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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

Department of the Treasury Internal Revenue Service Denema trust or private foundation)

Open to Public

		The organization may have to use a copy of this retain to satisfy state			
<u> </u>	For the	2010 calendar year, or tax year beginning $December 1$, 2010, and enc	ing Nove		0,2011
В	Check if	applicable: C Name of organization Boothbay Harbor Yacht Club		D Emplo	yer identification number
	Address	change Doing Business As		01-	0032215
10	Name ch	ange Number and street (or P.O box if mail is not delivered to street address) Room	suite		none number
	Initial ret	P.O. Box 497		(207) 633-5750
	Terminat	City or town, state or country, and ZIP + 4		1 1231	7 033 3,30
90.7	Amende	d return W. Boothbay Harbor, ME 04575-0497		G Gross	recounts \$ 4.60 440 44
\approx			1		receipts \$ 653,494
	Applicati	on portoning [-	m for affiliates? Yes X No
		Marianne Reynolds "Same as C above"			included? Yes No
₹ <u> </u>		npt status			a list (see instructions) N/A
<u>~</u> ਹ		e: ▶ www.bhyc.net	H(c) Gro	oup exempti	on number ► N/A
		organization 🔀 Corporation 🗌 Trust 🔲 Association 🗍 Other ▶ 💮 L. Year of fo	mation. 1907	M Sta	te of legal domicile ME
္ခ P	art I	Summary			
∌ 	1	Briefly describe the organization's mission or most significant activities:			
೨]	Encourage all aspects of yachting in the Boothbay	Harbor R	egion	of Maine
စ္ခ]	The state of the s			<u> </u>
Activities & Governance					***************************************
je.		Check this box ▶ ☐ If the organization discontinued its operations or disposed of more than 2	504 of its not soo		
é	2	· · · · · · · · · · · · · · · · · · ·		3	1
ಷ	3	• • • • • • • • • • • • • • • • • • • •			ļ
9	4	Number of independent voting members of the governing body (Part VI, line 1			17
<u> </u>	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)			42
Ę	6	Total number of volunteers (estimate if necessary)		. 6	100
•	7a	Total unrelated business revenue from Part VIII, column (C), line 12		. 7a	4.921
	ь	Net unrelated business taxable income from Form 990-T, line 34		. 7b	3.784
	 		Prior	Year	Current Year
	8	Contributions and grants (Part XIII-line 1h)		16 3/11	
Ē.	9	Program service revenue (Part VIII, Ijne/29)	l l	,596	15,344
Revenue	}	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		330	476, 238
é	10		1	1.139	287
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 86, 9c, 10c, and 11e)		406	158,119
	12	Total revenue—add lines 8 through 11 1 (must equal Part VIII, column (A), line 12)	659	1.471	649,988
	13	Grants and similar amounts paid (Part IX, column A), lines 1-3)			<u> </u>
	14	Benefits paid to or for members (Part IX, solumn (A), line 4)	<u></u>		
s	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	273	2.317	277,273
Se	16a	Professional fundraising fees (Part IX, column (A), line 11e)			
Expenses	b	Total Conductor of Street IV column (D) long (E)		7, 3 To 2	
ă	127	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	1 2	8/30	
	1 "				361,607
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		0,447	638,880
	19	Revenue less expenses. Subtract line 18 from line 12		9.024	11,108
Net Assets or	<u>s</u>		Beginning of	Current rea	End of Year
sets	g 20	Total assets (Part X, line 16)	1,466	5,566	1,963,237
As.	21	Total liabilities (Part X, line 26)		337	485,900
₹,	22	Net assets or fund balances. Subtract line 21 from line 20	1.466	229	1,477 337
E	art li	Signature Block	•	•	
		alties of perjury, I declare that I have examined this return, including accompanying schedules and s	tatements, and	to the best of	of my knowledge and belief, it is
tr	ue, corre	ct, and complete Declaration of preparer (other than officer) is based on all information of which pre	arer has any kn	owledge.	
_		The August of the second		12/20	//2
C:	ian	Santa de de la		Date	HON
	ign	Signature of officer		-7	•
Н	ere	SUSAN HANEY, TREASURER			
_		Type or print name and title	T5.		DTN
D	aid	Print/Type preparer's name Preparer's signature	Date		k 🗷 if PTIN
		Henry J. Hurford, Jr. They 9. Thought 1.	2/13/12	z self-e	employed P01207388
	repar	CDA		Firm's EIN	-
U	lse Oı	Firm's address P.O. Box 1, Boothbay Harbor, ME 04538		Phone no	
-	- عالم و حا	IRS discuss this return with the preparer shown above? (see instructions)	_ 		Yes No
IV	iay the	INO discuss this return with the preparer shown above. (see instructions)			24.55

) (Revenue \$

Other program services. (Describe in Schedule O.)

Total program service expenses ▶

including grants of \$

(Expenses \$

orm 990	(2010)		F	age 3
Part I	V Checklist of Required Schedules		. 1	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	\dashv	Yes	No
	complete Schedule A	1		_x_
	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		×
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		NIA
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		X
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		×
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		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
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,"			
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-	9		×
11	endowments? If "Yes," complete Schedule D, Part V	10		X
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	ارىكى 11a	4.77 /2.	- V
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	×	×
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		×
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11e		X
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		X
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		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		$+\mathbf{x}$
b	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	_	×
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		×
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		×
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		×
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	-	×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		×
20 a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	208	3	×
i	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some	201		

Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)

Part I	V 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		×
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? If "Yes," complete Schedule J	00		
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 25	23 24a		<u>×</u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		X N/A
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		NA
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		N/A
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		<i>x</i>
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		×
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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		×
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		×
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
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		×
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		×
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		×
35 a	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		×
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		NI
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,			
38	Part VI	37	1	×
	19? Note. All Form 990 filers are required to complete Schedule O	38		30 (2010

Part	V Statements Regarding Other IRS Filings and Tax Compliance		F	age 5
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	13. Y.F	***	
b	Enter the number of Forms M. OC included in line to Enter O if not applicable		د ^م يد د	* *,
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	1 4 4 4 1 1 2 2 1	7-1	2.0
_	reportable gaming (gambling) winnings to prize winners?	1c	[-3- 1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	5		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a		allera Marie	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	COAPAGE • • • • • • • • • • • • • • • • • • •	. 1
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	75 75		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	, X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	×	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		_	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		×
b	If "Yes," enter the name of the foreign country: ▶	1		
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	75.7 7		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		N
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?	6a		×
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	<u> </u>	N
7	Organizations that may receive deductible contributions under section 170(c).		5,,	
а		2	1.3	
	and services provided to the payor?	7a		M
b	, , , , , , , , , , , , , , , , , , , ,	7b	<u> </u>	M
С				
	required to file Form 8282?	7c	ļ	\ N/
đ		- t =	, ^	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	-	M
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f	 	<u></u> M
g	en e	7g	 	H
h		7h	 	_ <u>~</u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		, ` .	1.
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		·	٠. ا
_	organization, have excess business holdings at any time during the year?	8	+	~
9	Sponsoring organizations maintaining donor advised funds.	90	بد ۲٫۰۰۰	1
a		9a	+	~/
b		9b	+	M
10	Section 501(c)(7) organizations. Enter:	3		.1 :

	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		.,
b	If "Yes" enter the name of the foreign country:	4 d	^	_ <u>X</u>
	See instructions for filling requirements for Form 1D F 90-22.1, Report of Foreign Bank and Financial Accounts.	1 42 - 3 - 42 - 32 -		
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 _
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		_N/A
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?	6a		X_
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or	.		
	gifts were not tax deductible?	6b		NIA
7	Organizations that may receive deductible contributions under section 170(c).	3. 7.	5,00	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		7.4	`_*
	and services provided to the payor?	7a		_N/A
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		_N/A
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1_		
	required to file Form 8282?	7c		N/A
d	If "Yes," indicate the number of Forms 8282 filed during the year		,	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		_N/A
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		_N/A
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		HIA
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		N/A
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		`.	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization have excess business holdings at any time during the year?	8	المد المد	
•	organization, have excess business holdings at any time during the year?	2 (14)	 	NIA
9	Did the organization make any taxable distributions under section 4966?	9a	ید ۲۰۰۰	NIA
a	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		NIA
10	Section 501(c)(7) organizations. Enter:	100	<u> </u>	~//
a	Initiation fees and capital contributions included on Part VIII, line 12		2	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b 32.550			S
11	Section 501(c)(12) organizations. Enter:	- <u>23.</u>		
''a	Gross income from members or shareholders	4-2.5	1 - 1	` '
b	Gross income from other sources (Do not net amounts due or paid to other sources			
-	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		NIA
b	and the same of th	1 (T)	1 2	1.
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	77.19		
a	Letter was the English of the server gualified health plane in more than one state?	13a	1	N/A
_	Note. See the instructions for additional information the organization must report on Schedule O.	10 A		
b	Enter the amount of reserves the organization is required to maintain by the states in which	3.7		2
	the organization is licensed to issue qualified health plans			<u>'</u>
С	Enter the amount of reserves on hand		1 -	1.
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14	3	×
t	which is the second to the second three payments? If "No " provide an explanation in Schedule ()	14		NIA
		F	orm 99	0 (2010)

Form 99	·			age 6
Part \				
	"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change	ıs in S	Sche	dule
	O. See instructions. Check if Schedule O contains a response to any question in this Part VI			×
Section	on 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	<u> </u>		·
b	Enter the number of voting members included in line 1a, above, who are independent . 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	درت معتشر		Ţ.
_	any other officer, director, trustee, or key employee?	2	\longrightarrow	_X_
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		_ x _
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X_
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		_X_
6	Does the organization have members or stockholders?	6	_X	
7a	of the governing body?	7a		
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	×	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		^	2 -
	the year by the following:		ار کار در میرونید	
а	The governing body?	8a	×	
b	Each committee with authority to act on behalf of the governing body?	8b	_X_	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		, ,	
Cooti	ion B. Policies (This Section B requests information about policies not required by the Internal Reven	9 Co	ode)	<u> </u>
Secti	on B. Policies (This Section B requests information about policies het required by the informational		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		×
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	ļ	NIA
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		×
b		2 6.	, - Cula	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		×
b	nse to conflicts?	12b		NIA
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done.	12c		NA
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14	<u> </u>	_x_
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		7.	
	The state of the s	15a		
a b		15b	+	NIA
J	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a	 	_X_
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its	- W	3/4/3/2	
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		1
Soot	tion C. Disclosure	100	1	N/A
17	7 000° II I CILI			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(for public inspection. Indicate how you make these available. Check all that apply.	3)s on	ıly) av	allable
	□ Own website □ Another's website ▼ Upon request	_		
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict and financial statements available to the public.			policy,
20	State the name, physical address, and telephone number of the person who possesses the books and record			
	organization: DONNA BREWER WESTERN AVE, BOOTHBAY HARBOR, MAINE (201) 633-			

Form	ggn	(2010)	

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- 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

(A)	(B)			(0	•			- (D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	Individual tn or director	o Institutional trustee	Officer	Key employee	Mighest compensated at employee	Former	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) Marianne Reynolds										
Commodore	5	X		X	<u> </u>		<u> </u>	-0	-0-	<u>-0-</u>
(2) Neil Newton						,			_	_
Vice Commodore	5	X		X	_		ļ	-0-	-0-	-0-
(3) Robert McCann										•
Rear Commodore	5	Х		X	L.			-0-	-0-	-0-
(4) Betsie Permut					l	1	1	_		_
Secretary	5	X		X	$oxed{igspace}$		<u> </u>	-0-	-0-	-0-
(5) Susan Haney										
Treasurer	5	X	<u> </u>	X		<u> </u>	<u> </u>	-0-	-0-	-0-
(6) Charles Koch			1					_	_	_
Director	5	X	<u> </u>	<u> </u>	<u> </u>	ļ	_	-0-	-0-	-0-
(7) Dawn Lieb					1					
Director	5	X	$oldsymbol{ol}}}}}}}}}}}}}}}}}}$		ļ	1	1	-0-	-0-	-0-
(8) Karen Bartholomew		-		1					_	_
Director	5	X	_	_	1	↓	<u> </u>	-0-	-0-	-0-
(9) Margaret Reiser					1		1			
Director	5	X	ļ	↓_	1_	↓	1	-0-	-0-	-0-
(10) Eric Hakanson		-					1	_		_
Director	5	X	↓_	↓_	_	1	1_	-0-	-0-	-0-
(11) Howard Henniger					1				1	
Director	5	X	1_	\perp	\perp	<u> </u>	\perp	-0-	-0-	-0-
(12) James Newstead				1	1	1	1			
Director	5	X	1_	\perp	\perp	\bot	1	-0-	0	-0-
(13) Emily Whiting			١					1		1
Director	5	X	\perp	\perp	\perp		1_	-0-	-0-	-0-
(14) Carol Matwiczyk								1	_	_
Director	5	X	1	_	\perp		\perp	-0-	-0-	-0-
(15) Bill Hunt		1		1	1	1				
Director	5	<u> </u>	\perp		\perp		_	0-	-0-	-0-
(16) Peter Gardiner				1	1			1		
Director	5	X			\perp			-0-	_0-	-0- Form 990

Part '	Section A. Officers, Directors, Trus	tees, Key I	Emplo	yee	es, a	and	Highe	est (Compensated	Employees (c	ontinued	1)	
	(A)	(B)				C)			(D)	(E)		(F)	
	Name and title	Average	Positi	on (d	chec	k all 1	hat app	oly)	Reportable	Reportable		Estimated	
		hours per	악크	ᆿ	Q	×	욕포	Ţ	compensation	compensation fr	rom	amount of	
		week (describe	Individual trustee or director	stit	Officer	Key employee	글을	Former	from the	related organizations	. .	other	_
		hours for	90	胨	=	≝	oye st	₫	organization	(W-2/1099-MIS		compensation from the	n
		related	악음	na]	ğ	P & &		(W-2/1099-MISC)	(** 2 *********************************	~	organization	1
		organizations	เรา	5	İ	8	듛		,			and related	
		in Schedule	8	Institutional trustee			Highest compensated employee					organization	s
		O)		ð			l ted						
(17) C	ros Chos				-	-		_	 				
	reg Shea	-	77		1]				_	1	^	
	irector	5	X						-0-	-0-		0-	
(18)													
(40)				! —	-	<u> </u>							
(19)				}									
				<u> </u>	<u> </u>								
(20)]							
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(21)			<u> </u>	†	T	\vdash							
37.32											ļ		
(22)				├	┼	-	 	-					
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(23)			ŀ	1									
						<u> </u>							
(24)													
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(25)		 		+-	+	+		\vdash		<u> </u>			
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(26)		1	İ		1	ì							
		L	<u> </u>	<u> </u>	<u>i</u>		1						
(27)													
		1	1		1						-		
(28)			\top	t	1	╅				 			
120,		1			ŀ								
	Cub total	1	Ц	<u> </u>		ــــــ	l	<u> </u>	 	-0-		-0-	
1b	Sub-total		٠	-	-	•			-0-	-0-			
С	Total from continuation sheets to Part	VII, Section	on A							ļ			
d	Total (add lines 1b and 1c)							>	-0-	-0-		-0-	
2	Total number of individuals (including bu	t not limite	d to th	nos	e lıs	ted	abov	e) w	vho received m	ore than \$10	0.000 in		
	reportable compensation from the organ							-,		• • • • • • • • • • • • • • • • • • • •	-,		
												Yes	No
3	Did the organization list any former of	fficar dira	ctor (~r +	nict	.00	kov	amı	ployee or high	hoet compon	botca		110
3	employee on line 1a? If "Yes," complete										l l		- =
	• •										1	3	×
4	For any individual listed on line 1a, is th	e sum of re	eporta	ıble	COI	mpe	ensati	on a	and other com	pensation fro	m the		
	organization and related organizations	greater th	nan \$	150	00,0	0?	If "Ye	es,"	complete Sc	hedule J for	such	الأعلامية	300
	ındıvıdual											4	
5	Did any person listed on line 1a receive		omne	ensa	atioi	n fro	m an	v ui	nrelated organ	zation or indi	vidual		
3	for services rendered to the organization	2 If "Vec "	comp	lote	Sc	her	lule .l	for	such nerson			5 5	
		,	στηρ		, 00	., 100		, .,	Julia pordori		<u> </u>	<u> </u>	×
Section	on B. Independent Contractors										A + A A		
1	Complete this table for your five highest	compensa	ited in	dep	oen	den	t cont	rac	tors that receiv	ed more than	1 \$100,0	00 of	
	compensation from the organization.												
	(A)								(B)			(C)	
	Name and business ad	dress							Description of	services	Co	mpensation	
								╁					
	NONE							+					
								+		+			
								\bot					
								$oldsymbol{\perp}$					
				_									
2	Total number of independent contract	ors (includ	ling b	out	not	lin	nted	to	those listed a	bove) who			.*
-	received more than \$100,000 in compe	nsation from	n the	ora	anız	atio	n▶		0-	ŀ		3	
	. Course more man wronger in compe							-	<u> </u>		•	Form 99	20 (201

Part	VIII	Statement of Reve	enue				·····	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u>v</u> v	1a	Federated campaigns	1a	C3 875 2 X X X X X X X X X X X X X X X X X X				Si Sing Constitution
Contributions, gifts, grants and other similar amounts	ь		1b					
ω. E	C	Fundraising events .	1c	-				
or a	d	Related organizations						
s, g mila	e	Government grants (conti						
r si	f	All other contributions, gif	ts, grants,					
the the		and similar amounts not incl	uded above 1f	15,344				
Contributions, and other simi	g	Noncash contributions include	ed in lines 1a-1f \$					
<u></u>	h	Total. Add lines 1a-1f	· · · · · ·	>	15,344			The property of the second
ē				Business Code			Person.	ku Marija Bilika da karantar kananda da karantar kananda karantar kananda karantar kananda kananda kananda kar Lakatar karantar karantar kananda karantar kananda kananda kananda kananda kananda kananda kananda kananda kan
Ven	2a	MEMBERS AVES I	ASSESSMENTS	713990	343,830	343,830		
<u>~</u>	b	WATERFRONT ACT	IVITIES	7/3990	59,/28	59,128		
<u>Ğ</u> .	С	SAILING PROGRE	9/05	611600	52,572	52,572		
Ş	d	TENNIS PRAGRE	AMS	611600	20,708	20,708		
ram	e							
Program Service Revenue	f	All other program serv						
_	g	Total. Add lines 2a-2f			476,238	ASSESSMENT OF THE PARTY OF THE	2 THE TOPE BY THE	7
	3	and other similar amo		terius, interest,	100		207	
		Income from investment	-	ond proceeds	387		287	
	5	Royalties	tortax-exempt t	ond proceeds				
	3	noyalles	(i) Real	(ii) Personal	SERVINE AND	w10262772		1. 34 03 1 3 4 5
	6a	Gross Rents	8.140	<u> </u>				
	b	Less: rental expenses	3,506					
	C	Rental income or (loss)						
	d	Net rental income or (•	4.634		4.634	
	7a		(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less cost or other basis						
	1	and sales expenses .						
	С	Gain or (loss)					a productive state of the	
	d	Net gain or (loss) .		<u> ▶</u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A THE STATE OF THE	3 Sept. 2012 100	
60	1							
nZe	8a		undraising					
9.0		events (not including \$						
Ě		of contributions reported See Part IV, line 18 .	ea on line 1c).					
Other Reve				b				
ō	b							alta tataata tara ee ahaa
	9a						1.20	
	30			a				
	ь		s	b				
		N		ctivities				
		Gross sales of I						经第225年。
		returns and allowand		a				Company of the compan
) t			b				
		Net income or (loss)	from sales of it				3 9 2 2 9 2	- 122 20 0 13
		Miscellaneous	Revenue	Business Code	- Salar Sala			
	11a	A DINING ROOM	1 BAR SALE	5 722100	153,485			153,485
	1		EAULEO					
	•	c		-		 	 	-
	1 •	d All other revenue					22 1 45 L 1 5 L 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	\$ 1.00 P. T.
	1	e Total. Add lines 11a			153,485		# # # # # # # # # # # # # # # # # # #	153 485
	12	Total revenue. See	instructions.	<u> </u>	649,981	8 476,238	4,931	Form 990 (201

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).

	not include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
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 5	Benefits paid to or for members 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 8	Other salaries and wages	<u> </u>			
9	Other employee benefits	7,678			
10	Payroll taxes	28,175	-		
11	Fees for services (non-employees):	i			
a	Management			-	-
b	Legal	1.40-			
C	Accounting	3,680			
d e	Professional fundraising services. See Part IV, line 17			Sales Carrier	
f	Investment management fees		11-342-1502 C- C- 76-76	1	
g g	Other	a,414			
12	Advertising and promotion	2.597			
13	Office expenses	14.096			
14	Information technology	•			
15	Royalties				
16	Occupancy	107,509		ļ	
17	Travel	2,732			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest	15,215		 	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	83,931			
23	Insurance	20,472	7 10 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· 1000000000000000000000000000000000000	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If				
	line 24f amount exceeds 10% of line 25, column				
	(A) amount, list line 24f expenses on Schedule O.)				
а	FOOD 1 HOUGE	75,688			
b		26,715			
c		6,062			
d	RECAULTMENT	1,359			
e	STATE INCOME TAX	/37	-		
f	All other expenses	1.2.2.2			
25	Total functional expenses. Add lines 1 through 24f	638,880		+	
26	Joint costs. Check here ▶☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				Form 990 (201

		(A)		(B)
		Beginning of year		End of year
1	Cash—non-interest-bearing		1	
2	Savings and temporary cash investments	436,846	2	281851
3	Pledges and grants receivable, net	•	3	<u> </u>
4	Accounts receivable, net	11,819	4	16,240
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II of			
	Schedule L	W. (Chr.) D. W. (Ch.)	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)		Tafe.	
_			6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use	13,194	8	13,129
9	Prepaid expenses and deferred charges	565	9	797
10a				
۱.			10c	
11		997,988	11	1,651,220
12	Investments—publicly traded securities		12	
13	Investments—program-related. See Part IV, line 11		13	
14	Intangible assets		14	†
15	Other assets. See Part IV, line 11	6,160	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	1.466.566	16	10/2 127
17	Accounts payable and accrued expenses	337	17	1,963,237
18	Grants payable	1.00	18	1,123
19	Deferred revenue		19	1.766
20	Tax-exempt bond liabilities		20	
	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
22	Payables to current and former officers, directors, trustees, key			
21 22	employees, highest compensated employees, and disqualified persons.			
	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	480,000
24	Unsecured notes and loans payable to unrelated third parties		24	,
25	Other liabilities. Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	3.37	26	485,900
	Organizations that follow SFAS 117, check here ▶ 🔀 and complete			
	lines 27 through 29, and lines 33 and 34.		3	
27	Unrestricted net assets	1,466,229	27	1,477,337
28	Temporanly restricted net assets		28	
29	Permanently restricted net assets	and the second second second second	29	1 2 3 2 2 3 3 4 2 E
:	Organizations that do not follow SFAS 117, check here ▶ ☐ and			整色被饮
27 28 29 30 31 32 33	complete lines 30 through 34.			and with the second second
30			30	
31	Paid-in or capital surplus, or land, building, or equipment fund		32	
32		****	33	
33 3	Total net assets or fund balances	1,466,229		1,477,33

Part							
	Check if Schedule O contains a response to any question in this Part XI	•	· · · ·	<u>·</u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	64	9,98	8		
2	2 Total expenses (must equal Part IX, column (A), line 25)				638 880		
3	Revenue less expenses. Subtract line 2 from line 1	3		1.10			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1.466				
5	Other changes in net assets or fund balances (explain in Schedule O)	5		4			
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	1.477	7 33	7		
Part	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash Accrual Other		2°	-	-		
	If the organization changed its method of accounting from a prior year or checked "Other," exp Schedule O.	laın ı	n is		= ²		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		. 2a	Y	•		
b	Were the organization's financial statements audited by an independent accountant?		. 2b		×		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over						
	of the audit, review, or compilation of its financial statements and selection of an independent account	tant?	? 2c	v			
	If the organization changed either its oversight process or selection process during the tax year, exp	lain i	n 🔀	~ ^			
	Schedule O.						
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the yea	r wer	e 🚉				
	issued on a separate basis, consolidated basis, or both:		والكراكية المستراكية				
	Separate basis Consolidated basis Both consolidated and separate basis		12,23	12 12 1 2 1 1 1 1			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set f	orth i	ın 📑				
	the Single Audit Act and OMB Circular A-133?		. 3a		×		
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not under		ie	T			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	dits	3b		NIA		
			For	m 99 0	(2010)		

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

			HARBOR YACHT CLUE		01-0032215		
Par	t I	Organizations Maintaining Dono			ds or Accounts. Complete if the		
		organization answered "Yes" to F	orm 990, Part IV, line 6.	NA			
			(a) Donor advised		(b) Funds and other accounts		
1	Total i	number at end of year					
2	Aggre	gate contributions to (during year).					
3	Aggre	gate grants from (during year)					
4		gate value at end of year					
5		e organization inform all donors and	donor advisors in writing	that the assets he	eld in donor advised		
	funds	are the organization's property, subje-	ct to the organization's ex	clusive legal contro	ol? 🗌 Yes 🗌 No		
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used						
		or charitable purposes and not for the					
			<u> </u>				
Par		Conservation Easements. Comp	olete if the organization	answered "Yes"	to Form 990, Part IV, line 7, .up		
1		se(s) of conservation easements held			N/A		
•	-	eservation of land for public use (e.g.,			f an historically important land area		
	_	otection of natural habitat	recreation of education)		f a certified historic structure		
	_	eservation of open space		reservation of	a certified historic structure		
2		eservation of open space lete lines 2a through 2d if the organiza	ation hold a qualified cons	enzation contributio	on in the form of a consequation		
2		nent on the last day of the tax year.	ation nelo a qualified cons	er valion continuite	of the form of a conservation		
	cascii	tent on the last day of the tax year.			Held at the End of the Tax Year		
_	T-4-1				9 3 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
a							
b		acreage restricted by conservation ea					
C		er of conservation easements on a ce					
d		er of conservation easements included in the structure listed in the National Regis			i i		
_					··· 2d		
3			a, transferred, released, e	extinguisned, or terr	minated by the organization during the		
	tax ye						
4		per of states where property subject to					
5		the organization have a written po			· -		
		ons, and enforcement of the conserva					
6	Staff	and volunteer hours devoted to monit	oring, inspecting, and enfo	orcing conservation	easements during the year		
	▶						
7		int of expenses incurred in monitoring	, inspecting, and enforcing	g conservation ease	ements during the year		
	▶\$				4704 (4)(7)		
8		each conservation easement reported					
		() () ()					
9	In Pa	rt XIV, describe how the organization i	reports conservation ease	ments in its revenue	e and expense statement, and		
				ne organization's fir	nancial statements that describes the		
		ization's accounting for conservation					
Par	t III	Organizations Maintaining Coll					
		Complete if the organization ansi					
1a	If the	organization elected, as permitted un	nder SFAS 116 (ASC 958)	, not to report in its	s revenue statement and balance shee		
	work	s of art, historical treasures, or other	r similar assets held for p	oublic exhibition, e	ducation, or research in furtherance of		
		c service, provide, in Part XIV, the text					
b	if the	organization elected, as permitted in	under SFAS 116 (ASC 95	58), to report in its	revenue statement and balance shee		
					ducation, or research in furtherance of		
	•	c service, provide the following amoui	_				
	(i) R	evenues included in Form 990, Part VI	III, line 1		> \$		
	(ii) A	ssets included in Form 990, Part X .			• \$		
2	If the	e organization received or held work	s of art, historical treasu	res, or other simila	ar assets for financial gain, provide th		
_	follo	wing amounts required to be reported	under SFAS 116 (ASC 95	8) relating to these	items:		
а					> \$		
a L		ets included in Form 990. Part X			> \$		

Part								
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):							
а	Public exhibition	d [Loan or exchang					
b	☐ Scholarly research	e [Other					
C	Preservation for future generations							
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.							
5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar							
	assets to be sold to raise funds rather than to be maintained as part of the organization's collection?							
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.								
1a	Is the organization an agent, trustee, cus included on Form 990, Part X?					ot ☐ Yes ☐ No		
b	If "Yes," explain the arrangement in Part X	IV and complete the fol	lowing table:					
					Α	mount		
С				1c	 			
d	Additions during the year			1d				
е	Distributions during the year			1e				
f	Ending balance			1f				
2a	Did the organization include an amount or	n Form 990, Part X, line	21?			☐ Yes ☐ No		
	If "Yes," explain the arrangement in Part X				<u></u>			
Par	Endowment Funds. Complete			orm 99	0, Part IV, line	e 10. N/A		
	(8) Current year (b) Pno	r year (c) Two year	s back (d) Three years bac			
1a	Beginning of year balance			5	發展的學學學	-4, 5, 5, 5		
b	Contributions			7.				
С	Net investment earnings, gains, and losses			2000				
d	Grants or scholarships			ىقر	\$-\$\dagger\;			
е	Other expenditures for facilities and			7, 2.				
	programs			7				
f	Administrative expenses			2.		ar de la companya de		
g	End of year balance			3	最高分级表示	5 3-37-41 1 - A		
2	Provide the estimated percentage of the	ear end balance held a	S:					
а	Board designated or quasi-endowment							
b	_	%						
c	Term endowment ▶%							
3a	Are there endowment funds not in the po	ossession of the organi	zation that are held	and adn	ninistered for t	he		
	organization by:					Yes No		
	(i) unrelated organizations					. 3a(i)		
	(ii) related organizations					. 3a(ii)		
b	If "Yes" to 3a(ii), are the related organization	ions listed as required o	on Schedule R? .			. 3b		
4	Describe in Part XIV the intended uses of	the organization's ende	owment funds.					
Par	t VI Land, Buildings, and Equipme	ent. See Form 990, P	art X, line 10.					
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	de	ccumulated preciation	(d) Book value		
1a	Land	38/62	763,143	海逐渐	學的學學	801,305		
b	Buildings	25,408	1,208,035	<u> </u>	512,090	721,353		
С	Leasehold improvements			ļ	-			
d	Equipment		469,304		358,924	110,380		
е	Other	2,956	219,470	و	004, 244	18,182		
Tota	I. Add lines 1a through 1e. (Column (d) mus	t equal Form 990, Part	X, column (B), line 1	0(c).) .	▶	1,651,880		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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Employer identification number

OMB No 1545-0047

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

90-EZ or to provide any additional information.

Open to Public

Attach to Form 990 or 990-EZ.

Inspection

BOOTHBAY HARBOR YACHT CLUB 01-0032215 Part VI, Line 6 - The organization is a membership organization. Part VI, Line 7a - The membership elects the governing body. Part VI. Line 7b -Members dues and assessments are approved by the membership. Part.VI, Line.11b.-....The.completed.Form.990.is-reviewed-by-the-organization's----treasurer prior to filing. Other officers and board members review the Form 990, after it is filed, at the next scheduled meeting of the board. Any comments or suggestions are brought to the attention of the preparer. Part VI, Line 19 -No governing documents or financial statements are made available to the general public. Part VIII, Line 11a - The organization operates a dining room and bar for its -----members and their guests, public use is restricted. The dining room and bar do not operate at a profit nor is the -activity-engaged-in-for-profit:----