, MD, MN, MS, NC, ND, NH, NJ, PA, RI, SC, TN, UT, VA, WI, WV	
FORM 990, PART VI, SECTION C, LINE 19:	
ROTARY INTERNATIONAL MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST	
POLICY, AND AUDITED FINANCIAL STATEMENTS TO THE PUBLIC ON THE	
ORGANIZATION'S WEBSITE, WWW.ROTARY.ORG.	
FORM 990, PART VII, LINE 2	
HIGHEST PAID EMPLOYEES	
THE HIGHEST PAID EMPLOYEES ARE DETERMINED BASED ON W-2 AMOUNTS FOR THE	
FILING AND RELATED ORGANIZATION, CONSISTENT WITH PRIOR YEAR.	

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

PPH NET INCOME

475,188.

Schedule O (Form 990 or 990-EZ) 2020

Schedule O (Form 990 or 990-EZ) 2020		Page 2
Name of the organization ROTARY INTERNATIONAL		Employer identification number 36-1707667
INFOTECH ADJUSTMENT	4,417.	
TOTAL TO FORM 990, PART XI, LINE 9	479,605.	

SCHE	D	U	LΕ	R	
	-	-			

(Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

ROTARY INTERNATIONAL

Employer identification number 36-1707667

OMB No. 1545-0047

Open to Public Inspection

20

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity		3) 12(b)(13) rolled ity?
				501(c)(3))		Yes	No
THE ROTARY FDN OF ROTARY INTERNATIONAL -							
36-3245072, 1560 SHERMAN AVENUE, EVANSTON,					ROTARY		
IL 60201-3698	CHARITABLE	ILLINOIS	501(C)(3)	7	INTERNATIONAL	х	
ROTARY INTERNATIONAL HOLDINGS NFP -							
32-0515763, 1560 SHERMAN AVENUE, EVANSTON,					ROTARY		
IL 60201-3698	CHARITABLE	ILLINOIS	501(C)(3)	10	INTERNATIONAL	X	
	-						
	-						
	4						

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2020

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

		, 			(-)						
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	ר)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule	mana partn	
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No
ROTARY INTERNATIONAL INFOTECH											
PVT., LTD 98-1050532, 6TH											
FLOOR, BUILDING BETA II, GIGA	1		ROTARY								
SPACE, NAGAR ROAD, PUNE,	IT SUPPORT	INDIA	INTERNATIONAL	RELATED	242,962.	4,012,660.		x	N/A	x	99.99%
]										
	1										
	1										
	1										
	1										
	1										
	1		1							1	

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	(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	ship Sectio	
		country)		,				Yes	No
PPH NATIONAL INSURANCE CO - 03-0370108									
76 ST. PAUL STREET, SUITE 500			ROTARY						
BURLINGTON, VT 05041	CAPTIVE INSURANCE	VT	INTERNATIONAL	C CORP	475,188.	2,389,432.	100%	х	
	-								

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			Yes	s I
1 During the tax year, did the organization engage in any of the following transaction	ns with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled ent	ity	1a		
			X	
f Dividends from related organization(s)				
g Sale of assets to related organization(s)		1g		
i Exchange of assets with related organization(s)		1i		
				_
k Lease of facilities, equipment, or other assets from related organization(s)		1k		
I Performance of services or membership or fundraising solicitations for related org				
m Performance of services or membership or fundraising solicitations by related org	anization(s)	1m		
	tion(s)		X	
			X	_
p Reimbursement paid to related organization(s) for expenses			x	
			X	4
r Other transfer of cash or property to related organization(s)		1r	x	
s Other transfer of cash or property from related organization(s)		1s		

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) THE ROTARY FDN OF ROTARY INTERNATIONAL	В	7,695,462.	COST
(2) THE ROTARY FDN OF ROTARY INTERNATIONAL	N	1,905,738.	соят
(3) THE ROTARY FDN OF ROTARY INTERNATIONAL	0	34,225,354.	COST
(4) ROTARY INTERNATIONAL INFOTECH PVT., LTD.	Р	3,007,359.	COST
(5) PPH NATIONAL INSURANCE CO	Q	84,970.	COST
(6) THE ROTARY FDN OF ROTARY INTERNATIONAL	Q	14,714,993.	COST

Schedule R (Form 990) ROTARY INTERNATIONAL

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(7) PPH NATIONAL INSURANCE CO	R	815,827.	COST
(8) PPH NATIONAL INSURANCE CO	0	186,970.	COST
(9)			
_ (10)			
_ (11)			
_ (12)			
_ (13)			
_ (14)			
_ (15)			
_ (16)			
_ (17)			
_ (18)			
_ (19)			
_ (20)			
_ (21)			
_ (22)			
_ (23)			
(24)			

Schedule R (Form 990) 2020 ROTARY INTERNATIONAL

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.

(0)	<u> </u>	C	(d)	1-	、	(f)	(a)		•	(1)	(i)	(14)
(a)	(b)	(c)	(d)	Are a partners 501(c orgs	all	(f)	(g) Share of		ר) החסיי-	(i) Code V UBI	(j)	(k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners 501(c	s sec.)(3)	Share of total	end-of-year	tio	opor- nate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managin	
of entity		country)	excluded from tax under	orgs		income	assets		tions?	of Schedule K-1	partner?	
		country)	sections 512-514)	Yes	No	Income	asseis	Yes	No	(Form 1065)	Yes No	·
	1											
	-											
												
	1											
												1
	-											
	4											
												<u> </u>
	-											

Schedule R (Form 990) 2020

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART III, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS PARTNERSHIP:

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

ROTARY INTERNATIONAL INFOTECH PVT., LTD.

EIN: 98-1050532

6TH FLOOR, BUILDING BETA II, GIGA SPACE, NAGAR ROAD

PUNE, MAHARASHTRA, INDIA 411014