

State of Rhode Island and Providence Plantations
Department of State - Business Services Division

STAMP

Annual Report for the year: 2020
Non-Profit Corporation

- Filing period June 1 - June 30
→ Filing Fee \$20.00
→ Penalty Additional \$25.00 fee if form is not filed by July 30.

FORM
SECRETARY OF STATE
USE ONLY

1. Entity ID Number 00-0223694		2. Exact name of the Corporation NEW YORK YACHT CLUB FOUNDATION			
3. State of Incorporation NEW YORK		5. Brief description of the character of business conducted in Rhode Island TO MAINTAIN, RESTORE AND PRESERVE THE EXTERIOR OF THE HISTORICALLY AND ARCHITECTURALLY SIGNIFICANT BUILDING & IMPROVEMENTS LOCATED AT VARIOUS LANDMARKS			
4. NAICS Code 713990					
6. Principal Office Address 37 WEST 44TH STREET			City NEW YORK	State NY	Zip 10036
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name WILLIAM MATHEWS BROOKS			Vice-President Name BELINDA J. SHEPARD		
Street Address 37 WEST 44TH STREET			Street Address 37 WEST 44TH STREET		
City NEW YORK	State NY	Zip 10036	City NEW YORK	State NY	Zip 10036
Secretary Name CHRISTOPHER L. OTOROWSKI			Treasurer Name HARRY T. REIN		
Street Address 37 WEST 44TH STREET			Street Address 37 WEST 44TH STREET		
City NEW YORK	State NY	Zip 10036	City NEW YORK	State NY	Zip 10036
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name GEORGE A. L. DAVID			Director Name DAVID K. ELWELL JR.		
Street Address 37 WEST 44TH STREET			Street Address 37 WEST 44TH STREET		
City NEW YORK	State NY	Zip 10036	City NEW YORK	State NY	Zip 10036
Director Name JOSEPH C. HOOPES JR			Director Name MARIE KLOK CRUMP		
Street Address 37 WEST 44TH STREET			Street Address 37 WEST 44TH STREET		
City NEW YORK	State NY	Zip 10036	City NEW YORK	State NY	Zip 10036
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee					
Name of Officer/Authorized Representative <i>Michael Cronin</i>				Date 9/28/2020	
Signature of Officer/Authorized Representative <i>Michael Cronin</i>				FILED KM	

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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FORM 631 - Revised: 06/2019

NEW YORK YACHT CLUB FOUNDATION
ENTITY ID NO.: 000223694

7. NAMES AND ADDRESSES OF THE DIRECTORS - ATTACHMENT

RALPH HEYWARD ISHAM
C/O THE CLUB, 37 WEST 44TH STREET
NEW YORK, NY 10036

GLENN F. FULLER
C/O THE CLUB, 37 WEST 44TH STREET
NEW YORK, NY 10036

GARY A. JOBSON
C/O THE CLUB, 37 WEST 44TH STREET
NEW YORK, NY 10036

CAROL O'MALLEY
C/O THE CLUB, 37 WEST 44TH STREET
NEW YORK, NY 10036

ROBERT P. MORAN, JR.
C/O THE CLUB, 37 WEST 44TH STREET
NEW YORK, NY 10036

MARK MASHBURN
C/O THE CLUB, 37 WEST 44TH STREET
NEW YORK, NY 10036