

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



### Form **990**

**Return of Organization Exempt From Income Tax** 

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

OMB No 1545-0047

2010

**Open to Public** 

Inter	nal Revenue	Service	► The organization	may have to use a copy of this return	to satisfy s	tate report	ıng requirem	nents.		Inspec	tion
Α	For the 2	010 calent	lar year, or tax year beginr	ning	, 2010, ar	nd endin	g			,	
В	Check if app	plicable	C Name of organization NEW	PORT YACHT CLUB			-	D Employ	er identi	ification Numb	er
	Addres	s change	Doing Business As					05-0	254	070	
	Name	change	Number and street (or P O bo	x if mail is not delivered to street addr)		Room/s	uite	<b>E</b> Telepho			
	Initial r		110 LONG WHARF					(401	1) 8	46-9410	1
	Termin		City, town or country		State ZI	P code + 4		(101	-,		<u> </u>
			NEWPORT		RI O	2840		G Gross re	eceints :	\$ 914,2	28.
	FF	ation pending	F Name and address of principal	Officer		2010	H(a) Is this a	a group returi			Yes X No
			NORMAN P. BAILEY, 110 LC		RT (	2840		affiliates incli		Ħ	Yes No
$\overline{}$	Tax-exem	npt status	501(c)(3) X 501(c) (7	············· <del>························</del>	a)(1) or	527	If 'No,'	attach a list	(see ins	tructions)	
i	Websit	•	W.NEWPORTYACHTCL		<u> </u>	327	H(c) Group	exemption nu	mbor Þ	•	
K		organization	X Corporation Trust	Association Other	I Vasi	r of Format	ion 1894			egal domicile	PT
		Summar		7G3CCIDION OUTC	La rear	i ori orinat	100 TO 2 .	1 1111 3	Late of it	egai domicile	IXI
				on or most significant activities	NEW	PORT	YACHT	CLUB T	S A	MEMBER	
Ф				ES ITS MEMBERS VAR							
Š				THE OBJECTIVE OF							
Ĕ			ND NEWPORT.		<b></b>						
Š	2 Ch	eck this bo	x 🕨 🔲 if the organizatior	discontinued its operations or	disposed	d of more	e than 259	% of its ne	t asse	ets.	
ত ক			ting members of the govern						3		2:
69				of the governing body (Part VI			•		4		2.
₹				calendar year 2010 (Part V, Iır	ne 2a)			٠	5		48
Activities & Governance	9		of volunteers (estimate if n	art VIII, column (C), line 12				ŀ	6 7a		100 62,152
•	1		business taxable income fi			•			7 a		3,089
_	<b>3</b> 110	t dill cidica	business taxable income in	10111 1 01111 330-1, IIIIC 34			В	rior Year	-/5	Curro	nt Year
Revenue	8 Co	ntributions	and grants (Part VIII, line	1h)			<u>'</u>	12,1	51	Guilei	2,740
			ice revenue (Part VIII, line		701,0		6	82,884			
		_	come (Part VIII, column (A	<del>_,</del>			`	9,0			7,449
æ				es 5, 6d, 8c, 9c, 10c, and 11e)				46,0			34,761
				(must equal Part VIII, column (		2)		768,3		7	27,834
	<b>13</b> Gra	ants and si	milar amounts paid (Part I)	K, column (A), lines 1-3)							
	14 Bei	nefits paid	to or for members (Part IX								
_	<b>15</b> Sal	laries, othe	r compensation, employee		290,7	33.	3	03,512			
Expenses	16a Pro	ofessional i	fundraising fees (Part IX, co								
De L			ing expenses (Part IX, colu								
Δ			es (Part IX, column (A) lin	( 1 O 1 C O O 0 1				448,0	30	a	76,805
				qual Part IX, column (A) إلى المعادة	25)			738,7			80,317
			expenses. Subtract line 18			•	-	29,5			47,517
-1	13 110	venue less	expenses. Subtract fine To	non-ine tzv	•		Regionin	ng of Curren			f Year
Net Assets or Fund Balances	<b>20</b> Tot	lal assets (	Part X, line 16)				Degiiiisii	863,1			07,153
A B	i		s (Part X, line 26)			•		134,7			28,965
25	i -		fund balances. Subtract lin	21 from lone 20	•	•	` <del>                                     </del>	728,3	T		78,188
		Signatur	··	ie 21 nom me 20				120,3	30.	· · · · · · · · ·	10,100
			<del>/                                     </del>							-1 1 -1	
com	plete Declar	ation of prepa	rer (other than officer) is based on a	irn, including accompanying schedules a all information of which preparer has an	ng statemen knowledge	nts, and to	ine best of m	y knowleage	and bell	et, it is true, co	orrect, and
			Parren 161	Narie II	•			7/18/	/11		
Sig	n	Signatu	re of officer				Da	ite			
He	re	WAR	REN HARTWELL				TREAS	SURER			
			print name and title								
		Print/Type p	reparer's name	Preparer's signature	П	Date	·	Check	ıf	PTIN	
Pa	id	Nancy	L Mancini, CPA	Nancy L Mancini, C	PA 0	7/15/	11	self-employe	_   ed		
	eparer	Firm's name		ini, and Barbieri,	P. C.	<u> </u>		7			
	e Only	Firm's addre			<u> </u>			Firm's EIN	<b>•</b>		
	-		Cranston		02920			Phone no	(40)	1) 270-	6136
Ma	v the IRS	discuss th		shown above? (see instructions				1	, 101	X Yes	No

Form 990 (2010)

_		ORT YAC			05-0	254070	Page 2
ල ල	tilli Statement	of Progra	m Service	Accomplishments			
				nse to any question in this Part III		·	
1	Briefly describe the	-					
	NEWPORT YACH						
			<b></b>	ITS MEMBERS VARIOUS SERVICES RELATE	SD_TO_		
	See Form 990, Page	<u> </u>	rine i (condi	nuea)			<b></b>
	Did the organization	undertake a	ny significant	t program services during the year which were not listed o	n the orior		
-	Form 990 or 990-EZ			t program services daining the year which were not instead	in the prior	□ Y	es X No
	If 'Yes,' describe the	se new servi	ces on Scheo	dule O		ш.	
3	Did the organization	cease condu	ucting, or mal	ke significant changes in how it conducts, any program se	ervices?		es X No
	If 'Yes,' describe the	se changes o	on Schedule	0			_
4	Describe the exempt	purpose acl	nievements fo	or each of the organization's three largest program service	es by exper	ses. Section	on 501(c)(3)
	expenses, and rever	izations and nue, if any, fo	section 4947 or each progr	(a)(1) trusts are required to report the amount of grants a am service reported.	nd allocatio	ins to other	s, the total
	•			•			
	(Code: )	(Expenses	\$	including grants of \$)	(Revenue	\$	)
	· _ · · · · · · · · · · · · · · · · · ·			OAT & DOCK MAINTENANCE FOR MEMBERS	-		·
	YACHTSMEN.	. – – – – -				<del></del>	
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						•	
41		(Expenses		including grants of \$) CE & UPKEEP OF CLUBHOUSE FACILITIES	(Revenue	\$	,
	HOUSE COMMIT				S FOR U	<u> </u>	
	HEMDERS WAD	. <u></u>	1 TACULO	MEN.			
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		. <b></b>	<b></b> -				
40	(Code:)	(Expenses	\$	including grants of \$)	(Revenue	\$	)
				AINING AND ACTIVITIES FOR YOUTH.			
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		. <del>-</del>					
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	l Ollo a service	6					
40	Other program servi	ces. (Descrit			ė		,
	(Expenses \$  Total program servi	CO OVDODCOO		uding grants of \$ ) (Revenue	<b>P</b>		
BAA		or expenses		TEEA0102 10/06/10			Form <b>990</b> (2010)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		minen omg	
ć	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
ŧ	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	11 b		х
•	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	11 c		х
(	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	11 d		х
•	e Did the organization report an amount for other liabilities in Part X, line 25° If 'Yes,' complete Schedule D, Part X	11 e		Х
1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		х
12;	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		х
ı	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		_X_
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ı	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19_		х
20	aDid the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		Х
_	b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 b		

Form 990 (2010) NEWPORT YACHT CLUB

Rantiv Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		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? <i>If 'Yes,' complete Schedule J</i>	23		_X_
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		_x_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
t	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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		*	
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV .	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
(	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
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	,	х
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		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
ě	a 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  Yes X No			
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		х
38	Note. All Form 990 filers are required to complete Schedule O	38	х	1001-5
RΔΔ		Forn	1990 i	(2010)

	-0254070	1	Page !
Part V Statements Regarding Other IRS Filings and Tax Compliance			_
Check if Schedule O contains a response to any question in this Part V			نلہ
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable ga (gambling) winnings to prize winners?	iming 1 c	;	
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			
	48		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		X_	ļ
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see instructions)	ŀ		ļ
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	+	
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 t	X	<u> </u>
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority o financial account in a foreign country (such as a bank account, securities account, or other financial account)?	over, a		х
<b>b</b> If 'Yes,' enter the name of the foreign country:			
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	1	X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 t	,	Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	50	:	ļ
<b>6a</b> 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?	tion 6 a	1	х
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts not tax deductible?	were 6t		
7 Organizations that may receive deductible contributions under section 170(c).	01		<b></b>
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	ļ		ļ
services provided to the payor?		+	X
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7t	)	ļ
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Form 8282?	to file		x
d If 'Yes,' indicate the number of Forms 8282 filed during the year			<u>^`</u>
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f	1	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	<del></del>		<del> </del> -
as required?	7g	3	ļ
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h	1	ļ
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	ud the		
9 Sponsoring organizations maintaining donor advised funds.	.		ļ ·
a Did the organization make any taxable distributions under section 4966?	9a		
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?	9t	-	ļ
10 Section 501(c)(7) organizations. Enter	.		
1 1	20,750.		1
·	40,238.		
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders	İ		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources			1
against amounts due or received from them.)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	. 12a	<u>.                                    </u>	<u> </u>
<b>b</b> If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year . 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
a Is the organization licensed to issue qualified health plans in more than one state?	. <u>13</u> a		<u> </u>
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		x
			4 4 4

Form 990 (2010) NEWPORT YACHT CLUB 05-0254070 Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI  $\mathbf{x}$ Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1 a 21 **b** Enter the number of voting members included in line 1a, above, who are independent 21 1 b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? 2 X Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents 4 X since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Does the organization have members or stockholders? 6 X 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . 7 a X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a Х **b** Each committee with authority to act on behalf of the governing body? . 8Ь Х Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If 'Yes,' provide the names and addresses in Schedule O*. 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Does the organization have local chapters, branches, or affiliates? 10 a X b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11 a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 , 391 - 12 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 12a Х b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c Does the organization have a written whistleblower policy? 13 X 14 Does the organization have a written document retention and destruction policy? 14 X Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a Х **b** Other officers of key employees of the organization . 15b If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . 16 a Х ر پانچین b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Another's website Own website X Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

► WARREN HARTWELL, TREASURER 110 LONG WHARF

\_\_\_NEWPORT \_\_\_\_ RI \_\_02840 \_\_\_\_(401) 846-9410

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-orm	990	(2010)	NEWPORT	YACHT	CLUB

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1 a 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.

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

Check this box if neither the organization	nor any r	elated	l org	anız	atio	n com	pen	sated any current office	cer, director, or trustee	
(A)	(B)	, ,						(D)	(E)	<b>(F)</b>
Name and title	Average hours per week (describe hours for related organiza- tions in Schedule O)	or director	anstatutional trustee	Office Pr	a key employee	A High est compensated employee	i) Farmer	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) ROBERT MENSON REGATTA COMMITTEE CHAIR	0.50	х						0.	0.	0.
(2) JOSEPH SLAWINSKI FINANCE COMMITTE CHAIR	0.50	х						0.	0.	0.
(3) SUSAN BOOTH HOUSE COMMITTEE CHAIR	0.50							0.	0.	0.
(4) WAYNE COULOMBE HOUSE COMMITTEE CHAIR	0.50							0.	0.	0.
(5) G. GORDON STONE  MEMBERSHIP COMMITTEE CHAIR	0.50	х						0.	0.	0.
(6) DONALD BERRETT FLOAT & DOCK COMMITTEE CHAIR	0.50	х						0.	0.	0.
(7) AMINTHA CINOTTI  COMMUNICATIONS COMMITTEE CHAIR	0.50	х						0.	0.	0.
(8) ALLISON MILLER ENTERTAINMENT COMMITTEE CHAIR	0.50	х						0.	0.	0.
	0.50	х						0.	0.	0.
OFFSHORE COMMITTEE CHAIR	0.50	х						0.	0.	0.
(11) WINFRED KELLY FROSTBITE COMMITTEE CHAIR	0.50	х						0.	0.	0.
(12) DAVID MEDEIROS  FLEET CAPTAIN	0.50	х_						0.	0.	0.
(13) DANIEL ANTON YOUND ADULTS COMM. CHAIR	0.50	х						0.	0.	0.
(14) NEILL GRAY MEMBER AT LARGE	0.50	х						0.	0.	0.
(15) JACK_GRANT MEMBER AT LARGE	0.50	х						0.	0.	0.
(16) C. PETER JENCKS MEMBER AT LARGE	0.50	х						0.	0.	0.
(17) NELSON R. CHAFEE PAST COMMODORE	0.50	x		x				0.	0.	0.
RAA			TEE/	10107	12	2/21/10				Form 990 (2010)

Part VII Section A. Officers, Directors, Trus	tees, K	(ey	Em	ıplo	ye	es,	and	d Highest Con	pensated Emp	loyees (cont)
(A)	(B) (c)				(D)	(E)	(F)			
Name and title	Average hours							Reportable compensation from	Reportable compensation from	Estimated amount of other
	hours per week (describe hours for related organi- zations in Sch O)	악	insti	Officer	Key	Highest co	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the
•	hours for related	/idua	Institutional trustee	ĕ	employee	lest o	ner	(44-2/1099-141130)	(**-21033-141130)	organization and related
	organı- zations	2 5	nalt		oloye	eom				organizations
•	un Sch O)	stee	rust		ř	Dens				
			8			ated		:		
	ļ		<u></u>							
(18) NORMAN P. BAILEY, SR.	<b>-</b>									
PAST COMMODORE	0.50	X		X	_	<u> </u>		0.	0.	0.
(19) JOHN H. ELLIS									•	
COMMODORE	0.50	X		X_				0.	0.	0.
(20) DEBORAH MILLER		l							•	
VICE COMMODORE	0.50	X		Х			-	0.	0.	0.
(21) STEWART ABRAMSON	۱, ,			<b> </b>	ŀ				_	
REAR COMMODORE	0.50	X	_	X		-		0.	0.	0.
(22) EDITH MORIN		١,,		١.,					•	
SECRETARY	0.50	X_		Х				0.	0.	0.
(23) WARREN HARTWELL	ا ۔ ۔ ،	,,		Ų,					_	,
TREASURER	0.50	<del> </del> ↑		Х		_		0.	0.	0.
_(24)	-									
(25)	1		-							
(25)	-									
/2©	<del> </del>		1		$\vdash$					<u> </u>
(26)	-{									
(27)	1	┢┈	┢	$\vdash$	H					
727	-					1				
(28)		-	┢	-	$\vdash$					
	1									
(29)		<del>                                     </del>	一	$\vdash$		-				
727	1									
1 b Sub-total			1		<del>'</del>	<del>!</del>	<b></b>	0.	0.	0.
c Total from continuation sheets to Part VII, Section	Α .						<b>&gt;</b>			
d Total (add lines 1b and 1c)							<b>•</b>	0.	0.	0.
Total number of individuals (including but not limited	to thos	e lıs	ted	abov	/e) \	who	rece	eived more than \$	100,000 in reportab	le compensation
from the organization					•			·		·
										Yes No
3 Did the organization list any former officer, director	or truste	e k	ev e	mnl	ove	e oi	r hia	hest compensated	ł emplovee	37
on line 1a? If 'Yes,' complete Schedule J for such in	dıvidual	,, ,,	,				9			. <b>3</b> X
4 For any individual listed on line 1a, is the sum of rec	ortable	com	nen	sati	on a	and o	othe	r compensation from	om	
the organization and related organizations greater th	nan \$150	0,000	0? 1	f 'Ye	s' c	omp	lete	Schedule J for		
such individual			٠	•		•	٠			4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or	ompensa	ation	fro	m ai	ny u	inrel	ated	l organization or ir	ndıvıdual	5 X
Section B. Independent Contractors	unpiete	5011	cuu	, C J	101	JUCI	. pei		<u> </u>	
Complete this table for your five highest compensate	ed indep	ende	ent d	cont	ract	ors 1	that	received more that	n \$100,000 of	
compensation from the organization.	<u> </u>									
(A)	_							(B	)	(C)
Name and business addres	Name and business address Description of services Compensation									
					_					
								<u> </u>		
2 Total number of independent contractors (including \$100,000 in compensation from the organization \$	but not l	imite	ed to	o tho	se	liste	d ab	ove) who received	more than	•

ħ

		- Statement of the	Verial		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
S	1a Fe	ederated campaigns	. 1	a	· · · · · · · · · · · · · · · · · · ·	TOVELLAG		012,010,01014
ANT		embership dues	<del>                                     </del>	b	1			
A SE		undraising events	<u> </u>	c	1			
FTS		elated organizations	· -	d	•			
5.5		vernment grants (contribution	<u> </u>	e				
SIS				<del></del>				
		l other contributions, gifts, g milar amounts not included a		f 2,740.				
FRE		oncash contributions included		\$ 2,400.	•			
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS		otal. Add lines 1a-1f		, <u></u>	2,740.			
				Business Code			-	ŀ
NEN	2а мв	EMBERSHIP DUES & INI	TIATION FE	s 713990	294,943.	294,943.	0.	0.
RE	b F	LOAT & DOCK		713990	320,960.	280,247.	40,713.	0.
Z	c J	UNIOR ACTIVIT	IES	713990	28,340.	28,340.	0.	0.
SER	<b>d</b> 0	FFSHORE ACTIV	ITIES	713990	5,085.	799.	4,286.	0.
AM	e E	NTERTAINMENT (	COMMITTE	E 713990	17,852.	17,852.	0.	0.
PROGRAM SERVICE REVENUE	f All	ll other program servic	e revenue		15,704.	10,141.	5,563.	0.
8	g To	otal. Add lines 2a-2f		<u> </u>	682,884.			
	3 Inv	vestment income (incli her similar amounts)	udıng dıvıder	ds, interest and	4,394.	0.	4,394.	0.
	<b>4</b> Ind	come from investment	of tax-exem	pt bond proceeds				
	<b>5</b> Ro	oyalties				_		
			(ı) Real	(II) Personal		:		ı
		ross Rents			İ			ſ
		ess rental expenses						
		ntal income or (loss)				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
	<b>d</b> Ne	et rental income or (los	<del> </del>	· · · · · · · · · · · ·				
		oss amount from sales of	(i) Securitie	. ''		`		ļ
	ass	sets other than inventory		3,055.				'
		ss: cost or other basis						1
		d sales expenses .		0.				
		ain or (loss)		3,055.	2 055			
		et gain or (loss)		· · · · · · · · · · · · · · · · · · ·	3,055.	3,055.	0.	0.
ENUE	(ne	ross income from fund not including \$		s —				
OTHER REVE		contributions reported						!
띮		ee Part IV, line 18		. a				
6		ess: direct expenses et income or (loss) froi		b				,
:		ross income from gam ee Part IV, line 19	•					
		ee Part IV, line 19 ess: direct expenses		. b				1
	c Ne	et income or (loss) froi	n gaming ac	tivities .				
	<b>10a</b> Gr an	ross sales of inventory	, less returns	. a 221,155.				
		ess: cost of goods sold			1			,
		et income or (loss) froi		<u> </u>	34,761.	27,565.	7,196.	0.
		Miscellaneous Revenu		Business Code			.,====	
	11 a							
	<b>b</b>							
	c							
		I other revenue .						
		otal. Add lines 11a-11d		▶				
	12 To	otal revenue. See instr	uctions .	►	727,834.	662,942.	62,152.	0.

#### 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) but are not required to complete columns (B), (C), and (D)

Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
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	264,351.			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	5,716.		<u> </u>	
10	Payroll taxes	33,445.		<del></del>	
11	Fees for services (non-employees):				
а	Management				
b	Legal	1,084.			
C	Accounting .	5,685.			
	Lobbying				
е	Professional fundraising services. See Part IV, line 17	-	<i>1</i> 05 €	.48	
f	Investment management fees				
_	Other	11,959.			
12	Advertising and promotion				, <u> </u>
13	Office expenses	30,605.			
14	Information technology	2,851.			
15	Royalties				
16	Occupancy	120,616.		<del></del>	
17	Travel	1,607.			_
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	3 <b>,</b> 578.			
	Payments to affiliates				· · · · · · · · · · · · · · · · · · ·
	Depreciation, depletion, and amortization	67,098.			
	Insurance Other expenses. Itemize expenses not	50,993.			,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,
24	covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)	:			
а	YACHT CLUB EVENTS	29,766.			
	EQUIPMENT RENTAL & MAINTENANCE	17,905.			· · · · · · · · · · · · · · · · · · ·
	SUPPLIES	14,420.			
	OFFSHORE ACTIVITIES	1,119.			
	UNRELATED BUSINESS INCOME TAXES	514.			
	All other expenses	17,005.		-	<del></del>
25	Total functional expenses. Add lines 1 through 24f	680,317.			

<u> </u>	<u>π χ</u>	Balance Sheet	(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing	9,552.	1	16,317.
	2	Savings and temporary cash investments	46,045.	2	176,715.
ĺ	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	5,534.	4	2,403.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		 5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
ŝ	7	Notes and loans receivable, net		7	
A S E T S	8	Inventories for sale or use	12,747.	8	12,097.
5	9	Prepaid expenses and deferred charges	20,234.	9	24,425.
	10 a	Land, buildings, and equipment: cost or other basis.  Complete Part VI of Schedule D  1,625,184			
1	b	Less accumulated depreciation. 10b 1,012,587		10 c	612,597.
	11	Investments – publicly traded securities .	108,241.	11	62,599.
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
ļ	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets Add lines 1 through 15 (must equal line 34)	863,163.	16	907,153.
	17	Accounts payable and accrued expenses	17,279.	17	15,901.
ļ	18	Grants payable		18	· · · · · · · · · · · · · · · · · · ·
	19	Deferred revenue	55,923.	19	62,568.
ᅵ	20	Tax-exempt bond liabilities	·	20	
Å	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
L	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	of transmission who were
Ē	23	Secured mortgages and notes payable to unrelated third parties	61,565.	23	50,496.
١	24			24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	134,767.	26	128,965.
N		Organizations that follow SFAS 117, check here ► X and complete lines			
N E		27 through 29 and lines 33 and 34.			
A	27	Unrestricted net assets	728,396.	27	778,188.
(NOEE-S	28	Temporarily restricted net assets		28	
s	29	Permanently restricted net assets		29	
R		Organizations that do not follow SFAS 117, check here ► and complete			
		lines 30 through 34.			
F UZD	30	Capital stock or trust principal, or current funds .		30	space of c
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	32	Retained earnings, endowment, accumulated income, or other funds		32	
<b>B女し女之ひせ</b> の	33	Total net assets or fund balances.	728,396.	33	778,188.
E S	34	Total liabilities and net assets/fund balances.	863,163.	34	907,153.
BA					Form <b>990</b> (2010)

BAA

Form 990 (2010)

Form 990 (2010) NEWPORT YACHT CLUB	05-0254070	70 Page	
Part XI Reconciliation of Net Assets			
Check if Schedule O contains a response to any question in this Part XI	· · · · · · · · · · · · · · · · · · ·		
1 Total revenue (must equal Part VIII, column (A), line 12)	1	727,8	334 <u>.</u>
2 Total expenses (must equal Part IX, column (A), line 25)	2	680,3	317.
3 Revenue less expenses Subtract line 2 from line 1	. 3	47,5	<u>517.</u>
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	_4	728,3	<u> 396.</u>
5 Other changes in net assets or fund balances (explain in Schedule O) .	5	2,2	275.
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	778,1	188.
Part XII Financial Statements and Reporting			
Check if Schedule O contains a response to any question in this Part XII			X
		Yes	No
1 Accounting method used to prepare the Form 990:   Cash X Accrual Other			!
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			1
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a X	
<b>b</b> Were the organization's financial statements audited by an independent accountant?		2b	Х
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	nt of the audit,	2c X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
<b>d</b> If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both.	e issued on a		
X Separate basis Consolidated basis Both consolidated and separate basis			j
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	n the Single · ·	3a	х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	e required audit	3b	
BAA		Form <b>990</b> (	(2010)

TEEA0112 12/21/10

# SCHEDULE D (Form 990)

**Supplemental Financial Statements** 

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
 ► Attach to Form 990.
 ► See separate instructions.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

NEW	PORT YACHT CLUB			05-0	254070	
Par	Organizations Maintaining Dono	r Advised Funds or Other	er Similar Fund	s or Accounts	. Complete	: If
	the organization answered 'Yes' to	o Form 990, Part IV, line	∍ 6.		•	
		(a) Donor advised	funds	(b) Funds a	nd other acco	ounts
1	Total number at end of year .	,		··· <b>`                                </b>		
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year) .					
4	Aggregate value at end of year .			_		
_	,		1		•	
5	Did the organization inform all donors and donor funds are the organization's property, subject to	or advisors in writing that the a o the organization's exclusive	assets held in donoi legal control?	r advised	Yes	☐ No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for the purpose conferring impermissible private benefits the conferring impermissible private bending in the conferring impermissible private benefits the confer	ne benefit of the donor or dono fit?	or advisor, or for any	y other	Yes	☐ No
Par	Conservation Easements. Compl	ete if the organization a	nswered 'Yes' t	o Form 990, P	art IV, line	<u>7</u>
1	Purpose(s) of conservation easements held by	the organization (check all that	at apply)			
	Preservation of land for public use (e.g., re	ecreation or education)	Preservation of	an historically imp	ortant land ar	rea
	Protection of natural habitat		Preservation of	a certified historic	structure	
	Preservation of open space		_			
2	Complete lines 2a through 2d if the organization last day of the tax year	n held a qualified conservation	n contribution in the	form of a conserv	ation easeme	ent on the
				Held at	the End of th	e Tax Year
a	Total number of conservation easements			2a		
-	Total acreage restricted by conservation easen	nents .		2b		-
	: Number of conservation easements on a certific		n (a)	2c		
			• •			
•	Number of conservation easements included in structure listed in the National Register		•	2d		
3	Number of conservation easements modified, t tax year ►	ransferred, released, extinguis	shed, or terminated	by the organizatio	n during the	
4	Number of states where property subject to con	nservation easement is located	<b>←</b> t			
5	Does the organization have a written policy regand enforcement of the conservation easemen	garding the periodic monitoring ts it holds?	j, inspection, handli	ng of violations,	Yes	☐ No
6	Staff and volunteer hours devoted to monitorin	g, inspecting, and enforcing co	onservation easeme	ents during the yea	r	
7	Amount of expenses incurred in monitoring, in:	specting, and enforcing conse	vation easements of	during the year		
	Does each conservation easement reported on	line 2(d) above satisfy the re-	nuroments of section	nn.		
8	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .				Yes	No No
9	In Part XIV, describe how the organization rep- include, if applicable, the text of the footnote to conservation easements.	o the organization's financial s	tatements that desc	cribes the organiza	tion's account	sheet, and ting for
Pa	Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical wered 'Yes' to Form 990	Treasures, or ( ), Part IV, line 8	Other Similar A	Assets.	
1 a	a If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finan-	s held for public exhibition, edu	ucation, or research	e statement and ba in furtherance of p	lance sheet w public service	vorks of , provide,
ı	b) If the organization elected, as permitted under historical treasures, or other similar assets hel following amounts relating to these items:	SFAS 116 (ASC 958), to repo d for public exhibition, educate	rt in its revenue sta on, or research in f	tement and baland urtherance of publ	ce sheet work ic service, pro	s of art, ovide the
	(i) Revenues included in Form 990, Part VIII,	line 1			<b>≻</b> \$	
	<ul><li>(i) Revenues included in Form 990, Part VIII,</li><li>(ii) Assets included in Form 990, Part X .</li></ul>				<b>►</b> \$	
2	If the organization received or held works of an amounts required to be reported under SFAS 1	rt, historical treasures, or other	r similar assets for		vide the follow	ving
	a Revenues included in Form 990, Part VIII, line		* *		<b>►</b> \$	
	Assets included in Form 990, Part X				<b>►</b> \$	

Schedule D (Form 990) 2010 NEWPORT		<del></del>	05-025	
Part III Organizations Maintaining	Collections of Art,	Historical Treasures,	or Other Similar Ass	ets (continuea)
3 Using the organization's acquisition, accutems (check all that apply):	cession, and other record	ds, check any of the followin	g that are a significant use	of its collection
a Public exhibition	d _	Loan or exchange program	S	
<b>b</b> Scholarly research	e 🔝	Other		
c Preservation for future generations				
4 Provide a description of the organization Part XIV.	·			ın
5 During the year, did the organization so assets to be sold to raise funds rather ti	licit or receive donations	of art, historical treasures, part of the organization's co	or other similar	∏Yes ∏No
Part IV Escrow and Custodial Arra 9, or reported an amount o	angements. Comple	ete if organization answ		
1 a Is the organization an agent, trustee, cu included on Form 990, Part X?	istodian, or other intermo	ediary for contributions or ot	her assets not	Yes No
<b>b</b> If 'Yes,' explain the arrangement in Par	t XIV and complete the f	ollowing table:	,	
				Amount
c Beginning balance			1c	
<b>d</b> Additions during the year .			1d	<del></del>
e Distributions during the year.		••	1 e	
f Ending balance .			<u>  1f </u>	<del></del>
2a Did the organization include an amount		ne 21?	•	Yes No
b If 'Yes,' explain the arrangement in Par		w anamanad Waal ta E	Towns 000 Down IV Line	. 10
Part V Endowment Funds. Comple	<del></del>			1
<del></del>	) Current year (b)	Prior year (c) Two years t	back (d) Three years back	(e) Four years back
1 a Beginning of year balance			*	<b>X</b> *
<b>b</b> Contributions .				*.
c Net investment earnings, gains, and losses			*	, *,
d Grants or scholarships			, , ,	4.310, 7
e Other expenditures for facilities and programs				3 * 1
f Administrative expenses			**	ļ
g End of year balance				
2 Provide the estimated percentage of the	year end balance held	as:		
a Board designated or quasi-endowment	▶ %			
<b>b</b> Permanent endowment	<b>%</b>			
c Term endowment ►	8			
3a Are there endowment funds not in the p	ossession of the organiz	ation that are held and adm	inistered for the	
organization by:				Yes No
(i) unrelated organizations	•	•	••	3a(i)
(ii) related organizations .			•	3a(ii)
<b>b</b> If 'Yes' to 3a(ıı), are the related organiz	·			30
4 Describe in Part XIV the intended uses Part VI Land, Buildings, and Equi			· · · · · · · · · · · · · · · · · · ·	
			(c) Accumulated	(d) Book value
Description of investment	(a) Cost or other (investmen		depreciation	(d) Book value
1a Land	•• •		<del>                                     </del>	
<b>b</b> Buildings		(50, 202	272 776	204 527
c Leasehold improvements	,	658,303		284,527.
<b>d</b> Equipment	••	143,752		20,870.
e Other		823,129		307,200.
Total. Add lines 1a through 1e (Column (d) n	nust equal Form 990, Pa	rt X, column (B), line 10(c)	•	612,597.
BAA			Sched	dule <b>D</b> (Form 990) 2010

Part VII	Investments-Other Securities. See F	orm 990, Part X, Iı	ne 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mar	
(1) Financ	ial derivatives			
(2) Closely	y-held equity interests			
(3) Other				
<u>(B)</u> ~				<u> </u>
(c)				
<u></u>				
<u></u>				
<u>F</u>				<del></del>
<u>(G)</u>				
(H)				
_(l)	mn (b) must equal Form 990 Part X, column (B) line 12)	<del> </del>		
	Investments—Program Related. (See		line 13)	
<u> </u>	(a) Description of investment type	(b) Book value	(c) Method of valua	tion.
		(5) 20011 12110	Cost or end-of-year mar	ket value
(1)		 		
(2)				
(3)				
(4)				<del></del>
<u>(5)</u> (6)				
(7)				<del></del> .
(8)				<del></del>
(9)				
(10)				
	mn (b) must equal Form 990, Part X, column (B) line 13)			······································
Part IX	Other Assets. (See Form 990, Part X,	line 15)		
	<b>(a)</b> De	scription		(b) Book value
(1)				· · · · · · · · · · · · · · · · · · ·
(2)				
(3)				
(4)	<u></u>			
(5)				
<u>(6)</u>		. <u></u>		
<u>(7)</u>		<del></del>		
(8)	<del></del>			
<u>(9)</u> (10)				
	olumn (b) must equal Form 990, Part X, column(B,	) line 15)		
Part X	Other Liabilities. (See Form 990, Part			
1 416 74	(a) Description of liability	(b) Amount		
(1) Fede	eral income taxes	<b>(5)</b>		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total, (Colui	mn (b) must equal Form 990, Part X, column (B) line 25)	<b>•</b>		
2. FIN 48	(ASC 740) Footnote. In Part XIV, provide the text of	of the footnote to the ore	ganization's financial statements that re	ports the

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Sche	dule <b>D</b> (Form 990) 2010 NEWPORT YACHT CLUB	05-0254070	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		<u>.</u>
2	Total expenses (Form 990, Part IX, column (A), line 25)		
3	Excess or (deficit) for the year. Subtract line 2 from line 1		
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net). Add lines 4 through 8		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	[	
Pai	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue pe	r Return	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
i	Net unrealized gains on investments 2a		
	Donated services and use of facilities . 2b		
(	Recoveries of prior year grants		
(	i Other (Describe in Part XIV)		
	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	. 3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
;	Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV.)		
	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	,	
	a Donated services and use of facilities 2a		
	Prior year adjustments		
	C Other losses	<del></del>	
	d Other (Describe in Part XIV.)		
	e Add lines 2a through 2d	. 2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	a Investments expenses not included on Form 990, Part VIII, line 7b		
	b Other (Describe in Part XIV.)		
	c Add lines 4a and 4b	4c	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
	rt XIV Supplemental Information		
Con Part any	oplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part V, line 4; Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also compadditional information.	IV, lines 1b and 2b; lete this part to provide	:
<b>-</b>			· <b>-</b>
			· <b>- -</b> -
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			. – – – –

Schedule <b>D</b>	(Form 990) 2010 NEWPORT YACHT CLUB	05-0254070	Page 5
Part XIV	(Form 990) 2010 NEWPORT YACHT CLUB  Supplemental Information (continued)		
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#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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.

Open to Public Inspection

Name of the organization Employer identification number 05-0254070 NEWPORT YACHT CLUB Pt VI-A, Line 6 THERE ARE THREE CLASSES OF MEMBERSHIP - VOTING, SPOUSAL AND JUNIOR MEMBERSHIPS. Pt\_VI-A, Line 7a VOTING MEMBERS ELECT A "NOMINATING COMMITTEE" CONSISTING OF FIVE VOTING MEMBERS. THIS COMMITTEE PUTS FORTH A SLATE OF OFFICERS AND THREE MEMBERS FOR THE STANDING COMMITTEES. AT THE OCTOBER MEETING, ALL UNCONTESTED MEMBERS ON THE SLATE BECOME OFFICERS OR COMMITTEE MEMBERS. ADDITIONALLY, FOUR "MEMBERS AT LARGE" ARE DIRECTLY ELECTED BY THE VOTING MEMBERS ATTENDING THE OCTOBER MEETING. THE BOARD OF DIRECTORS IS COMPRISED OF THE OFFICERS, \_ THE MEMBERS AT LARGE AND ONE MEMBER OF EACH STANDING COMMITTEE, \_ \_ \_ WHO HAS BEEN CHOSEN BY THE COMMODORE TO BE THE CHAIRPERSON OF THE COMMITTEE. Pt\_VI-A, Line 7b ALL DECISIONS RELATING TO THE MANAGEMENT OF THE CLUB ARE MADE BY THE BOARD OF DIRECTORS, WITH THE EXCEPTION OF THE ANNUAL BUDGET WHICH IS PREPARED BY THE BOARD AND PRESENTED FOR APPROVAL, OR MODIFICATION, TO THE VOTING MEMBERS AT THE DECEMBER MEETING, EXCEPT AS MAY BE GOVERNED BY ROBERTS RULES. Pt\_VI-A, Line 8b THERE IS CURRENTLY NO REQUIREMENT FOR DOCUMENTATION OF COMMITTEE MEEETINGS; HOWEVER, ALL COMMITTEE DECISIONS ARE BROUGHT TO THE BOARD FOR BOARD APPROVAL. Pt\_VI-B, Line 11a THE TREASURER AND MEMBERS OF THE FINANCE COMMITTEE REVIEW A DRAFT OF THE FORM 990 AND FORM 990-T FOR THEIR APPROVAL AND/OR MODIFICATION BEFORE COMPLETION AND FILING. Pt VI-C, Line 19 GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS

Schedule O	(Form 990 or 990-EZ) 2010	Page 2
Name of the org		Employer identification number
NEWPORT	YACHT CLUB	05-0254070
	ARE MADE AVAILABLE TO THE PUBLIC UPON REQ	QUEST AFTER
<b>-</b>	BOARD APPROVAL.	
Pt_XII,	Line 2c THE FINANCE COMMITTEE SELECTS AN INDEPEND	DENT_ACCOUNTANT
	AND ASSUMES REPONSIBILITY FOR OVERSIGHT O	OF ALL ACCOUNTING
	SERVICES PROVIDED.	
<b>_</b>	·	
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#### **Supporting Statement of:**

Form 990 p 9/Cost of Goods Sold

Description	Amount
PURCHASES	115,649.
COST OF LABOR	56,177.
SUPPLIES	10,834.
OTHER	3,734.
Total	186,394.

05-0254070

#### **Supporting Statement of:**

Form 990 p 12/Part XI, Line 5

Description	Amount
NET APPRECIATION OF INVESTMENTS	2,275.
Total	2,275.

#### **Supporting Statement of:**

Sch D, page 2/Other col (b)

Description	Amount
FURNITURE & FIXTURES	81,926.
MARINA	569,213.
BOATS	171,990.
Total	823,129.

#### **Supporting Statement of:**

Sch D, page 2/Other col (c)

Description	Amount	
ACCUMULATED DEPRECIATION - FURNITURE & FIXTURES	73,099.	
ACCUMULATED DEPRECIATION - MARINA	318,416.	
ACCUMULATED DEPRECIATION - BOATS	124,414.	
Total	515 929	

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

OMB No 1545-1709

Department of the Treasury Internal Revenue Service		arate appli	cation for each return.				
• If you	are filing for an A	Automatic 3-Month Extension, com	olete only P	art I and check this box			► X
	_		_	complete only Part II (on page 2 of this i	form)		ت
				tic 3-month extension on a previously file		68	
corporatio request ai Associate	on required to file in extension of time of With Certain Pe	Form 990-T), or an additional (not a ne to file any of the forms listed in P	automatic) 3 art I or Part st be sent to	a 3-month automatic extension of time to 3-month extension of time. You can electr till with the exception of Form 8870, Infor- the IRS in paper format (see instruction Charities & Nonprofits	ronically fil mation Re	e Form 88 turn for Tr	368 to ansfers
Part 1	<b>Automatic 3-</b>	Month Extension of Time. C	nly subm	nit original (no copies needed).			
-	corporations (incli	, ,		nonth extension — check this box and cor d trusts must use Form 7004 to request a		•	► [_] to file
	Name of exempt	organization	<del></del>		Employer id	lentification r	number
Type or							
print	NEWPORT	YACHT CLUB			05-025	4070	
File by the due date for	Number, street, a	and room or suite number. If a P.O. box, see in	structions				
filing your return See	110 LONG	WHARF					
instructions	City, town or pos	t office, state, and ZIP code. For a foreign addr	ess, see instru	ctions		_	
	NEWPORT				RI	02840	)
		he return that this application is for	(file a sepa	rate application for each return)			01
Applications  Is For	on		Return Code	Application Is For			Return Code
Form 990			01	Form 990-T (corporation)			07
Form 990	-BL		02	Form 1041-A			08
Form 990	-EZ		03	Form 4720			09
Form 990	-PF		04	Form 5227			10
Form 990	-T (section 401(a	) or 408(a) trust)	05	Form 6069			11
Form 990	-T (trust other tha	an above)	06	Form 8870			12
Telep If the If this check	hone No. \( \bullet (\frac{40}{20})\) organization does is for a Group Re this box . \( \bullet \] ktension is for.	. If it is for part of the group, check	FAX Noness in the ligit Group E	United States, check this box .  Exemption Number (GEN) . If  and attach a list with the names a			
unti The	extension is for t  Calendar yea  tax year begi	_, 20 <u>11</u> _, to file the exempt orgithe organization's return for r 20 <u>10</u> or rounning, 20	anization re	_	nal return		
		for Form 990-BL, 990-PF, 990-T, 47 s See instructions	20, or 6069	, enter the tentative tax, less any	3a \$		0.
pay	ments made. Incl	lude any prior year overpayment alle	owed as a c		3b \$		0.
c Bal	ance due. Subtrac	ct line 3b from line 3a Include your	payment w	ith this form, if required, by using	305		0 -

**BAA** For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 1-2011)

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.