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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2014

Open to Public Inspection

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

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

and ending For the 2014 calendar year, or tax year beginning D Employer identification number C Name of organization Check if applicable Wantastiquet Trout Club, Inc. Doing business as Address change Number and street (or P O box if mail is not delivered to street address) 03-0165550 Name change E Telephone number 264 Trout Club Road Initial return ZIP code City or town (802) 824-5822 Weston 05161 Final return/terminated Foreign postal code Foreign country name Foreign province/state/county 201.681 G Gross receipts \$ Amended return F Name and address of principal officer No Application pending H(a) Is this a group return for subordinates? Clair Fogle, Jr, Wolfboro, NH H(b) Are all subordinates included? If "No," attach a list (see instructions) 501(c)(3) X 501(c) (7) ◀ (insert no) Tax-exempt status 4947(a)(1) or 527 Website: www wantastiquet com H(c) Group exemption number ▶ X Corporation Trust L Year of formation M State of legal domicile K Form of organization Association Other > 1904 VT Part I Summarv Briefly describe the organization's mission or most significant activities: The purpose of the Trout Club is cultivating and propagating fish; establishing and maintaining ponds and preserves; erecting, maintaining, and managing parks and picnic grounds. Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 10 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 2 Total number of volunteers (estimate if necessary). 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12. . . Net unrelated business taxable income from Form 990-T, line 34. 0 82,676 Contributions and grants (Part VIII, line 1h) . . . 9 118,754 Investment income (Part VIII, column (A), lines 3, 4, and 7d). 251 10 0 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 201.681 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 500 13 14 Benefits paid to or for members (Part IX, column (A), line 4) 34,021 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 15 Professional fundraising fees (Part IX, column (A), line 11e) 16a Total fundraising expenses (Part IX, column (D), line 25) ▶ 97,890 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 132.411 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). 69,270 19 Revenue less expenses Subtract line 18 from the 12. **End of Year** Beginning of Current Year 459.564 528.088 20 Total assets (Part X, line 16) 1,643 897 21 Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 527,191 22 457,921 Signature Block Under penalties of perjury, I declare that I have examined this retiging including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer collections based on all information of which preparer has any knowledge Sign Signature of officer Here CESLIE Type or print name and title Print/Type preparer's name Preparer's signature Check Paid self-employed P01237317 11/3/2015 Norman E Favor III **Preparer** Firm's EIN ► 20-0484110 Firm's name ► Favor & Co. **Use Only** (802) 362-2691 Firm's address ► PO Box 1586, Manchester Center, VT 05255

May the IRS discuss this return with the preparer shown above? (see instructions)

X Yes

	90 (2014)		03-0165550	Page 2
Pa	rt III	Statement of Program Service Accomplishments		
		Check if Schedule O contains a response or note to any line in this Part III	<u> </u>	
1	Briefly	describe the organization's mission:		
	The pu	rpose of the Trout Club is cultivating and propagating fish; establishing and		
	mainta	ining ponds and preserves; erecting, maintaining, and managing parks and picnic		
	ground			
2		organization undertake any significant program services during the year which were not listed on		
	the price	or Form 990 or 990-EZ?	. Yes	X No
	If "Yes,	" describe these new services on Schedule O.		
3	Did the	organization cease conducting, or make significant changes in how it conducts, any program		
		is?	Tyes	X No
	If "Yes,	" describe these changes on Schedule O.		
4	Descrit	be the organization's program service accomplishments for each of its three largest program service	ces, as measured	by
		ses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and		
	the tota	al expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 108,702 including grants of \$) (Revenue	e \$ 118	,754)
		ganization provides fishing, lodging and recreational services to it's membership.		
4b	(Code:) (Expenses \$ including grants of \$) (Revenu	e \$	
4-	(O - d - :	\/\(\Gamma_{\text{order}}\)	- -	
4c	(Code:) (Expenses \$ including grants of \$) (Revenu	еъ)
4d	Other r	program services. (Describe in Schedule O.)		
	(Expen		0)	
40		rogram service expenses 108.702		

Form 990 (2014) Wantastiquet Trout Club, Inc
Part IV Checklist of Required Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		×
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
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 "Yes," complete Schedule C,	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
0	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		x
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? <i>If "Yes," complete Schedule D, Part IV</i>	9		_x_
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		X
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 "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Х
_	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," complete Schedule D, Part X.	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	•••		
120	Schedule D, Parts XI and XII	12a		x
L	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	120		 ^
b	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	170		 ^
D	fundraising, business, investment, and program service activities outside the United States, or aggregate			
		14b		х
4 E	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	140		├^
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	45		Х
40	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		 ^-
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	4.0	İ	"
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			l
	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

	on political of the date of th	-	×	
24	Did the association association of 000 of grants or other position of grants or demonitation of	\Box	Yes	No
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 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
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 "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24c		
_	to defease any tax-exempt bonds?	24d		
	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 "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or	26		x
27	disqualified persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i>	20		
21	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			2.5
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<u> </u>	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			١.,
	Schedule L, Part IV	28b		X.
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		🗸
20	was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV </i>	28c	-	X
29 30	Did the organization receive more than \$25,000 in hori-cash contributions? If Fes, complete schedule W			 ^``
30	conservation contributions? If "Yes," complete Schedule M	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N,</i>		1	
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32	ļ	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		×
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		 ^
34	III, or IV, and Part V, line 1	34	ļ	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" 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 "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	
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 "Yes," complete Schedule R, Part	37		×
	VI	31	 	 ^
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	x	
	13: Note. All I offit 330 filets die required to complete conteduc C	1 00		

Form 9	90 (2014)	Wantastiquet Trout Club, Inc.	03-016555	0	Page 5
Par	l 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	<u></u>		
				Yes	No
1a	Enter th	ne number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	1		
b	Enter th	ne number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	1	İ
С	Did the	organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming	(gambling) winnings to prize winners?	<u>10</u>	c X	
2a	Enter th	ne number of employees reported on Form W-3, Transmittal of Wage and Tax			
		ents, filed for the calendar year ending with or within the year covered by this return	2		-
b		st one is reported on line 2a, did the organization file all required federal employment tax returns?	. 2t	<u> </u>	
		the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a		organization have unrelated business gross income of \$1,000 or more during the year?	<u>3</u> 8		X
b		" has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3t	<u> </u>	 -
4a		time during the calendar year, did the organization have an interest in, or a signature or other authority	/		
		financial account in a foreign country (such as a bank account, securities account, or other financial			×
		t)?	· · · 48	<u> </u>	+^
b		" enter the name of the foreign country: ▶			1
		structions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts	,		
5a	(FBAR)	e organization a party to a prohibited tax shelter transaction at any time during the tax year?	5	a	X
b		taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X
c	•	to line 5a or 5b, did the organization file Form 8886-T?	50	\rightarrow	
6a		ne organization have annual gross receipts that are normally greater than \$100,000, and did the			
-		ation solicit any contributions that were not tax deductible as charitable contributions?	6	a .	X
b		" did the organization include with every solicitation an express statement that such contributions or			
		ere not tax deductible?	<u> 61</u>	b	
7	Organi	zations that may receive deductible contributions under section 170(c).			
а		organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	<u> </u>	_	-
		rvices provided to the payor?	· · 7	_	+
b		" did the organization notify the donor of the value of the goods or services provided?	<u>7</u> 1	b	+
С		organization sell, exchange, or otherwise dispose of tangible personal property for which it was	,		
		d to file Form 8282?	7	<u>c </u>	
d		" indicate the number of Forms 8282 filed during the year	? 7		-
e		organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		'f	
†		ganization, during the year, pay premiums, directly of indirectly, on a personal benefit contract ganization received a contribution of qualified intellectual property, did the organization file Form 8899 as require		_	+
g h	If the or	ganization received a contribution of qualified intellection property, and the organization life is similar activities a form 10 ganization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 10		h	
8	Spons	oring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
Ū		oring organization have excess business holdings at any time during the year?		3	
9		oring organizations maintaining donor advised funds.			
а		sponsoring organization make any taxable distributions under section 4966?	9	а	
b		sponsoring organization make a distribution to a donor, donor advisor, or related person?		b	
10		n 501(c)(7) organizations. Enter:			
а		n fees and capital contributions included on Part VIII, line 12	82,000		
b		receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	0		
11		n 501(c)(12) organizations. Enter.			
а		income from members or shareholders			
Ь		income from other sources (Do not net amounts due or paid to other sources			}
	againsi	t amounts due or received from them.)		2a	-
12a		n 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? " enter the amount of tax-exempt interest received or accrued during the year	· · · <u> · </u>	<u>ca</u>	┪┈
b 42					
13		n 501(c)(29) qualified nonprofit health insurance issuers. organization licensed to issue qualified health plans in more than one state?	4:	3a	+
а		See the instructions for additional information the organization must report on Schedule O	· · · ''	_	1
b		he amount of reserves the organization is required to maintain by the states in which			
5	the org	anization is licensed to issue qualified health plans			
С		he amount of reserves on hand			
14a		organization receive any payments for indoor tanning services during the tax year?	1	4a	Х
		" has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	1	4b	

Form 9	90 (2014)	Wantastiquet Trout Club, Inc.	03	-0165550) F	age 6
Par	rt VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through	gh 7b below, and	d for a "N	o "	
	-	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change	es in Schedule	O. See in	struct	ions.
•		Check if Schedule O contains a response or note to any line in this Part VI				
Sect	ion A.	Soverning Body and Management			-	
					Yes	No
1a	Enter ti	ne number of voting members of the governing body at the end of the tax year	1a	10		
		are material differences in voting rights among members of the governing body, or				
		overning body delegated broad authority to an executive committee or similar			Į.	
		tee, explain in Schedule O.				
b	Enter ti	ne number of voting members included in line 1a, above, who are independent .	1b	10		
2		officer, director, trustee, or key employee have a family relationship or a business relation	onship with			
	-	er officer, director, trustee, or key employee?		. 2		X
3		organization delegate control over management duties customarily performed by or und				
		sion of officers, directors, or trustees, or key employees to a management company or o		. 3	ł	X_
4		organization make any significant changes to its governing documents since the prior Form 990 w				X
5		organization become aware during the year of a significant diversion of the organization				Χ_
6		organization have members or stockholders?		6		X
7a		organization have members, stockholders, or other persons who had the power to elect				
		more members of the governing body?		. 7a		X_
b		governance decisions of the organization reserved to (or subject to approval by) memb	ers.	<u> </u>		
		olders, or persons other than the governing body?		. 7b		Х
8		organization contemporaneously document the meetings held or written actions underta				
		r by the following:	Ū			
а		verning body?....................................		8a		X
b		ommittee with authority to act on behalf of the governing body?		. 8b		X
9	Is there	any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be	e reached			
	at the d	rganization's mailing address? If "Yes," provide the names and addresses in Schedule C	<u> </u>	. 9		Χ_
Sect	ion B. I	Policies (This Section B requests information about policies not required by the l	nternal Revenu	e Code.)	
	<u> </u>				Yes	No
10a	Did the	organization have local chapters, branches, or affiliates?		10a		X
b		" did the organization have written policies and procedures governing the activities of sur			1	
	affiliate	s, and branches to ensure their operations are consistent with the organization's exempt	purposes?	. 10b		
11a		organization provided a complete copy of this Form 990 to all members of its governing body before	ore filing the form?	?. 11a	<u> </u>	X
b		be in Schedule O the process, if any, used by the organization to review this Form 990.			<u> </u>	
12a		organization have a written conflict of interest policy? If "No," go to line 13		. 12a		X
b		ficers, directors, or trustees, and key employees required to disclose annually interests that could		ts? 12t	4—	├ ──
С		organization regularly and consistently monitor and enforce compliance with the policy?				
		e ın Schedule O how this was done				
13		organization have a written whistleblower policy?				X
14		organization have a written document retention and destruction policy?		. 14	-	X
15		process for determining compensation of the following persons include a review and ap				
		ndent persons, comparability data, and contemporaneous substantiation of the deliberation			-	
a		ganization's CEO, Executive Director, or top management official.		15a		X
b		officers or key employees of the organization		15b	' -	X
40.		to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a		organization invest in, contribute assets to, or participate in a joint venture or similar arra	_	40.	-	
		axable entity during the year?		· 16a	' 	X
b		" did the organization follow a written policy or procedure requiring the organization to ev		}	1	
		ation in joint venture arrangements under applicable federal tax law, and take steps to s		401		i
<u>C4</u>		anization's exempt status with respect to such arrangements?	<u> </u>	. 16t	<u>'</u>	Ь
		Disclosure	urod			
17 18	LIST THE	states with which a copy of this Form 990 is required to be filed None - Not Required to be filed None - Not Required to be filed 1014 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and		501/6\/3\	only	
18			aau-i (aeciion	JU 1 (U)(J)	OIIIY	,
		le for public inspection. Indicate how you made these available. Check all that apply In website Another's website X Upon request Other (e)	plain in Schedu	le Ol		
19		n website Another's website X Upon request Other (experiment) Of the representation made its governing document			v an	4
13		al statements available to the public during the tax year.	io, commot or mite	cor poil	,, am	-
20	State #	al statements available to the public during the tax year. he name, address, and telephone number of the person who possesses the organization	's books and red	cords: ►		
20	Olaic II	Les Velte				
		264 Trout Club Road, Weston, VT 05161				

0	3-0	1655	550_	Pa	ge 7	
ate	d					
					1	

Form 99	0 (201	4)	Wantas	stiquet	Trout	Club,	Inc

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated
Employees, and Independent Contractors
Check if Schedule O contains a response or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year

- 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. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er and	neck ss pe	ition more rson	than o is both or/truste	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Clair Fogle, Jr President	As Necessary	x		x	i			0	0	0
(2) Lou Alberino VP	As Necessary	x		x				0		
(3) Susanna Staas Secretary	As Necessary	X		X				0		
(4) Les Velte Treasurer	As Necessary	х		х				0	0	0
(5) Dick Dale Director	As Necessary	X						0	0	0
(6) Jim Demas Director	As Necessary	х						c	0	0
(7) Bill Keister Director	As Necessary	X							0	0
(8) Ray Hancock Director	As Necessary	X							0	0
(9) Ray Riley Director	As Necessary	X						c	0	0
(10) Steve Sawczuk Director	As Necessary	X						c	0	0
(11)										
(12)										
(13)										
(14)	-	{								

(A) Name and title		(B) Average hours per	(C) Position (do not check more than obox, unless person is both officer and a director/trust					one i an	(D) Reportable compensation	(E) Reportab compensal	le lion	Es	(F) Estimated amount of	
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from relati organizatio (W-2/1099-N	ons	com fr org and	other pensation the anization of the ani	on ed
(15)									-					
(16)											-			
<u>(17)</u>				_							_			
<u>(18)</u>														
(19)	•••••													
						_					\dashv			
(21)														
(22)														
(23)							_							
(24)										<u></u>				
(25)														
1b c d	Sub-total . Total from continuation sheets to Part VII, 5 Total (add lines 1b and 1c).	Section A .				 		A A A	0 0		0			0
2	Total number of individuals (including but not reportable compensation from the organizatio	limited to those	liste	d ab	ove 0) W	ho re	ceiv	ved more than \$	100,000 of				
3	Did the organization list any former officer, die employee on line 1a? If "Yes," complete Sche					yee	e, or h	nigh	nest compensate	ed	.	3	Yes	No
4	For any individual listed on line 1a, is the sum the organization and related organizations greindividual	of reportable c	ompe	ensa	atior							4		X
5	Did any person listed on line 1a receive or according services rendered to the organization? If "									ndıvidual	ļ	5		X
Sec	tion B. Independent Contractors	res, complete	Scre	auie	, , , ,	OI S	sucii j	Jer	3011	<u>····</u>	<u>. </u>	1_3_1		
1	Complete this table for your five highest comp compensation from the organization. Report of year.											n's ta	(
	(A) Name and business add	ress							(B) Description of se	vices	((C Compen		
None														0
								_						<u>0</u> 0
								\vdash		1				0
														0
2	Total number of independent contractors (incl more than \$100,000 of compensation from the		nıted ►	to t	hos	e lis	sted a	bo	ve) who receive	d				

*Form 9	90 (201	Wantastiquet Trout Club, Inc.				03-01655	550 Page 9
Par	VIII	<u> </u>					
	•	Check if Schedule O contains a response or	note to any line l	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	d e f	Federated campaigns	0 82,000 361 0 0 315	82,676			
	<u>h</u>	Iotal. Add lines (a-1)	Business Code	82,676			
Program Service Revenue	2a b		713990 531190	79,245 39,509	79,245 39,509	•	
vice	C			0			
n Se	a			0			
grar	f	All other program service revenue		0			
Pro	g	Total. Add lines 2a–2f		118,754			
	3 4 5	Investment income (including dividends, interest other similar amounts)	t, and ⊳ ceeds ⊳ [251 0 0			251
		Gross rents	(ii) Feisuliai				
	d	Net rental income or (loss)		0			
	7a	Gross amount from sales of assets other than inventory 0	(ii) Other 0				
	b	and sales expenses 0					
	d	Gain or (loss)	L	0			
Other Revenue	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18	0				
₹		Net income or (loss) from fundraising events .		0			
		Gross income from gaming activities.					

ь	Less: direct expenses b	0		j		
С	Net income or (loss) from fundraising events .	<u>.</u> . >	0			
9a	Gross income from gaming activities.					
	See Part IV, line 19	0				
b	Less: direct expenses b	0				
С	Net income or (loss) from gaming activities .		0			
10a	Gross sales of inventory, less				·-	
	returns and allowances a					
Ь	Less: cost of goods sold b	0				
1	Net income or (loss) from sales of inventory		0			
	Miscellaneous Revenue	Business Code				
11a			0			
ь			0			
c			0			
d	All other revenue		0			
e	Total. Add lines 11a–11d		0			
12	Total revenue. See instructions		201,681	118,754	0	25

12 Total revenue. See instructions

Form 990 (2014) Wantastiquet Trout Club, Inc. Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must complete all				
	Check if Schedule O contains a response or note		Part IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				<u> </u>
	domestic governments. See Part IV, line 21	500	500		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	o			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	o	İ		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	_0			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	o		_	
7	Other salaries and wages	29,065	29,065		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions).	o			
9	Other employee benefits	2,500	2,500		
10	Payroll taxes	2,456	2,456		
11	Fees for services (non-employees):				
а	Management	0	. 1		
b	Legal	0			
С	Accounting	3,530		3,530	
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	o			
12	Advertising and promotion	0			
13	Office expenses	1,904		1,904	
14	Information technology	670		670	
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses				·
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	15,561	15,561	0	0
23	Insurance	9,188	8,269	919	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column			1	
	(A) amount, list line 24e expenses on Schedule O)				
а	Fish & Supplies	18,620	18,620		
b	Maintenance	18,525	18,525		
С	Utilities	8,279	8,279		
d	Real Estate Taxes	19,248	19,248		
е	All other expenses Miscellaneous	2,365	1,630	735	
25	Total functional expenses. Add lines 1 through 24e .	132,411	124,653	7,758	0
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs			İ	
	from a combined educational campaign and			Ì	
	fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				

Form 990 (2014) Wantastiquet Trout Club, Inc.

Part X Balance Sheet

·		Check if Schedule O contains a response or r	lote to any line in union art x	(A) Beginning of year	<u>···</u>	(B) End of year
	1	Cash—non-interest-bearing		73,896	1	140,197
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		0	4	48
	5	Loans and other receivables from current and for				
]	trustees, key employees, and highest compensation	ted employees		j	
		Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons	s (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and	contributing employers and			
	l	sponsoring organizations of section 501(c)(9) voluntary emp	oloyees' beneficiary			
Assets		organizations (see instructions). Complete Part II of Schedul		6		
SS	7	Notes and loans receivable, net		0	7	0
∢	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or	1			
			10a 548,796			
	b	Less: accumulated depreciation 1		385,668		387,843
	11	Investments—publicly traded securities		0		0
	12	Investments—other securities. See Part IV, line 1		0		0
	13	Investments—program-related. See Part IV, line		0	-	0
	14	Intangible assets		0		0
	15	Other assets. See Part IV, line 11		0		0
	16	Total assets. Add lines 1 through 15 (must equa		459,564		528,088
	17	Accounts payable and accrued expenses		1,643		897
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities		·	20_	
	21	Escrow or custodial account liability. Complete P			21	
Liabilities	22	Loans and other payables to current and former				
Ħ		trustees, key employees, highest compensated e				
ia		disqualified persons. Complete Part II of Schedu	1 —		22	
_	23	Secured mortgages and notes payable to unrelate	·	0		0
	24	Unsecured notes and loans payable to unrelated		0	24	0
	25	Other liabilities (including federal income tax, pay	-			
		parties, and other liabilities not included on lines		0	25	0
	26	Part X of Schedule D		1,643		897
	20			1,045	20	
ses		Organizations that follow SFAS 117 (ASC 958 complete lines 27 through 29, and lines 33 an				
a	27	Unrestricted net assets		457,921	27	527,191
찚	28	Temporarily restricted net assets			28	
ᅙ	29	Permanently restricted net assets			29	
ᆵ		Organizations that do not follow SFAS 117 (ASC958), ch				
Net Assets or Fund Balances		complete lines 30 through 34.	neck fiele			
ets	30	Capital stock or trust principal, or current funds .			30	
488	31	Paid-in or capital surplus, or land, building, or eq	uipment fund		31	
et/	32	Retained earnings, endowment, accumulated inc			32	
Se	33	Total net assets or fund balances		4 <u>57,921</u>		527,191
	34	Total liabilities and net assets/fund balances	<u></u>	459,564	34	528,088

Form 9	90 (2014) Wantastiquet Trout Club, Inc.	03-016	<u>5550</u>	Pag	ge 12
Part					
	Check if Schedule O contains a response or note to any line in this Part XI			. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1		201	,681
2	Total expenses (must equal Part IX, column (A), line 25)	2		132	2,411
3	Revenue less expenses. Subtract line 2 from line 1	3		69	,270
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		457	<u>,921 </u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		527	<u>7,191 </u>
Part					_
	Check if Schedule O contains a response or note to any line in this Part XII			<u>. </u>	Ц_
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			1	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		Į l		l i
	reviewed on a separate basis, consolidated basis, or both				1
	Separate basis Doth consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of			
-	the audit, review, or compilation of its financial statements and selection of an independent accountant?.		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2014)

SCHEDULE D (Form 990) .

Supplemental Financial Statements

► Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Department of the Treasury Internal Revenue Service

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization

Open to Public Inspection

OMB No 1545-0047

Wantastiquet Trout Club 03-0165550							
	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.						
	Complete if the organization answered "Yes" to Form 990, Part IV, line 6.						
	(a) Donor advised funds	(b) Funds and other accounts					
1	Total number at end of year						
2	Aggregate value of contributions to (during year) .						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in writing that the assets held	ın donor advised					
•	funds are the organization's property, subject to the organization's exclusive legal control						
6	Did the organization inform all grantees, donors, and donor advisors in writing that gran						
•	used only for charitable purposes and not for the benefit of the donor or donor advisor,						
	purpose conferring impermissible private benefit?						
Dor							
Part							
	Complete if the organization answered "Yes" to Form 990, Part IV, line 7.						
1	Purpose(s) of conservation easements held by the organization (check all that apply).	of a histography important land area					
		of a historically important land area					
	Protection of natural habitat Preservation	of a certified historic structure					
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualified conservation contributi	ion in the form of a conservation					
	easement on the last day of the tax year.	Held at the End of the Tax Year					
а	Total number of conservation easements	. 2a					
b	Total acreage restricted by conservation easements						
С	Number of conservation easements on a certified historic structure included in (a)	2c					
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a						
_	historic structure listed in the National Register						
3	Number of conservation easements modified, transferred, released, extinguished, or te	rminated 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	n, handling of					
_	violations, and enforcement of the conservation easements it holds?						
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation						
•	>	• •					
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation eas	sements during the year					
•	▶ \$	•					
8	Does each conservation easement reported on line 2(d) above satisfy the requirements	s of section					
•	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?						
9	In Part XIII, describe how the organization reports conservation easements in its revenue	ue and expense statement, and					
•	balance sheet, and include, if applicable, the text of the footnote to the organization's file	nancial statements that describes					
	the organization's accounting for conservation easements.						
Par		or Other Similar Assets.					
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.						
4.	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its	rovenue statement and halance sheet					
та	works of art, historical treasures, or other similar assets held for public exhibition, educations	otion or research in furtherance					
	works of art, historical treasures, or other similar assets field for public exhibition, educa-	that describes these items					
	of public service, provide, in Part XIII, the text of the footnote to its financial statements	that describes these items.					
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its rev	enue statement and balance sneet					
	works of art, historical treasures, or other similar assets held for public exhibition, educ	ation, or research in furtherance					
	of public service, provide the following amounts relating to these items:	~ *					
	(i) Revenue included in Form 990, Part VIII, line 1	5					
	(ii) Assets included in Form 990, Part X	\$					
2	If the organization received or held works of art, historical treasures, or other similar as	sets for financial gain, provide the					
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these						
а	Revenue included in Form 990, Part VIII, line 1						
b	Assets included in Form 990, Part X	<u> ▶ \$</u>					

	ale D (Form 990) 2014 Wantastiquet Trout Club						03-016			Page 2
Part	Organizations Maintaining Colle	ctions of A	rt, Hist	orical Trea	asures, or C	other Si	milar Assets	(continu	ıed)	
3	Using the organization's acquisition, access	sion, and oth	er recor	ds, check a	ny of the follo	wing tha	t are a signific	ant		
	use of its collection items (check all that app	ply):	_	_						
а	Public exhibition		d [Loan	or exchange	programs	3			
b	Scholarly research		e $\bar{\lceil}$	Other	-	-				
С	Preservation for future generations		_	_						
4	Provide a description of the organization's or Part XIII.	collections ar	nd expla	in how they	further the o	rganizati	on's exempt p	urpose in		
5	During the year, did the organization solicit	or receive do	onations	of art, histo	orical treasure	es, or oth	er similar		_	
	assets to be sold to raise funds rather than	to be mainta	ined as	part of the	organization's	s collection	on?	Ye	s 💹	No
Part	Complete if the organization answ 990, Part X, line 21.		to Forn	n 990, Par	t IV, line 9, d	or report	ed an amour	nt on For	m	
1a	Is the organization an agent, trustee, custoo	dian or other	interme	diary for co	entributions or	other as	sets not			
	included on Form 990, Part X?							Ye	s 🔲	No
b	If "Yes," explain the arrangement in Part XII	II and comple	ete the f	ollowing tat	ble:		·			
								Amount		
С	Beginning balance					1c				
d	Additions during the year					1d				
e	Distributions during the year					1e				
f	Ending balance					1f	L			0
2a	Did the organization include an amount on	Form 990, Pa	art X, lin	e 21, for es	scrow or custo	odial acc	ount liability?	Ye	s 🗶	No
b	If "Yes," explain the arrangement in Part XII	II Check her	e if the e	explanation	has been pro	ovided in	Part XIII			
Part	V Endowment Funds.			-	· · ·					
	Complete if the organization answ	vered "Yes"	to Forn	n 990. Par	t IV. line 10.					
		Current year		nor year	(c) Two years		i) Three years bac	k (e) Fo	ur years	back
1a	Beginning of year balance				, , , , , , , , , , , , , , , , , , ,		<u>· · · · · · · · · · · · · · · · · ·</u>	+ ` `		
b	Contributions		-							-
c	Net investment earnings, gains,				·					
	and losses				İ					
d	Grants or scholarships		_					1		
e	Other expenditures for facilities				-					
•	and programs							ļ		
f	Administrative expenses				 					
g	End of year balance	0	-			o		o		0
2	Provide the estimated percentage of the cu				·					
a	Board designated or quasi-endowment	▶	%							
b	Permanent endowment	%								
c	Temporarily restricted endowment	<u></u> %								
-	The percentages in lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the poss			ation that a	are held and	administe	ered for the			
	organization by:							[Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		
b	If "Yes" to 3a(ii), are the related organizatio							3b		· ·
4	Describe in Part XIII the intended uses of the									•
Part										
	Complete if the organization answ		to Forn	n 990. Par	rt IV, line 11	a. See F	orm 990. Pa	rt X, line	10	
	Description of property	(a) Cost or o			ost or other		ccumulated		ok valu	ie
	accompliant of property	(a) Cost of C		, , ,	sis (other)	, ,	preciation	(3) 30	,	-
1a	Land			0	0					0
b	Buildings		-		445,416		108,639		33	36,777
C	Leasehold improvements			0	0		0			0
d	Equipment			0	103,381		52,315		5	1,066
е	Other			0	0		0			0
Total	. Add lines 1a through 1e. (Column (d) must		990, Pa	rt X, colum	n (B), line 10	c)	. •		38	37,843

) Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year m	
(1) Financial	derivatives	. 0		
	neld equity interests			
(3) Other				
(<u>A</u>)				
(<u>B</u>)				
(C)				
· · · (Ď)			··	
	•		<u> </u>	
(F) (G)				
(H)				
) must equal Form 990, Part X, col (B) line 12)	▶ 0		
Part VIII	,	Related. on answered "Yes" to Form 990, P	Part IV. line 11c See Form	990, Part X, line 13
	(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year n	luation
(1)				
(2)				
(3)				·
(4)				
(5)				
(6)				
(7)				
(8) (9)				
) must equal Form 990, Part X, col (B) line 13)	D		
	Other Assets.			
(4)		on answered "Yes" to Form 990, F	Part IV, line 11d See Form	1 990, Part X, line 15. (b) Book value
(1)			Part IV, line 11d See Form	
(2)			Part IV, line 11d See Form	
			Part IV, line 11d See Form	
(2)			Part IV, line 11d See Form	
(2) (3) (4)			Part IV, line 11d See Form	
(2) (3) (4) (5) (6) (7)			Part IV, line 11d See Form	
(2) (3) (4) (5) (6) (7) (8)			Part IV, line 11d See Form	
(2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization	(a) Description	Part IV, line 11d See Form	
(2) (3) (4) (5) (6) (7) (8) (9) Total, (Colu	Complete if the organization	(a) Description	Part IV, line 11d See Form	
(2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization mn (b) must equal Form 990, Pa Other Liabilities. Complete if the organization	(a) Description		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total, (Colu	mn (b) must equal Form 990, Pa	(a) Description If X, col. (B) line 15.)		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total, (Colu	mn (b) must equal Form 990, Pa Other Liabilities. Complete if the organization line 25.	rt X, col. (B) line 15.)		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) Total, (Colu	mn (b) must equal Form 990, Pa Other Liabilities. Complete if the organization line 25. (a) Description of liability	rt X, col. (B) line 15.)		(b) Book value
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Par	·	Return.	
_	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	-	
b	Donated services and use of facilities	-	
C	Recoveries of prior year grants	-	
d	Other (Describe in Part XIII.)		0
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIII.)	-	
Ь	· · · · · · · · · · · · · · · · · · ·		0
С 5	Add lines 4a and 4b	4c 5	0
_	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Keturn	•
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	1 1	
a	Donated services and use of facilities	-	
b	Prior year adjustments	-	
C	Other losses	-{	
d	Other (Describe in Part XIII.)	-	0
е 3	Add lines 2a through 2d	2e 3	<u>0</u> 0
4	Subtract line 2e from line 1	3	
a b	Investment expenses not included on Form 990, Part VIII, line 7b	-	
C	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	0
	t XIII Supplemental Information.		
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inf		
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Schedule D (Form	n 990) 2014 Wantastiquet Trout Club	03-0165550	Page 5
Part XIII	. Supplemental Information (continued)		
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			• • • • • • • • • • • • • • • • • • • •

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Open to Public

Department of the Treasury
Internal Revenue Service
Name of the organization

► Attach to Form 990 or 990-EZ.
Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization	Employer identification frameer
Wantastiquet Trout Club	03-0165550
Part VI: Line11b	
Form 990 is prepared by an independent Certified Public Accountant. It is then reviewed by the	organizations treasurer,
Total 955 to proper of by an independent octalied Labito Accountains it is then reviewed by the	organizationo tradografi.
signed and mailed.	
Part VI: Line 19	
The organization will make it's governing documents available upon reviewing a formal request	