# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

2022
Open to Public
Inspection

A F	or th	e 2022 cal	endar year, or tax year beginning	10/01/20:	22 and en	nding			09	/30/2023		
В			C Name of organization					D Em	ploye	er identification number		
D Ch	eck if a	applicable:	BARNEGAT BAY YACHT RA	ACING ASSOCIATION	NC							
	Addres	ss change	Doing business as					22-	-60	49570		
	Name	change	Number and street (or P.O. box if ma	ail is not delivered to street ad	dress)	Room	n/suite	E Tel	E Telephone number			
	Initial i	return	PO BOX 5422					(	)	_		
	Final r	eturn/terminated	City or town, state or province, cour	ntry, and ZIP or foreign postal	code	'		<b>G</b> Gro	oss re	eceipts \$		
	Amend	led return	TOMS RIVER, NJ 08754							261,379.		
	Applica	ation pending	F Name and address of principal office	r: ROBERT VOGEL			H(a	a) Is this a group	return			
			PO BOX 5422, TOMS RIV				H(k	subordinates?  Are all subord	linates i			
I T	ax-ex	empt status:	X 501(c)(3) 501(c) (	) (insert no.)	4947(a)(1) or	527	<b>—</b> `	•		list. See instructions.		
	Vebs		W.BBYRA.ORG	) (meent ner)	ιστι (ω)(τ) σ.	02.	H(c	) Group exem	ption r	number		
_		of organization		Association Other		L Year of for				of legal domicile: NJ		
Pa		Summ		7.0000.00.00.00.00.00.00.00.00.00.00.00.		1 - 1 - 1 - 1 - 1 - 1 - 1		1990		or regar derinerer. 140		
	1		scribe the organization's mission o	r most significant activities	. TO DEV	FIOD AMA	תבווס חבווס	יים דעיי ג	F C	ON A NATIONAT		
	'	•	ŭ	ŭ				SERVCE		ON A NATIONAL		
Governance			TERNATIONAL LEVELS FO BER YACHT CLUBS ON BA									
, L	2											
8	2	Check this		discontinued its operati	•				1 1	1		
	3		f voting members of the governing						3	14		
Activities &	4		f independent voting members of t						4	14		
, iii	5		ber of individuals employed in cale						5	NONE		
cti	6		ber of volunteers (estimate if necess						6	150		
•			elated business revenue from Part V						7a			
	b	Net unrela	ated business taxable income from	Form 990-T, Part I, line 11		<del> , .</del>			7b			
							P	rior Year		Current Year		
<u>a</u>	8		ons and grants (Part VIII, line 1h) .					97,60	01.	106,553.		
Revenue	9	Program s	service revenue (Part VIII, line 2g) .					53,20	J8.	52 <b>,</b> 250.		
Şe	10	Investmen	nt income (Part VIII, column (A), line	es 3, 4, and 7d)				51	19.	3,003.		
	11	Other reve	enue (Part VIII, column (A), lines 5,	6d, 8c, 9c, 10c, and 11e)				5.	57.	372.		
	12	Total reve	nue - add lines 8 through 11 (must	equal Part VIII, column (A	A), line 12)			151,88	35.	162,178.		
	13	Grants an	d similar amounts paid (Part IX, colu	umn (A), lines 1-3)				17,35	50.	8,523.		
	14	Benefits p	aid to or for members (Part IX, colu	mn (A), line 4)				No	ONE	NONE		
ဖ	15		other compensation, employee bene					No	ONE	NONE		
Expenses	16 a		nal fundraising fees (Part IX, column					No	ONE	NONE		
be			Iraising expenses (Part IX, column (I									
ω̂	17		enses (Part IX, column (A), lines 11					114,75	58.	137,565.		
	18		enses. Add lines 13-17 (must equal					132,10		146,088.		
	19		ess expenses. Subtract line 18 from					19,7		16,090.		
		TTOVCHUOT	COO CAPONOCO. CUDITACE IIIIC TO HOI	11110 12 1 1 1 1 1 1 1			eainning	of Current \		End of Year		
anc	20	Total asse	ets (Part X, line 16)					386,57		410,499.		
Ass Ba	21		lities (Part X, line 26)						ONE	NONE		
せるこ	22		s or fund balances. Subtract line 21			⊢		386,57		410,499.		
Par			ture Block	Hom line 20, , , , , ,				300,3	19.	410,499.		
			rjury, I declare that I have examined th	is return including accompa	anvina schedules	and statemen	te and t	to the heet of	f my	knowledge and helief it is		
true,	corre	ect, and com	plete. Declaration of preparer (other than	n officer) is based on all inform	mation of which	preparer has ar	ny knowl	edge.	iiiiy	kilowieuge allu bellei, it is		
										_		
Sigr	1	Signature of	of officer					 Date				
Here		Signature	onicei					Date				
		<del>-</del> .	1.00									
			nt name and title	Ι=		1						
Paid		Print/Type	preparer's name	Preparer's signature		Date		Check	J '''	PTIN		
Prep	arer	HEIDI	L DREYFUSS			01/08/2	024	self-employ	ed	P00058263		
Use		Firm's nam	ne WILKIN & GUTTENP	LAN, P.C.			Firr	m's EIN	2	2-2612018		
	Jy	Firm's add	ress 1200 TICES LANE	EAST BRUNSWICK,	NJ 08816	5	Pho	one no.	7	32-846-3000		
Мау	the	IRS discu	iss this return with the preparei	r shown above? See in	structions .					. X Yes No		
			uction Act Notice, see the separat							Form <b>990</b> (2022)		

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Pa		Program Service Acc			
_			oonse or note to any line in this Pa	rt III	
1	Briefly describe the orga				
			A NATIONAL AND INTERNA		
	THE SPORT OF SA		IT SERVES 14 MEMBER Y		
			CAL YACHT CLUBS IN THE		
			ORS ON A NATIONAL LEVE		
2	prior Form 990 or 990-E	Z?		ear which were not listed on the	Yes X No
	If "Yes," describe these				
3				how it conducts, any program	Yes X No
4		•		its three largest program service	ces, as measured by
	•		organizations are required to re ch program service reported.	port the amount of grants and a	allocations to others,
4a	a (Code:) (E	xpenses \$ 135,	including grants of \$	) (Revenue \$	121,610.
	TO DEVELOP AMAT	EUR ATHLETES ON	A NATIONAL AND INTERNA	ATIONAL LEVEL	
	FOR THE PSORT O	F SAILBOAT RACI	NG. IT SERVES 14 MEMB	ER YACHT CLUBS	
	ON BARNEGAT BAY	NJ AND ASSISTS	LOCAL YACHT CLUBS IN '	THE	
	SURROUNDING ARE	A AS WELL AS SU	PPORTS LOCAL SAILORS OF	N A NATIONAL	
	LEVEL.				
	-				
4b	(Code: ) (E	xpenses \$	including grants of \$	) (Revenue \$	)
	, , , ,	· · · · · · · · · · · · · · · · · · ·			
	-				
	-				
4с	(Code:) (E	xpenses \$	including grants of \$	) (Revenue \$	)
	· · · · · · · · · · · · · · · · · · ·				
	-				
_		/D " - · · ·	•		
4d	d Other program services	·	*	_	
	(Expenses \$	including grants		ie \$ )	
4e	Total program service e	xpenses	135.653		

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Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Χ	
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		Χ
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		X
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	,		37
7	"Yes," complete Schedule D, Part I	6		X
7	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	<b>-</b> '-		Λ
0	complete Schedule D, Part III	8		Χ
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			71
·	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Χ
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	Χ	
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		Χ
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		Χ
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		Χ
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	11f		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40.		
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	405		3.7
42	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13 14 a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	174		Λ
	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		Χ
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	- 1.2		
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Χ
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		Χ
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Χ
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Χ
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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 12 If "Yes," complete Schedule I, Parts I and II	21		X

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Part	Checklist of Required Schedules (continued)			
22	Did the executation report more than 65 000 of grants or other assistance to or for demostic individuals on		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			21
	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	0.4		
	to defease any tax-exempt bonds?	24c		
	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			
	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? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,	21		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	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		37
31	conservation contributions? <i>If "Yes," complete Schedule M</i>	30 31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			21
-	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
	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	256		
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
30	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	- 50		21
٠.	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			
	19? <b>Note</b> : 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			
4.	Fatantha mushan namantadin have 2 of Famo 4000. Fatan 0 if not applicable		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
C	reportable gaming (gambling) winnings to prize winners?	1c		
JSA 2E1030			990	(2022)
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Par	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	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	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		Χ
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).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Χ
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Χ
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Χ
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided? $\dots$	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
	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		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the	8		
•	sponsoring organization have excess business holdings at any time during the year?	0		
	Sponsoring organizations maintaining donor advised funds.  Did the engaging organization make any tayable distributions under section 40662	9a		
	Did the sponsoring organization make any taxable distributions under section 4966?	9b		
	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			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> 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			
	Enter the amount of reserves on hand	4.4		3.7
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
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		v
	excess parachute payment(s) during the year?	15		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Χ
10	If "Yes," complete Form 4720, Schedule O.	. 0		23
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person 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			

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22-6049570 Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Sect	ion A. Governing Body and Management	• • •	<u> </u>	· · · ·	· · · ·	Λ
	non-ra cotorning zoa, ana managomone				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	14			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar					
	committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	14	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business re	lation	ship with			
	any other officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or un					
	supervision of officers, directors, trustees, or key employees to a management company or other p			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fi			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's			5	37	X
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 el			7.0	37	
_	one or more members of the governing body?			7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval			7b		Х
_	stockholders, or persons other than the governing body?			7.0		Λ
8	Did the organization contemporaneously document the meetings held or written actions und	ertake	en during			
	the year by the following:			8a	Х	
a	The governing body?			8b	X	
b	Each committee with authority to act on behalf of the governing body?			0.0	71	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O.</i>			9		Х
Secti	ion B. Policies (This Section B requests information about policies not required by the Inte	ernal	Revenue	Code		
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of		-			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt p	•		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fi	ling th	e form? .	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			40-		3.7
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		•	12b		
	rise to conflicts?			120		
С	Did the organization regularly and consistently monitor and enforce compliance with the p	-		12c		
40	describe on Schedule O how this was done			13		Х
13	Did the organization have a written whistleblower policy?			14		X
14 15	Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review ar					
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation		-			
а	The organization's CEO, Executive Director, or top management official			15a		
b	Other officers or key employees of the organization			15b		
	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	r arra	ingement			
	with a taxable entity during the year?		•	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization					
	participation in joint venture arrangements under applicable federal tax law, and take steps to	safe	guard the	405		
Section	organization's exempt status with respect to such arrangements?	<u> </u>		16b		
17 10		000	and 000 -	Γ (000	tion F	01/6
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), (3)s only) available for public inspection. Indicate how you made these available. Check all that ap  Own website   X Another's website  X Upon request  Other (explain on Sc	ply.		ı (sec	tion 5	01(C)
19	Describe on Schedule O whether (and if so, how) the organization made its governing document financial attempts available to the public during the tax year.	nents,	conflict o	f inte	rest p	olicy,
20	and financial statements available to the public during the tax year.  State the name, address, and telephone number of the person who possesses the organization's I	ooks	and record	ls		

732-974-9133

Form **990** (2022)

JSA 2E1042 1.000

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

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
  - 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, box 6 of 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.

compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

🔯 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	box,	unle	Pos heck ss pe	erson	e than o is both or/trust	an	( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other compensation	
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations	
(1) JIM CADRANELL	0.50										
TRUSTEE	NONE	Х						NONE	NONE	NONE	
(2) LEO CANZONERI	0.50										
TRUSTEE	NONE	Х						NONE	NONE	NONE	
(3) DAVE APPLEGATE	0.50										
TRUSTEE	NONE	Х						NONE	NONE	NONE	
(4) KEVIN CARTON	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	X						NONE	NONE	NONE	
(8) DAN KANE	0.50										
TRUSTEE	NONE	X						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) HEATHER ANDOLSEN	0.50										
TRUSTEE	NONE	X						NONE	NONE	NONE	
(12) ED VIENCKOWSKI	0.50										
TRUSTEE	NONE	X						NONE	NONE	NONE	
(13) WILL DEMAND	0.50										
TRUSTEE	NONE	Х						NONE	NONE	NONE	
(14) MANDIE RHODES	0.50										
TRUSTEE	NONE	Χ						NONE	NONE	NONE Form <b>990</b> (2022)	

Form 990 (2022)

Form 99											Page <b>8</b>
Part \	•	ustees, Ke	y En	nplo	_		and F	lig	1		•
	(A) Name and title		box,	unles er and	Pos heck ss pe	erson	e than o is both or/trusto employ	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization
		below dotted line)	Individual trustee or director	Institutional trustee	·	Key employee	Highest compensated employee				and related organizations
	BUZZ REYNOLDS T CAPTAIN	5.00 NONE			Х				NONE	NONE	NONE
16) MEAS	DAVE MAGNO	5.00 NONE			Х				NONE	NONE	NONE
	ROBERT VOGEL	5.00			Λ				NONE	NONE	NON
	SURER	NONE			Х				NONE	NONE	NONE
	TRICIA SURDOVEL ETARY	5.00 NONE			Х				NONE	NONE	NONE
	CHRISTINA CONNELL COMMODORE	5.00 NONE			Х				NONE	NONE	NONE
	SCOTT YATES ODORE	10.00 NONE			Х				NONE	NONE	NONE
	NED THOMSON COMMODORE	5.00 NONE			Х				NONE	NONE	NONE
			-								
	b-total							<b>&gt;</b>	NONE	NONE	NON
	tal from continuation sheets to Part VII, S	_							NONE		NONI
<b>2</b> To	tal (add lines 1b and 1c) tal number of individuals (including but not portable compensation from the organization	limited to t					e) who	re	NONE eceived more than		NONE
						110					Yes No
	d the organization list any <b>former</b> offic nployee on line 1a? <i>If "Yes," complete Sched</i> e										3 X
org	r any individual listed on line 1a, is the s ganization and related organizations gro dividual	eater than	\$15	50,0	00?	i If	"Yes	,"	complete Schedu	le J for such	4 X
5 Die	d any person listed on line 1a receive or services rendered to the organization? <i>If "Ye</i> "	accrue co	mpen	sati	on '	fron	n any	un	related organizati	on or individual	5 X
	on B. Independent Contractors										
	omplete this table for your five highest com mpensation from the organization. Report c ar.										

(A) Name and business address	(B) Description of services	(C) Compensation
ivanie and publicess address	Description of services	Compensation

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

22-6049570

### Part VIII Statement of Revenue

		Check if Schedule O contains a re	espor	nse or note to an	y line in this Part V	/111		
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts,	1a	Federated campaigns	1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues	1b	68,960.				
وَقِ	С	Fundraising events	1c					
fts,	d	Related organizations	1d					
છં≅	е	Government grants (contributions)	1e					
Sir.	f	All other contributions, gifts, grants,						
ë ë		and similar amounts not included above	1f	37,593.				
를	~	Noncash contributions included in	•	21,7222				
<b>E</b> 5	g		1g 5					
a So	h				106,553.			
_	- "	Total. Add lilles 1a-11	• • •	Business Code	100,333.			
a,		DECICEDATION FEEC		Dusiness Code	26,715.	26 715		
ż l	2a	REGISTRATION FEES			19,500.	26,715.		
Ser	b	BOAT CHARTER FEES				19,500.		
E a	С	BOAT MAINTENANCE REIMBURSEMENTS			6,035.	6,035.		
Re	d							
Program Service Revenue	е							
ъ.	f	All other program service revenue						
	g	Total. Add lines 2a-2f			52,250.			
	3	Investment income (including divide	nds,	interest, and				
		other similar amounts)			2,204.			2,204
	4	Income from investment of tax-exempt			NONE			
	5	Royalties			NONE			
		(i) Rea	l	(ii) Personal				
	6a	Gross rents 6a						
	b	Less: rental expenses 6b						
	С	Rental income or (loss) 6c	NONE	NONE				
	d	Net rental income or (loss)			NONE			
	7a	Gross amount from (i) Securit	ties	(ii) Other				
		sales of assets						
		other than inventory 7a 100	,000.					
<u>a</u>	b	Less: cost or other basis						
Ju		and sales expenses 7b	,201.					
Revenue	С	Gain or (loss) 7c	799.					
	d	Net gain or (loss)			799.			
Other	8a	Gross income from fundraising						
ნ	va	events (not including \$						
		of contributions reported on line						
		•	8a	NONE				
		1c). See Part IV, line 18	8b	NONE				
	b	Less: direct expenses			NONE			
	С		venis		NONE			
	9a	Gross income from gaming activities. See Part IV, line 19	9a	NONE				
	b	Less: direct expenses	9b	NONE	310315			
	С	Net income or (loss) from gaming active	/ities .		NONE			
	10a	Gross sales of inventory, less						
		returns and allowances		NONE				
	b	Less: cost of goods sold	10b	NONE				
	С	Net income or (loss) from sales of invent	огу		372.	372.		
sn				Business Code				
ne ge	11a							
a en	b							
e ce	С							
Miscellaneous Revenue	d	All other revenue						
	е	Total. Add lines 11a-11d			NONE			
	12	Total revenue. See instructions			162,178.	52,622.		2,204
JSA 2E105	1 1.000							Form <b>990</b> (2022)
	02	77JQ L844			021325			

22-6049570

# Part IX Statement of Functional Expenses

	organizations must co			

Check if Schedule O contains a response or note to any line in this Part IX							
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses		
1	Grants and other assistance to domestic organizations						
	and domestic governments. See Part IV, line 21	6 <b>,</b> 523.	6 <b>,</b> 523.				
2	Grants and other assistance to domestic						
	individuals. See Part IV, line 22	2,000.	2,000.				
3	Grants and other assistance to foreign						
	organizations, foreign governments, and						
	foreign individuals. See Part IV, lines 15 and 16	NONE					
4	Benefits paid to or for members	NONE					
5	Compensation of current officers, directors,						
	trustees, and key employees	NONE					
6	Compensation not included above to disqualified						
	persons (as defined under section 4958(f)(1)) and						
	persons described in section 4958(c)(3)(B)	NONE					
7	Other salaries and wages	NONE					
8	Pension plan accruals and contributions (include	NONE					
	section 401(k) and 403(b) employer contributions)						
9	Other employee benefits	NONE					
10	Payroll taxes	NONE					
11	Fees for services (nonemployees):						
а	Management	NONE					
b	Legal	NONE					
C	Accounting	4,260.		4,260.			
d	Lobbying	NONE					
	Professional fundraising services. See Part IV, line 17.	NONE					
f	Investment management fees	488.		488.			
g	Other. (If line 11g amount exceeds 10% of line 25, column						
	(A), amount, list line 11g expenses on Schedule O.)	NONE					
12	Advertising and promotion	NONE					
13	Office expenses	2,167.		2,167.			
14	Information technology	NONE					
15	Royalties	NONE					
16	Occupancy	NONE					
17	Travel	NONE					
18	Payments of travel or entertainment expenses						
	for any federal, state, or local public officials	NONE					
	Conferences, conventions, and meetings	NONE					
	Interest	NONE					
21	,	NONE	24 272				
22		24,273.	24,273.				
23		14,599.	14,599.				
24							
	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.)						
	FLAGS, TROPHIES & AWARDS	36,181.	36,181.				
	DECALS FOULTHMENT DEDAIDS & MAINTENA	2,378. 37,551.	2,378. 37,551.				
	EQUIPMENT REPAIRS & MAINTENA	2,500.	2,500.				
	BOAT STORAGE	13,168.	2,500. 9,648.	3,520.			
	All other expenses Add lines 1 through 24e	146,088.		10,435.	NONE		
	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	140,000.	135,653.	10,433.	NOINE		
-•	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 (2022)

Page **11** 

Form 99	,			Page <b>11</b>
Part				
	Check if Schedule O contains a response or note to any line in this Pa	(A) Beginning of year		(B) End of year
Τ,	Cash - non-interest-bearing	164,344.	1	203,061.
		111,104.	2	43,344.
		NONE	3	NONE
		NONE	4	NONE
. ا				
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons	NONE	5	NONE
(				
	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).	NONE	6	NONE
ر ای		NONE	7	NONE
Assets		NONE	8	NONE
ې اتخ		NONE	9	NONE
	a Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a 649,771.			
	b Less: accumulated depreciation	87,424.	10c	63,152.
11		23,707.	11	100,942.
12	· · · ·	NONE		NONE
13	· · · · · · · · · · · · · · · · · · ·	NONE		NONE
14	· -	NONE		NONE
15		NONE		NONE
16		386,579.	16	410,499.
17		NONE	17	NONE
18	· ·	NONE	18	NONE
19	· ·	NONE	19	NONE
20		NONE	20	NONE
21	Escrow or custodial account liability. Complete Part IV of Schedule D	NONE	21	NONE
တ္က 22	· · · · · · · · · · · · · · · · · · ·			
Liabilities	trustee, key employee, creator or founder, substantial contributor, or 35%			
abi	controlled entity or family member of any of these persons	NONE	22	NONE
⊒ً   <sub>23</sub>	Secured mortgages and notes payable to unrelated third parties	NONE	23	NONE
24	Unsecured notes and loans payable to unrelated third parties	NONE	24	NONE
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	NONE
seou	Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
<u>ह</u>   27	Net assets without donor restrictions	344,841.	27	368,861.
28	Net assets with donor restrictions	41,738.	28	41,638.
or Fund Balances	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
ة <sub>29</sub>	-		29	
ets 30	<del>-</del>		30	
Assets			31	
Net 32	<u> </u>	386,579.	32	410,499.
ž 33	F	386,579.	33	410,499.
		300,373.		Form <b>990</b> (2022)

Form **990** (2022)

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Form 990 (2022) Page **12** 

Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1	62,	<u> 178</u> .
2	Total expenses (must equal Part IX, column (A), line 25)	2		1	46,	088.
3						<u> </u>
4						
5	Net unrealized gains (losses) on investments	5			7,	<u>830</u> .
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10		4	10,	<u>499</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 on					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a	Χ	
	If "Yes," check a box below to indicate whether the financial statements for the year were cor	npiled	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		X
	If "Yes," check a box below to indicate whether the financial statements for the year were aud	ted o	na			
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	ersight	t of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?					
	If the organization changed either its oversight process or selection process during the tax year, e	xplain	on			
	Schedule O.					
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in	the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	lergo	the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	udits .		3b		

#### **SCHEDULE 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.

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization BARNEGAT BAY YACHT RACING ASSOCIATION 22-6049570 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(y). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 331/3 % of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV. Sections A. D. and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of (iv) Is the organization (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) instructions) instructions) document? Yes No (A) (B) (C) (D)

(E)

Total

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.) Section A. Public Support Calendar year (or fiscal year beginning in) (e) 2022 (a) 2018 (b) 2019 (c) 2020 (d) 2021 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . . . . . The value of services or facilities furnished by a governmental unit to the organization without charge . . . . . . Total. Add lines 1 through 3..... 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). . . . . . . Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**. Section C. Computation of Public Support Percentage % Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) . . . . . . . % 16a 331/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this b 331/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 

Schedule A (Form 990) 2022

#### 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.)

Sec	tion A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	327,274.	37,817.	119,772.	97,601.	106,553.	689,017.
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	877.	179.	505.	557.	372.	2,490.
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	328,151.	37,996.	120,277.	98,158.	106,925.	691,507.
7 a	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.)						691,507.
Sec	tion B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	328,151.	37,996.	120,277.	98,158.	106,925.	691,507.
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties, and income from similar						
	sources	30.	20.		519.	2,204.	2,773.
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						NONE
С	Add lines 10a and 10b	30.	20.		519.	2,204.	2,773.
11	Net income from unrelated business						
	activities not included on 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.)	328,181.	38,016.	120,277.	98,677.	109,129.	694,280.
14	First 5 years. If the Form 990 is for	the organization	on's first, second	l, 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 Supp						
15	Public support percentage for 2022 (line 8,	column (f), divid	ed by line 13, colun	nn (f))		15	99.60%
16	Public support percentage from 2021 Sche	dule A, Part III, lin	ie 15			16	99.91%
Sec	tion D. Computation of Investment						
17	Investment income percentage for 2022 (lin			3, column (f)).		17	0.40%
18	Investment income percentage from 2021 S					18	0.09%
	331/3% support tests - 2022. If the org						
	17 is not more than 331/3 %, check this	-					
b	331/3% support tests - 2021. If the orga	-	_	•			
	line 18 is not more than 331/3 %, check						
	Private foundation. If the organization of			•			

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#### Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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
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- 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," answel 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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Part	V Supporting Organizations (continued)			
			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 <b>Part VI</b> .	11c		
Section	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? If "No," describe in <b>Part VI</b> how the supported organization(s) 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.	1		
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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Section	on 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	4		
Section	on D. All Type III Supporting Organizations			
00011	on 2.7 iii 13po iii oapporting organizationo		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	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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Section	on 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 ins	structi	ons).	
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 <b>Part VI</b> how you supported a governmental entity (see	e instr		
2	Activities Test. Answer lines 2a and 2b below.		Yes	NO
а	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 <b>Part VI identify those supported organizations and explain</b> 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.	2a		
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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	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 <b>Part VI.</b>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If</i> "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nization	s				
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	ng trust on	Nov. 20, 1970 (explai	in in <b>Part VI</b> ). See			
	instructions. All other Type III non-functionally integrated supporting organ	izations r	nust complete Sectio	ns A through E.			
Se	ction 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		7					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
	ction 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):						
а	Average monthly value of securities	1a					
b	Average monthly cash balances	1b					
	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other factors						
	(explain in detail in <b>Part VI</b> ):						
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					
_	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					
Se	ction 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							

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(see instructions).

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)								
Sect	Section D - Distributions							
1	Amounts paid to supported organizations to accomplish ea	1						
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed					
	organizations, in excess of income from activity			2				
3	Administrative expenses paid to accomplish exempt purpo	ses 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 <b>Part VI</b> )		5				
6	Other distributions (describe in Part VI). 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 2022 from Section C, line 6	9						
10	Line 8 amount divided by line 9 amount			10				
		(i)	(ii)		(iii)			

		(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022			
	(reasonable cause required - explain in <b>Part VI</b> ). See			
	instructions.			
3	Excess distributions carryover, if any, to 2022			
a	From 2017			
b	From 2018			
С	From 2019			
d	From 2020			
е	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2022 distributable amount			
i	Carryover from 2017 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
С	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2018			
b	Excess from 2019			
С	Excess from 2020			
d	Excess from 2021			
е	Excess from 2022			

Schedule A (Form 990) 2022