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# TAX RETURN FILING INSTRUCTIONS

**FORM 990**

**FOR THE YEAR ENDING**

December 31, 2019

| Prepared for          | ROCKING THE BOAT, INC.  
|                       | 812 edgewater road  
|                       | BRONX, NY  10474 |

| Prepared by           | TOBIN & COMPANY, CPA'S  
|                       | 2500 WESTCHESTER AVENUE  
|                       | PURCHASE, NY  10577 |

| Amount due or refund   | Not applicable |

| Make check payable to | Not applicable |

| Mail tax return and check (if applicable) to | Not applicable |

| Return must be mailed on or before | Not applicable |

**Special Instructions**

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-EO to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS.
Form 8879-EO

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here ✗ b Total revenue, if any (Form 990, Part VIII, column (A), line 12) ........................................ 1b 2,956,427.
2a Form 990-EZ check here □ b Total revenue, if any (Form 990-EZ, line 9) ........................................ 2b
3a Form 1120-POL check here □ b Total tax (Form 1120-POL, line 22) ........................................ 3b
4a Form 990-PF check here □ b Tax based on investment income (Form 990-PF, Part VI, line 5) ........................................ 4b
5a Form 8868 check here □ b Balance Due (Form 8868, line 3c) ........................................ 5b

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization’s 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization’s electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization’s return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization’s federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization’s electronic return and, if applicable, the organization’s consent to electronic funds withdrawal.

Officer’s PIN: check one box only

I authorize □ to enter my PIN ERO firm name Enter five numbers, but do not enter all zeros

As my signature on the organization’s tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return’s disclosure consent screen.

X As an officer of the organization, I will enter my PIN as my signature on the organization’s tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return’s disclosure consent screen.

Part III Certification and Authentication

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

EROS signature □ Date □

EROS Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So
Form 990
(Rev. January 2020)
Department of the Treasury
Internal Revenue Service

EXTENDED TO NOVEMBER 16, 2020

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

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning and ending

B Name of organization
ROCKING THE BOAT, INC.

D Employer identification number
**-***7814

E Telephone number
718-466-5799

I Tax-exempt status: (X) 501(c)(3) 501(c)( ) (a) (insert no.) 4947(a)(1) or 527

J Website: WWW.ROCKINGTHEBOAT.ORG

K Form of organization: [ ] Corporation [ ] Trust [ ] Association [ ] Other

L Year of formation: 1995 [ ] State of legal domicile: NY

Part I
Summary

1 Briefly describe the organization’s mission or most significant activities: TRADITIONAL WOODEN BOATBUILDING, ROWING, SAILING, ENVIRONMENTAL RESEARCH AND RESTORATION, INDIVIDUAL

2 Check this box [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, line 39

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue (must equal Part VIII, column (A), line 12)

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25)

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses. Subtract line 18 from line 12

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances. Subtract line 21 from line 20

Part II
Signature Block

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
MANDA D'AGATA, PRESIDENT

Date 9/15/2020

Print/Type preparer’s name
Preparer’s signature

Paid
Preparer’s name
TOBIN & COMPANY, CPA’S

Preparer’s signature

Date

Type or print name and title

Paid
Preparer’s name

Preparer’s signature

Date

Preparer’s EIN
**-***2313

PTIN 00593418

self-employed

Firm’s EIN

Firm’s name

Firm’s EIN
**-***7814

Firm’s address

Phone no. 9148332200

9/15/2020 | 1:15 PM EDT

LHA For Paperwork Reduction Act Notice, see the separate instructions.

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION
ROCKING THE BOAT EMPOWERS YOUNG PEOPLE FROM THE SOUTH BRONX TO DEVELOP THE SELF-CONFIDENCE TO SET AMBITIOUS GOALS AND GAIN THE SKILLS NECESSARY TO ACHIEVE THEM.

ROCKING THE BOAT OPERATES A RANGE OF BOATBUILDING, ENVIRONMENTAL SCIENCE AND SAILING YOUTH AND COMMUNITY DEVELOPMENT PROGRAMS. THE FOLLOWING SUMMARIZES THE MAJOR PROGRAMS:

1-YOUTH DEVELOPMENT PROGRAM:
ROCKING THE BOAT'S YOUTH DEVELOPMENT PROGRAM IS SPLIT INTO THREE TRACKS—WOODEN BOATBUILDING, BRONX RIVER RESTORATION, SAILING—AND TWO LEVELS—STUDENT AND APPRENTICE—BUT UNITED THROUGH A SHARED FOCUS ON GIVING HIGH SCHOOL STUDENTS THE OPPORTUNITY TO LEARN BY DOING PRACTICAL WORK THAT PRODUCES TANGIBLE RESULTS.

2-PUBLIC PROGRAMS:

15430806 800994 ROCKING       2019.04000 ROCKING THE BOAT, INC.      ROCKING1

SEE SCHEDULE O FOR CONTINUATION(S)
** Part IV Checklist of Required Schedules **

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Is the organization required to complete Schedule B, Schedule of Contributors?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If &quot;Yes,&quot; complete Schedule C, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule C, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 Revenue Procedure 98-19? If &quot;Yes,&quot; complete Schedule C, Part III</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If &quot;Yes,&quot; complete Schedule D, Part III</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If &quot;Yes,&quot; complete Schedule D, Part IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If &quot;Yes,&quot; complete Schedule D, Part V</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>11 If the organization's answer to any of the following questions is &quot;Yes,&quot; then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If &quot;Yes,&quot; complete Schedule D, Part VI</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part VII</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>c 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 &quot;Yes,&quot; complete Schedule D, Part VIII</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part IX</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>e Did the organization report an amount for other liabilities in Part X, line 25? If &quot;Yes,&quot; complete Schedule D, Part X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>12a Did the organization obtain separate, independent audited financial statements for the tax year? If &quot;Yes,&quot; complete Schedule D, Parts XI and XII</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b Was the organization included in consolidated, independent audited financial statements for the tax year? If &quot;Yes,&quot; and if the organization answered &quot;No&quot; to line 12a, then completing Schedule D, Parts XI and XII is optional</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>13 Is the organization a school described in section 170(b)(1)(A)(ii)? If &quot;Yes,&quot; complete Schedule E</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>14a Did the organization maintain an office, employees, or agents outside of the United States?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? If &quot;Yes,&quot; complete Schedule F, Parts I and IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>15 Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? If &quot;Yes,&quot; complete Schedule F, Parts II and IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule F, Parts III and IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule G, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule G, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>19 Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? If &quot;Yes,&quot; complete Schedule G, Part III</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>20a Did the organization operate one or more hospital facilities? If &quot;Yes,&quot; complete Schedule H</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b If &quot;Yes&quot; to line 20a, did the organization attach a copy of its audited financial statements to this return?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 17? If &quot;Yes,&quot; complete Schedule I, Parts I and II</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>
### Part IV Checklist of Required Schedules (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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 22? If &quot;Yes,&quot; complete Schedule I, Parts I and III.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>23. Did the organization answer &quot;Yes&quot; to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If &quot;Yes,&quot; complete Schedule J.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>24a. 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 &quot;Yes,&quot; answer lines 24b through 24d and complete Schedule K. If &quot;No,&quot; go to line 25a.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Did the organization act as an &quot;on behalf of&quot; issuer for bonds outstanding at any time during the year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25a. Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If &quot;Yes,&quot; complete Schedule L, Part I.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule L, Part I.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule L, Part II.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule L, Part III.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>28. Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If &quot;Yes,&quot; complete Schedule L, Part IV.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b. A family member of any individual described in line 28a? If &quot;Yes,&quot; complete Schedule L, Part IV.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>c. A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If &quot;Yes,&quot; complete Schedule L, Part IV.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>29. Did the organization receive more than $25,000 in non-cash contributions? If &quot;Yes,&quot; complete Schedule M.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>30. Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If &quot;Yes,&quot; complete Schedule M.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>31. Did the organization liquidate, terminate, or dissolve and cease operations? If &quot;Yes,&quot; complete Schedule N, Part I.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>32. Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If &quot;Yes,&quot; complete Schedule N, Part II.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule R, Part I.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>34. Was the organization related to any tax-exempt or taxable entity? If &quot;Yes,&quot; complete Schedule R, Part II, III, or IV, and Part V, line 1.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>35a. Did the organization have a controlled entity within the meaning of section 512(b)(13)?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b. If &quot;Yes&quot; to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If &quot;Yes,&quot; complete Schedule R, Part V, line 2.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>36. Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If &quot;Yes,&quot; complete Schedule R, Part V, line 2.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>37. Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If &quot;Yes,&quot; complete Schedule R, Part VI.</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>38. Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

**Note:** All Form 990 filers are required to complete Schedule O.

### Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a. Enter the number reported in Box 3 of Form 1096. Enter 0 if not applicable</td>
<td>29</td>
<td></td>
</tr>
<tr>
<td>b. Enter the number of Forms W-2G included in line 1a. Enter 0 if not applicable</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?</td>
<td>1c</td>
<td></td>
</tr>
</tbody>
</table>

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Form 990 (2019) ROCKING THE BOAT, INC.  **-***7814 Page 4

15430806 800994 ROCKING 2019.04000 ROCKING THE BOAT, INC. ROCKING1
### Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

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.  
\[ \square \text{Yes} \quad \square \text{No} \]

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>If at least one is reported on line 2a, did the organization file all required federal employment tax returns?</td>
<td>( \square ) Yes ( \square ) No</td>
<td><strong>Note:</strong> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</td>
</tr>
</tbody>
</table>

3a Did the organization have unrelated business gross income of $1,000 or more during the year?  
\[ \square \] Yes \( \square \) No  

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>3a</td>
<td>If &quot;Yes,&quot; did the organization file a Form 990-T for this year? If &quot;No&quot; to line 3b, provide an explanation on Schedule O</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
</tr>
</tbody>
</table>

4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  
\[ \square \] Yes \( \square \) No  

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>4a</td>
<td>If &quot;Yes,&quot; enter the name of the foreign country</td>
<td></td>
<td>See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).</td>
</tr>
</tbody>
</table>

5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  
\[ \square \] Yes \( \square \) No  

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>5a</td>
<td>If &quot;Yes,&quot; has any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
</tr>
</tbody>
</table>

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?  
\[ \square \] Yes \( \square \) No  

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>6a</td>
<td>If &quot;Yes,&quot; did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
</tr>
</tbody>
</table>

7 Organizations that may receive deductible contributions under section 170(c).  

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>7a</td>
<td>If the organization received a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>7b</td>
<td>If &quot;Yes,&quot; did the organization notify the donor of the value of the goods or services provided?</td>
<td>( \square ) Yes ( \square ) No</td>
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<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
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</thead>
<tbody>
<tr>
<td>7c</td>
<td>Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</td>
<td>( \square ) Yes ( \square ) No</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>7d</td>
<td>If &quot;Yes,&quot; indicate the number of Forms 8282 filed during the year</td>
<td>( \square ) Yes ( \square ) No</td>
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</table>

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<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>7e</td>
<td>Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</td>
<td>( \square ) Yes ( \square ) No</td>
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</table>

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
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</thead>
<tbody>
<tr>
<td>7f</td>
<td>Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
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</thead>
<tbody>
<tr>
<td>7g</td>
<td>Did the organization receive a contribution of qualified intellectual property, did the organization file Form 8899 as required?</td>
<td>( \square ) Yes ( \square ) No</td>
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</table>

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
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</thead>
<tbody>
<tr>
<td>7h</td>
<td>If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
</tr>
</tbody>
</table>

8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  
\[ \square \] Yes \( \square \) No  

9 Sponsoring organizations maintaining donor advised funds.  

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>9a</td>
<td>Did the sponsoring organization make any taxable distributions under section 4966?</td>
<td>( \square ) Yes ( \square ) No</td>
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</table>

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>9b</td>
<td>Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
</tr>
</tbody>
</table>

10 Section 501(c)(7) organizations. Enter:  

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a</td>
<td>Initiation fees and capital contributions included on Part VIII, line 12</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
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</tbody>
</table>

11 Section 501(c)(12) organizations. Enter:  

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>11a</td>
<td>Gross income from members or shareholders</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>11b</td>
<td>Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
</tr>
</tbody>
</table>

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  
\[ \square \] Yes \( \square \) No  

<table>
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<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>12b</td>
<td>If &quot;Yes,&quot; enter the amount of tax-exempt interest received or accrued during the year</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
</tr>
</tbody>
</table>

13 Section 501(c)(29) qualified nonprofit health insurance issuers.  

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>13a</td>
<td>Is the organization licensed to issue qualified health plans in more than one state?</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>13b</td>
<td>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</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>13c</td>
<td>Enter the amount of reserves on hand</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
</tr>
</tbody>
</table>

14a Did the organization receive any payments for indoor tanning services during the tax year?  
\[ \square \] Yes \( \square \) No  

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>14b</td>
<td>If &quot;Yes,&quot; has it filed a Form 720 to report these payments? If &quot;No,&quot; provide an explanation on Schedule O</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
</tr>
</tbody>
</table>

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?  
\[ \square \] Yes \( \square \) No  

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>16</td>
<td>If &quot;Yes,&quot; see instructions and file Form 4720, Schedule N.</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
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</tbody>
</table>

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<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Is the organization an educational institution subject to the section 4968 excise tax on net investment income?</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Option</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>If &quot;Yes,&quot; complete Form 4720, Schedule O.</td>
<td>( \square ) Yes ( \square ) No</td>
<td></td>
</tr>
</tbody>
</table>
Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year
Yes 15
No

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.

1b Enter the number of voting members included on line 1a, above, who are independent
Yes 15
No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

10a Did the organization have local chapters, branches, or affiliates?
Yes 10a
No

If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?
Yes 11a
No

b Describe in Schedule O the process, if any, used by the organization to review this Form 990.

12a Did the organization have a written conflict of interest policy?
Yes 12a
No

g If "No," go to line 13

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
Yes 12b
No

c Describe in Schedule O how this was done

13 Did the organization have a written whistleblower policy?
Yes 13
No

14 Did the organization have a written document retention and destruction policy?
Yes 14
No

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

a The organization's CEO, Executive Director, or top management official
Yes 15a
No

b Other officers or key employees of the organization
Yes 15b
No

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).

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?
Yes 16a
No

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?
Yes 16b
No

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed

NY

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records

VICTOR ISAYEV - 718-466-5799
812 EDDYWATER ROAD, BRONX, NY 10474

Form 990 (2019)
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

- List all of the organization’s current key employees, if any. See instructions for definition of "key employee."
- List the organization’s five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization’s former officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization’s former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

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

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) DUSTIN GOODWIN</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(2) FRANCES MONTGOMERY</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(3) CARLA MURPHY</td>
<td>3.00</td>
<td>SECRETARY</td>
<td>X X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(4) PETER WRIGHT</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(5) JENNIFER GALVIN</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(6) ROLANDO THOMAS INFANTE</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(7) THOMAS CARPENTER</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(8) ANTONIO RAMOS</td>
<td>1.00</td>
<td>VICE PRESIDENT</td>
<td>X X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(9) OSCAR AARTS</td>
<td>1.00</td>
<td>TREASURER</td>
<td>X X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(10) MANDA D'AGATA</td>
<td>1.00</td>
<td>PRESIDENT</td>
<td>X X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(11) JEREMY POCHMAN</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(12) PETER BEARDSLEY</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(13) THOMAS THACKER</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(14) MATT LANDRY</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(15) GREG MATZAT</td>
<td>1.00</td>
<td>DIRECTOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(16) ADAM GREEN</td>
<td>40.00</td>
<td>EXECUTIVE DIRECTOR</td>
<td>X</td>
<td>133,800.</td>
<td>0.</td>
</tr>
</tbody>
</table>
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
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<tbody>
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</tbody>
</table>

1b Subtotal: $133,800.00 | 0 | 39,102.00  

Total from continuation sheets to Part VII, Section A: $0.00 | 0 | 0.00  

Total (add lines 1b and 1c): $133,800.00 | 0 | 39,102.00  

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization: 1  

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a?  
   - Yes: X  
   - No:  

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000?  
   - Yes:  
   - No: X  

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization?  
   - Yes:  
   - No: X  

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
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</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization: 0  

Form 990 (2019)
### Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

<table>
<thead>
<tr>
<th>(A)</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 a</td>
<td>Federated campaigns</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 b</td>
<td>Membership dues</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 c</td>
<td>Fundraising events</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 d</td>
<td>Related organizations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 e</td>
<td>Government grants (contributions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 f</td>
<td>All other contributions, gifts, grants, and similar amounts not included above</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 g</td>
<td>Noncash contributions included in lines 1a-1f</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 h</td>
<td>Total, Add lines 1a-1f</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 a</td>
<td>PROGRAM CONTRACT FEE</td>
<td>104,848.</td>
<td>104,848.</td>
</tr>
<tr>
<td>3</td>
<td>Investment income (including dividends, interest, and other similar amounts)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Income from investment of tax-exempt bond proceeds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Royalties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 a</td>
<td>Gross rents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 b</td>
<td>Less: rental expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 c</td>
<td>Rental income or (loss)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 d</td>
<td>Net rental income or (loss)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 a</td>
<td>Gross amount from sales of assets other than inventory</td>
<td>13,119.</td>
<td></td>
</tr>
<tr>
<td>7 b</td>
<td>Less: cost or other basis and sales expenses</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>7 c</td>
<td>Gain or (loss)</td>
<td>13,119.</td>
<td></td>
</tr>
<tr>
<td>8 a</td>
<td>Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18</td>
<td>10,342.</td>
<td></td>
</tr>
<tr>
<td>8 b</td>
<td>Less: direct expenses</td>
<td>90,899.</td>
<td></td>
</tr>
<tr>
<td>9 a</td>
<td>Gross income from gaming activities. See Part IV, line 19</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 b</td>
<td>Less: direct expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 a</td>
<td>Gross sales of inventory, less returns and allowances</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 b</td>
<td>Less: cost of goods sold</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 c</td>
<td>Net income or (loss) from sales of inventory</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 a</td>
<td>Miscellaneous Revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 d</td>
<td>All other revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 e</td>
<td>Total, Add lines 11a-11d</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Total revenue. See instructions</td>
<td>2,956,427.</td>
<td>104,848.</td>
</tr>
<tr>
<td></td>
<td>(A)</td>
<td>(B)</td>
<td>(C)</td>
</tr>
<tr>
<td>---</td>
<td>------</td>
<td>------</td>
<td>------</td>
</tr>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td>111,951</td>
<td>111,951</td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>133,800</td>
<td>57,334</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>1,368,862</td>
<td>973,474</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>387,998</td>
<td>250,154</td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (nonemployees):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Legal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Accounting</td>
<td>82,635</td>
<td>62,323</td>
</tr>
<tr>
<td>d</td>
<td>Lobbying</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising services, See Part IV, line 17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)</td>
<td>124,175</td>
<td>43,255</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td>42,391</td>
<td>31,762</td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>63,175</td>
<td>62,523</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>50,509</td>
<td>45,780</td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td>13,830</td>
<td>13,415</td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>126,591</td>
<td>122,791</td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td>29,196</td>
<td>24,025</td>
</tr>
<tr>
<td>24</td>
<td>Other expenses, Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>DIRECT PROGRAM EXPENSES</td>
<td>89,851</td>
<td>89,820</td>
</tr>
<tr>
<td>b</td>
<td>REPAIRS AND MAINTENANCE</td>
<td>51,700</td>
<td>47,640</td>
</tr>
<tr>
<td>c</td>
<td>STAFF, STUDENT, &amp; EVEN</td>
<td>30,762</td>
<td>28,688</td>
</tr>
<tr>
<td>d</td>
<td>ENTRANCE, RENTAL, CHART</td>
<td>29,312</td>
<td>29,122</td>
</tr>
<tr>
<td>e</td>
<td>All other expenses</td>
<td>59,525</td>
<td>43,090</td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>2,796,263</td>
<td>2,037,147</td>
</tr>
<tr>
<td>26</td>
<td>Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Check if Schedule O contains a response or note to any line in this Part IX:

Add lines 1 through 24e

Form 990 (2019)
## ROCKING THE BOAT, INC.

### Part X  Balance Sheet

**Check if Schedule O contains a response or note to any line in this Part X**

- [ ]

### Assets

<table>
<thead>
<tr>
<th></th>
<th>Beginning of year</th>
<th>End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash - non-interest-bearing</td>
<td>336,483</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>1,799,345</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>594,379</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Loans and other receivables from other disqualified persons (as defined under section 4958(h)(1)), and persons described in section 4958(c)(3)(B)</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>24,778</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>3,238,616</td>
</tr>
<tr>
<td>10b</td>
<td>Less: accumulated depreciation</td>
<td>1,369,965</td>
</tr>
<tr>
<td>11</td>
<td>Investments - publicly traded securities</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Investments - other securities. See Part IV, line 11</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Investments - program-related. See Part IV, line 11</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td>3,635</td>
</tr>
<tr>
<td>16</td>
<td>Total assets. Add lines 1 through 15 (must equal line 33)</td>
<td>4,718,814</td>
</tr>
</tbody>
</table>

### Liabilities

<table>
<thead>
<tr>
<th></th>
<th>Beginning of year</th>
<th>End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>88,636</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td>14,449</td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Loans and other 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</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td>973,095</td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>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</td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities. Add lines 17 through 25</td>
<td>1,086,180</td>
</tr>
</tbody>
</table>

### Net Assets or Fund Balances

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>Net assets without donor restrictions</td>
<td>2,153,985</td>
</tr>
<tr>
<td>28</td>
<td>Net assets with donor restrictions</td>
<td>1,488,649</td>
</tr>
</tbody>
</table>

### Organizations that follow FASB ASC 958, check here

- [x] and complete lines 27, 28, 32, and 33.

### Organizations that do not follow FASB ASC 958, check here

- [ ] and complete lines 29 through 33.

### Total liabilities and net assets/fund balances

- [ ]

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>32</td>
<td>Total net assets or fund balances</td>
<td>3,642,634</td>
</tr>
<tr>
<td>33</td>
<td>Total liabilities and net assets/fund balances</td>
<td>4,718,814</td>
</tr>
</tbody>
</table>

Form 990 (2019)
### Part XI | Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI:  

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>2,956,427.</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>2,796,263.</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>160,164.</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))</td>
<td>3,642,634.</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>199,014.</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain on Schedule O)</td>
<td>0.</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))</td>
<td>4,001,812.</td>
</tr>
</tbody>
</table>

### Part XII | Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII:  

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Cash</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Accrual</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Other</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed its method of accounting from a prior year or checked &quot;Other,&quot; explain in Schedule O.</td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Separate basis</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Consolidated basis</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Both consolidated and separate basis</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Separate basis</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Consolidated basis</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Both consolidated and separate basis</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>If &quot;Yes&quot; 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?</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.</td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>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?</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; the organization undergo the required audit or audits, explain on Schedule O and describe any steps taken to undergo such audits</td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>If &quot;Yes,&quot; did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain on Schedule O and describe any steps taken to undergo such audits</td>
<td></td>
</tr>
</tbody>
</table>

Form 990 (2019)
**Part I  Reason for Public Charity Status**

(All organizations must complete this part.) See instructions.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).</td>
</tr>
<tr>
<td>2</td>
<td>A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)</td>
</tr>
<tr>
<td>3</td>
<td>A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).</td>
</tr>
<tr>
<td>4</td>
<td>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;</td>
</tr>
<tr>
<td>5</td>
<td>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.)</td>
</tr>
<tr>
<td>6</td>
<td>A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).</td>
</tr>
<tr>
<td>7</td>
<td>An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)</td>
</tr>
<tr>
<td>8</td>
<td>A community trust described in section 170(b)(1)(A)(vii). (Complete Part II.)</td>
</tr>
<tr>
<td>9</td>
<td>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;</td>
</tr>
<tr>
<td>10</td>
<td>An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% 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.)</td>
</tr>
<tr>
<td>11</td>
<td>An organization organized and operated exclusively to test for public safety. See section 509(a)(4).</td>
</tr>
<tr>
<td>12</td>
<td>An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out purposes described in section 170(b)(1)(A)(i) or section 170(b)(1)(A)(ii). (Complete Part II.)</td>
</tr>
</tbody>
</table>

- **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, 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.

- Enter the number of supported organizations.

- Provide the following information about the supported organization(s).

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-10 above (see instructions))</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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):**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td>2077215</td>
<td>2537664</td>
<td>2963257</td>
<td>2922361</td>
<td>2911181</td>
</tr>
<tr>
<td>2</td>
<td>Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td><strong>Total. Add lines 1 through 3</strong></td>
<td>2077215</td>
<td>2537664</td>
<td>2963257</td>
<td>2922361</td>
<td>2911181</td>
</tr>
<tr>
<td>5</td>
<td>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)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>932,596</td>
</tr>
<tr>
<td>6</td>
<td><strong>Public support. Subtract line 5 from line 4.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12479082</td>
</tr>
</tbody>
</table>

### Section B. Total Support

**Calendar year (or fiscal year beginning in):**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Amounts from line 4</td>
<td>2077215</td>
<td>2537664</td>
<td>2963257</td>
<td>2922361</td>
<td>2911181</td>
</tr>
<tr>
<td>8</td>
<td>Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td><strong>Total support. Add lines 7 through 10</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>13411678</td>
</tr>
<tr>
<td>12</td>
<td>Gross receipts from related activities, etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>628,999</td>
</tr>
</tbody>
</table>

**First five 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.**

**Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))**

<table>
<thead>
<tr>
<th></th>
<th>14</th>
<th>15</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>93.05</td>
<td>93.02</td>
</tr>
</tbody>
</table>

**Public support percentage from 2018 Schedule A, Part II, line 14**

**33 1/3% support test - 2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

**33 1/3% support test - 2018.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

**10% - facts-and-circumstances test - 2019.** 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 organization.

**10% - facts-and-circumstances test - 2018.** If the organization did not check a box on line 13, 16a, 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 organization.

**Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.
## Schedule A (Form 990 or 990-EZ) 2019

**ROCKING THE BOAT, INC.**

### 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.)

#### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support. (Subtract line 7c from line 6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support. (Add lines 9, 10c, 11, and 12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 First five 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f)</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Public support percentage from 2018 Schedule A, Part III, line 15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f)</th>
</tr>
</thead>
<tbody>
<tr>
<td>17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Investment income percentage from 2018 Schedule A, Part III, line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19a 33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19b 33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**DocuSign Envelope ID:** 9409F6C0-3F19-4569-9335-9EA8A506B832
### Section A. All Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If “Yes,” answer (b) and (c) below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a Was any supported organization not organized in the United States (“foreign supported organization”)? If “Yes,” and if you checked 12a or 12b in Part I, answer (b) and (c) below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5a Did the organization add, substitute, or remove any supported organizations during the tax year? If “Yes,” answer (b) and (c) 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).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Substitutions only. Was the substitution the result of an event beyond the organization’s control?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 or 990-EZ).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If “Yes,” complete Part I of Schedule L (Form 990 or 990-EZ).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If “Yes,” provide detail in Part VI.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Did a disqualified person (as defined in 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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a 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 10b below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part IV. Supporting Organizations (continued)

#### Section B. Type I Supporting Organizations

1. Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.

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

#### Section C. Type II Supporting Organizations

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

#### Section D. All Type III Supporting Organizations

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?

2. Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).

3. By reason of the relationship described in (2), 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," explain in Part VI the role the organization's supported organizations played in this regard.

### Section E. Type III Functionally Integrated Supporting Organizations

1. Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
   - a. 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.
   - c. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

2. Activities Test. Answer (a) and (b) below.
   - a. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
   - b. Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

3. Parent of Supported Organizations. Answer (a) and (b) below.
   - a. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
   - b. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.
Part V | Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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

### Section A - Adjusted Net Income

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Add lines 1 through 3.</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>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)</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td><strong>Adjusted Net Income</strong> (subtract lines 5, 6, and 7 from line 4)</td>
<td>8</td>
</tr>
</tbody>
</table>

### Section B - Minimum Asset Amount

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Average monthly value of securities</td>
<td>1a</td>
</tr>
<tr>
<td>b</td>
<td>Average monthly cash balances</td>
<td>1b</td>
</tr>
<tr>
<td>c</td>
<td>Fair market value of other non-exempt-use assets</td>
<td>1c</td>
</tr>
<tr>
<td>d</td>
<td>Total (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
</tr>
<tr>
<td>e</td>
<td><strong>Discount</strong> claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2 from line 1d.</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Multiply line 5 by .035.</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Recoveries of prior-year distributions</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Minimum Asset Amount (add line 7 to line 6)</td>
<td>8</td>
</tr>
</tbody>
</table>

### Section C - Distributable Amount

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Adjusted net income for prior year (from Section A, line 8, Column A)</td>
</tr>
<tr>
<td>2</td>
<td>Enter 85% of line 1.</td>
</tr>
<tr>
<td>3</td>
<td>Minimum asset amount for prior year (from Section B, line 8, Column A)</td>
</tr>
<tr>
<td>4</td>
<td>Enter greater of line 2 or line 3.</td>
</tr>
<tr>
<td>5</td>
<td>Income tax imposed in prior year</td>
</tr>
<tr>
<td>6</td>
<td><strong>Distributable Amount.</strong> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</td>
</tr>
</tbody>
</table>

7. Check if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).
### Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

#### Schedule A (Form 990 or 990-EZ) 2019

**ROCKING THE BOAT, INC.**

<table>
<thead>
<tr>
<th>Section D - Distributions</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes</td>
</tr>
<tr>
<td>2</td>
<td>Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets</td>
</tr>
<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required)</td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in Part VI). See instructions.</td>
</tr>
<tr>
<td>7</td>
<td>Total annual distributions. Add lines 1 through 6.</td>
</tr>
<tr>
<td>8</td>
<td>Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.</td>
</tr>
<tr>
<td>9</td>
<td>Distributable amount for 2019 from Section C, line 6</td>
</tr>
<tr>
<td>10</td>
<td>Line 8 amount divided by line 9 amount</td>
</tr>
</tbody>
</table>

#### Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2019</th>
<th>(iii) Distributable Amount for 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2019 from Section C, line 6</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions.</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2019</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>From 2014</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>From 2015</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>From 2016</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>From 2017</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>From 2018</td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Total of lines 3a through e</td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Applied to 2019 distributable amount</td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Carryover from 2014 not applied (see instructions)</td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2019 from Section D, line 7: $</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Applied to 2019 distributable amount</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Remainder. Subtract lines 4a and 4b from 4.</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Excess distributions carryover to 2020. Add lines 3j and 4c.</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Breakdown of line 7:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Excess from 2015</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Excess from 2016</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Excess from 2017</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Excess from 2018</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Excess from 2019</td>
<td></td>
</tr>
</tbody>
</table>

Schedule A (Form 990 or 990-EZ) 2019
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
<table>
<thead>
<tr>
<th>Contributor’s Name</th>
<th>Total Contributions</th>
<th>Excess Contributions</th>
</tr>
</thead>
<tbody>
<tr>
<td>11TH HOUR PROJECT</td>
<td>525,000</td>
<td>256,766</td>
</tr>
<tr>
<td>ATLMAN FOUNDATION</td>
<td>302,000</td>
<td>33,766</td>
</tr>
<tr>
<td>J.E. &amp; Z.B. BUTLER FOUNDATION</td>
<td>550,000</td>
<td>281,766</td>
</tr>
<tr>
<td>JUDI &amp; ALAN COGEN</td>
<td>590,000</td>
<td>321,766</td>
</tr>
<tr>
<td>NY COMMUNITY TRUST</td>
<td>300,000</td>
<td>31,766</td>
</tr>
<tr>
<td>DONALD A. PELS CHARITABLE TRUST</td>
<td>275,000</td>
<td>6,766</td>
</tr>
</tbody>
</table>

### Schedule B (Form 990, 990-EZ, or 990-PF)

#### Name of the organization

ROCKING THE BOAT, INC.

#### Employer identification number

**---7814

#### Organization type (check one):

- [ ] Form 990 or 990-EZ 501(c)( ) (enter number) organization
- [ ] 4947(a)(1) nonexempt charitable trust not treated as a private foundation
- [ ] 527 political organization
- [X] Form 990-PF 501(c)(3) exempt private foundation
- [ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
- [ ] 501(c)(3) taxable private foundation

#### Check if your organization is covered by the General Rule or a Special Rule.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

- [ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- [X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) $5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

- [ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

- [ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don’t complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling $5,000 or more during the year. 

**Caution:** An organization that isn’t covered by the General Rule and/or the Special Rules doesn’t file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn’t meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).
<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>THE PINKERTON FOUNDATION 610 FIFTH AVENUE, SUITE 316 NEW YORK, NY 10020</td>
<td>$100,000.00</td>
<td>Person Payroll</td>
</tr>
<tr>
<td>2</td>
<td>J.E. &amp; Z.B. BUTLER FOUNDATION 780 THIRD AVENUE, 15TH FLOOR NEW YORK, NY 10017</td>
<td>$100,000.00</td>
<td>Person Payroll</td>
</tr>
<tr>
<td>3</td>
<td>JUDY AND ALAN COGEN 435 OAKWOOD PLACE BOULDER, CO 80304</td>
<td>$100,000.00</td>
<td>Person Payroll</td>
</tr>
<tr>
<td>4</td>
<td>ALTMAN FOUNDATION 521 FIFTH AVE 35TH FLOOR NEW YORK, NY 10175</td>
<td>$90,000.00</td>
<td>Person Payroll</td>
</tr>
<tr>
<td>5</td>
<td>DEPARTMENT OF YOUTH &amp; COMM DEV 156 WILLIAM ST. #6 NEW YORK, NY 10038</td>
<td>$137,911.00</td>
<td>Person Payroll</td>
</tr>
<tr>
<td>6</td>
<td>MARY J. HUTCHINS FOUNDATION, INC. 31 WEST 27TH STREET, 4TH FLOOR NEW YORK, NY 10001</td>
<td>$60,000.00</td>
<td>Person Payroll</td>
</tr>
</tbody>
</table>
### Part I Contributors

(see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
</table>
| 7   | DONALD A. PELS CHARITABLE TRUST  
    C/O FIDUCIARY TRUST COMPANY  
    INTERNATIONAL  
    NEW YORK, NY 10017 | $200,000. | Person [X]  
                                   | Payroll [ ]  
                                   | Noncash [ ]  
                                   | (Complete Part II for noncash contributions.) |
| 8   | PETER AND CYNTHIA KELLOGG  
    C/O IAT REINSURANCE COMPANY, 48 WALL STREET, 30TH FLOOR  
    NEW YORK, NY 10005 | $100,000. | Person [X]  
                                   | Payroll [ ]  
                                   | Noncash [ ]  
                                   | (Complete Part II for noncash contributions.) |
| 9   | THEODORE J FORSTMANN CHARITABLE TRUST  
    320 E 43RD STREET  
    NEW YORK, NY 10017 | $100,000. | Person [X]  
                                   | Payroll [ ]  
                                   | Noncash [ ]  
                                   | (Complete Part II for noncash contributions.) |
| 10  | SIMON FOUNDATION  
    160 5TH AVENUE  
    NEW YORK, NY 10010 | $200,000. | Person [X]  
                                   | Payroll [ ]  
                                   | Noncash [ ]  
                                   | (Complete Part II for noncash contributions.) |
| 11  | WEINBERG FOUNDATION  
    7 PARK CENTER CT  
    OWNING MILLS, MD 21117 | $50,000. | Person [X]  
                                   | Payroll [ ]  
                                   | Noncash [ ]  
                                   | (Complete Part II for noncash contributions.) |
| 12  | DEPARTMENT OF CULTURAL AFFAIRS  
    31 CHAMBERS ST, 2ND FLOOR  
    NEW YORK, NY 10007 | $76,020. | Person [X]  
                                   | Payroll [ ]  
                                   | Noncash [ ]  
                                   | (Complete Part II for noncash contributions.) |
## Part II Noncash Property

(see instructions). Use duplicate copies of Part II if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Description of noncash property given</th>
<th>(c) FMV (or estimate) (See instructions.)</th>
<th>(d) Date received</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>
ROCKING THE BOAT, INC.

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this info. once.)

Use duplicate copies of Part III if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>
| (e) Transfer of gift
Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
|                     |                     |                 |                                    |
|                     |                     |                 |                                    |
|                     |                     |                 |                                    |

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
<td></td>
</tr>
</tbody>
</table>
| (e) Transfer of gift
Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
|                     |                     |                 |                                    |
|                     |                     |                 |                                    |
|                     |                     |                 |                                    |

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
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<td></td>
<td></td>
</tr>
</tbody>
</table>
| (e) Transfer of gift
Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
|                     |                     |                 |                                    |
|                     |                     |                 |                                    |
|                     |                     |                 |                                    |

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| (e) Transfer of gift
Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
|                     |                     |                 |                                    |
|                     |                     |                 |                                    |
|                     |                     |                 |                                    |
### Part I. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate value of contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate value of grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
</tbody>
</table>

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  
   - Yes  
   - No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  
   - Yes  
   - No

### Part II. Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
   - Preservation of land for public use (for example, recreation or education)  
   - Preservation of a historically important land area  
   - Preservation of a certified historic structure  
   - Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

<table>
<thead>
<tr>
<th></th>
<th>Held at the End of the Tax Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Total number of conservation easements</td>
</tr>
<tr>
<td>2b</td>
<td>Total acreage restricted by conservation easements</td>
</tr>
<tr>
<td>2c</td>
<td>Number of conservation easements on a certified historic structure included in (a)</td>
</tr>
<tr>
<td>2d</td>
<td>Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register</td>
</tr>
</tbody>
</table>

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year.

4 Number of states where property subject to conservation easement is located.

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  
   - Yes  
   - No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year.

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year.

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  
   - Yes  
   - No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

### Part III. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

   (i) Revenue included on 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 financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

   (a) Revenue included on Form 990, Part VIII, line 1  
   (b) Assets included in Form 990, Part X
Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
   a  Public exhibition
   b  Scholarly research
   c  Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

Part IV  Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

   b If "Yes," explain the arrangement in Part XIII and complete the following table:

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
</tr>
<tr>
<td>1d</td>
</tr>
<tr>
<td>1e</td>
</tr>
<tr>
<td>1f</td>
</tr>
</tbody>
</table>

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

   b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V  Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

1a Beginning of year balance
   b Contributions
   c Net investment earnings, gains, and losses
   d Grants or scholarships
   e Other expenditures for facilities and programs
   f Administrative expenses
   g End of year balance

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
   a Board designated or quasi-endowment  23.00 %
   b Permanent endowment  77.00 %
   c Term endowment %

   The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
   (i) Unrelated organizations
   (ii) Related organizations

   b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

Part VI  Land, Buildings, and Equipment.

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

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td>358,412.</td>
<td></td>
<td>358,412.</td>
<td></td>
</tr>
<tr>
<td>1b Buildings</td>
<td>2,255,764.</td>
<td>1,040,716.</td>
<td>1,215,048.</td>
<td></td>
</tr>
<tr>
<td>1c Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Equipment</td>
<td>377,858.</td>
<td>250,871.</td>
<td>126,987.</td>
<td></td>
</tr>
<tr>
<td>1e Other</td>
<td>246,582.</td>
<td>78,378.</td>
<td>168,204.</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>1,868,651.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
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<tr>
<td>(C)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(F)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)

### Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
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<tr>
<td>(5)</td>
<td></td>
<td></td>
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<tr>
<td>(6)</td>
<td></td>
<td></td>
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<tr>
<td>(7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

### Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
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<tr>
<td>(5)</td>
<td></td>
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<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

Total, (Column (b) must equal Form 990, Part X, col. (B) line 15.)

### Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability | (b) Book value |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
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<tr>
<td>(5)</td>
<td></td>
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<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

Total, (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII. ✗
### Part XI. Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
</tr>
<tr>
<td>2a</td>
<td>Net unrealized gains (losses) on investments</td>
</tr>
<tr>
<td>2b</td>
<td>Donated services and use of facilities</td>
</tr>
<tr>
<td>2c</td>
<td>Recoveries of prior year grants</td>
</tr>
<tr>
<td>2d</td>
<td>Other (Describe in Part XIII.)</td>
</tr>
<tr>
<td>2e</td>
<td>Add lines 2a through 2d</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
</tr>
<tr>
<td>4a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
</tr>
<tr>
<td>4b</td>
<td>Other (Describe in Part XIII.)</td>
</tr>
<tr>
<td>4c</td>
<td>Add lines 4a and 4b</td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)</td>
</tr>
</tbody>
</table>

### Part XII. Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25:</td>
</tr>
<tr>
<td>2a</td>
<td>Donated services and use of facilities</td>
</tr>
<tr>
<td>2b</td>
<td>Prior year adjustments</td>
</tr>
<tr>
<td>2c</td>
<td>Other losses</td>
</tr>
<tr>
<td>2d</td>
<td>Other (Describe in Part XIII.)</td>
</tr>
<tr>
<td>2e</td>
<td>Add lines 2a through 2d</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
</tr>
<tr>
<td>4a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
</tr>
<tr>
<td>4b</td>
<td>Other (Describe in Part XIII.)</td>
</tr>
<tr>
<td>4c</td>
<td>Add lines 4a and 4b</td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)</td>
</tr>
</tbody>
</table>

### Part XIII. Supplemental Information.

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

**PART V, LINE 4:**

THE ORGANIZATION'S PERMANENTLY RESTRICTED NET ASSETS CONSIST OF ENDOWMENT FUND ASSETS TO BE HELD IN PERPETUITY.

**PART X, LINE 2:**

THE COMPANY RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT TO BE SUSTAINED. MANAGEMENT HAS DETERMINED THAT THE COMPANY HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION AND/OR DISCLOSURE. THE COMPANY IS NO LONGER SUBJECT TO EXAMINATIONS BY APPLICABLE TAXING JURISDICTIONS FOR PERIODS PRIOR TO 2012.
PART XI, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EVENTS

90,899.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EVENT COSTS

90,899.
**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

<table>
<thead>
<tr>
<th>(i) Name and address of individual or entity (fundraiser)</th>
<th>(ii) Activity</th>
<th>(iii) Did fundraiser have custody or control of contributions?</th>
<th>(iv) Gross receipts from activity</th>
<th>(v) Amount paid to (or retained by) fundraiser listed in col. (i)</th>
<th>(vi) Amount paid to (or retained by) organization</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Total**

List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

---

**Name of the organization**

ROCKING THE BOAT, INC.

**Employer identification number**

**2019**

**Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.
### Part II  Fundraising Events

Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

<table>
<thead>
<tr>
<th>Event #1</th>
<th>Event #2</th>
<th>Other events</th>
<th>Total events</th>
</tr>
</thead>
<tbody>
<tr>
<td>Event type</td>
<td>Event type</td>
<td>(total number)</td>
<td>(add col. (a) through col. (c))</td>
</tr>
<tr>
<td>1</td>
<td>Gross receipts</td>
<td>506,858</td>
<td>197,616</td>
</tr>
<tr>
<td>2</td>
<td>Less: Contributions</td>
<td>506,858</td>
<td>187,274</td>
</tr>
<tr>
<td>3</td>
<td>Gross income (line 1 minus line 2)</td>
<td>10,342</td>
<td>10,342</td>
</tr>
</tbody>
</table>

### Direct Expenses

<table>
<thead>
<tr>
<th>Expense</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash prizes</td>
<td></td>
</tr>
<tr>
<td>Noncash prizes</td>
<td></td>
</tr>
<tr>
<td>Rent/facility costs</td>
<td>6,102</td>
</tr>
<tr>
<td>Food and beverages</td>
<td>6,178</td>
</tr>
<tr>
<td>Entertainment</td>
<td></td>
</tr>
<tr>
<td>Other direct expenses</td>
<td>27,084</td>
</tr>
</tbody>
</table>

**Total:** 90,899

**Net income summary:** -80,557

### Part III  Gaming

Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

<table>
<thead>
<tr>
<th>Expense</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross revenue</td>
<td></td>
</tr>
<tr>
<td>Cash prizes</td>
<td></td>
</tr>
<tr>
<td>Noncash prizes</td>
<td></td>
</tr>
<tr>
<td>Rent/facility costs</td>
<td></td>
</tr>
<tr>
<td>Other direct expenses</td>
<td></td>
</tr>
<tr>
<td>Volunteer labor</td>
<td>Yes</td>
</tr>
<tr>
<td>Direct expense summary</td>
<td></td>
</tr>
</tbody>
</table>

**Total gaming:**

**Net gaming income summary:**
Schedule G (Form 990 or 990-EZ) 2019 ROCKING THE BOAT, INC. Page 3

11 Does the organization conduct gaming activities with nonmembers? [ ] Yes [ ] No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? [ ] Yes [ ] No

13 Indicate the percentage of gaming activity conducted in:
   a The organization's facility [ ] %
   b An outside facility [ ] %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:
   Name ▶
   Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? [ ] Yes [ ] No
   b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ▶ and the amount of gaming revenue retained by the third party ▶ $ ▶
   c If "Yes," enter name and address of the third party:
      Name ▶
      Address ▶

16 Gaming manager information:
   Name ▶
   Gaming manager compensation ▶ $ ▶
   Description of services provided ▶
   □ Director/officer  □ Employee  □ Independent contractor

17 Mandatory distributions:
   a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? [ ] Yes [ ] No
   b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $ ▶

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

[Blank lines]

[Signature]

932083 09-11-19

Schedule G (Form 990 or 990-EZ) 2019

15430806 800994 ROCKING 2019.04000 ROCKING THE BOAT, INC. ROCKING1
### SCHEDULE I

#### (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

- Attach to Form 990.
- Go to www.irs.gov/Form990 for the latest information.

Name of the organization: ROCKING THE BOAT, INC.

<table>
<thead>
<tr>
<th>Part</th>
<th>General Information on Grants and Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes ☒ No ☐</td>
</tr>
<tr>
<td>2</td>
<td>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.</td>
</tr>
</tbody>
</table>

#### Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Enter total number of section 501(c)(3) and government organizations listed in the line 1 table</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Enter total number of other organizations listed in the line 1 table</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part III** Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of noncash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>THE ORGANIZATION PROVIDES SCHOLARSHIPS ADMINISTERED BY A THIRD PARTY &quot;BEYOND THE BOROUGHS&quot; TO ITS PARTICIPANTS.</td>
<td>47</td>
<td>111,951</td>
<td>0</td>
<td>FAIR MARKET VALUE</td>
<td></td>
</tr>
</tbody>
</table>

**Part IV** Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**PART I, LINE 2:**

BEYOND THE BOROUGHS MONITORS THE GRANT FUNDS RECEIVED AND DISBURSED.
### Part I Questions Regarding Compensation

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>First-class or charter travel</td>
<td></td>
<td>![ ]</td>
</tr>
<tr>
<td>Travel for companions</td>
<td></td>
<td>![ ]</td>
</tr>
<tr>
<td>Tax indemnification and gross-up payments</td>
<td></td>
<td>![ ]</td>
</tr>
<tr>
<td>Discretionary spending account</td>
<td></td>
<td>![ ]</td>
</tr>
<tr>
<td>Housing allowance or residence for personal use</td>
<td></td>
<td>![ ]</td>
</tr>
<tr>
<td>Payments for business use of personal residence</td>
<td></td>
<td>![ ]</td>
</tr>
<tr>
<td>Health or social club dues or initiation fees</td>
<td></td>
<td>![ ]</td>
</tr>
<tr>
<td>Personal services (such as maid, chauffeur, chef)</td>
<td></td>
<td>![ ]</td>
</tr>
</tbody>
</table>

**1b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

<table>
<thead>
<tr>
<th>Line 1b</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
</tbody>
</table>

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

<table>
<thead>
<tr>
<th>Line 2</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
</tbody>
</table>

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization’s CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- Compensation committee
- Independent compensation consultant
- Form 990 of other organizations
- Written employment contract
- Compensation survey or study
- Approval by the board or compensation committee

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Receive a severance payment or change-of-control payment?</td>
<td>![ ]</td>
</tr>
<tr>
<td>b</td>
<td>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</td>
<td>![ ]</td>
</tr>
<tr>
<td>c</td>
<td>Participate in, or receive payment from, an equity-based compensation arrangement?</td>
<td>![ ]</td>
</tr>
</tbody>
</table>

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>The organization?</td>
<td>![ ]</td>
</tr>
<tr>
<td>b</td>
<td>Any related organization?</td>
<td>![ ]</td>
</tr>
</tbody>
</table>

If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>The organization?</td>
<td>![ ]</td>
</tr>
<tr>
<td>b</td>
<td>Any related organization?</td>
<td>![ ]</td>
</tr>
</tbody>
</table>

If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.

<table>
<thead>
<tr>
<th>Line 7</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
</tbody>
</table>

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

<table>
<thead>
<tr>
<th>Line 8</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
</tbody>
</table>

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

<table>
<thead>
<tr>
<th>Line 9</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
</tbody>
</table>
For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren’t listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADAM GREEN</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>EXECUTIVE DIRECTOR</td>
<td>(i) 133,800.</td>
<td>(ii) 0.</td>
<td>(iii) 0.</td>
<td>39,102.</td>
<td>172,902.</td>
</tr>
<tr>
<td></td>
<td>(i) 0.</td>
<td>(ii) 0.</td>
<td>(iii) 0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td></td>
<td>(i)</td>
<td>(ii)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(i)</td>
<td>(ii)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<td>(i)</td>
<td>(ii)</td>
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<td></td>
</tr>
<tr>
<td></td>
<td>(i)</td>
<td>(ii)</td>
<td></td>
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</tr>
</tbody>
</table>
**Part III Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

<table>
<thead>
<tr>
<th>Line</th>
<th>Information Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4a</td>
<td></td>
</tr>
<tr>
<td>4b</td>
<td></td>
</tr>
<tr>
<td>4c</td>
<td></td>
</tr>
<tr>
<td>5a</td>
<td></td>
</tr>
<tr>
<td>5b</td>
<td></td>
</tr>
<tr>
<td>6a</td>
<td></td>
</tr>
<tr>
<td>6b</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

Schedule J (Form 990) 2019
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AND GROUP SOCIAL/EMOTIONAL COUNSELING, COLLEGE ADVISEMENT.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
ROCKING THE BOAT'S PUBLIC PROGRAMS EXPOSE A BROADER AUDIENCE TO ITS WORK. THE ON-WATER CLASSROOM INTRODUCES THE JOY OF ROWING AND THE BEAUTY AND ECOLOGICAL DIVERSITY OF THE BRONX RIVER TO ELEMENTARY, MIDDLE, AND HIGH SCHOOL STUDENTS THROUGHOUT THE SCHOOL YEAR, AND OFFERS BOTH PROFESSIONAL DEVELOPMENT FOR TEACHERS AND TEAMBUILDING PROGRAMS FOR A WIDE RANGE OF ADULT GROUPS. DURING THE SUMMER, BRONX RIVER CAMP–AN ENVIRONMENTAL EDUCATION PROGRAM WITH A STRONG EMPHASIS ON TEAMBUILDING–AND SAILING CAMP INTRODUCE PARTICIPANTS TO ROWING AND SAILING, AND ALLOW THEM TO SPEND A PORTION OF THEIR SUMMER INVOLVED IN OUTDOOR ACTIVITIES THAT ENHANCE THEIR CAPACITY AND THINK CRITICALLY AND PROBLEM SOLVE COLLABORATIVELY, WHILE BUILDING PHYSICAL FITNESS AND FOSTERING ENVIRONMENTAL STEWARDSHIP. ON AN EVEN LARGER SCALE, COMMUNITY ROWING AND SAILING INVITES THE GENERAL PUBLIC TO GO FOR A FREE ROW OR SAIL, GUIDED BY ROCKING THE BOAT PROGRAM ASSISTANTS, ON SATURDAY AND SUNDAY AFTERNOONS FROM MEMORIAL DAY TO LABOR DAY.

FORM 990, PART VI, SECTION B, LINE 11B:
A DRAFT COPY OF THE FORM 990 WAS PROVIDED TO THE ORGANIZATION'S GOVERNING BODY FOR REVIEW BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C:
THE ORGANIZATION HAS PUT INTO PLACE A CONFLICTS OF INTEREST POLICY AND ASKS...
STAFF AND BOARD MEMBERS PERIODICALLY TO MAKE DISCLOSURES OF ANY CONFLICT IN ACCORDANCE WITH SUCH POLICY. THE BOARD FOLLOWS THE PROCEDURES SET FORTH IN SUCH POLICY IF ANY MATTER IS PRESENTED FOR CONSIDERATION THAT ENTAILS A CONFLICT, OR POSSIBLE CONFLICT, OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15A:


FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

THE ORGANIZATION IMPLEMENTED A WHISTLEBLOWER POLICY AND DOCUMENT RETENTION POLICY EFFECTIVE 2009. THE POLICIES HAVE BEEN DISCUSSED WITH PERSONNEL. THESE POLICIES ARE AVAILABLE FOR REVIEW.
Form 8868 (Rev. January 2020)

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.  
Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

<table>
<thead>
<tr>
<th>Type or print</th>
<th>Name of exempt organization or other filer, see instructions.</th>
<th>Taxpayer identification number (TIN)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>ROCKING THE BOAT, INC.</td>
<td>**-***7814</td>
</tr>
</tbody>
</table>

Number, street, and room or suite no. If a P.O. box, see instructions.

812 EDGEWATER ROAD

City, town or post office, state, and ZIP code. For a foreign address, see instructions.

BRONX, NY 10474

Enter the Return Code for the return that this application is for (file a separate application for each return)

<table>
<thead>
<tr>
<th>Application Is For</th>
<th>Return Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form 990 or Form 990-EZ</td>
<td>01</td>
</tr>
<tr>
<td>Form 990-BL</td>
<td>02</td>
</tr>
<tr>
<td>Form 4720 (individual)</td>
<td>03</td>
</tr>
<tr>
<td>Form 990-PF</td>
<td>04</td>
</tr>
<tr>
<td>Form 990-T (sec. 401(a) or 408(a) trust)</td>
<td>05</td>
</tr>
<tr>
<td>Form 990-T (trust other than above)</td>
<td>06</td>
</tr>
</tbody>
</table>

VICTOR ISAYEV

Telephone No. 718-466-5799  
Fax No.  

If the organization does not have an office or place of business in the United States, check this box.  
If this is for a Group Return, enter the organization’s four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until NOVEMBER 16, 2020 , to file the exempt organization return for the organization named above. The extension is for the organization’s return for:

[ ] calendar year 2019 or
[ ] tax year beginning , and ending .

2 If the tax year entered in line 1 is for less than 12 months, check reason:
[ ] Initial return  
[ ] Final return  
[ ] Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.

3a $ 0.

3b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

3b $ 0.

3c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

3c $ 0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

MAIL TO: DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE CENTER  
OGDEN, UT 84201-0045

41.1

15430806 800994 ROCKING 2019.04000 ROCKING THE BOAT, INC. ROCKING1
# TAX RETURN FILING INSTRUCTIONS

NEW YORK FORM CHAR500

## FOR THE YEAR ENDING

December 31, 2019

| Prepared for | ROCKING THE BOAT, INC.  
| | 812 edgewater road  
| | BRONX, NY 10474 |

| Prepared by | TOBIN & COMPANY, CPA'S  
| | 2500 WESTCHESTER AVENUE  
| | PURCHASE, NY 10577 |

| Amount due or refund | Balance due of $275.00 |

| Make check payable to | Department of Law |

| Mail tax return and check (if applicable) to | NYS Office of Attorney General  
| | Charities Bureau Registration Section  
| | 28 Liberty Street  
| | New York, NY 10005 |

| Return must be mailed on or before | Please mail as soon as possible. |

| Special Instructions | The report should be signed and dated by the authorized individual(s).  
| | The attached copy of federal Form 990 must be properly signed and dated. |
We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

Confirm your Registration Category in the Charities Registry at www.CharitiesNYS.com.

Send with fee and attachments to:
NYS Office of the Attorney General
Charities Bureau Registration Section
28 Liberty Street
New York, NY 10005

President or Authorized Officer:

Chief Financial Officer or Treasurer:

Check the exemption(s) that apply to your filing. If your organization is claiming an exemption under one category (7A or EPTL only filers) or both categories (DUAL filers) that apply to your registration, complete only parts 1, 2, and 3, and submit the certified Char500. No fee, schedules, or additional attachments are required. If you cannot claim an exemption or are a DUAL filer that claims only one exemption, you must file applicable schedules and attachments and pay applicable fees.

Check the exemption(s) that apply to your filing. If your organization is claiming an exemption under one category (7A or EPTL only filers) or both categories (DUAL filers) that apply to your registration, complete only parts 1, 2, and 3, and submit the certified Char500. No fee, schedules, or additional attachments are required. If you cannot claim an exemption or are a DUAL filer that claims only one exemption, you must file applicable schedules and attachments and pay applicable fees.

☐ 3a. 7A filing exemption: Total contributions from NY State including residents, foundations, government agencies, etc. did not exceed $25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during the fiscal year.

☐ 3b. EPTL filing exemption: Gross receipts did not exceed $25,000 and the market value of assets did not exceed $25,000 at any time during the fiscal year.

☐ Yes ☐ No 4a. Did your organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State? If yes, complete Schedule 4a.

☐ Yes ☐ No 4b. Did the organization receive government grants? If yes, complete Schedule 4b.

Make a single check or money order payable to:
“Department of Law”

*The “Exempt” category refers to an organization’s NYS registration status. It does not refer to its IRS tax designation.
**Checklist of Schedules and Attachments**

Check the schedules you must submit with your CHAR500 as described in Part 4:
- If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
- If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants

Check the financial attachments you must submit with your CHAR500:
- IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable
- All additional IRS Form 990 Schedules, including Schedule B (Schedule of Contributors). Schedule B of public charities is exempt from disclosure and will not be available for public review.

If your organization was eligible for and filed an IRS 990-N e-postcard. Our revenue exceeded $25,000 and/or our assets exceeded $25,000 in the filing year. We have included an IRS Form 990-EZ for state purposes only.

If you are a 7A only or DUAL filer, submit the applicable independent Certified Public Accountant’s Review or Audit Report:
- Review Report if you received total revenue and support greater than $250,000 and up to $750,000.
- Audit Report if you received total revenue and support greater than $750,000
- No Review Report or Audit Report is required because total revenue and support is less than $250,000
- We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required

**Calculate Your Fee**

For 7A and DUAL filers, calculate the 7A fee:
- $0, if you checked the 7A exemption in Part 3a
- $25, if you did not check the 7A exemption in Part 3a

For EPTL and DUAL filers, calculate the EPTL fee:
- $0, if you checked the EPTL exemption in Part 3b
- $25, if the NET WORTH is less than $50,000
- $50, if the NET WORTH is $50,000 or more but less than $250,000
- $100, if the NET WORTH is $250,000 or more but less than $1,000,000
- $250, if the NET WORTH is $1,000,000 or more but less than $10,000,000
- $750, if the NET WORTH is $10,000,000 or more but less than $50,000,000
- $1500, if the NET WORTH is $50,000,000 or more

**Send Your Filing**

Send your CHAR500, all schedules and attachments, and total fee to:

NYS Office of the Attorney General
Charities Bureau Registration Section
28 Liberty Street
New York, NY 10005

**Need Assistance?**

Visit: [www.CharitiesNYS.com](http://www.CharitiesNYS.com)
Call: (212) 416-8401
Email: Charities.Bureau@ag.ny.gov
# CHAR500

## Schedule 4b: Government Grants

www.CharitiesNYS.com

If you checked the box in question 4b in Part 4, complete this schedule and list EACH government grant award by a domestic (federal, state or local) agency; interstate or intergovernmental agency (for example Port Authority of New York and New Jersey); and state or local authorities. Use additional pages if necessary. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations.

### 1. Organization Information

<table>
<thead>
<tr>
<th>Name of Organization:</th>
<th>NY Registration Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>ROCKING THE BOAT, INC.</td>
<td>07-07-21</td>
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### 2. Government Grants

<table>
<thead>
<tr>
<th>Name of Government Agency</th>
<th>Amount of Grant</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEPARTMENT OF YOUTH AND COMM. DEV</td>
<td>137,911</td>
</tr>
<tr>
<td>DEPARTMENT OF CULTURAL AFFAIRS</td>
<td>76,020</td>
</tr>
<tr>
<td>USDA FOREST SERVICE</td>
<td>34,949</td>
</tr>
<tr>
<td>NYS DEPARTMENT OF ENVIRONMENTAL CONSERVE.</td>
<td>56,763</td>
</tr>
<tr>
<td>NYS CENTER FOR ECONOMIC OPPORTUNITY</td>
<td>13,726</td>
</tr>
<tr>
<td>HARBOR SCHOOL</td>
<td>4,019</td>
</tr>
<tr>
<td>NYC DEPT OF ENVIRONMENTAL PROTECTION</td>
<td>500</td>
</tr>
<tr>
<td>Total Government Grants:</td>
<td>Total: 323,888</td>
</tr>
</tbody>
</table>

[Page 1]