2017 Exempt Org. Return prepared for:

Eagle Rock Yacht Club Inc 834 S Broadway #1002 Los Angeles, CA 90014

MAGUIRE & HART, GP
PO BOX 973
AGOURA HILLS, CA 91376-0973

Short Form Return of Organization Exempt From Income Tax

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

OMB No. 1545-1150

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990EZ for instructions and the latest information

Open to Public Inspection

Ä	For	the 2017 calendar year, or tax year beginning , 2017, and ending	,			
В	Check if applicable: C D		Employer identification number			
F	Name change Eagle Rock Yacht Club Inc			27-2225420		
H	Initial return 834 S Broadway #1002			Telephone number		
F	Initial return Final return/terminated Los Angeles, ĈA 90014					
F	╡			t'		
	=	I IF (:	Group Ex Number	emption ►		
G	Acc	ounting Method: X Cash Accrual Other (specify) ► H Check ► X	X if the	organization is not		
I	Web	psite: www.eaglerockyachtclub.com required to	attach S	Schedule B		
J	Tax-e	x-exempt status (check only one) — X 501(c)(3)				
K		n of organization: X Corporation Trust Association Other				
L	Add asse	lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if totaets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	al ►\$	68,413.		
Р		Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instruction				
-	<u> </u>	Check if the organization used Schedule O to respond to any question in this Part I				
	1	Contributions, gifts, grants, and similar amounts received	1	6,323.		
	2	Program service revenue including government fees and contracts	2	57,591.		
	3	Membership dues and assessments	3	0.70021		
	4	Investment income	4			
	5 8	a Gross amount from sale of assets other than inventory				
		b Less: cost or other basis and sales expenses				
		Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5 c			
	6	Gaming and fundraising events				
Ŗ	_	a Gross income from gaming (attach Schedule G if greater than \$15,000)				
Ž		b Gross income from fundraising events (not including \$ of contributions				
REVENUE		from fundraising events reported on line 1) (attach Schedule Of the sum				
Ĕ		of such gross income and contributions exceeds \$15,000				
		c Less: direct expenses from gaming and fundraising events	<u>. </u>			
		d Net income or (loss) from gaming and tundraising events (add lines 6a and 6b and subtract line 6c)	6 d	1,727.		
	7	a Gross sales of inventory, less returns and allowances	00	1,121.		
		b Less: cost of goods sold				
		c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7 c			
	8	Other revenue (describe in Schedule O).				
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		65,641.		
	10	Grants and similar amounts paid (list in Schedule O).		03/011.		
	11	Benefits paid to or for members	11			
E	12	Salaries, other compensation, and employee benefits	12			
EXPENSES	13	Professional fees and other payments to independent contractors	13	4,575.		
	14	Occupancy, rent, utilities, and maintenance.	14	1/0/01		
S E	15	Printing, publications, postage, and shipping	15			
S	16	Other expenses (describe in Schedule O). See Schedule O	16	58,254.		
	17	Total expenses. Add lines 10 through 16		62,829.		
A NSE TT S	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	2,812.		
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year		2, 012.		
	19	figure reported on prior year's return)	19	31,002.		
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	32,000.		
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	33,814.		
=				50,017		

Par	Check if the organization used Sch	structions for Part II) nedule O to respond to any qu	estion in this Part II			X
	<u> </u>			(A) Beginning of year		(B) End of year
22	Cash, savings, and investments			31,430.	22	34,019.
23	Land and buildings			,	23	,
24	Other assets (describe in Schedule O)				24	
25	Total assets			31,430.	25	34,019.
26	Total liabilities (describe in Schedule C))	e 0	428.	26	205.
27	Net assets or fund balances (line 27 of	f column (B) must agree with	line 21)	31,002.	27	33,814.
Par	t III Statement of Program Service A	Accomplishments (see the inst	ructions for Part III)			Expenses
	Check if the organization used S	chedule O to respond to any o	question in this Part́ II	LX	Regi	uired for section 501
What	is the organization's primary exempt purpose? Se	ee Schedule O			(c)(3)	and 501(c)(4)
Desc	cribe the organization's program service	accomplishments for each of	its three largest progr	am services, as		nizations; optional thers.)
bene	cribe the organization's program service sured by expenses. In a clear and concipited, and other relevant information for	each program title.	ces provided, the num	iber of persons	01 01	ners.)
28	Coo Cahadula O					
	Dec Delication					
	(Grants \$) If t	his amount includes foreign g	rants, check here	<i>-</i>	28 a	55,512.
29	,	3 3	,			33,312.
	(Grants \$) If t	his amount includes foreign g	rants, check here		29 a	
30	, ,		,			
-						
	(Grants \$) If t	his amount includes foreign g	rants, check here		30 a	
31	Other program services (describe in So				50 u	
31		his amount includes foreign g			31 a	
32	Total program service expenses (add				32	55,512.
	t IV List of Officers, Directors,				-	
Гаг	Check if the organization used S				e uie i	iistructions for Fart IV)
	Check if the organization used c	1	· // × //	11 2 2	· · · · · ·	
	(a) Name and title	(b) Average hours per week devoted to	(c) Reportable compensation (Forms W-2/1099-MSC) (in not paid, enter -0-)	contributions to employ benefit plans, and defer	yee	(e) Estimated amount of other compensation
		position	(if not paid, enter -0-)	compensation	ireu	other compensation
Chi	ristopher Alves	188				
	esident] ~ ~ ~ ((()) (Gy) 30	0		0.	0.
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BAA		TEEA0812L 0	<u>)</u>)8/22/17	-		Form 990-EZ (2017)
	·					. OIIII JJU-LL (LUI/)

the instructions for Part V.) Check if the organization used Schedule O to respond to any question in the instructions for Part V.)	his Part V		. П
33 Did the organization engage in any significant activity not previously reported to the IRS?		Yes	No
If 'Yes,' provide a detailed description of each activity in Schedule O			X
Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended document a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)			Х
35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activiti (such as those reported on lines 2, 6a, and 7a, among others)?			Х
b If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? <i>If 'No,' provide an explanation in</i>		_	71
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) no reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III	otice,		Х
36 Did the organization undergo a liquidation, dissolution, termination, or significant			
disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36		X
b Did the organization file Form 1120-POL for this year?	37 b		Х
38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or vany such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	vere		
b If 'Yes,' complete Schedule L, Part II and enter the total			X
amount involved	N/A		
a Initiation fees and capital contributions included on line 9	N/A		
b Gross receipts, included on line 9, for public use of club facilities	N/A		
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	IN/ A		
section 4911 • 0 ; section 4912 • 0 ; section 4955 •	0		
b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958	0.		
benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that ha	s not been		Х
reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	40.0		Λ
managers or disqualified persons during the year under sections 4912, 4955, and 4958	0.		
d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization	0.		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40 e		Х
41 List the states with which a copy of this return is filed None	<u> </u>	<u> </u>	
42 a The organization's books are in care of ► Chris Alves Telephone	no. ►		
Located at ► 834 S Broadway #1002 Los Angeles CA ZIP +	+4► 90014		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over	a nt)2	Yes	No
financial account in a foreign country (such as a bank account, securities account, or other financial account If 'Yes,' enter the name of the foreign country:►	nt)? 42 b		Х
See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
c At any time during the calendar year, did the organization maintain an office outside the United States?	42 c		Χ
If 'Yes,' enter the name of the foreign country:▶			
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year	1 1	-	N/A N/A
	<u> </u>	Yes	No
44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.	ead 44 a		Х
b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.			
c Did the organization receive any payments for indoor tanning services during the year?			X
d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O			
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?			X
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)			Х

Form 990-EZ (2017) Eagle Rock Yacht Club Inc 27-2225420 Page 4 No Yes Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I..... 46 Χ Section 501(c)(3) organizations only All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI..... No Yes 47 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 47 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 48 49 a Did the organization make any transfers to an exempt non-charitable related organization?...... 49 a **b** If 'Yes,' was the related organization a section 527 organization? 49 b Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.' (d) Health benefits, contributions to employee benefit plans, and deferred compensation (b) Average hours (e) Estimated amount of (c) Reportable compensation (Forms W-2/1099-MISC) er week devoted to position (a) Name and title of each employee other compensation None f Total number of other employees paid over \$100,000 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None. (a) Name and business address of each independent contractor (b) Type of service (c) Compensation None d Total number of other independent contractors each receiving over \$100,000..... 52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a No completed Schedule A. Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign Here President Christopher Alves Type or print name and title Print/Type preparer's name Preparer's signature Check

. ► X Yes No
Form 990-EZ (2017)

865-8670

P00165277

(818)

26-1242320

self-employed

Firm's EIN

Phone no

Vincent Maguire, EA

91376-0973

GP

CA

Vincent Maguire, EA

Firm's name ▶

Firm's address ►

MAGUIRE & HART

PO BOX 973

AGOURA HILLS

Paid

Preparer Use Only

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number 27-2225420 Eagle Rock Yacht Club Inc

Form 990-EZ, Part I, Line 16 Other Expenses

Advertising and Promotion. Community Support. Computer/Internet. Conferences	\$	2,048. 2,030. 707. 5,016.
Insurance		1,179.
League Expenses		14,203.
License and Permits		240.
Member Program Expenses		6,738.
Memberships and Dues		120.
Outside Services		6,000.
Parking		_68.
Payroll Processing		540.
Postage		553.
Rent		15,200.
Shop Expenses		2,700.
Supplies		727.
Tax/License		185.
Total	. <u>\$</u>	58,254.

Form 990-EZ, Part II, Line 26 **Total Liabilities**

Accounts Payable and Accrued Expenses

428 205 428. 205.

Form 990-EZ, Part III - Organization's Primary Exempt Purpose

The Yacht Club utilizes the nostalgia of dodge ball to reinvigorate struggling city parks while providing tailor made youth programming to the at-risk youth and members of the surrounding community with a focus on health, education, social connectedness, public safety, environmental quality, arts and cultural vitality.

Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

Funds were used to purchase supplies for events and programs directed at our charitable purpose of reinvigorating struggling city parks by providing tailor made youth programming to the at-risk youth and dodge ball leagues. gym permit fees, sending kids to summer camp at oakwood recreations center and north Hollywood recreation center.