F

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public. /-.... . . . -1 41-.... 1-4

OMB No. 1545-0047 6 12 Open to Public

Inspection
inspection

		enue Serv		v.irs.gov/Formag	o for instructions	and the latest	information.			nspect	Ion			
A F	or th	e 2021	calendar year, or tax year beginning		10/01/2021	and ending			09/30/20					
Bo	heck if a	pplicable:	C Name of organization				D Empl	oyer identi	fication numb	ber				
	_		BARNEGAT BAY YACHT RAC	CING ASSOCI	ATION									
	Addre		Doing business as			1		22-6049570						
	Name	e change	Number and street (or P.O. box if mail is	not delivered to stree	et address)	Room/suite	E Teler	phone numb	ber					
	+	l return	PO BOX 5422				()	-					
	termi	return/ inated	City or town, state or province, country, a	nd ZIP or foreign po	stal code									
	Amer returi	n	TOMS RIVER, NJ 08754					s receipts \$		151,	885.			
	Appli pend	cation ing	F Name and address of principal officer:		this a group bordinates?	return for	Yes	X No						
			PO BOX 5422, TOMS RIVER	R, NJ 08754			H(b) Ar	e all subordina	tes included?	Yes	No			
<u> </u>	Tax-ex	empt st	atus: X 501(c)(3) 501(c) () ┥ (insert no	o.) 4947(a)(1)	or 527		If "No," attac	ch a list. See inst	ructions				
J	Websi	ite: 🕨	WWW.BBYRA.ORG				H(c) Gr	oup exemptio	on number 🕨					
-		of organ	ization: X Corporation Trust	Association 0	Other 🕨	L Year of	formation: 19	90 M Sta	ate of legal do	micile:	NJ			
Pa	art I	Su	mmary											
	1	Briefly	describe the organization's mission or a second se second second sec	most significant a	activities: TO DI	EVELOP AM	IATEUR AI	HLETES	SONAN	OITA	NAL			
e		AND	INTERNATIONAL LEVELS FC	R THE SPOR	T OF SAILBO	AT RACING	G. IT SE	ERVCES						
Governance		14 1	MEMBER YACHT CLUBS ON BA	RNEGAT BAY	NJ AND ASS	ISTS LOCA	AL YACHT	CLUBS						
ver	2	Check	this box 🕨 📃 if the organization di	scontinued its op	perations or dispos	ed of more tha	n 25% of its n	et assets.						
	3	Numb	er of voting members of the governing	body (Part VI, line	•1a)				3		14			
کہ د	4	Numb	er of independent voting members of t	he governing bod	y (Part VI, line 1b) .			🗳	4		14			
itie	5	Total	number of individuals employed in cale	ndar year 2021 (F	Part V, line 2a)			4	5		NONE			
Activities &	6	Total	number of volunteers (estimate if necess	sary)				6	6		150			
Ă	7a	Total	unrelated business revenue from Part V	II, column (C), lin	e12			7	'a					
	b	Net ur	nrelated business taxable income from I		7	b								
							Prior		Cur	rent Ye	ar			
Ø	8	Contri	butions and grants (Part VIII, line 1h)			[1	19,772	2.	97,	,601.			
Revenue	9		am service revenue (Part VIII, line 2g)					56,540).	53,208				
eve	10		ment income (Part VIII, column (A), line						5.		519.			
R	11		revenue (Part VIII, column (A), lines 5,		505	5.		557.						
	12		revenue - add lines 8 through 11 (must				1	76,822		151,	885.			
	13		s and similar amounts paid (Part IX, colu					2,100			,350.			
	14		its paid to or for members (Part IX, colu		NON		,	NONE						
s	15		es, other compensation, employee bene		NON	ЛЕ		NONE						
Expenses	16 a		ssional fundraising fees (Part IX, column					NONE		2				
ed			fundraising expenses (Part IX, column (I											
ш			expenses (Part IX, column (A), lines 11				1	30,927	· .	114,	758.			
	18		expenses. Add lines 13-17 (must equal			ſ		33,027			108.			
	19		uue less expenses. Subtract line 18 from	, , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			43,795			,777.			
or	-		1				Beginning of			of Year				
Net Assets or Fund Balances	20	Total a	assets (Part X, line 16)				3	73,887	· .	386,	579.			
Ass Ba	21		liabilities (Part X, line 26)			F		, NON		,	NONE			
Net	22		ssets or fund balances. Subtract line 21			Г	3	73,887		386,	579.			
	rt II		gnature Block							,				
Und	der pe	nalties of	of perjury, I declare that I have examined thi	s return, including	accompanying sched	ules and statem	ents, and to th	e best of m	ny knowledge	and bel	lief, it is			
true	e, corre	ect, and	complete. Declaration of preparer (other than	officer) is based on	all information of wh	ich preparer has	any knowledge	9.						
Sig		S	Signature of officer				D	ate						
He	re													
		Τ	ype or print name and title											
		Print/	Type preparer's name	Preparer's signatur	re	Date	Ch	eck if	PTIN					
Paic		HEI	DI L DREYFUSS	-	023 self-employed P00058263									
	Darer		aname ▶ WILKIN & GUTTENPI	LAN, P.C.		,		Firm's EIN ► 22-2612018						
use	Only		address > 1200 TICES LANE I		VICK, NJ 088	316	Phone I		732-846		0			

T BAY YACHT RACING ASSOCIATION

For	m 990 (2021) Page 2
Pa	art III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO DEVELOP AMATEUR ATHLETES ON A NATIONAL AND INTERNATIONAL LEVEL FOR
	THE SPORT OF SAILBOAT RACING. IT SERVES 14 MEMBER YACHT CLUBS ON
	BARNEGAT BAY NJ AND ASSISTS LOCAL YACHT CLUBS IN THE SURROUNDING AREA
	AS WELL AS SUPPORTS LOCAL SAILORS ON A NATIONAL LEVEL.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. 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.
4a	(Code:) (Expenses \$121,855. including grants of \$) (Revenue \$122,068.)
	TO DEVELOP AMATEUR ATHLETES ON A NATIONAL AND INTERNATIONAL LEVEL
	FOR THE PSORT OF SAILBOAT RACING. IT SERVES 14 MEMBER YACHT CLUBS
	ON BARNEGAT BAY NJ AND ASSISTS LOCAL YACHT CLUBS IN THE
	SURROUNDING AREA AS WELL AS SUPPORTS LOCAL SAILORS ON A NATIONAL
	LEVEL.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
40	(Code:) (Expenses \$including grants of \$) (Revenue \$)
70	
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
	Total program service expenses ► 121,855.
JSA 1F1	Form 990 (2021)

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Part	IV Checklist of Required Schedules		N	
4	In the experimentation described in section $E(1/2)/2$ or $40.47/2/2$ (other then a private foundation)? If "Vec."		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
6	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, Part I.	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8		v
9	<i>complete Schedule D, Part III</i>	o		X
3	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V.	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
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		X
С	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
I	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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		x
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
120	Schedule D, Parts XI and XII.	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	120		
-	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
40	Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	40		77
19	Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		X
19	If "Yes," complete Schedule G, Part III	19		x
20 2	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			<u> </u>
	domestic government on Part IX. column (A). line 1? If "Yes." complete Schedule I. Parts I and II	21	Х	

⊃age	4

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Part	V Checklist of Required Schedules (continued)			
~~			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the	22		Λ
20	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J.	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
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24d		
25 a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	200		- 23
-	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		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			Λ
	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		Х
50	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
25.0	or IV, and Part V, line 1	34		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	35a		Х
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
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	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
Dart	 19? Note: All Form 990 filers are required to complete Schedule O	38		Х
Part	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a NONE			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b NONE			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax									
	Statements, filed for the calendar year ending with or within the year covered by this return 2a NONE									
b	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?									
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.									
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х						
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b								
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		X						
b	b If "Yes," enter the name of the foreign country ►									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_								
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X						
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х						
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	0.		3.7						
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	ch								
-	gifts were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c). Did the experimentation receives a neutrino success of $C_{2,2}^{+}$ made partly on a contribution and partly for goods.									
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?	7a		Х						
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b								
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was									
Ŭ	required to file Form 8282?	7c		Х						
d	If "Yes," indicate the number of Forms 8282 filed during the year									
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х						
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g								
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h								
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
	sponsoring organization have excess business holdings at any time during the year?	8								
9	Sponsoring organizations maintaining donor advised funds.									
	Did the sponsoring organization make any taxable distributions under section 4966?	9a								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter:									
	Initiation fees and capital contributions included on Part VIII, line 12									
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b									
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders.									
	Gross income from members or shareholders									
b	against amounts due or received from them.)									
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
	Is the organization licensed to issue qualified health plans in more than one state?	13a								
	Note: See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which									
	the organization is licensed to issue qualified health plans									
с	Enter the amount of reserves on hand									
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х						
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		L						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			-						
	excess parachute payment(s) during the year?	15		X						
	If "Yes," see the instructions and file Form 4720, Schedule N.	40		37						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х						
47	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17								
	If "Yes," complete Form 6069.									

Form 990 (2021)

Form 9	90 (2021) BARNEGAT BAY YACHT RACING ASSOCIATION 22-604	∂570	F	Page 6
Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See III	Siruc	X
Sect	ion A. Governing Body and Management			Δ
5601	on A. Governing body and management		Yes	No
19	Enter the number of voting members of the governing body at the end of the tax year 1a 14			
Ia	If there are material differences in voting rights among members of the governing body, or	1		
	if the governing body delegated broad authority to an executive committee or similar			
b	committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent			
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:	0.0	37	
a	The governing body?	8a 8b	X	
b	Each committee with authority to act on behalf of the governing body?	00	Λ	
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? <i>If "Yes," provide the names and addresses on Schedule O.</i>	9		x
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	-)	- 71
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		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?	450		
a	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	15b		
40.	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	16a		Х
h	with a taxable entity during the year?	Tou		
D	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		
Sect	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright NJ,			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-	T (sec	tion 5	01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			. /
	Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of	of inter	est p	olicy,
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and record	ls 🕨		
	ROBERT VOGEL PO BOX 5422 TOMS RIVER, NJ 08754			
JSA	732-974-9133	Form	990	(2021)

2-6049570

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Part VII	Compensation	of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Co	ntra	actors								
	Check if Schedule	0 0	contains a r	esponse or n	ote to any line	e in this	s Part VII				

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Former Individual trustee or director			an tee)	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations	
			ě		ated				
(1) JIM CADRANELL	0.50								
TRUSTEE	NONE	Х					NONE	NONE	NONE
(2) LEO CANZONERI	0.50								
TRUSTEE	NONE	Х					NONE	NONE	NONE
(3) BRADFORD WRIGHT	0.50								
TRUSTEE	NONE	Х					NONE	NONE	NONE
(4) BETH BACCARO	0.50	-							
TRUSTEE	NONE	Х					NONE	NONE	NONE
(5) JEANETTE BRICK	0.50	-							
TRUSTEE	NONE	Х					NONE	NONE	NONE
(6) PATRICK BOLAND	0.50	-							
TRUSTEE	NONE	Х					NONE	NONE	NONE
(7) CONNIE KNAPP	0.50								
TRUSTEE	NONE	Х					NONE	NONE	NONE
(8) BRIGID MORAN SMIRCICH	0.50	-							
TRUSTEE	NONE	Х					NONE	NONE	NONE
(9) RICHARD PROKO	0.50	-							
TRUSTEE	NONE	Х					NONE	NONE	NONE
(10) RUSS WHITMAN III	0.50								
TRUSTEE	NONE	Х					NONE	NONE	NONE
(11) KEITH WILSON	0.50	-							
TRUSTEE	NONE	Х					NONE	NONE	NONE
(12) BOB CURTAIN	0.50								
TRUSTEE	NONE	Х					NONE	NONE	NONE
(13) WILL DEMAND	0.50								
TRUSTEE	NONE	Х					NONE	NONE	NONE
(14) GEORGE BURGER	0.50								
TRUSTEE	NONE	Х					NONE	NONE	NONE

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FUIII	990	(2021)

(A) Name and title	(B) Average hours per week (list any hours for	Average Position hours per (do not check more week (list any			re than c n is both	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	an	(F) stimated nount of other pensation
	related organizations below dotted line)	Individual trustee or director	Unicer Institutional trustee		Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	fro orga ano	om the anization d related anizations
L5) RUSSELL LUCAS	10.00									
COMMODORE	NONE		X				NONE	NONE		NON
L6) DAVE MAGNO		-					NONE	NONE		NON
1EASURER L7) ROBERT VOGEL	NONE 5.00		X	·			NONE	NONE		NON
IREASURER	NONE		X				NONE	NONE		NON
L8) TRICIA SURDOVEL	5.00			·						
5ECRETARY	NONE		X				NONE	NONE		NON
L9) CHRISTINA CONNELL	5 00									
FLEET CAPTAIN	NONE	1	X				NONE	NONE		NON
20) SCOTT YATES	5.00									
/ICE COMMODORE	NONE		X				NONE	NONE		NON
21) NED THOMSON	5.00									
REAR COMMODORE	NONE		X				NONE	NONE		NON
		-								
		-								
Ib Sub-total							NONE	NONE		NON
c Total from continuation sheets to Part V	II, Section A						NONE	NONE		NON
d Total (add lines 1b and 1c)							NONE			NON
Protal number of individuals (including but reportable compensation from the organized)		hose	listed		e) who NE	o re	ceived more than	\$100,000 of		
B Did the organization list any former										Yes No
employee on line 1a? If "Yes," complete Sc	hedule J for su	ch ind	ividua						3	X
For any individual listed on line 1a, is t organization and related organizations	greater than	\$15	50,000	? 1	f "Yes	;," (complete Schedu			
individual	or accrue co	mpen	sation	fror	n any	un	related organizatio		4	X
for services rendered to the organization?	If "Yes," comple	te Sch	nedule	J foi	r such	per	son		5	X
Section B. Independent Contractors Complete this table for your five highest compensation from the organization. Repo										
year. (A)							(B)		(C)	
Name and business	s address						Description of se	rvices (Compens	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► NONE NONE

Form 990 (2021)

BARNEGAT BAY YACHT RACING ASSOCIATION Part VIII Statement of Revenue

		Check if Schedule O contains a resp	oonse or note to any				
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts Its	1a	Federated campaigns 1a	1				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	68,860.				
	с	Fundraising events	;				
	d	Related organizations	1				
	е	Government grants (contributions) 16	•				
	f	All other contributions, gifts, grants,					
		and similar amounts not included above . 1f	28,741.				
<u></u> E E E	g	Noncash contributions included in					
d		lines 1a-1f	ı \$				
ရ ပိ	h	Total. Add lines 1a-1f		97,601.			
			Business Code				
e	2a	REGISTRATION FEES		26,262.	26,262.		
Program Service Revenue	b	BOAT CHARTER FEES		19,500.	19,500.		
	c b	BOAT MAINTENANCE REIMBURSEMENTS		7,446.	7,446.		
an Sve					,		
2 2 2 2	d						
Pro	e		_				
_	f g	All other program service revenue Total. Add lines 2a-2f		53,208.			
	3	Investment income (including dividend		,			
	3	other similar amounts)		519.			519.
		,		NONE			0101
	4 5	Income from investment of tax-exempt bo Royalties	•	NONE			
	ľ	(i) Real	(ii) Personal	NONE			
	0.0		(
	6a	Gross rents 6a					
	b	Less: rental expenses 6b	ONE NONE				
	C .						
	dd	Net rental income or (loss)		NONE			
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a					
anı	b	Less: cost or other basis					
Revenue		and sales expenses 7b					
Re	С	Gain or (loss) 7c					
	d	Net gain or (loss)	<u> ▶</u>	NONE			
Other	8a	Gross income from fundraising					
0		events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18	a NONE				
	b	Less: direct expenses	b NONE				
	С	Net income or (loss) from fundraising ever	nts 🕨	NONE			_
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9	a NONE				
	b	Less: direct expenses	b NONE				
	с	Net income or (loss) from gaming activitie	es ト	NONE			
	10a	Gross sales of inventory, less					
		returns and allowances	Da NONE				
	b	Less: cost of goods sold	Db NONE				
	C C	Net income or (loss) from sales of inventory		557.	557.		
s			Business Code				
e ŝou	11a						
ane	b						
ell: sve	c b						
Miscellaneous Revenue	d	All other revenue					
Σ	e	Total. Add lines 11a-11d		NONE			
	12	Total revenue. See instructions		151,885.	53,765.		519

JSA 1E1051 1.000 0277JQ L844

Part IX Statement of Functional Expenses

BARNEGAT BAY YACHT RACING ASSOCIATION

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service (C) Management and (A) Total expenses (D) Do not include amounts reported on lines 6b. 7b. Fundraising 8b. 9b. and 10b of Part VIII. general expenses expenses expenses 1 Grants and other assistance to domestic organizations 17,000 and domestic governments. See Part IV, line 21 17,000 2 Grants and other assistance to domestic 350 350. individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and NONE foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members NONE Compensation of current officers, directors, 5 trustees, and key employees NONE 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and NONE persons described in section 4958(c)(3)(B) 7 Other salaries and wages NONE NONE 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits NONE 9 NONE 10 11 Fees for services (nonemployees): NONE a Management NONE **b** Legal 3,910 <u>3,</u>910. c Accounting NONE d Lobbying NONE e Professional fundraising services. See Part IV, line 17 361 361 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column NONE (A), amount, list line 11g expenses on Schedule O.) Advertising and promotion NONE 12 2,482. 2,482. 13 Office expenses 14 Information technology..... NONE NONE 15 Royalties Occupancy NONE 16 NONE 17 Payments of travel or entertainment expenses 18 NONE for any federal, state, or local public officials Conferences, conventions, and meetings NONE 19 Interest NONE 20 NONE 21 Payments to affiliates Depreciation, depletion, and amortization 25,328 25,328. 22 12,191. 12,191. Insurance 23 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) a FLAGS, TROPHIES & AWARDS 28,545 28,545. 2,379 DECALS 2,379 b c EQUIPMENT REPAIRS & MAINTENA 26,218 26,218. d BOAT STORAGE 2,500 2,500. 10,844 7,344. 3,500 e All other expenses 25 Total functional expenses. Add lines 1 through 24e 132,108. 121,855. 10,253. NONE Joint costs. Complete this line only if the 26 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 (2021)

Page	1	1	
Page			

		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	219,397.	1	164,344.
2	Savings and temporary cash investments.	41,738.	2	111,104.
3	Pledges and grants receivable, net	NONE	3	NONI
4	Accounts receivable, net	NONE	-	NON
5	Loans and other receivables from any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons	NONE	5	NONI
6	Loans and other receivables from other disqualified persons (as defined			
	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	NONE	6	NONI
<u>හ</u> 7	Notes and loans receivable, net	NONE		NONI
ASSETS 0 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Inventories for sale or use	NONE	8	NONE
۲ ۹	Prepaid expenses and deferred charges	NONE	9	NONI
10	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a 649, 771.			
	Less: accumulated depreciation	112,752.	10c	87,424
11	Investments - publicly traded securities	NONE		23,707.
12	Investments - other securities. See Part IV, line 11	NONE	12	NONI
13	Investments - program-related. See Part IV, line 11.	NONE	13	NONI
14	Intangible assets	NONE	14	NONI
15	Other assets. See Part IV, line 11	NONE	15	NONI
16	Total assets. Add lines 1 through 15 (must equal line 33)	373,887.	16	386,579.
17	Accounts payable and accrued expenses	NONE	17	NONE
18	Grants payable	NONE	18	NONI
19	Deferred revenue	NONE	19	NONI
20	Tax-exempt bond liabilities	NONE	20	NONI
21	Escrow or custodial account liability. Complete Part IV of Schedule D	NONE	21	NONI
ഴു 22	Loans and other payables to any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
aDI	controlled entity or family member of any of these persons	NONE	22	NONI
- 23	Secured mortgages and notes payable to unrelated third parties	NONE	23	NONE
24	Unsecured notes and loans payable to unrelated third parties	NONE	24	NONI
25	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	NONE	25	NONE
26	Total liabilities. Add lines 17 through 25	NONE	26	NONI
lices	Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
8 27	Net assets without donor restrictions	332,149.	27	344,841.
28	Net assets with donor restrictions	41,738.	28	41,738.
Net Assets of Fund Balances	Organizations that do not follow FASB ASC 958, check here ► and complete lines 29 through 33.			
ວ ທ 29	Capital stock or trust principal, or current funds		29	
1 3 0	Paid-in or capital surplus, or land, building, or equipment fund		30	
₩ 4 31	Retained earnings, endowment, accumulated income, or other funds		31	
32	Total net assets or fund balances	373,887.	32	386 , 579.
z 33	Total liabilities and net assets/fund balances	373,887.	33	386,579.

Form **990** (2021)

BARNEGAT	BAY	YACHT	RACING	ASSOCIATION
m 990 (2021)				

Form 9	00 (2021)			Pa	ge 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)		1	51,	<u>885</u> .
2	Total expenses (must equal Part IX, column (A), line 25)				<u>108</u> .
3	Revenue less expenses. Subtract line 2 from line 1				<u>777</u> .
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4				<u>887</u> .
5	Net unrealized gains (losses) on investments 5			-7,	<u>085</u> .
6	Donated services and use of facilities				
7	Investment expenses				
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain on Schedule O)				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))		3	86,	<u>579</u> .
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>			
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain of	אר			
	Schedule O.				
2a	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 on a separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of			
Ŭ	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain of				
	Schedule O.				
3 -	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
Ja	Single Audit Act and OMB Circular A-133?		3a		Х
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	he			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .		3b		

required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits . . .

Form **990** (2021)

SCHEDU	LE A
(Form 990)	

Public Charity Status and Public Support

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

OMB No. 1545-0047

		evenue Service		Go to www.irs.go	ov/Form990 for instructi	ons and	the latest	information.	Inspection
Nam	e of t	he organization	1					Employer identifi	cation number
BAI	RNE	GAT BAY YAG	CHT RACINO	G ASSOCIATION	1			22-6	049570
Ра	rt I	Reason for	r Public Cha	rity Status. (All o	organizations must o	complet	te this pa		
The	orga	anization is not	a private fou	ndation because it	is: (For lines 1 through	gh 12, ch	eck only	one box.)	
1		A church, con	vention of chu	urches, or associa	tion of churches desc	ibed in s	ection 1	70(b)(1)(A)(i).	
2		A school desc	ribed in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E	Form 99	90).)		
3		A hospital or a	a cooperative	hospital service o	rganization described i	n sectio	n 170(b)	(1)(A)(iii).	
4		A medical res	earch organiz	ation operated in	conjunction with a hos	spital de	scribed ir	n section 170(b)(1)(A)	(iii). Enter the
		hospital's nam	ne, city, and st	ate:					
5		An organization	on operated f	or the benefit of	a college or universit	y owned	d or ope	rated by a governme	ental unit described in
		section 170(b)(1)(A)(iv). (C	omplete Part II.)					
6		A federal, stat	te, or local go	vernment or gove	rnmental unit describe	d in sect	ion 170(b)(1)(A)(v).	
7		An organization	on that norma	ally receives a sub	ostantial part of its su	pport fro	om a go	vernmental unit or fro	om the general public
		described in s	ection 170(b)	(1)(A)(vi). (Compl	ete Part II.)				
8					o)(1)(A)(vi). (Complete				
9		An agricultura	I research org	ganization describe	ed in section 170(b)(1)(A)(ix) (operated	in conjunction with a	land-grant college
		or university o	or a non-land-	grant college of ag	priculture (see instruct	ions). Ei	nter the r	name, city, and state o	f the college or
		university:							
10		receipts from support from acquired by th	activities rela gross investm ne organizatio	ted to its exempt f ient income and u n after June 30, 19	pre than 331/3 % of its functions, subject to c nrelated business tax 975. See section 509	ertain ex able inco (a)(2). (0	ceptions me (less Complete	s; and (2) no more thar s section 511 tax) from Part III.)	n 331/3 % of its
11		•	•	•	usively to test for publi	•			
12		•	•	•					ry out the purposes of
				-					tion 509(a)(3). Check
			-		es the type of suppor			-	-
а		••		•	, supervised, or contr	-		• • • • •	
			-		regularly appoint or e		ajority of	the directors or truste	es of the
_		• •	•	-	e Part IV, Sections A				
b				-	ed or controlled in co				
			-		rganization vested in	the sam	e person	is that control or man	age the supported
			. ,	•	, Sections A and C.				
С					ng organization opera				lly integrated with,
			•	. , .	s). You must comple				
d			-		porting organization o	-			
			-		nization generally mus	-		-	an allentiveness
	Г		-		omplete Part IV, Sect				
е			-		a written determinatio ionally integrated sup			• • • • •	п, туре п
f	Fn							ЮП.	
g					orted organization(s).		• • • • •		•••••
3		ame of supported of	-	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of
	(1)			() =	(described on lines 1-10	listed in yo	ur governing	support (see	other support (see
					above (see instructions))	docu Yes	ment? No	instructions)	instructions)
(A)									
(B)									
(C)									
(D)									
(E)									
Tota	al								

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	
13	First 5 years. If the Form 990 is for organization, check this box and stop here						
Sec	tion C. Computation of Public Sup	-					
14	Public support percentage for 2021 (li						%
15	Public support percentage from 2020						%
16a	331/3% support test - 2021. If the org	-					
	box and stop here . The organization qu						
b	331/3% support test - 2020. If the org						
	this box and stop here. The organization			-			
17a	10%-facts-and-circumstances test - 2						
	10% or more, and if the organization						
	Part VI how the organization meets			-	-		
	organization						
b	10%-facts-and-circumstances test - 2		-				
	15 is 10% or more, and if the organiz					-	-
	in Part VI how the organization meets			-	-		
40	organization						
18	Private foundation. If the organization						
	instructions	<u></u>					🚩 📖

Schedule A (Form 990) 2021

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

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

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

	tion A. Public Support	(a) 2017	(b) 2019	(a) 2010	(4) 2020	(a) 2021	(f) Total
	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	88,630.	327,274.	37,817.	119,772.	97,601.	671,094.
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	844.	877.	179.	505.	557.	2,962.
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513 .						NONE
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						NONE
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						NONE
6	Total. Add lines 1 through 5	89,474.	328,151.	37,996.	120,277.	98,158.	674,056.
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						NONE
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						NONE
с	Add lines 7a and 7b						NONE
8	Public support. (Subtract line 7c from						
	line 6.)						674,056.
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6	89,474.	328,151.	37,996.	120,277.	98,158.	674,056.
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties, and income from similar						
	sources	31.	30.	20.		519.	600.
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						NONE
с	Add lines 10a and 10b	31.	30.	20.		519.	600.
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on.						NONE
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						NONE
13	Total support. (Add lines 9, 10c, 11,						
	and 12.) • • • • • • • • • • • • • • • • • • •	89,505.	328,181.	38,016.	120,277.	98,677.	674,656.
14	First 5 years. If the Form 990 is fo	r the organization	on's first, secon	d, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
	organization, check this box and stop here						· · · · ▶ 📃
Sec	tion C. Computation of Public Sup	port Percenta	ge				
15	Public support percentage for 2021 (line 8	, column (f), divid	ed by line 13, colu	mn (f))		15	99.91%
16	Public support percentage from 2020 Sche	edule A, Part III, lin	ie 15			16	99.98 %
Sec	tion D. Computation of Investmen	t Income Perc	entage				
17	Investment income percentage for 2021 (li	ine 10c, column (f), divided by line ²	13, column (f))		17	0.09%
18	Investment income percentage from 2020	Schedule A, Part	III, line 17			18	0.02%
19 a	331/3% support tests - 2021. If the o					ore than 331/3%	, and line
	17 is not more than 331/3%, check thi	-					
b	331/3% support tests - 2020. If the org		-				
	line 18 is not more than 331/3%, check						
20	Private foundation. If the organization	did not check a	a box on line 1	4, 19a, or 19b,	, check this bo	x and see instru	ictions
JSA							A (Form 990) 2021

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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1

2

Part			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s)</i>
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

 Yes
 No

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).
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Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see inst	tructio	ns).	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	e instru	ctions	s).
			Yes	No
2	Activities Test. Answer lines 2a and 2b below.			
2	Did substantially all of the organization's activities during the tax year directly further the event nurposes of			

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

2a

2b

3a

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection			
of gross income or for management, conservation, or maintenance of			
property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	-		
emergency temporary reduction (see instructions).	6		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continued)		
Sect	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exer				
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organi	zations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	rovide details in Part VI)		5	
6	Other distributions (<i>describe in Part VI</i>). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount	1		10	
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	IS	(iii) Distributable Amount for 2021
_1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021				
	(reasonable cause required - <i>explain in Part VI)</i> . See				
	instructions.				
3	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
C	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from				
	Section D, line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount			_	
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, <i>explain in Part VI.</i> See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, <i>explain in</i> Part VI. See instructions.				
7					
7	Excess distributions carryover to 2022. Add lines 3j and 4c.				
8	Breakdown of line 7:				
 a	Excess from 2017				
 b	Excess from 2018				
C	Excess from 2019				
d	Excess from 2020				
e	Excess from 2021				