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Form **990**

Department of the Treasury Internal Revenue Service

OMB No 1545-0047 2014

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Rublic -

A	Fo	or the	2014 calen	dar y	ear, or ta	x year begir	nning			, 20	14, and	endin	ıg			,	
В	Ch	eck if a	oplicable	C N	Name of orga	nization NEV	VPORT	'YACH'	r CLUE	3				D Emplo	yer iden	tification number	
	Γ	Addre	ess change		Doing busine:			-						05-	0254	1070	
	Γ	Name	a change	<u> </u>	lumber and	street (or PO bo	x if mail is	not delivere	d to street a	ddress)		Room/	suite	E Teleph	one num	nber	-
	ſ	Initial	return	1110) LONG	WHARF								(40	1) 8	346-9410	
	T	Final	eturn/terminated			state or province,	country,	and ZIP or fo	reign postal	code							
	ı	-	nded return	NEW	VPORT					R	T 02	840		G Gross	ecelots	\$1,205,9	76
	上	-	cation pending			idress of principal	officer					0 10	H(a) Is this a	a group return	_		es X No
	_			STEWA	RT I ARRA	MSON 110 L	ONG I	HARF I	NEWPOR	·T	RI 02	840	H(b) Are all	subordinates attach a fist	ınclude		es No
<u> </u>	-	Tax-ex	empt status		501(c)(3)		7) ◀ (inser	1	4947(a)(1		527	If No,'	attach a fist	see inst	ructions)	_
<u>.</u>						TYACHTCL		<u> </u>		1 + 7 + 7 (0)(1)	, . ,	J 2.	H(c) Group	exemption nu	mber l	•	
K			organization		Corporation	Trust	Associ		Other >		L Year o	f formati					RI
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<u> </u>	~				organiza	ation's mission	n or mo	st signific	ant activi	ties	NEWDO	ЭРТ	VACUT.	CT IIP T	S 7	MEMBER	
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LUIJ & Governance	<u> </u>					IES WITH									<u>-</u>		
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ک کو						organization	n discor	ntinued its	operatio	ns or dispo	sed of i	more t	– – – – han 25% c	of its net a	 ssets.		
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୍ଧ	3					ng members									4	_	20
K II 30 Activities						employed in o									5		44
						estimate if ne									6	ļ	100
	1					enue from Pa									7a	6	<u> 3,596.</u>
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劉 g	ı				- '	art VIII, line 1	•							11,6			3,604.
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	1					lumn (A), line					72			476,3	374.	46	3,869.
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ets or	8							[69]	,			· ·	Beginniı	ng of Curre	nt Year	End of	Year
36 ts	[2	20 T	otal assets (Part 2	X, line 16))		1	i coint	1.1. 185	T	\.	. 1	1,452,0	060.	1,48	3,703.
t Ass	2	21 T	otal liabilities	s (Par	t X, line 2	26)		1	jgidi	3111	<u> </u>	₹		664,3	379.	60	8,517.
ž.	2	22 N	et assets or	fund	balances	. Subtract line	e 21 fro	m line 20					.	787,6	581.	87	75,186.
P	äft	訓羅	Signatu	re Bl	lock					•				•			
Und	der p	enalties	of perjury, I dec	clare the	at I have exa	unined this return,	, including	accompany	ing schedule	s and statem	ents, and t	to the be	st of my know	ledge and be	lief, it is	true, correct, and	
con	nplet	e Deda	ration of prepar	er (other	e tran office	r) is based on all	Informatio	on of which p	reparer has	any knowledg	e 						
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		arer	Firm's name	• '	CALI	RI MANCI	NI &	BARBI	ERI,	PC							
Us	se	Only	Firm's addre	ess	1 Wo	rthingto	n Rd							Firm's EIN	26	<u>-2227576</u>	
					Crans	ston				RI 02	920			Phone no	(40		
Ma	y t	he IRS	discuss thi	s retu	ırn with th	e preparer st	nown al	bove? (se	e instruct							X Yes	No
BA	λĀ	For P	aperwork F	Reduc	tion Act	Notice, see	the sep	parate ins	struction	s.		TE	EA0101 05/2	28/14		Form 9	990, (2014)

Form	990 (2014) NEWPORT YACHT CLUB	05-0254070	Page 2
Par			
	Check if Schedule O contains a response or note to any line in this Part III		<u></u>
1	Briefly describe the organization's mission:		
	NEWPORT YACHT CLUB IS A MEMBER		
	ORGANIZATION THAT PROVIDES ITS MEMBERS VARIOUS SERVICES RELATED	<u>. TO</u>	_ _
	See Form 990, Page 2, Part III, Line 1 (continued)		
	Did the assessment of details and small and the same of the same o		
2	Did the organization undertake any significant program services during the year which were not listed on the Form 990 or 990-EZ?	·	No
	If 'Yes,' describe these new services on Schedule O.	Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	es? Yes	X No
•	If 'Yes,' describe these changes on Schedule O.	I les	X No
4	Describe the organization's program service accomplishments for each of its three largest program services	as measured by expense	s.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	others, the total expenses	
	and revenue, if any, for each program service reported.		
	/Code: \/Fireness C	/D A	
4 a	· · · · · · · · · · · · · · · · · · ·	(Revenue \$)
	FLOAT & DOCK COMMITTEE: FLOAT & DOCK MAINTENANCE FOR MEMBERS A	ND AISTAING	
	YACHTSMEN.		
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
		·	
4 b	(Code:) (Expenses \$ including grants of \$)	(Revenue \$	)
	HOUSE COMMITTEE: MAINTENANCE & UPKEEP OF CLUBHOUSE FACILITIES	FOR USE BY	
	MEMBERS AND VISITING YACHTSMEN.		
		· <b></b>	
		<b></b>	
			<b></b> -
			<b></b>
			<del>-</del>
4.	(Code: ) (Expenses \$ including grants of \$ )	(Revenue \$	١
	JUNIOR ACTIVITIES: SAIL TRAINING AND ACTIVITIES FOR YOUTH.	(I tevenue 4	′
	DONION ACTIVITIES. DATE INSTANTING AND ACTIVITIES FOR TOUTH.		
			<b></b>
		·	
	•		
		- <b></b>	
4 d	Other program services. (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue	\$	)
4 0	· Total program service expenses   ▶		

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Form 990 (2014) NEWPORT YACHT CLUB 05-0254070 Page 3 Partition Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete X Χ Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . . . . . 2 Х 3 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III . . . . . . . Х 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Х 6 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' Х 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation Х 10 Х 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. a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule 11 a X 11 b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total Х 11 c 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 X 11 d X e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X. . . . 11 e 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 . . . . . X 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII. . . 12a Х b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and Х if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional . . . . . . . . . 12 b Χ Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. . . . . . 13 Х 14a Did the organization maintain an office, employees, or agents outside of the United States?......... b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, Х 14b Х 15 Х 16 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 17 Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Х 18

Х Х

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'

b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . . . . . . . . .

Form 990 (2014) NEWPORT YACHT CLUB

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Part IV:	Checklist	of Required	Schedules	(continued)

	•		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
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		х
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, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		х
	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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
!	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		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?  If 'Yes', complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		х
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 LANGE	1
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	-	X
	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		Х
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		Х
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, Part II, III, or IV, and Part V, line 1	34		х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If Yes, complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Note. All Form 990 filers are required to complete Schedule O	38	Х	
BA/		Form	990 (	2014)

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Part V Statements Regarding Other IRS Filings and Tax Compliance	0		age :
. Check if Schedule O contains a response or note to any line in this Part V			. Г
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	J		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		<u> </u>
2 a 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 2 a 4.4	, —		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	†
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			<u> </u>
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	X	<u> </u>
b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b	Х	
<ul> <li>4 a 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)?</li> <li>b If 'Yes,' enter the name of the foreign country: ►</li> </ul>	4 a		х
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR)	1		
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		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 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).	1		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7.0		Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 a		<u>  ^</u>
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	''	┼	┼
Form 8282?	7 c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year	┷		L
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e	<u> </u>	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h	:	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
organization have excess business holdings at any time during the year?	8		ļ
9 Sponsoring organizations maintaining donor advised funds.	<b> </b>		ļ
a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		<u> </u>
10 Section 501(c)(7) organizations. Enter			İ
a Initiation fees and capital contributions included on Part VIII, line 12	4		1
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 59, 131.	4		
11 Section 501(c)(12) organizations. Enter		-	
a Gross income from members or shareholders	4		
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		<u> </u>
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	4	l	1
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	<b> </b>		<u> </u>
a is the organization licensed to issue qualified health plans in more than one state?	13 a		<del>                                     </del>
Note. See the instructions for additional information the organization must report on Schedule O.	1		
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	1		
c Enter the amount of reserves on hand	1	<u> </u>	<b> </b>
14a Did the organization receive any payments for indoor tanning services during the tax year?	14 a	<u> </u>	X
O DETENDING THE CONTROL OF THE PROPERTY OF THE	1745		•

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Pai	<ul> <li>Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.</li> </ul>	v, an	d for	
	Check if Schedule O contains a response or note to any line in this Part VI			. X
Sec	tion A. Governing Body and Management	_		
		ŀ	Yes	No
1 6	Enter the number of voting members of the governing body at the end of the tax year			
ı	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 any other			
_	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents	$\neg$		
	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	Did the organization have members or stockholders?	6	X	
7 :	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more	-		<del></del>
	members of the governing body?	7 a	х	1
	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7ь	х	1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
í	The governing body?	8 a	Х	
	Each committee with authority to act on behalf of the governing body?	8 b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			<del></del>
_	organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue	ue C	ode.)	
			Yes	No
10 a	Did the organization have local chapters, branches, or affiliates?	10 a		X
	If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b		<u> </u>
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11 a		X
ı	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a		X
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b		
(	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done.	12 c		
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14		Х
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?			
	The organization's CEO, Executive Director, or top management official	15a		X
	Other officers or key employees of the organization	15b		X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).			
16:	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	- 1		
	taxable entity during the year?	16a		X
	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		<u> </u>
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) at for public inspection. Indicate how you made these available. Check all that apply.  Own website  I Another's website  I Upon request  Other (explain in Schedule O)		le	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year	to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	JOHN ELLIS 110 LONG WHARF NEWPORT RI 02840 (40	1) 8	346-9	9410

Form	990	(2014)	NEWPORT	VACHT	CLUB
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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 related organization compensated any current officer, director, or trustee.											
(C)											
(A) Name and Title	(B) Average hours per	than	one i both dire	box, u an oi ector/	inless fficer : truste		n	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	week (list any nours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Kcy employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
(1) LEE PARKS REGATTA CHAIR - start OCT.	5.00	X						0.	0.	0.	
(2) JOY HADLEY REGATTA CHAIR - thru SEPT.	5.00	Х						0.	0.	0.	
(3) ROBERT ANTIGNANO. FINANCE COMMITTEE CHAIR	5.00	Х						0.	0.	0.	
(4) PHILLIP MARKS HOUSE COMMITTEE CHAIR	10.00	Х				•		0.	0.	0.	
	5.00	Х						0.	0.	0.	
	10.00	х						0.	0.	0.	
(7) <u>HANK_KNISKERN</u> COMMUNICATIONS CHAIR	5.00	x						0.	0.	0.	
(8) SOLANGE MORISSETŤ ENTERTAINMENT CHAIR - thru SEPT.	5.00	х						0.	0.	0.	
(9) BETSY GREEN ENTERTAINMENT CHAIR - start OCT.	5.00	х						0.	0.	0.	
JR. ACTIVITIES COMM. CHAIR - start OCT.	5.00	х						0.	0.	0.	
JR. ACTIVITIES COMM. CHAIR - thru SEPT.	5.00	Х						0.	0.	0.	
(12) ROY GUAY OFFSHORE COMMITTEE CHAIR	5.00	Х						0.	0.	0.	
(13) WINFRÉD KELLY FROSTBITE COMMITTEE CHAIR	5.00	Х						0.	0.	0.	
(14) WHIT CORBISHLEY YOUND ADULT COMM. CHAIR	5.00	Х						0.	0.	0.	

Part VII. Section A. Oπicers, Directors, Trus		Ley	<u> </u>		oye C)	e 5,	aiit	a nighest con	inproyees (continued)				
, (A)	Average	(do	not c	heck	more	than o	ne	(D)	(E)			(F)	
Name and title	hours per week	offi	, unle icer ar	nd a c	directo	s both or/trust	ee)	Reportable compensation from	Reportable compensation from	<u>.</u>	amour	imated nt of oth	er
		Individual trustee or director	institutional trustee	Officer	Kcy employee	Highest compensated employee	ormer	the organization (W-2/1099-MISC)	related organization (W-2/1099-MISC)	5	fro orga and	ensation om the nization related nization:)
(15) PETER ROPOSA MEMBER AT LARGE - OCT-DEC	2.00	х						0.		0.			0
(16) DONALD MARCUS MEMBER AT LARGE - thru SEPT.	2.00	x						0.		0.			0
(17) MICHAEL O'REILLY MEMBER AT LARGE	2.00	-						0.		0.			0
(18) THOMAS ROWE MEMBER AT LARGE	1.00	x						0.		0.		-	0
(19) MIKE DECHAMBEAU MEMBER AT LARGE - start OCT.	2.00	_						0.		0.			0
(20) STEWART J. ABRAMSON COMMODORE	10.00	х		х				0.		0.			0
(21) MICHAEL WARREN VICE COMMODORE	10.00	х		х				0.		0.			0
(22) STEPHEN WEAVER REAR COMMODORE	10.00	Х		Х				0.		0.			0
(23) EDITH MORIN SECRETARY	1.00	Х		х			<u> </u>	0.		0.			0
TREASURER start OCT.	10.00	x_		х	<u> </u>	ļ	ļ	0.		0.		0	
(25) JOSEPH SLAWINSKI TREASURER thru SEPT.	_ 10.00	X		х				0.		0.			0
1 b Sub-total	ion A		• •	• •	• •	• •	•	0.		0.			0
d Total (add lines 1b and 1c)							>	0.		0.			0
2 Total number of individuals (including but not limite from the organization ► 0	ed to those	listed	abo	ove)	who	rece	eive	d more than \$100,	000 of reportable	comp	ensat	on	
3 Did the organization list any former officer, directo	or trustee	a ka	, em	nolos	/ee	or by	nhos	et compensated en	nnlovee		73,45° 13.44°	Yes	No
on line 1a? If 'Yes,' complete Schedule J for such if For any individual listed on line 1a, is the sum of re	individual		٠.	٠.		• •					3		Х
the organization and related organizations greater such individual	than \$150,	0003	If Y	es'	com	plete	Scl	hedule J for			4	<u></u>	X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,'										<u></u>	5	<u>r</u> .	X
Section B. Independent Contractors 1 Complete this table for your five highest compensation from the organization Report comp	ated indepe	nden	nt co.	ntra	ctors	that	rec	eived more than \$	100,000 of	x vear			
(A) (B)											C) nsatio	n n	
REAGAN CONSTRUCTION 121 GREEN LANE MIDDLETOWN RI 02842 FLOAT/PILING INSTALLATION										_2	01,	790	
													_
2 Total number of independent contractors (including \$100,000 of compensation from the organization	•	nited	to th	hose	e liste	ed ab	ove) who received mo	re than			, , , , , , , , , , , , , , , , , , ,	į.

r an	, 41	Check if Schedule O contains a respo	nse or note to any lin	ne in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1 a	Federated campaigns 1 a					
irai our		Membership dues 1 b					
8, E		Fundraising events 1c					
Giff		Related organizations 1 d					
S. E	8	Government grants (contributions) 1 e	2,000.				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above 1 f	1,604.				
d C	_	Noncash contributions included in lines 1a-1f \$			1		
<u>양</u> 투	h	Total. Add lines 1a-1f		3,604.			
Program Service Revenue	_		Business Code				
eve		MEMBERSHIP DUES & INITIATION FEES		425,819.	425,819.	0.	0.
eВ	b	FLOAT & DOCK	713990	415,207.	370,034.	45,173.	0.
Zic	C	ENTERTAINMENT COMMITTEE	713990	25,257.	25,257.	0.	0.
8		REGATTA & FLEET ACTIVITIES		17,520.	5,852.	11,668.	0.
ram		HOUSE ACTIVITIES	713990	17,081.	17,081.	0.	0.
8		All other program service revenue		31,209.	26,719.	4,490.	0.
		Total. Add lines 2a-2f		932,093.			
	3	Investment income (including dividends, other similar amounts)		483.	0.	483.	0.
	4	Income from investment of tax-exempt b	•		<u>-</u>		
	5	Royalties	(II) Personal				
	6 -	Gross rents	(ii) r ersonal				
		Less rental expenses	 				
		Rental income or (loss)					
		Net rental income or (loss)					
		(i) Converting	(II) Other	!			
	/ a	Gross amount from sales of assets other than inventory	3,500.				
	b	Less. cost or other basis and sales expenses	51,193.				
	C	Gain or (loss)	-47,693.				
	d	Net gain or (loss)	. <u></u>	-47,693.	0.	0.	-47,693.
nue	8 a	Gross income from fundraising events (not including \$					
Other Reve		of contributions reported on line 1c).					
æ		See Part IV, line 18	а				
Ē	b	Less direct expenses	b				
ಕ	С	Net income or (loss) from fundraising even	ents ▶				
	9 a	Gross income from gaming activities. See Part IV, line 19	a				
	b	Less. direct expenses	b				
	С	Net income or (loss) from gaming activiti	es				
		Gross sales of inventory, less returns					
		and allowances	a 266,296.				
		Less cost of goods sold	b 249,101.				
	С	Net income or (loss) from sales of invent	tory ▶	17,195.	15,413.	1,782.	0.
		Miscellaneous Revenue	Business Code				
	11 a						
	b	, , , , , , , , , , , , , , , , , , ,			-		
	C					· -	ļ
		All other revenue	L				
		Total. Add lines 11a-11d					ļ
	12	Total revenue. See instructions		905,682.	886,175.	63,596.	-47,693.

Paralla Statement of Functional Expenses

Section 501(c	(3) and 501(c)(4)	organizations must com	plete all columns.	All other org	anızatıons must com	plete column (A	١).

Check if Schedule O contains a response or note to any line in this Part IX											
	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	(D) Fundraising expenses						
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21										
2	Grants and other assistance to domestic individuals. See Part IV, line 22 · · · · · · ·										
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16		_								
4 5	Benefits paid to or for members		· ·								
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	307,631.									
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)										
9	Other employee benefits	9,886.									
10	Payroll taxes	36,792.									
11	Fees for services (non-employees).	00,7,02.									
а	Management										
	Legal	531.	•••								
c	Accounting	5,950.									
d	Lobbying	3,200.									
е	Professional fundraising services See Part IV, line 17										
f	Investment management fees										
g		10 500									
42	(A) amount, list line 11g expenses on Schedule O) Advertising and promotion	12,583. 31.									
13	Office expenses	35,540.									
14	Information technology	862.									
15	Royalties	002.	 								
16	Occupancy	139,618.			· · · · · · · · · · · · · · · · · · ·						
17	Travel	60.									
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	30.									
19	Conferences, conventions, and meetings										
20	Interest	26,777.									
21	Payments to affiliates			<u> </u>							
22	- · · · · · · · · · · · · · · · · · · ·	60 , 050.									
23	Insurance	58,041.									
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)										
а	DOCK & EQUIP. RENTAL & MAINT.	38,471.									
	YACHT CLUB EVENTS	38,273.									
	SUPPLIES	24.734.									
	OFFSHORE ACTIVITIES	5,785.									
	All other expenses	16,563.									
25	Total functional expenses. Add lines 1 through 24e.	818,178.									
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)										

Form 990 (2014) NEWPORT YACHT CLUB 05-0254070 Page 11 Part X **Balance Sheet** (B) (A) End of year Beginning of year 1 358,972 54,306. 2 203,718 336,812. 3 3 4 3,695 4,474. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other 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). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 8 20,089 21,034. Prepaid expenses and deferred charges 9 28,503 38,857. 10 a .086,204 10 b 10 c 780,692 965,340. 11 56,391 56,147. Investments - other securities. See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 14 14 6,733. 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 452,060 16 483,703. 5,754 17 17 8,294. 18 18 19 61,622 19 73,001 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 22 23 597,003 527,222. 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . 25 664,379 26 608,517 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete Assets or Fund Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets........ 27 787.681 875,186. 28 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.

> 483,703 Form 990 (2014)

875,186.

31

32

33

34

787,681

452,060

圣 33

31

32

Retained earnings, endowment, accumulated income, or other funds

Forn	990 (2014) NEWPORT YACHT CLUB 0	5 - 0254070		Pag	ge 12
Pa	t ※ Reconciliation of Net Assets				
	. Check if Schedule O contains a response or note to any line in this Part XI				لـــــــــــــــــــــــــــــــــــــ
1	Total revenue (must equal Part VIII, column (A), line 12)		9	05 <u>,</u> 6	<u>82.</u>
2	Total expenses (must equal Part IX, column (A), line 25)		8	<u>18,1</u>	<u>78.</u>
3	Revenue less expenses. Subtract line 2 from line 1		!	87 <u>,5</u>	04.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	<u> </u>	87,6	81.
5	Net unrealized gains (losses) on investments	. 5			
6	Donated services and use of facilities	. 6			
7	Investment expenses	. 7			
8	Prior period adjustments	. 8			
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			-	
	column (B))	· 10	8	75,1	85.
Pa	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>	. .		. X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		122	Trans.	part of
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain		***		# 11
	in Schedule O.		4 24 1-45 4 24 1-45	2 P	٠.
2 :	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed o	na	型電		r
	separate basis, consolidated basis, or both	, 4		Annual T	
	X Separate basis Consolidated basis Both consolidated and separate basis				
1	Were the organization's financial statements audited by an independent accountant?		2 b		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate			蒸	·;
	basis, consolidated basis, or both.			**	٠, "
	Separate basis Consolidated basis Both consolidated and separate basis				57 6.
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a review, or compilation of its financial statements and selection of an independent accountant?	ıudıt,	2 c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		建	(E.4FC)	
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin Audit Act and OMB Circular A-133?	jle 	3 a		Х
1	of 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required	audit t			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	· · · · · · · · · · · · · · · · · · ·	<u>3</u> b	<u> </u>	
BAA			Form	990 (2	2014)

SCHEDULE D (Form 990) ·

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public n990. Inspection Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

	NEWPORT YACHT CLUB		05-0254070		
Par	Organizations Maintaining Donor Advised Funds or Other Similar	r Funds or Acc			
	Complete if the organization answered 'Yes' to Form 990, Part IV, line				
_	(a) Donor advised funds	(b) Ft	unds and other accounts		
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year	,			
5	Did the organization inform all donors and donor advisors in writing that the assets held in do are the organization's property, subject to the organization's exclusive legal control?				
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fund for charitable purposes and not for the benefit of the donor or donor advisor, or for any other impermissible private benefit?	purpose conferring			
Par	Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line				
1	Purpose(s) of conservation easements held by the organization (check all that apply).				
		tion of a historically	important land area		
		tion of a certified his	•		
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	the form of a conse	rvation easement on the		
	last day of the tax year.				
		L	leld at the End of the Tax Year		
а	a Total number of conservation easements	2a			
k	Total acreage restricted by conservation easements	2 b			
C	: Number of conservation easements on a certified historic structure included in (a) $ \cdot \cdot \cdot \cdot $	2 c			
c	Number of conservation easements included in (c) acquired after 8/17/06, and not on a histor structure listed in the National Register	ric 2 d			
3	Number of conservation easements modified, transferred, released, extinguished, or terminal tax year ►		tion during the		
4	Number of states where property subject to conservation easement is located				
5	Does the organization have a written policy regarding the periodic monitoring, inspection, har	-	∏Yes ∏No		
6	and emoleculate of the conservation cascinotics knows.				
7	7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year				
8	· · · · · · · · · · · · · · · · · · ·				
9	9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for				
Par	conservation easements. † Organizations Maintaining Collections of Art, Historical Treasure	s. or Other Sin	nilar Assets		
	Complete if the organization answered 'Yes' to Form 990, Part IV, line	e 8.			
1 a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its rever art, historical treasures, or other similar assets held for public exhibition, education, or resear in Part XIII, the text of the footnote to its financial statements that describes these items.	nue statement and to ch in furtherance of	balance sheet works of f public service, provide,		
t	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue historical treasures, or other similar assets held for public exhibition, education, or research in following amounts relating to these items:	n furtherance of put	olic service, provide the		
	(i) Revenue included in Form 990, Part VIII, line 1				
	(ii) Assets included in Form 990, Part X				
2	If the organization received or held works of art, historical treasures, or other similar assets for amounts required to be reported under SFAS 116 (ASC 958) relating to these items.				
a	a Revenue included in Form 990, Part VIII, line 1		▶\$		
	Accete restricted in Form 000. Dod V		L 6		

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land				
b Buildings				
c Leasehold improvements		716,535.	432,090.	284,445.
d Equipment		96,377.	85,481.	10,896.
e Other	[1,273,292.	603,293.	669,999.
Total Add lines 1a through 1e (Column (d) must equa	al Form 990 Part X colum	nn (B) line 10c)		965.340

BAA

Schedule **D** (Form 990) 2014

	nents — Other Securities.	d Wasi ta Farm 000 F	lost IV line 11h See Form 000 I	Dort V. line 10
	te if the organization answered into or category (including name of security)	(b) Book value	art IV, line 11b. See Form 990, F	
	es - · · · · · · · · · · · · · · · · · ·		(C) Welfied of Valuation Cost of end-c	
• •	y interests			
(3) Other	y morests			
(A)				
(B)		-		
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(1)				
Total. (Column (b) must equ	ual Form 990, Part X, column (B) line 12)	· -		
Part VIII Investm	nents — Program Related.	d'Voc' to Form 000 F	art IV, line 11c. See Form 990, F	Port V. lino 12
	ription of investment type	(b) Book value	(c) Method of valuation Cost or end-	
(1)	nphon of investment type	(b) Dook value	(c) Welliod of Valuation Cost of end-	-oi-year market value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total (Column (h) must en	ual Form 990, Part X, column (B) line 13).	.▶		
			<u> </u>	
Park X Other A	Assets.		Part IV Jino 11d, Soo Form 990.	Part Y line 15
Park X Other A	Assets. te if the organization answered	d 'Yes' to Form 990, F	art IV, line 11d. See Form 990, I	
Partix Other A Comple	Assets. te if the organization answered		art IV, line 11d. See Form 990, I	Part X, line 15.
Park X Other A	Assets. te if the organization answered	d 'Yes' to Form 990, F	art IV, line 11d. See Form 990, I	
(1) (2) (3)	Assets. te if the organization answered	d 'Yes' to Form 990, F	art IV, line 11d. See Form 990, F	
(1) (2) (3) (4)	Assets. te if the organization answered	d 'Yes' to Form 990, F	art IV, line 11d. See Form 990, F	
(1) (2) (3) (4) (5)	Assets. te if the organization answered	d 'Yes' to Form 990, F	Part IV, line 11d. See Form 990, F	
(1) (2) (3) (4) (5) (6)	Assets. te if the organization answered	d 'Yes' to Form 990, F	Part IV, line 11d. See Form 990, F	
(1) (2) (3) (4) (5) (6) (7)	Assets. te if the organization answered	d 'Yes' to Form 990, F	Part IV, line 11d. See Form 990, F	
(1) (2) (3) (4) (5) (6) (7) (8)	Assets. te if the organization answered	d 'Yes' to Form 990, F	Part IV, line 11d. See Form 990, F	
(1) (2) (3) (4) (5) (6) (7)	Assets. te if the organization answered	d 'Yes' to Form 990, F	Part IV, line 11d. See Form 990, F	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Assets. te if the organization answered	d 'Yes' to Form 990, F Description		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) mu	Assets. te if the organization answered (a) ust equal Form 990, Part X, column (B. Liabilities.	d 'Yes' to Form 990, F		(b) Book value
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Schedule D (Form 990) 2014 NEWPORT YACHT CLUB	05-0254070	Page 4
Parkie Reconciliation of Revenue per Audited Financial Statements With Revenue per	r Return.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
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		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2 е	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	per Return.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
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		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
C Add lines 4a and 4b		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Part XIII Supplemental Information.		

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

Schedule **D** (Form 990) 2014

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2014

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

OMB No 1545-0047

NEWDODE VACUE OF	05-0254070
NEWPORT YACHT CLU	
	THERE ARE THREE CLASSES OF MEMBERSHIP - VOTING, SPOUSAL AND JUNIOR
Pt VI, Line 6	MEMBERSHIPS.
	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
Pt VI, Line 7a	CHAIRPERSON OF THE COMMITTEE.
	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
Pt VI, Line 7b	ROBERTS RULES.
	THERE IS CURRENTLY NO REQUIREMENT OF COMMITTEE MEETINGS; HOWEVER, ALL
Pt VI, Line 8b	COMMITTEE DECISIONS ARE BROUGHT TO THE BOARD FOR BOARD APPROVAL.
•	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
Pt VI, Line 11b	COMPLETION AND FILING.
	GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS ARE MADE
Pt VI. Line 19	AVAILABLE TO THE PUBLIC UPON REQUEST AFTER BOARD APPROVAL.
,	THE FINANCE COMMITTEE SELECTS AN INDEPENDENT ACCOUNTANT AND ASSUMES
Pt XII, Line 2c	
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Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

YACHTING ACTIVITIES WITH THE OBJECTIVE OF ENCOURAGING YACHTING IN AND AROUND NEWPORT.

Form 990-T, Page 1, Part II, Line 28 Other Deductions Statement

DIRECT EXPENSES RELATED TO NON-MEMBER SERVICES:	
REGATTA AND FLEET ACTIVITIES	6,235.
OFFSHORE ACTIVITIES	15,033.
ICE MACHINE	103.
BAR AND FOOD OPERATIONS	37,369.
TRANSIENT DOCKAGE	65,373.
OVERHEAD ALLOCATED	61,190.
LOSSES DISALLOWED UNDER LIMITATIONS	
IMPOSED BY REVENUE RULING 86-69	-86,435.
NEWSLETTER ADVERTISING EXPENSES	2,200.
Total	101,068.

Supporting Statement of:

Form 990 p 9/Cost of Goods Sold

Description	Amount
FOOD, BEVERAGES AND SUPPLIES	152,177.
COSTS OF LABOR	88,942.
OTHER	7,982.
Total	249,101.