## Folm 990

Department of the Treasury

Internal Revenue Service

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

32

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

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2009

Open to Public Inspection

	<u>A</u>		calendar year, or tax year beginning , 2009, and ending		, 20	
		Check if applicable	Please C Name of organization, number and street, city, town, state, and ZIP code D Employer	dentifica	ation number	
	1 1	Address change	luse IRS label or	38-2454578		
	П	Name change	print or BAYSIDE YACHT CLUB F Telephon	hone number		
	н	Initial return	i voe i		1-3866	
	Н	Terminated	ISposified			
	Н		Instruc- FO BOA 1201	\$	7055.	
		Amended return Application	tions MOUNT CLEMENS MI 48046 H(a) Is the	a group r		
		pending		filiates?	∐ Yes ⊠ No	
			25315 COLLINGW ROSEVILLE MI 48,066- H(b) Are all		ded?	
	<u>i 1</u>	Fax-exempt sta		attach a list structions)	Yes No	
	J	Website: ▶	BYC.US H(c) Group	exemption nui	mber 🕨	
	KF	orm of organization			te of legal domicile MI	
			mmary	111 01111	o or rogal derinions	
		<del></del>	describe the organization's mission or most significant activities			
		1	ER SAFETY			
	ø	WILLE	MV DILLIII			
	and			<del></del>		
	Ĕ					
	Governance		this box 🕨 📋 if the organization discontinued its operations or disposed of more than 25% of its n	et assets		
	Ö		r of voting members of the governing body (Part VI, line 1a)	3	50	
	Š	4 Numbe	r of independent voting members of the governing body (Part VI, line 1b)	4		
	Activities &	5 Total nu	umber of employees (Part V, line 2a)	5		
$\Rightarrow$	₹	6 Total nu	umber of volunteers (estimate if necessary)	6		
2010	ĕ		ross unrelated business revenue from Part VIII, column (C), line 12	7a		
		_	related business taxable income from Form 990-T, line 34	7b	<del></del>	
va •	_	D Net dill		1		
<b>├</b>		0 Cambrida	Prior Year		Current Year	
=	Ř	8 Contrib	utions and grants (Part VIII, line 1h) FCFIVED 55	590.	7670.	
=	,en	9 Progran	m service revenue (Part VIII line 29) EUEIVED			
	Revenue	10 Investm	nent income (Part VIII, column A), lines 3, 4, and 7d)	60.	136.	
Щ	_	11 Other re		085.	-751.	
<b>Z</b>		12 Total re	venue - add lines 8 through 44 (must equal Part VIII, column, (A), line 12) 2.5	565.	7055.	
4		13 Grants	and similar amounts paid (Part 1X golumni(A) lines 1-3)			
SCANNED JUL		14 Benefits	s paid to or for members (Part De tolumn (A)) line 4).			
S	w	li .	s, other compensation, employee benefits (Part IX, column (A), lines 5-10)			
	Se	4	sional fundraising fees (Part IX, column (A), line 11e)			
	Expenses	I.	indraising expenses, (Part IX, column (D), line 25) ▶	!	. ^ *	
	X	(		<del>'''</del>	*	
		1	expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		<del></del>	
		f	xpenses - Add lines 13 17 (must equal Part IX, column (A), line 25)			
		19 Revenu	ue less expenses Subtract line 18 from line 12	65.	7055.	
	o ses		Beginning of Y		End of Year	
	ets	20 Total as	ssets (Part X, line 16)	325.	17885.	
	Net Assets or Fund Balances	21 Total lia	abilities (Part X, line 26)	)42.	9322.	
	Fund	22 Net ass	sets or fund balances Subtract line 21 from line 20	783.	8563.	
	Pa	art II Sig	nature Block	<del></del>		
			er penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of r	ny knowledne		
			belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any k			
			, , , , , , , , , , , , , , , , , , ,	nomougu 		
	ei.	.n   k '	the state of the s		-14-10	
	Sig	•		<del></del>	1//	
	He	re   🚩		ate		
			DAVID IMBIROWICZ TREASURER			
			Type or print name and title		1-12	
	D~'	Pre	parer's Date Check if		er's identifying number istructions)	
	Pal	l siar	nature 05/07/2010 self- employed ▶ ▷		0000326	
			s name (or yours JOSEPH L SIMASKO EIN	▶ 38-	-3393562	
	Use		f-employed), ess, and ZIP+4 319 N GRAT MOUNT CLEMENS MI 48043 Phone no		6-954-4974	
	May		iss this return with the preparer shown above? (See instructions)		X Yes No	

For Privacy Act and Paperwork Reduction Act Notice, see the separate Instructions.

Rev 1

		AYSIDE YACHT				38-245	45/8	F	age 2
Par	t III Statem	ent of Program Se	rvice Accomp	<u>ishments</u>	··				
1	-	the organization's miss	ion						
	WATER SA	AFETY			<del></del>				
		<del></del>	<del></del>						
2			nificant program s	ervices during the year wl	hich were not listed on			_	
	the prior Form 9						Yes		No
	if "Yes," describ	oe these new services o	n Schedule O				_	_	
3	Did the organization	ation cease conducting,	or make significa	nt changes in how it cond	ucts any program serv	rices?	Yes		No
		e these changes on Sc							
4	Describe the ex	cempt purpose achieven	nents for each of t	he organization's three la	rgest program service:	s by expenses			
	Section 501(c)(	3) and 501(c)(4) organia	zations and sectio	n 4947(a)(1) trusts are red	quired to report the am	ount of grants an	d		
	allocations to of	thers, the total expenses	s, and revenue, if	any, for each program sei	rvice reported				
4a	(Code	) (Expenses \$	19709.	including grants of \$		) (Revenue \$		201	.69.)
	DOCKAGE	EVENT							
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4b	(Code	) (Expenses \$	8396.	including grants of \$		) (Revenue \$		71	.85.)
					<del></del>				
	COMMADOR	KE BALL			<del></del> -				
	-			<del></del>					
				<del></del>					
		<del></del>		<del></del>	<del></del>				
		<del></del>	<del></del>						
					<u>.</u>				
				· · · · · · · · · · · · · · · · · · ·			-		
					<del></del>				
4c	(Code	) (Expenses \$		including grants of \$		) (Revenue \$			)
			<del></del>						<del></del>
			<u> </u>						
	-								
			·		····				
				-					
4d	Other program	services (Describe in S	chedule O)						
	(Expenses \$		including grants o	f \$	)(Revenue \$		)		
40		service expenses 🕨	2810	5.					
	<u> </u>			<del></del>			Form	990 .	(2009)

### Part IV Checklist of Required Schedules

Schedule D. Part VI

			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?	2		- ^
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			.,
4		3_	-	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	- <u>  </u>	_	
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		Х
11	is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	'		**
	VII, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	<u> </u>		

of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII

Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets

Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more

Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more

 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

of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII

- Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X
- Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses
  the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X
- 12 Did the organization obtain a separate, independent audited financial statement for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII

12 12A Was the organization included in a consolidated, independent audited financial statement for the tax year? Yes No : If "Yes," completing Schedule D. Parts XI, XII, and XIII is optional 12A Χ 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I Χ 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any 15 organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 15 Χ 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III Χ 16 Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, 17 column (A), line 11e? If "Yes," complete Schedule G, Part I Х 17 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Χ 18 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? Χ If "Yes," complete Schedule G, Part III 19

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Did the organization operate one or more hospitals? If "Yes," complete Schedule H

Part	Checklist of Required Schedules (continued)			
	5 4 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations	1 1		
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and If	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			٠,,
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's			
	current and former officers, directors, trustees, key employees, and highest compensated employee's? If "Yes,"			v
24-	complete Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		X
24a	\$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 question 25	245		v
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		X 
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
·	to defease any tax-exempt bonds?	24c		Х
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c		X
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction	24u		
, Ja	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	234		
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	230		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20		
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	1 1		
	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, directly or indirectly	,		
	(see Schedule L, Part IV instructions for definitions of "direct" and "indirect" and applicable filing thresholds,	37	,	
	conditions, and exceptions)	M.	*	,
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	••••	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family			
	member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Χ
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		X
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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2 .	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	1		
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
				l .
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
37 38	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 Did the organization complete Schedule O and provide explanations for Part VI, lines 11 and 19?	37		X

Pa	t V Statements Regarding Other IRS Filings and Tax Compliance							
							Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	}						
	U.S. Information Returns. Enter -0- if not applicable		1a		0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	L	1b_		0			
C	Did the organization comply with backup withholding rules for reportable payments to vendo	rs and rep	ortat	ole				
	gaming (gambling) winnings to prize winners?	,				1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			1				
	Statements, filed for the calendar year ending with or within the year covered by this return	Ĺ	2a_			_		
b	If at least one is reported on line 2a, did the organization file all required federal employment	ıt tax returi	ns?			2b	l	ļ
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this retu	urn (see i	nstru	ctions	s)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year	ar covered	d by					
	this return?					_3a		X
þ	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule C	)				_3b		X
4a	At any time during the calendar year, did the organization have an interest in, or a signature	or other a	utho	rity ov	er,			
	a financial account in a foreign country (such as a bank account, securities account, or other	r financial	acco	unt)?		4a	<u> </u>	X
b	If "Yes," enter the name of the foreign country					-		
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of	f Foreign E	Bank					
	and Financial Accounts					4		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	•				5a	<u> </u>	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelte					5b	<u> </u>	X
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exem	npt Entity I	Rega	rding			1	
	Prohibited Tax Shelter Transaction?					5c	<u> </u>	<u> </u>
	Does the organization have annual gross receipts that are normally greater than \$100,000, a	and did the	е					١
	organization solicit any contributions that were not tax deductible?					6a	<u> </u>	<u>X</u>
	If "Yes," did the organization include with every solicitation an express statement that such c	contribution	ns or					İ
	gifts were not tax deductible?					6b	L	
	Organizations that may receive deductible contributions under section 170(c).					ı	ı	ı
	Did the organization receive a payment in excess of \$75 made partly as a contribution and p and services provided to the payor?	baruy for g	ooas			7.		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	,				7a 7b	<u> </u>	<del></del>
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for w					/B		
	required to file Form 8282?	VIIICII IL WA	3			7c	1	1
	If "Yes," indicate the number of Forms 8282 filed during the year	1	7d	l		1 70	į.	ı
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premium	⊔ nsonane		ı al				
	benefit contract?	110 Oii u po	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<b></b>		7e	1	]
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal beni	efit contra	ct?			7f		<del> </del>
	For all contributions of qualified intellectual property, did the organization file Form 8899 as r					7g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Fori		as re	equire	d?	7h		<b></b>
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) support			•		<u> </u>	•	•
	organizations Did the supporting organization, or a donor advised fund maintained by a spo	onsoring o	organ	ızatıo	n,			
	have excess business holdings at any time during the year?					8		
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the organization make any taxable distributions under section 4966?					9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?					9ь		
10	Section 501(c)(7) organizations. Enter							
а	Initiation fees and capital contributions included on Part VIII, line 12	10a						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				<u> </u>		
11	Section 501(c)(12) organizations. Enter	ı				<b>.</b>		
	<b>├</b>	11a						
	Gross income from other sources (Do not net amounts due or paid to other sources							
	· · · · · · · · · · · · · · · · · · ·	11b					ı" ·	1 *
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu	1	041?			12a		
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b					000	(2000)
						10	שכב וווונ	(2009)

Form	990 (2009) BAYSIDE YACHT CLUB 38-24	154578	Р	age 6
Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below			
<u> </u>	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See in	structions		
Secti	on A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body	5 O <sub>1</sub>		
b	Enter the number of voting members that are independent  1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	Î 2		l x
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	Χ	
7a	Does the organization have members, stockholders, or other persons who may elect one of more members			
	of the governing body?	_7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	*		
	the year by the following?	<del></del>		1
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	ļ
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sect	on B. Policies (This Section B requests information about policies not required by the Internal Revenue Code )			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			3.7
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	11	V	X
	Does the organization have a written conflict of interest policy? If "No", go to line 13	12a	X	<del></del>
D	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
_	rise to conflicts?	12b		X
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	425		X
42	describe in Schedule O how this is done  Describe argument and a written which believes palicy?	12c	X	<u> </u>
	Does the organization have a written whistleblower policy?	13	X	├─
	Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by	14	, <b>?</b>	l
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
2	The organization's CEO, Executive Director, or top management official?	15a		l x
	Other officers or key employees of the organization?	15a		X
	Describe the process in Schedule O (see instructions)	1,100		1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		*	~
,	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	, ^¥}		. /- >
	the organization's exempt status with respect to such arrangements?	16b		ĺ
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website  Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes it governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization •		_	
		Form 9	90	(2009)

US990**\$\$**6

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed
- 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. See instructions for definition of "key employee."
- List the organization's fivecurrent highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A)	not compensate (B)			(C				(D)	(E)	(F)
Name and Title	Average	Positi	on (ch			hat ap	ply)		Reportable	Estimated
	hours per week		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
		•								
				ļ						
				-	<u> </u>					
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				-						
		$\vdash$		<del> </del> -					<del> </del>	
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				<del> </del>			-			
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	<del></del>									

Ρē	Section A. Officers, Directors,		Key Li	npicy	_		ı ı sığıı	831		yees (continued)	<del>,                                     </del>
	(A)	(B) (C) Average Position (check all that apply)							(D)	(E)	(F)
	Name and title	hours per week			Officer			Former	Reportable compensation from	Reportable compensation from related	Estimated amount of other
			Individual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	ier	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
			-								
		1									
		<b> </b>									
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		<u>l</u>	]]								
	Total  Total number of individuals (including but r	not limited t	to thos	e liste	d ab	OVE	\ who i	rece	o over than \$100	000 in reportable c	ompensation
	from the organization	ioi iiiiiied	.0 11103	e nate	u ab	OVE,	) WIIO 1		ived more mair \$100	,000 in reportable c	ompensation
											Yes No
	Did the organization list anyformer officer,						ee, or i	nigh	est compensated		
	employee on line 1a? If "Yes," complete So For any individual listed on line 1a, is the s						and o	ther	compensation from		3   X
	the organization and related organizations									1	1
	individual										4   X
	Did any person listed on line 1a receive or services rendered to the organization? If "\					-			-		<b>5</b>     X
	tion B. Independent Contractors	res, comp	iele St	neau	<u>e                                    </u>	01 5	исп ре	1501			<b>3</b>   A
	Complete this table for your five highest co	mpensate	dındep	ende	nt co	ntra	ctors t	hat	received more than \$	100,000 of	
	compensation from the organization										
	(A) Name and busines	e address							(B) Description of s	envices	(C) Compensation
	Name and basines	3 dadiess	-						<u> </u>	ici vices	Compensation
_	<del></del>										
_											

Rev 1

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# Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4)	organizations must	t complete all columns.
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	All other organizations must complete of	olumn (A) but are not	required to complete	columns (B), (C) and (	D).
Do n	ot include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	( <b>D)</b> Fundraising
7b, 8	b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in			ı	
	the U.S. See Part IV, line 22			•	
3	Grants and other assistance to governments,			ı	
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16			•	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				<del></del> -
7	Other salaries and wages .				<del></del> .
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting .				
d	Lobbying				
0	Professional fundraising services See Part IV, line 17		 		
f	Investment management fees				
g	Other				<del></del>
12	Advertising and promotion				
13	Office expenses				
14	Information technology .				
15	Royalties .				
16	Occupancy				
17	Travel .				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	<del>_</del> -			
20	Interest .				<del></del>
21	Payments to affiliates .				
22	Depreciation, depletion, and amortization				
23	Insurance .	L			
24	Other expenses Itemize expenses not covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed	,		•	
	5% of total expenses shown on line 25 below )				
	570 Or total expenses shown on line 25 below /	<u> </u>			-
a		<del> </del>			
b					
c d					
		<del></del> -		<u> </u>	
e f	All other expenses .	- <del>-</del> -			
25	Total functional expenses. Add lines 1 through 24f			L <u></u>	
25 26	Joint Costs Check here If following				
	SOP 98-2 Complete this line only if the org				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Careamonal campaign and landraiding delicitation	<u> </u>	<u> </u>	<u> </u>	5 000 (0000)

Pai	rt X	Balance Sheet				
			<u></u> _	(A)		(B)
				Beginning of year		End of year
	1	Cash - non-interest-bearing	<del></del> _	2682.	1	2725.
	2	Savings and temporary cash investments	19143.	2	15160.	
	3	Pledges and grants receivable, net		_	3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, dire		•	•	
		employees, and highest compensated employees		5		
	6	Receivables from other disqualified persons (as			hus	
		4958(f)(1)) and persons described in section 495		,		
		Part II of Schedule L		6		
υ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
As	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other			<del></del>	
		basis Complete Part VI of Schedule D	10a			
	Ь	Less accumulated depreciation	10b		10c	· · · ·
	11	Investments - publicly traded securities		<del> </del>	11	
	12	Investments - other securities See Part IV, line 1		12		
	13	Investments - program-related See Part IV, line		13		
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		15		
	16	Total assets Add lines 1 through 15 (must equal	21825.	16	17885.	
	17	Accounts payable and accrued expenses	2042.	17	1322.	
	18	Grants payable			18	
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability Complete P		21		
ties	22	Payables to current and former officers, directors			<u> </u>	- 47,
Liabilities		employees, highest compensated employees, an	•		· (	* ** */,
Lia E		persons Complete Part II of Schedule L	a aloqualiio		22	,
	23	Secured mortgages and notes payable to unrelate	ed third parties		23	
	24	Unsecured notes and loans payable to unrelated	•		24	
	25	Other liabilities Complete Part X of Schedule D	······ parities	8000.	25	8000.
	26	Total liabilities Add lines 17 through 25		10042.	26	9322.
	<del> </del> -	Organizations that follow SFAS 117, check here	e ▶ and			
		complete lines 27 through 29, and lines 33 and	_			
Ses	27	Unrestricted net assets		THE RESERVE ASSESSMENT OF THE PARTY OF THE P	27	
<u>a</u>	28	Temporarily restricted net assets			28	
Net Assets or Fund Balances	29	Permanently restricted net assets			29	
Ē		Organizations that do not follow SFAS 117, che	1.5 3 4	**** **	· · · · · · · · · · · · · · · · · · ·	
Ē		and complete lines 30 through 34.	eck here ► X		26.35	, ,
হ	30	Capital stock or trust principal, or current funds			30	~
ssel	31	Paid-in or capital surplus, or land, building, or equ	uipment fund		31	
t Ā	32	Retained earnings, endowment, accumulated inc	•	11783.	32	8563.
Ž	33	Total net assets or fund balances		11783.	33	8563.
	34	Total liabilities and net assets/fund balances		21825.	34	17885.
	1			21020.		Form 990 (2009)

Form 9	990 (2009) BAYSIDE YACHT CLUB	38-2454578	Pag	ge 12
Par	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 🐰 Cash 📗 Accrual 📋 Other			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of the		
	audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements of the year were			
	issued on a consolidated basis, separate basis, or both	2d		
	separate basis consolidated basis both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits?	3b		
		Form	990	(2009

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

	RAYSIDE YACHT CLUB		38-2454578				
	art I Organizations Maintaining Donor Adv	ised Funds or Other Similar Funds					
	Complete if the organization answered ``Yes" to		3171000anto.				
		(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year .	(2) 20101 4411004 141100	(a) I died die offer decoding				
2	Aggregate contributions to (during year)		<del> </del>				
3	Aggregate grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors	in writing that the assets held in donor advis	sed funds				
•	are the organization's property, subject to the organization	_	<b>.</b>				
6	Did the organization inform all grantees, donors, and don	<b>G</b>					
•	for charitable purposes and not for the benefit of the dono		, – –				
P:	art II Conservation Easements. Complete if						
1	* = ·-	· · · · · · · · · · · · · · · · · · ·	o, Fait IV, lille /				
•	Purpose(s) of conservation easements held by the organization (check all that apply)  Preservation of land for public use (e.g., recreation or pleasure)  Preservation of an historically important land area.						
	Preservation of land for public use (e.g., recreation or pleasure) Protection of natural habitat Preservation of an historically important land area Preservation of certified historic structure						
	Protection of natural habitat	Preservatio	n or certined historic structure				
2	Preservation of open space		and the last design of the last				
2	Complete lines 2a-2d if the organization held a qualified of	conservation contribution in the form of a con	servation easement on the last day of th				
	tax year						
_	Total number of consequences		Held at the End of the Year				
a			2a				
b	,		2b				
С		• •	2c				
	Number of conservation easements included in (c) acquir		2d				
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during							
	the taxable year ▶						
4	Number of states where property subject to conservation						
5	Does the organization have a written policy regarding the		· — —				
	and enforcement of the conservation easements it holds?		🛛 Yes 📙 No				
6	Staff and volunteer hours devoted to monitoring, inspecting						
7	Amount of expenses incurred in monitoring, inspecting, a						
8	Does each conservation easement reported on line 2(d) a	above satisfy the requirements of section 170	)(h)(4)(B)(ı)				
	and section 170(h)(4)(B)(ii)?		Yes No				
9	In Part XIV, describe how the organization reports conser	vation easements in its revenue and expense	e statement, and balance sheet, and				
	include, if applicable, the text of the footnote to the organi	ization's financial statements that describes t	he organization's accounting for				
_	conservation easements						
Pa	ort III Organizations Maintaining Collections	of Art, Historical Treasures, or Ot	her Similar Assets.				
	Complete if the organization answered 'Yes" to I						
1 ;	a If the organization elected, as permitted under SFAS 116,	, not to report in its revenue statement and ba	alance sheet works of art, historical				
	treasures, or other similar assets held for public exhibition	i, education, or research in furtherance of pu	blic service, provide, in Part XIV, the				
	text of the footnote to its financial statements that describe	es these items					
ı	b If the organization elected, as permitted under SFAS 116,	, to report in its revenue statement and balan	ce sheet works of art, historical trea-				
	sures, or other similar assets held for public exhibition, ed						
	relating to these items	·					
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$				
	(II) Assets included in Form 990, Part X		► \$ ► \$				
2	If the organization received or held works of art, historical	treasures, or other similar assets for financia	· <del></del>				
	required to be reported under SFAS 116 relating to these						

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2009

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

	dule D (Form 990) 2009 BAISIDE IACHT CLUB			4545/8	Page 4
	Reconciliation of Change in Net Assets from Form 990 to F	inancial Statement	$\overline{}$		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		7,055.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		
3	Excess or (deficit) for the year Subtract line 2 from line 1		3		7,055.
4	Net unrealized gains (losses) on investments	•	4		
5	Donated services and use of facilities	•	5		
6	Investment expenses .	•	6		
7	Prior period adjustments	•	7		
8	Other (Describe in Part XIV)	•	8		<del></del>
9	Total adjustments (net) Add lines 4-8		9	<del></del>	7 055
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9  1 XII Reconciliation of Revenue per Audited Financial Statement	- Wish Davenus no	10	•	7,055.
		s with Revenue pe	erro		
1	Total revenue, gains, and other support per audited financial statements  Amounts included on line 1 but not on Form 990, Part VIII, line 12		1	1	
2	1	ا م		1	
a	Net unrealized gains on investments  Donated services and use of facilities	2a			
b	· · · · · · · · · · · · · · · · · · ·	2b			
C	· · · · ·	2c		1	
d	Add lines 2a through 2d	20		20	
е 3	Subtract line 2e from line 1	•		2e 3	
	Amounts included on Form 990, Part VIII, line 12, but not on lines		'	, s	<del></del>
4		اما		1	
a b	· · · · · · · · · · · · · · · · · · ·	4a 4b		1	
C	Add lines 4a and 4b	40		4c	
5	Total revenue Add lines 3 and 4c (This should equal Form 990, Part I, line 12)		ŀ	5	
	t XIII Reconciliation of Expenses per Audited Financial Statemen	ts With Expenses	ner	Return	<del>-</del>
1	Total expenses and losses per audited financial statements	its With Expenses	<del>PC.</del>	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			<u> </u>	
a	1	2a			
b	· · · · · · · · · · · · · · · · · · ·	2b			
c	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d			
8	Add lines 2a through 2d		$\neg \neg$	2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1		
b	Other (Describe in Part XIV)	4b			
	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18)			5	
_	t XIV Supplemental Information			<u> </u>	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines	1a and 4 Part IV lines		ind 2h Part V	line 4
	X Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this				
~ап.	A Part XI, line 6, Part XII, lines 20 and 40, and Part XIII, lines 20 and 40. Also complete th	is part to provide any ac	aditioi	nai informatio	n
				<del>-,</del>	
				· · ·	
		<del></del>			
					<del>,</del>