# Form **990**

# Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public.

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

A F	or the	e 2022 calendar year, or tax year beginning and	enaing		
<b>B</b> c	heck if pplicabl	C Name of organization  NEW YORK COUNCIL NAVY LEAGUE OF		D Employer identifie	cation number
	Addre				
	Name chang			82-24090	06
	Initial return		Room/suite	E Telephone number	
	Final return termir	_		212-825-	
	ated Amen	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	3,456,828.
L	return □Applic	NEW TORK, NI 10004	\ TD	H(a) Is this a group re	
	tion pendi	F Name and address of principal officer: CAF1 FRANK K. KUSSC		for subordinates	
		1 SOUTH STREET, ROOM #318, NEW YORK, NY		H(b) Are all subordinates in	
		empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) of the NYNAVYLEAGUE • ORG	or 527	1 ′	list. See instructions
	Vebsi	organization: X Corporation Trust Association Other	I Voor	H(c) Group exemption 2017	n number  1 State of legal domicile; NY
Pa	art I	Summary	L TEAT	oriorination. ZOI/	1 State of legal dofficile. 14 1
	_	Briefly describe the organization's mission or most significant activities: EDUCA	ATIONA	L NON-PROFIT	
ce		ORGANIZATION CITIZENS IN SUPPORT OF THE S			
nar	l	Check this box if the organization discontinued its operations or dispos			
Ve	3			3	17
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			17
Š		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			3
Ϋ́Ε̈́	6	Total number of volunteers (estimate if necessary)		6	60
Activities & Governance				7a	0.
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	·····		0.
Revenue				Prior Year	Current Year
	l	Contributions and grants (Part VIII, line 1h)		1,364,881.	239,941.
	l	Program service revenue (Part VIII, line 2g)		15,924.	21,869.
Şe.		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		301,924.	2,288.
_	l	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-28,878.	-83,430.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,653,851.	180,668.
	l	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		67,900. 0.	78,975.
	l	Benefits paid to or for members (Part IX, column (A), line 4)		174,188.	0. 183,141.
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Expenses	10a	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)	0.	0.	0.
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		181,350.	398,946.
	l ''	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		423,438.	661,062.
	l	Revenue less expenses. Subtract line 18 from line 12		1,230,413.	-480,394.
or es		Torondo rece experience. Casardor into 10 from into 12		ginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		5,773,737.	4,467,371.
ASS	21	Total liabilities (Part X, line 26)		31,864.	14,707.
E E E	22	Net assets or fund balances. Subtract line 21 from line 20		5,741,873.	4,452,664.
	art II	Signature Block			
		lties of perjury, I declare that I have examined this return, including accompanying schedules			knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer		
		Signature of officer			3
Sigi				Date	
Her	е	CAPT FRANK R. RUSSO JR. USN, PRESIDENT  Type or print name and title			
				Date Check	PTIN
Paid	I	Print/Type preparer's name  ANNA J. DAVIS  ANNA J. DAVIS		.1/13/23 off-employ	
	arer	Firm's name HANCOCK ASKEW & CO., LLP			8-0662558
	Only	Firm's address 3740 DAVINCI COURT, SUITE 400		Tilli 3 Lili 3	
	J <b>,</b>	PEACHTREE CORNERS, GA 30092		Phone no. (7	70) 246-0793
Mav	the II	RS discuss this return with the preparer shown above? See instructions		1. Hollo Ho. ( )	X Yes No

Pai	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: THE MISSION OF THE NEW YORK COUNCIL NAVY LEAGUE OF UNITED STATES, INC.
	IS TO INFORM THE AMERICAN PEOPLE AND THEIR GOVERNMENT THAT THE UNITED
	STATES OF AMERICA IS A MARITIME NATION AND ITS NATIONAL DEFENSE AND
	ECONOMIC WELL BEING ARE DEPENDENT UPON STRONG SEA SERVICES - US NAVY,
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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 services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$
	YOUTH PROGRAMS
	THE ORGANIZATION SUPPORTS SEVERAL PROGRAMS AND ACTIVITIES THAT EXPOSE
	LOCAL YOUTH TO CIVIC RESPONSIBILITY AND THE LEADERSHIP QUALITIES OF THE
	SEA SERVICES. 2022 PROGRAMMING INCLUDED: FINANCIAL SUPPORT OF FIVE
	JROTC UNITS, STIPENDS RECOGNIZING OUTSTANDING PARTICIPATION OF
	INDIVIDUAL JROTC MEMBERS, FINANCIAL SUPPORT OF ONE LOCAL NAVAL SEA
	CADET UNIT AND TWO YOUNG MARINES UNITS.
4b	(Code: ) (Expenses \$ 180,782. including grants of \$ 0.) (Revenue \$ 6,120.)
70	FLEET SUPPORT
	THE ORGANIZATION PROVIDES FINANCIAL SUPPORT TO UNITS AND INDIVIDUAL
	PERSONNEL OF THE SEA SERVICES AND THEIR FAMILIES. 2022 PROGRAMMING
	INCLUDED: FUNDING A NAVY PREP PROGRAM SCHOLARSHIP AT SUNY MARITIME
	COLLEGE, THE USCGC CLARENCE SUTPHIN COMMISSIONING CELEBRATION,
	PREPARATION FOR THE 2023 COMMISSIONING OF USS COOPERSTOWN, AWARDS TO
	SAILORS OF THE QUARTER/YEAR FOR USCG STATION NY, USCG SECTOR NY, USCG
	MSST NY AND NAVAL TALENT ACQUISITION GROUP-EMPIRE STATE; HOSTING OF
	EVENTS DURING THE IN-PERSON RETURN OF FLEET WEEK NEW YORK; ANNUAL
	RECOGNITION OF NEWLY COMMISSIONED OFFICERS AT USMMA, SUNY MARITIME
	COLLEGE AND FORDHAM UNIVERSITY; SUPPORT FOR PROGRAMS AT LOCAL AND
	VISITING USCG, NAVY AND MARINE CORPS COMMANDS AND MERCHANT MARINE
4c	(Code:) (Expenses \$
	EDUCATION & ADVOCACY
	THE ORGANIZATION HOSTS EVENTS AND RUNS PROGRAMS FOR MEMBERS AND THE
	PUBLIC TO FURTHER OUR MISSION OF EDUCATING THE PUBLIC AND ELECTED OFFICIALS ON THE IMPORTANCE OF THE SEA SERVICES. 2022 PROGRAMMING
	INCLUDED: THE INAUGURAL NEW YORK MARITIME SECURITY CONFERENCE, ONE
	IN-PERSON AND ONE VIRTUAL NATIONAL SECURITY BRIEFING, SUPPORT OF THE
	COAST GUARD ART PROGRAM AND SUPPORT FOR MARITIME INDUSTRY STUDENTS AND
	GRADUATES AT KINGSBOROUGH COMMUNITY COLLEGE.
	CILIDOILED III REMODERATION CONTINUE CO
4d	Other program services (Describe on Schedule O.)
-	(Expenses \$ 215,757 • including grants of \$ 0 • ) (Revenue \$ 2,380 • )
4e	Total program service expenses 574,822.

**4e** Total program service expenses

# Form 990 (2022) THE UNITED S 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		X
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		X
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
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 "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "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?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, 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
С	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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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 "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," 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
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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 "Yes," complete Schedule F, Parts I and IV	14b		X
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 "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			٠.,
	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,	l		,,
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		v	
46	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	-
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<sub>V</sub>
	complete Schedule G, Part III	19		X
20a	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		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		37	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	

# NEW YORK COUNCIL NAVY LEAGUE OF

Form 990 (2022) THE UNITED STATES INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
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			<sub>V</sub>
04 -	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	04-		X
<b>L</b>	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b		
·		24c		
ч	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
<b>2</b> 0u	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
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		Х
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 "Yes," complete Schedule L, Part II	26		Х
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 "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 the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			, v
•	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			X
33	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		-
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	00		
٠.	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
	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		
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		X
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 VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
<b>D</b>	Note: All Form 990 filers are required to complete Schedule 0	38	X	
Par				
	Check if Schedule O contains a response or note to any line in this Part V		 I	<u> </u>
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  1a 6  Enter the number of Forms W-2G included on line 1a Enter -0- if not applicable  1b 0	-		
b	Effect the number of Forms wize included of time rate Effect of it not applicable	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10	Х	
	(garibling) wirinings to prize wiriners?	1c	000	(0.0.0.0)

022) THE UNITED STATES INC.

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No
<b>2</b> a	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 2a 2a 3		v	
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	v
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			X
<b>L</b>	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		
b	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
<b>5</b> 0		5a		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		X
b	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	30		
va		6a		x
h	any contributions that were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Ua		
b	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	05		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
·	to file Form 8282?	7c		x
d	1-1			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
b	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			
	Enter the amount of reserves on hand			v
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		x
	excess parachute payment(s) during the year?	15		<u> </u>
16	If "Yes," see the instructions and file Form 4720, Schedule N.	16		х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	10		
17	If "Yes," complete Form 4720, Schedule O.  Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
17	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.	<b>-</b> "		
	n 100, complete i dilli 0000.			

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 17			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee 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 reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe on 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? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process on 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?	16a		X
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?	16b		
Sec	tion 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)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X 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	financ	cial	
	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			
	THE ORGANIZATION - 212-825-7333			
	1 SOUTH STREET #318, NEW YORK, NY 10004			

# Form 990 (2022) THE UNITED STATES INC. 82-2 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

X Check this box if neither the organization no	or any related	orga	niza	tion	com	npen	sate	ed any current officer, d	rector, or trustee.	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average	(do		Posi		l than c	one	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	son is	s both	n an	compensation	compensation	amount of
	week		cer an	a a a	recto	r/trus	tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	l trus		99/	n ben		1099-NEC)	1099-1420)	and related
	below	Individual trustee or director	Institutional trustee	_	Key employee	st col	<u></u>	10001120)		organizations
	line)	Indivi	Institu	Officer	Key e	Highest compensated employee	Former			3
(1) CAPT FRANK R RUSSO JR USN	5.00									
PRESIDENT		Х		Х				0.	0.	0.
(2) COL CHARLES R BLAICH USMC (RET)	2.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(3) JARED R CHAFFEE	2.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(4) CDR EVAN D DASH USN (RET)	2.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(5) NADIA FAROOQ	2.00								_	_
VICE PRESIDENT		Х		Х				0.	0.	0.
(6) GARY K KILBERG	1.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(7) RICHARD LOWE	2.00	ł								_
TREASURER		Х		Х				0.	0.	0.
(8) KRISTEN SAUVIGNE	2.00									
SECRETARY		Х		Х				0.	0.	0.
(9) RICHARD S HELLER ESQ	2.00									
JUDGE ADVOCATE	1 00	Х						0.	0.	0.
(10) REV GERALD E MURRAY JR	1.00	l								
CHAPLAIN	1 00	Х						0.	0.	0.
(11) SKYLAR BONNE	1.00	,,								0
DIRECTOR	1 00	Х						0.	0.	0.
(12) JOEL DUNN	1.00	٠,							0	0
DIRECTOR	1 00	Х						0.	0.	0.
(13) GREGORY KESHISHIAN	1.00	7.7							_	0
DIRECTOR	1 00	Х						0.	0.	0.
(14) CAPT THEODORE T MASON USN (RET)	1.00	х						0.	0.	0
OIRECTOR (15) MADELINE PENACHIO	1.00	Λ						0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(16) DANIEL SOLOMON	1.00	Λ						0.	0.	<u> </u>
DIRECTOR	1.00	Х						0.	0.	0.
(17) COL MARY E WESTMORELAND USA (RE	1.00							0.	0.	<u> </u>
DIRECTOR	1.00	Х						0.	0.	0.
	l	77	<b>I</b>				<u> </u>	<u> </u>	U •	000

232007 12-13-22 Form **990** (2022)

Form 990 (2022)

	Par	Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	High R	ghe	st C	ompensated Employee	s (continued)				
Thouse per work of the compensation of the compensation from the compensation of the compensation from and related compensation from the compe		(A)	(B)							(D)	(E)			(F)	
The Subtotal    Description from continuation sheets to Part VII, Section A   0   0   0   0		Name and title	1						one	Reportable	Reportable	Э	Es	stimate	∌d
hours for related organizations below line)  1b Subtotal  1b Subtotal  1c Total from continuation sheets to Part VII, Section A  2 Total number of individual is any former officer, director, frustee, key employee, or highest compensation from the organization and related days and related above) who received more than \$150,000 of reportable compensation from the organization and related organization is not related on the organization and related organization is not received more than \$150,000 of reportable compensation from the organization is not received more than \$150,000 of reportable compensation from the organization is not received more than \$150,000 of reportable compensation from the organization is not received more than \$150,000 of reportable compensation from the organization is not received more than \$150,000 of reportable compensation from the organization is not received more than \$150,000 of reportable compensation from the organization is not received more than \$150,000 of reportable compensation from the organization is not received more than \$150,000 of reportable compensation from the organization is not received more than \$150,000 of reportable compensation from the organization and related organization is not received more officer, director, trustee, key employee, or highest compensation from the organization and related organization is not received more than \$150,000 of reportable compensation from the organization or individual for services \$1				box	, unle	ss pe	rson i	is bot	h an	compensation	from related	on	ar	nount	of
The Subtotal  C Total from continuation sheets to Part VII, Section A  C Total from continuation sheets to Part VII, Section A  C Total (add lines the and tc)  O .  O .  O .  O .  O .  O .  O .  O				_	cer ar	na a a	irecto	or/trus	itee)						
The Subtotal  C Total from continuation sheets to Part VII, Section A  C Total from continuation sheets to Part VII, Section A  C Total (add lines the and tc)  O .  O .  O .  O .  O .  O .  O .  O			1 '	rector									ı	•	
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The Subtotal  C Total from continuation sheets to Part VII, Section A  C Total from continuation sheets to Part VII, Section A  C Total (add lines the and tc)  O .  O .  O .  O .  O .  O .  O .  O			"	ual tr	ional		ploye	t con	١.	1099-NEC)			l		
The Subtotal  C Total from continuation sheets to Part VII, Section A  C Total from continuation sheets to Part VII, Section A  C Total (add lines the and tc)  O .  O .  O .  O .  O .  O .  O .  O			1	divid	stitu	fficer	ey em	ighes	ome.				l	ailizati	JI 13
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  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    Ves			· · ·	=	-	0	×	王亚	Œ						
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  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    Ves				1											
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  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    Ves															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  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    Ves								-							
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c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  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    Ves															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  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    Ves				-											
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  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    Ves								$\vdash$							
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c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  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    Ves															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  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    Ves		Cultitatal								0		0			
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization  Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  To ray individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual of services rendered to the organization? If "Yes," complete Schedule J for such person  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.  (A)  None  (B)  (C)  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than	10	Total from continuation about to Doub VII													
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Yes   No															
compensation from the organization    Yes   No											000 of reportable				<u> </u>
Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  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? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes." complete Schedule J for such person  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.  (A)  Name and business address  NONE  Description of services  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who received more than	2	· · ·	ot illilited to th	030	11310	ual	JOVE	<i>5)</i> VVI	10 10	scerved more than \$100,	ooo or reportable	C			0
line 1a? If "Yes," complete Schedule J for such individual  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? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 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.  (A)  (B)  (B)  (C)  Compensation  Compensation  1 Total number of independent contractors (including but not limited to those listed above) who received more than		·												Yes	No
line 1a? If "Yes," complete Schedule J for such individual  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? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 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.  (A)  (B)  (B)  (C)  Compensation  Compensation  1 Total number of independent contractors (including but not limited to those listed above) who received more than	3	Did the organization list any <b>former</b> officer,	director, truste	ee, k	кеу е	empl	loye	e, or	hiq	hest compensated emp	loyee on				
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? If "Yes," complete Schedule J for such individual		•	*		•	•	•		•		•		3		Х
and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 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.  (A)  (B)  (B)  (C)  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than	4														
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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.  (A)  (B)  (C)  Compensation  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than			plete Schedule	e J f	or su	ıch <u>ı</u>	oers	on					5		X
the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A) (B) (C) Compensation  NONE  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than		·													
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Name and business address NONE Description of services Compensation  2 Total number of independent contractors (including but not limited to those listed above) who received more than			ine dalendar ye	Jui C	<u> </u>	19 W	1011	O1 VV	<u> </u>		cur.		((	C)	
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	2			ot lir	nited	d to		_	ted	above) who received me	ore than				

## NEW YORK COUNCIL NAVY LEAGUE OF Form 990 (2022) THE UNI Part VIII Statement of Revenue THE UNITED STATES INC.

	Check if Schedule O contains a response or note to any line in this Part VIII										
						(A)	(B)	(C)	(D)		
						Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under		
							Tarrottorrato	Basilioso iovelias	sections 512 - 514		
ts ts	1 a	Federated campaigns		1a							
ra M	b	Membership dues		1b	2,951.						
Ω, E	С	Fundraising events		1c	114,540.						
ar A		Related organizations		1d							
s, G		Government grants (contrib		1e							
Sign	f	All other contributions, gifts, g	rants, and								
outi the		similar amounts not included a		1f	122,450.						
ÖĘ	g	Noncash contributions included in lin	nes 1a-1f	1g \$							
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f				239,941.					
					Business Code						
ø	2 a	MEMBERSHIP EVENTS			900099	21,869.	21,869.				
Program Service Revenue	b										
	С										
an eve	d										
og B	е										
<u>r</u>	f	All other program service re	evenue								
	g	Total. Add lines 2a-2f				21,869.					
	3	Investment income (includi	ng divide	nds, intere	st, and						
		other similar amounts)				100,735.			100,735.		
	4	Income from investment of	tax-exen	npt bond p	roceeds						
	5	Royalties									
			(	i) Real	(ii) Personal						
	6 a	Gross rents	6a								
	b	Less: rental expenses	6b								
	С	Rental income or (loss)	6с								
	d	Net rental income or (loss)									
	7 a	Gross amount from sales of	(i) S	Securities	(ii) Other						
		assets other than inventory	7a <sup>3</sup> ,	064,073.							
	b	Less: cost or other basis									
ne		and sales expenses		162,520.							
Revenue	С	Gain or (loss)	7c	-98,447.							
Be		Net gain or (loss)		<u></u>		-98,447.			-98,447.		
ther		Gross income from fundraising	g events (r	not							
₹		including \$1	14,540.	_ of							
		contributions reported on li	ine 1c). S	ee							
		Part IV, line 18		8a	30,210.						
	b	Less: direct expenses		8b	113,640.						
	С	Net income or (loss) from fu	undraisin	g event <u>s</u>		-83,430.			-83,430.		
	9 a	Gross income from gaming	activities	s. See							
		Part IV, line 19		9a							
	b	Less: direct expenses		9b							
	С	Net income or (loss) from g	aming ac	tivities							
	10 a	Gross sales of inventory, le	ss return	s							
		and allowances		10a							
	b	Less: cost of goods sold		10b							
	С	Net income or (loss) from s	ales of in	ventory							
S					Business Code						
Miscellaneous Revenue	11 a										
ang enn	b										
Sel Sek	С										
Mis		All other revenue									
		Total. Add lines 11a-11d					-,				
	12	Total revenue. See instruction	าร			180,668.	21,869.	0.	-81,142.		

#### Form 990 (2022)

#### Part IX | Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must compl	ete all columns. All othe	r organizations must con	nplete column (A).	
	Check if Schedule O contains a respons				(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	66,775.	66,775.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	12,200.	12,200.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	169,228.	152,308.	16,920.	
7	Other salaries and wages	103,440.	134,300.	10,940.	
8	Pension plan accruals and contributions (include				
0	section 401(k) and 403(b) employer contributions)	435.	391.	44.	
9	Other employee benefits	13,478.	12,130.	1,348.	
10 11	Payroll taxes  Fees for services (nonemployees):	13,470.	14,130.	1,340.	
	` ' ' '				
a b	Management				
	Legal Accounting	25,962.	12,981.	12,981.	
d	Lobbying	2373021	12/3011	12/3011	
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	26,190.		26,190.	
g g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A), amount, list line 11g expenses on Sch O.)	1,514.	757.	757.	
12	Advertising and promotion	,			
13	Office expenses	20,611.	7,071.	13,540.	
14	Information technology	1,104.	552.	552.	
15	Royalties				
16	Occupancy				
17	Travel	8,693.		8,693.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	5,215.		5,215.	
24	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 0.)				
а	MEMBER EVENTS/EDUCATION	309,657.	309,657.		
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	661,062.	574,822.	86,240.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				000

Form 990 (2022)
Part X Balance Sheet

I ai	ιλ	balance Sheet					
		Check if Schedule O contains a response or n	ote to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			274.	1	426.
	2	Savings and temporary cash investments			314,763.	2	185,104.
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net		15,422.	4	16,630.	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub					
		controlled entity or family member of any of th		5			
	6	Loans and other receivables from other disqua					
		under section 4958(f)(1)), and persons describ	ed in sec	tion 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net			950,000.	7	950,000.
Assets	8	Inventories for sale or use				8	
Ř	9	Prepaid expenses and deferred charges			5,000.	9	8,263.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		35,858.	1 000		1 000
	b	Less: accumulated depreciation		34,568.	1,290.	10c	1,290.
	11	Investments - publicly traded securities			4,486,988.	11	3,305,658.
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	F 882 828	15	4 460 201		
	16	Total assets. Add lines 1 through 15 (must ed			5,773,737.	16	4,467,371.
	17	Accounts payable and accrued expenses			31,864.	17	14,707.
	18	Grants payable		18			
	19	Deferred revenue		I		19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
ies	22	Loans and other payables to any current or for					
ij		trustee, key employee, creator or founder, sub				00	
Liabilities	22	controlled entity or family member of any of th				22	
	23 24	Secured mortgages and notes payable to unre- Unsecured notes and loans payable to unrelate				_ <u></u>	
	25	Other liabilities (including federal income tax, p				24	
	23	parties, and other liabilities not included on lin					
		of Schedule D	CS 11-24)	. Complete Fait A		25	
	26	Total liabilities. Add lines 17 through 25			31,864.	26	14,707.
	20	Organizations that follow FASB ASC 958, cl			32,0011	20	
es		and complete lines 27, 28, 32, and 33.					
SI C	27	Net assets without donor restrictions			5,741,873.	27	4,406,009.
3ak	28	Net assets with donor restrictions			, ,	28	46,655.
둳		Organizations that do not follow FASB ASC					,
ᇳ		and complete lines 29 through 33.					
ō	29	Capital stock or trust principal, or current fund			29		
sets	30	Paid-in or capital surplus, or land, building, or				30	
Ass	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			5,741,873.	32	4,452,664.
_	33	Total liabilities and net assets/fund balances			5,773,737.	33	4,467,371.

82-2409006 Page **12** 

Pa	Reconciliation of Net Assets				
	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	18	0,6	68.
2	Total expenses (must equal Part IX, column (A), line 25)	2			62.
3	Revenue less expenses. Subtract line 2 from line 1	3	-48		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,74	1,8	73.
5	Net unrealized gains (losses) on investments	5	-80	8,8	<u> 15.</u>
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 on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	4,45	2,6	64.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
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 reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	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:				
	X 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	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

NEW

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

YORK COUNCIL NAVY LEAGUE OF

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

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

THE UNITED STATES INC. 82-2409006 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 10 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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 and 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). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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## 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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	457,684.	302,981.	268,411.	414,881.	239,941.	1683898.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	457,684.	302,981.	268,411.	414,881.	239,941.	1683898.
5	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)						625,425.
	Public support. Subtract line 5 from line 4.						1058473.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	457,684.	302,981.	268,411.	414,881.	239,941.	1683898.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources $\dots$	115,691.	102,079.	98,714.	128,877.	100,735.	546,096.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						0000004
	<b>Total support.</b> Add lines 7 through 10						2229994.
	Gross receipts from related activities,	-			l	12	118,320.
13	First 5 years. If the Form 990 is for the	-	st, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3)	
800	organization, check this box and stor						·····
	Etion C. Computation of Public			olumn (f\)		14	47.47 %
	Public support percentage for 2022 (I	, , , , , , , , , , , , , , , , , , , ,	,	( //		15	
	Public support percentage from 2021 33 1/3% support test - 2022. If the control of the control o					<u> </u>	% and
108							
h	stop here. The organization qualifies as a publicly supported organization  **Display: It is a support to the image of the						
	and <b>stop here.</b> The organization qual	•		•		•	
17a	10% -facts-and-circumstances test						
a	and if the organization meets the fact:	_					
	meets the facts-and-circumstances te			-		viriow the organiz	
h	10% -facts-and-circumstances test	-		*	-		
	more, and if the organization meets the	•				•	. = , • • •
	· · · · · · · · · · · · · · · · · · ·				-		
18	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						

## 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.)

Se	ction A. Public Support		•				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		1		1	T	T
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
10a	a Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
_	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b  Net income from unrelated business						
••	activities not included on line 10b,						
	whether or not the business is						
12	regularly carried on Other income. Do not include gain						
12	or loss from the sale of capital						
40	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)					(01/2)/(0)	
14	First 5 years. If the Form 990 is for the	-			-		
Se	check this box and stop herection C. Computation of Publi						
	Public support percentage for 2022 (I			column (f))		15	%
	Public support percentage from 2021					16	<del>/</del> 6
	ction D. Computation of Inves					101	70
	Investment income percentage for 20			ne 13. column (f))		17	%
	Investment income percentage from					18	%
	a 33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box ar						
ŀ	33 1/3% support tests - 2021. If the						
•	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 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.
- 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).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **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.
- 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.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **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.
- 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.
- 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on 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.
- 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 line 10b below.
  - **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.)

		Yes	No
	1		
	2		
	За		
	n.		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9c		
	46		
	10a		
	10b		
ماريا	A (Forn	n 000)	2022

	rt IV   Supporting Organizations (continued)		- 10	age <b>o</b>
	Continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		100	110
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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 officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
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.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
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			
0	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
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?	1		
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).	2		
3	By reason of the relationship described on line 2, above, 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," describe in Part VI the role the organization's	3		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	<u> </u>		
1	, , , , , , , , , , , , , , , , , , ,			
' a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)  The organization satisfied the Activities Test. Complete line 2 below.	•		
b	The organization is the parent of each of its supported organizations. <i>Complete</i> <b>line 3</b> <i>below.</i>			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in.	struction	c)	
2	Activities Test. Answer lines 2a and 2b below.	Struction	Yes	No
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.	2a		
b	Did the activities described on line 2a, above, 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.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	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? If "Yes" or "No" provide details in Part VI.	3a		
b	·			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

# NEW YORK COUNCIL NAVY LEAGUE OF

Schedule A (Form 990) 2022

THE UNITED STATES INC.

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Part V	Гуре III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1 C	heck here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 ( <i>explain in</i>	Part VI). See instructions
	ll other Type III non-functionally integrated supporting organizations mu		·	
Section A - A	djusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net sho	rt-term capital gain	1		
2 Recover	ries of prior-year distributions	2		
3 Other gr	ross income (see instructions)	3		
4 Add line	es 1 through 3.	4		
<b>5</b> Depreci	ation and depletion	5		
6 Portion	of operating expenses paid or incurred for production or			
collection	on of gross income or for management, conservation, or			
mainten	nance of property held for production of income (see instructions)	6		
7 Other ex	xpenses (see instructions)	7		
8 Adjuste	ed Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - M	linimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggrega	ate fair market value of all non-exempt-use assets (see			
instructi	ions for short tax year or assets held for part of year):			
a Average	e monthly value of securities	1a		
<b>b</b> Average	e monthly cash balances	1b		
<b>c</b> Fair mar	rket value of other non-exempt-use assets	1c		
d Total (a	dd lines 1a, 1b, and 1c)	1d		
e Discou	nt claimed for blockage or other factors			
(explain	in detail in Part VI):			
2 Acquisit	tion indebtedness applicable to non-exempt-use assets	2		
3 Subtrac	t line 2 from line 1d.	3		
4 Cash de	eemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see inst	ructions).	4		
5 Net valu	ue of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply	line 5 by 0.035.	6		
<b>7</b> Recover	ries of prior-year distributions	7		
8 Minimu	m Asset Amount (add line 7 to line 6)	8		
Section C - D	Distributable Amount			Current Year
1 Adjuste	d net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.	85 of line 1.	2		
3 Minimur	m asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter gr	reater of line 2 or line 3.	4		
5 Income	tax imposed in prior year	5		
6 Distribu	utable Amount. Subtract line 5 from line 4, unless subject to			
	ncy temporary reduction (see instructions).	6		
$\overline{}$	heck here if the current year is the organization's first as a non-function	nally integrated	d Type III supporting orga	anization (see

Schedule A (Form 990) 2022

instructions).

Fai	t v Type in Non-Functionally integrated 509(	aj(s) supporting orga	ilizations (continu	<u> ,ea) </u>	
Secti	on D - Distributions				Current Year
_1_	Amounts paid to supported organizations to accomplish exer		1		
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
_5_	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	<b>Total annual distributions.</b> Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9_	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		Г	10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	าร	(iii) Distributable Amount for 2022
_1_	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
_3_	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
c	From 2019				
d	From 2020				
<u>e</u>	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2022 distributable amount				
i_	Carryover from 2017 not applied (see instructions)				
<u>_i</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
<u>a</u>	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
<u>C</u>	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8_	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
_	Excess from 2022				

Schedule A (Form 990) 2022

NEW YORK COUNCIL NAVY LEAGUE OF 82-240<u>9006 Page 8</u> THE UNITED STATES INC. Schedule A (Form 990) 2022 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. Part VI (See instructions.)

232028 12-09-22 Schedule A (Form 990) 2022

# Schedule A

# Identification of Excess Contributions Included on Part II, Line 5

2022

\*\* Do Not File \*\*

\*\*\* Not Open to Public Inspection \*\*\*

Contributor's Name	Total Contributions	Excess Contributions
C.V. STARR & CO., INC.	250,000.	205,400.
SCHEUING, DORIS	75,000.	30,400.
SECUNDA FAMILY FOUNDATION	150,000.	105,400.
MORGAN STANLEY FOUNDATION	45,025.	425.
BLOOMBERG PHILANTHROPIES	75,000.	30,400.
POINT72	150,000.	105,400.
FISHER BROTHERS FOUNDATION	50,000.	5,400.
JOHNSON & JOHNSON	165,000.	120,400.
UNITEDHEALTH GROUP INC	50,000.	5,400.
HUNTINGTON INGALLS INDUSTRIES	61,000.	16,400.
FISERV	45,000.	400.
Total Excess Contributions to Schedule A, Part II, Line 5		625,425.

# Schedule B

Department of the Treasury Internal Revenue Service

(Form 990)

Schedule of Contributors

Attach to Form 990 or Form 990-PF

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

OMB No. 1545-0047

2022

Name of the organization

NEW YORK COUNCIL NAVY LEAGUE OF THE UNITED STATES INC.

**Employer identification number** 

Organization type (check one):						
Filers of:		Section:				
Form 990 c	or 990-EZ	X 501(c)( 3 ) (enter number) organization				
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
		527 political organization				
Form 990-F	PF	501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
Note: Only	a section 501(c)(7	covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General Ru	ule					
	•	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special Ru	ules					
se	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), 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.					
co	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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
y∈ is pı	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 <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$					
answer "No	Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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).					

Name of organization
NEW YORK COUNCIL NAVY LEAGUE OF
THE UNITED STATES INC.

Employer identification number

Parti	Contributors (see instructions). Use duplicate copies of Part I if additional	ıı space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SECUNDA FAMILY FOUNDATION  62 TEATOWN RD  CROTON ON HUDSON, NY 10520-3523	\$50,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	MORGAN STANLEY  1 NEW YORK PLAZA, 5TH FLOOR  NEW YORK, NY 10004	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	FISERV  225 LIBERTY ST FL 29  NEW YORK, NY 10281-1049	\$ 25,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	HUNTINGTON INGALLS INDUSTRIES  4101 WASHINGTON AVE  NEWPORT NEWS, VA 23607-2734	\$ 25,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	CHARLES BLAICH  122 N MADA AVE  STATEN ISLAND, NY 10310-2147	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	HUGOTON FOUNDATION  990 PARK AVE  NEW YORK, NY 10075-0102	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
NEW YORK COUNCIL NAVY LEAGUE OF
THE UNITED STATES INC.

Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	GARY KILBERG  36 MAYFAIR LN  GREENWICH, CT 06831-3640	\$6,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	TRANSPORTATION INSTITUTE  5201 CAPITAL GATEWAY DRIVE  CAMP SPRINGS, MD 20746	\$\$	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	GENERAL DYNAMICS CORP  3150 FAIRVIEW PARK DRIVE  FALLS CHURCH, VA 22042	\$8,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	RAYTHEON COMPANY 4101 E. PLANO PARKWAY PLANO, TX 75074	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11_	MILIO MANAGEMENT  103 ASHBURTON AVE.  YONKERS, NY 10701	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	LOCKHEED MARTIN 6801 ROCKLEDGE DR. BETHESDA, MD 20817	\$ <u>27,500.</u>	Person X Payroll

Name of organization

NEW YORK COUNCIL NAVY LEAGUE OF

Employer identification number

THE UNITED STATES INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	ALTEC/STYSLINGER FOUNDATION 210 INVERNESS CENTER DR. BIRMINGHAM, AL 35242	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
No.	Manie, address, and Zir + +	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

NEW YORK COUNCIL NAVY LEAGUE OF

THE UNITED STATES INC.

Employer identification number

82-2409006

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.						
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		- - - - - \$					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		- - - - - \$					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		- - - - - \$					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		- - - - - - - - - -					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		- - - - - \$					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		- - - - \$					

**Employer identification number** 

Name of organization NEW YORK COUNCIL NAVY LEAGUE OF THE UNITED STATES INC. 82-2409006 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. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

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

Attach to Form 990.

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

OMB No. 1545-0047

2022
Open to Public Inspection

Name of the organization

NEW YORK COUNCIL NAVY LEAGUE OF THE UNITED STATES INC.

Employer identification number 82-2409006

Par	organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		nilar Funds or Ac	counts. Complete if the
	organization answered Tes Offronti 990, Faitty, iii	(a) Donor advised f	unds (	(b) Funds and other accounts
1	Total number at end of year	(4) = 1111 = 1111 = 1		
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	in donor advised fund	ds
	are the organization's property, subject to the organization's	-		
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor o			
	impermissible private benefit?			Yes No
Par		ganization answered "Yes"	on Form 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).		
	Preservation of land for public use (for example, recrea	ition or education)	Preservation of a histo	orically important land area
	Protection of natural habitat	F	Preservation of a certi	fied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution	on in the form of a co	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)		2c
d	Number of conservation easements included in (c) acquired a			
	historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terr	ninated by the organi	zation during the tax
	year			
4	Number of states where property subject to conservation eas			
5	Does the organization have a written policy regarding the per		n, handling of	
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and	enforcing conservatio	n easements during the year
_	<del></del>			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enfor	cing conservation eas	sements during the year
	Does each consequation assessment reported on line O(d) show	ro patiativi the requirements o	of acation 170/b)/4\/D\	(1)
8	Does each conservation easement reported on line 2(d) above			
9	and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation.			
9	balance sheet, and include, if applicable, the text of the footr			
	organization's accounting for conservation easements.	lote to the organization's in	ianciai statements the	at describes the
Par	t III Organizations Maintaining Collections of	f Art, Historical Treas	ures, or Other S	imilar Assets.
	Complete if the organization answered "Yes" on Form		•	
1a	If the organization elected, as permitted under FASB ASC 95	68, not to report in its revenu	ue statement and bala	ance sheet works
	of art, historical treasures, or other similar assets held for put	, '		
	service, provide in Part XIII the text of the footnote to its finar	,		·
b	If the organization elected, as permitted under FASB ASC 95			e sheet works of
	art, historical treasures, or other similar assets held for public	•		
	provide the following amounts relating to these items:			·
	(i) Revenue included on Form 990, Part VIII, line 1			\$
2	If the organization received or held works of art, historical tre			
	the following amounts required to be reported under FASB A			
а	Revenue included on Form 990, Part VIII, line 1			\$
b	Assets included in Form 990, Part X			

# NEW YORK COUNCIL NAVY LEAGUE OF

Schedule D (Form 990) 2022 THE UNITED STATES INC.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

82-2409006 Page **2** 

	t III   Organizations Maintaining C	ollections of A			easures. o	r Other	Similar		(conti		age Z
3	<u> </u>								(COITEII	<i>laca</i>	
	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):										
а	Public exhibition d Loan or exchange program										
b	Scholarly research				nango progre						
c	Preservation for future generations	·									
4	Provide a description of the organization's co	allections and explai	n how th	ev further tl	ne organizatio	n's evem	int nurnos	se in Part	XIII		
5	During the year, did the organization solicit o							sc iiii ait.	<b>XIII.</b>		
J	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran										
	reported an amount on Form 990, Pai							,	,		
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for d	contribution	s or other ass	sets not ir	ncluded				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII								_	-	
	3	ŗ	3						Amoun	t	
С	Beginning balance						1c				
	Additions during the year										
	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on Fe								Yes		No
	If "Yes," explain the arrangement in Part XIII.						•			F	j
Par										-	
	·	(a) Current year		rior year	(c) Two yea			ears back	(e) Fou	r years	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1c	ı, column (a	i)) held as:	•					
а	Board designated or quasi-endowment	·	%	, ,							
b	Permanent endowment	%									
С	The state of the s	<del></del> %									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
За	Are there endowment funds not in the posse	ssion of the organiz	ation tha	t are held a	nd administer	ed for the	e				
	organization by:									Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requi	red on So	chedule R?					3b		
4	Describe in Part XIII the intended uses of the								,		
Par	t VI Land, Buildings, and Equipm	ent.					_				
	Complete if the organization answere	d "Yes" on Form 99	0, Part IV	, line 11a. S	See Form 990	, Part X, I	ine 10.				
	Description of property	(a) Cost or	other	(b) Cos	t or other	(c) Ac	cumulate	ed	(d) Boo	k valu	е
	- 	basis (invest	ment)	basis	(other)	dep	reciation				
1a	Land										
	Buildings										
	Leasehold improvements										
	Equipment			3	0,653.		29,36	53.		1,2	
	Other				5,205.		5,20	05.			0.

Schedule D (Form 990) 2022

Part VII Investments - Of	ther Se	curities.				
Schedule D (Form 990) 2022	THE	UNITED	STATES	INC.	ı	
	И₽М	IORK C	DOMCIP I	NAVI	LEAGUE	OI

Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.		•	
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990. Part IV. line	11d. See Form 990. Part X. line 15.	
	Description	, ,	(b) Book value
(1)			. ,
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15 \		
Part X Other Liabilities.	10.)		
Complete if the organization answered "Yes" of	on Form 990 Part IV line	11e or 11f See Form 990 Part X line 25	
(a) Description of linkility	, , , , , , , , , , , , , , , , , , ,	770 07 771. Oce 1 01111 000, 1 dit X, iiii 2 20	(b) Book value
			(b) DOOK VAILE
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	•		
2. Liability for uncertain tax positions. In Part XIII, provide		-	·
organization's liability for uncertain tax positions under	FASB ASC 740. Check he	ere if the text of the footnote has been pr	ovided in Part XIII X

82-2409006 Page 4

Scriedule D (Form 990) 2022	THE UNITED STATES INC.				400000 Page 4
	of Revenue per Audited Financial Sta		Revenue per Re	turn.	
	unization answered "Yes" on Form 990, Part IV, lii	ne 12a.			-530,724.
· •				1	-530,724.
	but not on Form 990, Part VIII, line 12:	ا ما	_000 015		
	s) on investments		-808,815. 9,973.		
	of facilities		3,313.		
	ints		112 (10		
d Other (Describe in Part XIII.		•	113,640.		605 202
				2e	-685,202. 154,478.
				3	134,470.
	990, Part VIII, line 12, but not on line 1:	1.1	26 100		
	cluded on Form 990, Part VIII, line 7b		26,190.		
	)	4b			26 100
				4c	26,190. 180,668.
5 Total revenue. Add lines 3	and 4c. <i>(This must equal Form 990. Part I. line 12</i> of Expenses per Audited Financial St	) atamants With	Evnenses ner E	5 Paturn	
	unization answered "Yes" on Form 990, Part IV, lii		Lxperises per i	ictui ii.	•
	per audited financial statements			1	758,485.
	but not on Form 990, Part IX, line 25:			•	73071031
	of facilities	2a	9,973.		
	n raciilles		3 7 3 7 3 4		
		_			
	)		113,640.		
•			•	2e	123,613.
				3	634,872.
	990, Part IX, line 25, but not on line 1:				001/0/20
	cluded on Form 990, Part VIII, line 7b	4a	26,190.		
<b>b</b> Other (Describe in Part XIII.			20,1301		
				4c	26,190.
	3 and <b>4c.</b> (This must equal Form 990, Part I, line 1			5	661,062.
Part XIII Supplemental I	nformation.	<u>6.)</u>			00=700=0
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,
	s 2d and 4b. Also complete this part to provide a			,	,
,		•			
PART X, LINE 2:					
TAX STATUS FOOTING	TE - THE COUNCIL HAS BEE	N RECOGNIZ	ZED BY THE	INTE	RNAL
					4 ( = ) ( 9 )
REVENUE SERVICE (	IRS) AS EXEMPT FROM FEDE	RAL TAX UI	NDER SECTIO	N 50	1(C)(3)
			DD011767011		T110011
OF THE U.S. INTER	NAL REVENUE CODE. ACCORD	INGLY, NO	PROVISION	FOR	INCOME
MANDO HAO DODE MA	DE IN HIE ACCOMPANYING E	T111110T1T		3.0	COLLYMETATO
TAXES HAS BEEN MA	DE IN THE ACCOMPANYING F	INANCIAL	STATEMENTS.	AC	COUNTING
DETNOTED CENEDA	IIV ACCEDMED IN MILE INTM	ED CMVMEC	OF AMEDICA	ם היים	IIIDE
PRINCIPLES GENERA	LLY ACCEPTED IN THE UNIT	ED STATES	OF AMERICA	REQ	UIRE
MANIACEMENIII IIIO ETTA	LUATE THE TAX POSITIONS	плием ру п	THE COUNCIL	מזא ג	
MANAGEMENT TO EVA	LUATE THE TAX PUSITIONS	IAKEN BI	THE COUNCIL	АИД	
RECOGNIZE A TAY T	IABILITY (OR ASSET) IF T	HE COUNCE	. нас ам тм	ᠬᡏᡓᠬ	אדא יישע
VECOGNITE W INV I	TADIUIII (OK ABBEI) IF I.	TIE COUNCII	אוט אוא מאזו ר	CURI.	UTIN IUV
POSTTION THAT MOR	E LIKELY THAN NOT WOULD	NOT BE SIIS	STATNED HEAT	N EX	<b>АМТ</b> ИАТТОИ
TODITION THAT MOD			7111111D OIO	-4 1142	
BY THE IRS. MANAG	EMENT HAS CONCLUDED THAT	AS OF DEC	CEMBER 31,	2022	, THERE

ARE NO UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN BY THE

COUNCIL THAT WOULD REQUIRE RECOGNITION OF A LIABILITY (OR ASSET) OR

Part XIII   Supplemental Information (continued)	·g
DISCLOSURE IN THE FINANCIAL STATEMENTS. MANAGEMENT BELIEVES THAT	IT IS NO
LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR YEARS BEGINNING PRI	OR TO
2019.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
EXPENSES RECORDED ON PAGE 9 PART VIII LINE 8B	113,640.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
EXPENSES RECORDED ON PAGE 9 PART VIII LINE 8B	113,640.

#### SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **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.

NEW YORK COUNCIL NAVY LEAGUE OF

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

OMB No. 1545-0047

2022

Open to Public Inspection

Employer identification number

THE UNITED STATES INC. 82-2409006 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. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Mail solicitations Solicitation of non-government grants Internet and email solicitations b Solicitation of government grants Phone solicitations Special fundraising events С g d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No Total 3 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.

NEW YORK COUNCIL NAVY LEAGUE OF 82-2409006 Page 2 THE UNITED STATES INC. Schedule G (Form 990) 2022 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. (a) Event #1 (b) Event #2 (c) Other events (d) Total events ANNUAL NONE (add col. (a) through DINNER col. (c)) (event type) (event type) (total number) 144,750. 144,750. Gross receipts 114,540. 114,540. 2 Less: Contributions 30,210. 30,210. 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 67,988. 67,988. 7 Food and beverages 8 Entertainment 45,652. 45,652. Other direct expenses 113,640. 10 Direct expense summary. Add lines 4 through 9 in column (d) ..... -83,430.11 Net income summary. Subtract line 10 from line 3, column (d) 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. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes

Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: \_ 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

# NEW YORK COUNCIL NAVY LEAGUE OF

Sch	nedule G (Form 990) 2022 THE UNITED STATES INC. 82-	2409	006	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	☐ No
	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
	, , ,	1		
	a The organization's facility	13a		%
	o An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	📖	Yes	∟ No
	a If "Vec " enter the amount of gaming revenue received by the arganization.			
	o If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$			
(	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Caming manager information:			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:			
â	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	Ш	Yes	∟ No
t	• 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 \$			
Pa	Int IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III.	art III. Iir	nes 9. 9	9b. 10b.
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	,	,	,
_				

232083 10-27-22 Schedule G (Form 990) 2022

# NEW YORK COUNCIL NAVY LEAGUE OF Schedule G (Form 990) THE UNITED Part IV Supplemental Information (continued) THE UNITED STATES INC. 82-2409006 Page 4

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **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.

NEW YORK COUNCIL NAVY LEAGUE OF

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

THE UNITE	D STATES	INC.					82-2409006	,
Part I General Information on Grants ar	nd Assistance							
1 Does the organization maintain records to	o substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selection		
criteria used to award the grants or assis	tance?						X Yes N	ю
2 Describe in Part IV the organization's pro								
Part II Grants and Other Assistance to I recipient that received more than \$						es" on Form 990, Part	IV, line 21, for any	
Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance	
NAVY JUNIOR RESERVE OFFICERS								
TRAINING CORPS - 439 WEST 49TH								
STREET - NEW YORK, NY 10019		501C3	57,275.	0.			GENERAL SUPPORT	
MARINE CORPS JUNIOR RESERVE OFFICERS TRAINING CORPS - 100 LUTEN AVE - STATEN ISLAND, NY								
10312		501C3	9,500.	0.			GENERAL SUPPORT	
2 Enter total number of section 501(c)(3) ar	nd government or	ganizations listed in the	e line 1 table			1		
3 Enter total number of other organizations	-	-	•••••					_

Page 2

THE UNITED STATES INC.

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of non-(e) Method of valuation (f) Description of noncash assistance (book, FMV, appraisal, other) recipients cash grant cash assistance STIPENDS 12,200. 0. 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: SAILOR OF THE OUARTER/YEAR AWARDS - WE PREPARE A CHECK, CERTIFICATE AND CONGRATULATORY LETTER FOR THE INDIVIDUAL BEING RECOGNIZED BASED ON WRITTEN REQUEST AND DOCUMENTATION FROM THE SPONSORED/LOCAL MILITARY UNITS COMMAND. WHEN POSSIBLE WE PRESENT THE AWARD IN PERSON. IF NO PRESENTER IS AVAILABLE, WE SHIP THE AWARD PACKAGE TO THE UNIT'S CO/XO/CMC. BUDGET ALLOCATION TO SPONSORED YOUTH PROGRAMS - SPONSORED YOUTH PROGRAMS SUBMIT ITEMIZED BUDGET REQUESTS ANNUALLY TO THE VP OF YOUTH PROGRAMS, AN

## SCHEDULE O (Form 990)

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

NEW YORK COUNCIL NAVY LEAGUE OF THE UNITED STATES INC.

Employer identification number 82-2409006

OMB No. 1545-0047

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
MARINE CORPS, US COAST GUARD AND THE U.S. FLAG MERCHANT MARINE.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
US MARINE CORPS, US COAST GUARD AND THE US FLAG MERCHANT MARINE. THIS
PURPOSE IS ACCOMPLISHED THROUGH: (I) EDUCATION OF LOCAL AND NATIONAL
LEADERS AND AMERICAN PUBLIC OF THE IMPORTANCE OF STRONG SEA SERVICES;
(II) SUPPORT OF THE MEN AND WOMEN OF THE SEA SERVICES, INCLUDING UNITS,
INDIVIDUAL PERSONNEL FROM THE ACTIVE DUTY AND RESERVE COMPONENTS AND
THEIR FAMILIES; AND (III) DEVELOPMENT OF THE NEXT GENERATION OF LEADERS
THROUGH YOUTH PROGRAMS.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
EDUCATIONAL INSTITUTIONS.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
THE ORGANIZATION'S REMAINING PROGRAM IS FOR MEMBERSHIP RECRUITING,
RETENTION, AND SUPPORT.
EXPENSES \$ 215,757. INCLUDING GRANTS OF \$ 0. REVENUE \$ 2,380.
FORM 990, PART VI, SECTION A, LINE 6:
THE ORGANIZATION IS A MEMBERSHIP ORGANIZATION THAT PROVIDES EDUCATIONAL
ASSISTANCE, SUPPORT, AND SCHOLARSHIPS TO NEEDY INDIVIDUALS AS WELL AS
SUPPORT FOR NAVAL ORGANIZATIONS AND MUSEUMS.

<u>Schedule O (Form 990) 2022</u> Page **2** 

NEW YORK COUNCIL NAVY LEAGUE OF Name of the organization **Employer identification number** 82-2409006 THE UNITED STATES INC. THE BOARD SHALL ELECT THE OFFICERS AND ADVISORY COMMITTEE OF THE CORPORATION AT ITS REGULAR MEETING IMMEDIATELY FOLLOWING THE ANNUAL MEETING, FROM THE SLATE OF NOMINEES PRESENTED BY THE NOMINATING COMMITTEE SUPPLEMENTED BY THE NOMINATIONS FROM THE FLOOR. THE BOARD MAY REMOVE ANY OFFICER WITH OR WITHOUT CAUSE, BY VOTE OF TWO-THIRDS OF THE DIRECTORS PRESENT, AT A SPECIAL MEETING CALLED FOR THAT PURPOSE. ALL VACANCIES IN ANY OFFICE SHALL BE FILLED BY THE BOARD WITHOUT UNDUE DELAY, AT A REGULAR MEETING OR AT A SPECIAL MEETING CALLED FOR THAT PURPOSE. THE BOARD SHALL AUDIT BILLS AND DISBURSE THE FUNDS OF THE CORPORATION. THE BOARD SHALL DEVISE AND CARRY INTO EXECUTION SUCH OTHER MEASURES AS IT DEEMS NECESSARY OR DESIRABLE TO PROMOTE THE OBJECTIVES OF THE CORPORATION. FORM 990, PART VI, SECTION B, LINE 11B: FORM 990 IS REVIEWED BY THE PRESIDENT AND TREASURER PRIOR TO FILING THE RETURN. FORM 990, PART VI, SECTION B, LINE 12C: OFFICERS, DIRECTORS, AND EMPLOYEES ARE REQUIRED ANNUALLY TO DISCLOSE INTEREST THAT COULD GIVE RISE TO CONFLICTS. 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 AND ON THEIR WEBSITE.