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SCANNED DEC 02 2015

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

Qepartment of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	For th	e 2014 calendar year, or tax year beginning $\mathrm{JUL}1$ , $2014$	g Jl	JN 30, 20	15	
В	Check if applicab	C Name of organization MARINE CORPS LEAGUE OF PENNSYLVANIA, INC		D Employer ide	ntificati	ion number
X	Addre					
	Name   Chang			25	-131	3893
	Initial return Final	Number and street (or P 0 box if mail is not delivered to street address) 7306 JONESTOWN ROAD	/suite	E Telephone nu		5-0520
<u> </u>	lretum termir ated	<u> </u>			7-21	155,411.
ſ	Amen	ded HADDICRIDC DA 17112	_ F	G Gross receipts \$		
F	⊒retum ∏Apptic			H(a) Is this a gro	•	Yes X No
ь.	Lión pendi	7306 JONESTOWN ROAD, HARRISBURG, PA 17112	2	for subordin		
1 -	 Гау <b>.</b> еу	empt status: ☐ 501(c)(3) X 501(c) ( 4 )	527	H(b) Are all subording		ed? Yes No . (see instructions)
		te: N/A				umber ► 0955
						ate of legal domicile PA
	art E	Summary	Teal Of	TOTTIALION 174	3 IVI 50	ate of legal domicile FA
	1	Briefly describe the organization's mission or most significant activities: SUPPORT	VET	FRANS AN	тн О	EIR
Activities & Governance	1 .	DEPENDENTS AND FOSTER PATRIOTISM AND CITIZEN				
IB U	1	Check this box ▶ ☐ if the organization discontinued its operations or disposed of				<del></del>
Š	ł	Number of voting members of the governing body (Part VI, line 1a)	more	.nan 2570 Onto n	3	18
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)	•		4	18
త భ		Total number of individuals employed in calendar year 2014 (Part V, line 2a)				0
iţe		Total number of volunteers (estimate if necessary)		•••	5	550
÷	l	Total unrelated business revenue from Part VIII, column (C), line 12		•	6	0.
Ă	l	Net unrelated business taxable income from Form 990-T, line 34			7a 7b	0.
	<u></u>	Net unrelated business taxable income from Form 990-1, line 34	T	Drien Veer	/B	
	8	Contributions and greats /Dort VIII. Inc. 1h		Prior Year 8,80		Current Year 7,328.
ĭ	Į.	Contributions and grants (Part VIII, line 1h)		27,21		
Revenue	l .	Program service revenue (Part VIII, line 2g)	-	$\frac{27,21}{18,32}$		29,100.
æ		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-	47,33		30,713.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	$\vdash$			45,535.
		Total revenue - add lines 8 through 11 (must equal Part-VIII, column (A), line 12)	+	101,67		112,676.
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		24,60	0.	27,500.
		Benefits paid to or for members (Part IX, column (A), line 4)	-		0.	0.
Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5.10)	-		0.	0.
en	ı	Professional fundraising fees (Part IX, column (A), liné 11e)  Total fundraising expenses (Part IX, column (D): line 25)		· · · · · · · · · · · · · · · · · · ·	<del>-   -</del>	0.
Ĕ	ı		-	55 05		97 200
	ı	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	55,95		87,299.
	l	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		80,55		114,799.
_s	19	Revenue less expenses. Subtract line 18 from line 12	<del>                                     </del>	21,11		-2,123.
Net Assets or Fund Balances		T. I. I (P I.V. I	Begii	nning of Current Ye		End of Year
SSe	20	Total assets (Part X, line 16)		677,64		689,657.
Jet/ mg/	21	Total liabilities (Part X, line 26)	-		0.	0.
	22 rt	Net assets or fund balances. Subtract line 21 from line 20 Signature Block	J	677,64	3 • ]	689,657.
		ities of perjury, I declare that I have examined this return, including accompanying schedules and st			of my kno	owledge and belief, it is
true,	correc	t, and complete Declaration of preparer (other than officer) is based on all information of which pre	parer na	as any knowledge	1211	2415
0:	_	Signature of officer		Date	<u>ון נכו</u>	20/5
Sigr		ROBERT C. ZILTZ, JR., PAYMASTER		Duto		
Her	е	Type or print name and title		<u> </u>		···
			Dat	e Chash	च्चा	PTIN
Paid		Print/Type preparer's name  ROBERT A. ROMAKO  Preparer's signature		12011- 1	العف	
			,,,	1 100.00		P00252344
Prep				Firm's EIN	<u> </u>	6-1382359
Use	uniy	Firm's address 220 HALDEMAN AVENUE NEW CUMBERLAND, PA 17070			/717	774 2042
<u> </u>	Ala - 15			Phone no	/1/	
ıvıay	เท <b>e</b> เห	RS discuss this return with the preparer shown above? (see instructions)				X Yes No

			Yes	No
<b>`</b> 1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		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		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, 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,	ľ		
	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		Х
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 temporarily restricted endowments, permanent			
	endowments, or 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, VIII, 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		X
þ	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	<u> </u>
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16° If "Yes," complete Schedule D, Part VIII	11c		X
ď	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
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			v
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40		х
_	Schedule D, Parts XI and XII	12a		
Ь	Was the organization included in consolidated, independent audited financial statements for the tax year?	406		х
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	14a		X
	Did the organization maintain an office, employees, or agents outside of the United States?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	, a		
b	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		х
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	1.42		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
. •	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		i	
	complete Schedule G, Part III	19	Х	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2014)

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	rt IV   Checklist of Required Schedules (continued)		Yes	No
` 21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
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		l :	ļ
	Schedule K. If "No", go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c	1	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	ĺ		
	of any of these persons? If "Yes," complete Schedule L, Part III	27		<b>X</b> _
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28ь		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? 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		ŀ	
	contributions? If "Yes," complete Schedule M	30		<u>X</u> _
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	}	ŀ	
	Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		}	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u> _
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		- 1	
	Part V, line 1	34		<u>X</u> _
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Χ_
b	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		
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		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	]		
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

MARINE CORPS LEAGUE OF PENNSYLVANIA, INC C/O ROBERT C. ZILTZ, JR. 25-1313893 Form 990 (2014) Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes Nο 2 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 0 2a filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3ь 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х 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). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Х 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6ь Organizations that may receive deductible contributions under section 170(c). X 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X 7с d If "Yes," indicate the number of Forms 8282 filed during the year 7d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 76 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f 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? 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 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9a

bit the sponsoring organization make a distribution to a donor, donor advisor, or related person?
 Section 501(c)(7) organizations. Enter:
 a Initiation fees and capital contributions included on Part VIII. Inc. 12

a 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

Section 501(a)(12) expanientings. Fator:

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

a 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?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b

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

a Is the organization licensed to issue qualified health plans in more than one state?
 Note. 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
 c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

**b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form **990** (2014)

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9ь

12a

13a

14a

10a

10ь

11a

11b

13b 13c

MARINE CORPS LEAGUE OF PENNSYLVANIA, INC C/O ROBERT C. ZILTZ, JR. 25-1313893 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 in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 18 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 in Schedule O 18 b Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X 7Ь persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, Х 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? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Х 13 13 Did the organization have a written whistleblower policy? X 14 Did the organization have a written document retention and destruction policy? 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? X a The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization .... X 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? . . . . 16a . . . 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? Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed ▶\_\_\_ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Another's website Other (explain in Schedule O) Own website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial

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

statements available to the public during the tax year.

ROBERT C. ZILTZ, JR. - 717-215-0520 7306 JONESTOWN ROAD, HARRISBURG, PA

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# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)			(C Pos	C)			(D)	(E)	(F)	
Name and Title	Average hours per	(do	o not check mor x, unless person			than	one	Reportable compensation	Reportable compensation	Estimated amount of	
	week	offi	cer ar	nd a d	irecto	or/trus	tee)	from	from related	other	
	(list any	or director			(			the	organizations	compensation	
	hours for related	or di	88			Highest compensated employee		organization	(W-2/1099-MISC)	from the	
	organizations	trustee	al trus		<b>8</b>	mpeu		(W-2/1099-MISC)		organization and related	
	below	Individual	Institutional trustee	<b>a</b>	Key employee	est co loyee	声			organizations	
	line)	텰	ışı	Officer	Ş.	돌	P		· · · · · · · · · · · · · · · · · · ·		
(1) JAMES POWELL	15.00			١							
COMMANDANT	15 00	<u> </u>	_	Х	ļ	<u> </u>		0.	0.	0.	
(2) ERIC FUSSENEGGER	15.00	┨		,				•	0	•	
SENIOR VICE COMMANDANT	15 00		<del> </del>	Х		<u> </u>		0.	0.	0.	
(3) THOMAS HAZLETT	15.00	ļ		х		ļ		0		0	
JUNIOR VICE COMMANDANT	10.00		-	^		_		0.	0.	0.	
(4) BRIAN NATALI	10.00	-		х	İ			0.	0.	0	
JUDGE ADVOCATE	25.00	$\vdash$		^					0.	0.	
(5) ROBERT ZILTZ PAYMASTER	23.00			х				0.	0.	_0.	
(6) DAVID BRADY	20.00		├-	71							
ADJUTANT	20100			х				0.	0.	0.	
(7) JOHNNY GILL	10.00		-								
CHAPLAIN				Х				0.	0.	0.	
(8) GORDON SHERIFF	10.00										
JUNIOR PAST COMMANDANT				X				0.	0.	0.	
	<u> </u>						ļ				
	<del> </del>										
	<del>                                     </del>								·	<del> </del>	
	-										
										<del></del>	
						ı <b>I</b>	- 1				
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Form 990 (2014)

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	KUDEKI	١	7. 1 1 1 1 7	ur.

Pa	rt VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ghe	st C	Compensated Employe	es (continued)			
	(A)  Name and title	(B) Average hours per week (list any hours for related organizations below	tee or director (b) (c) (c)	not c	Pos check ess pe	ition more rson lirecto	tition more than o more is both frector/truste		(D)  Reportable compensation from the	(E) Reportable compensation from related organizations (W-2/1099-MISC		Estin amou oth compe from organ and re	nated int of ner nsation in the zation elated zations
		line)	Indivi	Institu	Officer	Keyer	Highe	Form					
				-		_					+		
											+		
											_		
											+		
1b	Sub-total							<b>&gt;</b>	0.		0.		0.
	Total number of individuals (including but n					<u>.                                    </u>		► No re	0. 0. eceived more than \$100	(	0.		0.
	compensation from the organization  Did the organization list any former officer,	director, or tru	uste	e, ke	ey er	nplo	yee,	, or	highest compensated e	mployee on	— Г	Ye	S No
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su and related organizations greater than \$15	um of reportab	le co							the organization		4	X
5 Sec	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," comparison B. Independent Contractors	accrue compe	nsat	ıon f	rom	any	unr			dual for services		5	х
1	Complete this table for your five highest co										ensat	tion fron	n
	(A) Name and business			ONE		vicio :			(B) Description of s		Co	(C) mpensa	ition
						_							
2	Total number of independent contractors (i \$100,000 of compensation from the organi		ot lii	mite	d to		se lis	stec	d above) who received m	nore than		orm QQ	0 (2014)

C/O ROBERT C. ZILTZ, JR. 25-1313893 Form 990 (2014) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under Related or Unrelated Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1a 1 a Federated campaigns 1b Membership dues 1c c Fundraising events 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and 7,328. similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 7,328 h Total. Add lines 1a-1f Business Code 2 a LIFE MEMBER PROGRAM 900009 13,203. 13,203 Program Service Revenue 8,321. 8,321. CONVENTION AND MEAL RE 900099 900099 7,576. 7,576. c DUES f All other program service revenue 29,100. Total. Add lines 2a-2f Investment income (including dividends, interest, and 14,514. 14,514. other similar amounts) ... Income from investment of tax-exempt bond proceeds Royalties (ii) Personal (i) Real 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (II) Other 7 a Gross amount from sales of (i) Securities 17,217 assets other than inventory b Less: cost or other basis 1,018 and sales expenses 16,199. c Gain or (loss) ... 16,199 16,199 d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See 16,267. Part IV, line 18 9,140. b Less: direct expenses 7,127. 7,127. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See 65,620. Part IV, line 19 27,783. b Less: direct expenses  $\triangleright$ 37,837. 37,837. c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 5,333. and allowances 4,794. **b** Less: cost of goods sold 539 539. c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 900099 32 32. INSURANCE ADMINISTRATI d All other revenue

59,478.

32

112,676.

e Total. Add lines 11a-11d

Total revenue. See instructions

45,870.

Form 990 (2014) C/O ROBERT C. ZILTZ, JR.

Part IX Statement of Functional Expenses

Seci	tion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons			mplete column (A).	
		(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				1,1
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	27,500.	27,500.		
3	Grants and other assistance to foreign			1	
	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				. <del></del>
6	Compensation not included above, to disqualified	Ĭ			
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				<del></del> <del>-</del>
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	<del></del>			
9	Other employee benefits				·
10	Payroll taxes				
11	Fees for services (non-employees):	1,025.		1 025	
a	· · ·	1,023.		1,025.	
b	Legal				
C	Accounting		-		<del></del>
d	. –				
e f	Professional fundraising services See Part IV, line 17 Investment management fees	26.	· · · · · · · · · · · · · · · · · · ·	26.	
		20.		20.	
9	column (A) amount, list line 11g expenses on Sch O )				
12	Advertising and promotion				<del></del>
13	Office expenses	1,236.		1,236.	
14	Information technology	2,2001	-	1,200.	
15	Royalties				
16	Occupancy	7,117.	7,117.		
17	Travel	32,792.	32,792.		
18	Payments of travel or entertainment expenses	, , , , , , ,			
-	for any federal, state, or local public officials		}		
19	Conferences, conventions, and meetings	11,772.	11,772.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A)				111111111111111111111111111111111111111
	amount, list line 24e expenses on Schedule 0)	27,250.	27 250		
a	CHARITABLE ACTIVITIES AWARDS	3,228.	27,250. 3,228.		
Ь	MISCELLANEOUS EXPENSES	1,587.	1,587.		
C	PRINTING AND PUBLICATIO	1,266.	1,266.		
d		1,200.	1,200.		<del></del>
	All other expenses	114,799.	112,512.	2,287.	0.
25 26	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the organization	11-11-11-11-1	116,316.	2,201.	<u> </u>
ĘŲ	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation		+		
	Check here If following SOP 98-2 (ASC 958-720)		j		

Form 990 (2014)
Part X Balance Sheet

	Check If Schedule O contains a response or note to any line in this Part X	· · · · · · · · · · · · · · · · · · ·	<del>   -</del>	
		(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing	37,018.	1	46,557
2	Savings and temporary cash investments	33,270.	2	26,422
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5_	
6	Loans and other receivables from other disqualified persons (as defined under			
ŀ	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
:	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
7 8	Inventories for sale or use	3,922.	8	4,367
9	Prepaid expenses and deferred charges	<del></del>	9	
10a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a			
ь	Less: accumulated depreciation		10c	
111	Investments - publicly traded securities	_	11	<del> </del>
12	Investments - other securities. See Part IV, line 11	603,438.	12	612,311
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	677,648.	16	689,657
17	Accounts payable and accrued expenses	<b>,</b>	17	
18	Grants payable		18	
19	Deferred revenue	· · · · · · · · · · · · · · · · · · ·	19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees,	-		······································
	key employees, highest compensated employees, and disqualified persons.			
	Complete Part II of Schedule L	ĺ	22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third		2-7	
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
Į	Schedule D		25	
26	Total liabilities. Add lines 17 through 25	0.	26	0
120	Organizations that follow SFAS 117 (ASC 958), check here X and		20	
	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	677,648.	27	691,257
28	Temporarily restricted net assets	07770101	28	0317237
29	Permanently restricted net assets		29	······································
25	Organizations that do not follow SFAS 117 (ASC 958), check here		25	
1	1			
20	and complete lines 30 through 34.	•	20	
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
27 28 29 30 31 32	Retained earnings, endowment, accumulated income, or other funds	677,648.	32	601 257
33	Total net assets or fund balances		33	691,257
34	Total liabilities and net assets/fund balances	677,648.	34	691,257 Form <b>990</b> (2014

Form 990 (2014)

Form	990 (2014) C/O ROBERT C. ZILTZ, JR.	<u> 25–131</u>	.3893	Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
		<b>!</b>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>76.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			99.
3	Revenue less expenses. Subtract line 2 from line 1	3			23.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			48.
5	Net unrealized gains (losses) on investments	5	14	<del>1,1</del>	32.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			_	
	column (B))	10	689	9,6	<u>57.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	· O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				ĺ
	Separate basis Consolidated basis Both consolidated and separate basis				İ
b	Were the organization's financial statements audited by an independent accountant?		2b	·	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				İ
	Separate basis Consolidated basis Both consolidated and separate basis				ĺ
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				ĺ
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form 990 (2014)

## SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs gov/form990

OMB No 1545-0047

2014

Open to Public Inspection

the organization answered "Yes," to Form 990,	Part IV, line 3, or Form 990-EZ, Part \	<ul> <li>Ine 46 (Political Campaign Activities), then</li> </ul>
---	---	--

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

#### If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• Section 501(c)(4), (5), or (6) organizations	ations: Complete Part III			
Name of organization MARINE C/O ROE	CORPS LEAGUE OF BERT C. ZILTZ, JE	₹.	·	Employer identification number 25–1313893
Part I-A Complete if the or	ganization is exempt und	der section 501(c	) or is a section 5	27 organization.
<ol> <li>Provide a description of the organi</li> <li>Political expenditures</li> <li>Volunteer hours</li> </ol>	zation's direct and indirect politi	cal campaign activities	s in Part IV. 	<b>&gt;</b> \$
Part I-B Complete if the or	ganization is exempt und	der section 501(c	)(3).	
<ul> <li>1 Enter the amount of any excise tax</li> <li>2 Enter the amount of any excise tax</li> <li>3 If the organization incurred a section</li> <li>4a Was a correction made?</li> <li>b if "Yes," describe in Part IV.</li> <li>Part I-C Complete if the organization</li> <li>1 Enter the amount directly expendent</li> </ul>	nncurred by organization managon 4955 tax, did it file Form 4720 ganization is exempt und	ers under section 495 for this year? der section 501(c) action 527 exempt fund	), except section section section section sectivities	S       No         Yes       No         Yes       No         501(c)(3).       No
<ul> <li>2 Enter the amount of the filing organ exempt function activities</li> <li>3 Total exempt function expenditure line 17b</li> <li>4 Did the filing organization file Form</li> <li>5 Enter the names, addresses and emade payments. For each organization for the filing organization file form</li> </ul>	s. Add lines 1 and 2. Enter here and 1. Enter he	and on Form 1120-POI IN) of all section 527 p d from the filing organ a separate political org	L, colitical organizations to ization's funds. Also en ganization, such as a se	ter the amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid fr filing organization funds. If none, ente	n's contributions received and

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014 C/0					1313893 Page 2
Part II-A Complete if the organi section 501(h)).	zation is exe	empt under section	on 501(c)(3) and file	ed Form 5768 (	election under
A Check If the filing organization expenses, and share of	excess lobbying	expenditures).		group member's na	me, address, EIN,
B Check I if the filing organization	checked box A a	and "limited control" pr	ovisions apply.	4-3 Ed	4 > 4 (5) + 1
Limits or (The term "expenditur	Lobbying Expe es" means amo		.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence	e public opinion	(grass roots lobbying)			
b Total lobbying expenditures to influence	e a legislative bo	ody (direct lobbying)	. [_		
c Total lobbying expenditures (add lines	1a and 1b)				
d Other exempt purpose expenditures					
e Total exempt purpose expenditures (ac	ld lines 1c and 1	d)			
f Lobbying nontaxable amount. Enter the	amount from the	ne following table in bo	th columns.		
If the amount on line 1e, column (a) or (b)	is: The lol	bbying nontaxable an	nount is:		
Not over \$500,000	20% of	f the amount on line 1e			
Over \$500,000 but not over \$1,000,000	\$100,0	00 plus 15% of the ex	cess over \$500,000.		
Over \$1,000,000 but not over \$1,500,0	00 \$175,0	00 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,	000 \$225,0	00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000	,000.			
h Subtract line 1g from line 1a. If zero or le Subtract line 1f from line 1c. If zero or le j If there is an amount other than zero or reporting section 4911 tax for this year (Some organizations that n	ess, enter -0- either line 1h or ? 4-Year Av nade a section 5	eraging Period Under	r section 501(h) have to complete all o	f the five columns I	Yes No
	<del>.</del>	nditures During 4-Ye	····		
Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures				<del></del>	
d Grassroots nontaxable amount		,		, ,,	
e Grassroots ceiling amount (150% of line 2d, column (e))	······································				
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014 C/O ROBERT C. ZILTZ, JR. 25-1313893 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description		a)	(1	o)
	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	_			
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
ď	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ction	-
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	•	_ 2		X
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?  ###################################		3		X
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members	"No," O	K (b) Par	. III-A, III	1e 3, IS
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	cal			
_	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year	•	2b		
c	Total		2c		<del></del>
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)	_	5		
Par					
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list): Part I	I-A. lines 1 a	nd 2 (see	
	ictions); and Part II-B, line 1. Also, complete this part for any additional information.	,,			
	otions), and that it of into the notion of the part to any accumulation				
					-
		·			
				<u></u>	-

# (Form 990)

# Supplemental Financial Statements

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

Attach to Form 990.

Open to Public

Department of the Treasury

Information about Schedule D (Form 990) and its instructions is at www irs

Employer identification number

2c

Inspection MARINE CORPS LEAGUE OF PENNSYLVANIA, Name of the organization C/O ROBERT C. ZILTZ, 25-1313893 JR. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of a historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a 2b Total acreage restricted by conservation easements

	listed in the National Register		
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the	organization during the tax	
	year ▶		
Ļ	Number of states where property subject to conservation easement is located ▶		
;	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?	Yes	N
j	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements du	ring the year 🟲 🔃	<u>_</u>
,	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during	the year ► \$	
3	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(	h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?	Yes	N
)	In Part XIII, describe how the organization reports conservation easements in its revenue and expense	statement, and balance sheet	, and

include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts

relating to these items:	
(i) Revenue included in Form 990, Part VIII, line 1	. <b>&gt;</b> \$
(ii) Assets included in Form 990, Part X	<b>&gt;</b> \$
If the organization received or held works of art, historical treasures, or other similar asser	ets for financial gain, provide
the following amounts required to be reported under SFAS 116 (ASC 958) relating to the	ese items:

a Revenue included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Number of conservation easements on a certified historic structure included in (a)

Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure

Schedule D (Form 990) 2014

2

Sche	dule D (Form 990) 2014 C/O ROB	ERT C. ZIL	TZ,	JR.				25-13	13893	Page 2
Par	t III Organizations Maintaining C	collections of A	rt, His	storical Tr	reasures, or Ot	her :	Simil	ar Asse	ts(continu	ued)
. 3	Using the organization's acquisition, access	ion, and other record	is, chec	ck any of the	following that are a	sıgnı	ficant	use of its	collection	items
	(check all that apply)									
а	Public exhibition	d	· 🗀	Loan or exc	change programs					
Ь	Scholarly research	е	, 🗀	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how t	they further t	the organization's e	xemp	t purp	ose in Par	t XIII.	
5	During the year, did the organization solicit of	or receive donations	of art, h	nistorical trea	asures, or other simi	ılar as	sets		_	
	to be sold to raise funds rather than to be m								Yes	No_
Par	t IV Escrow and Custodial Arran	gements. Comple	ate If th	e organizatio	on answered "Yes"	to For	m 990	), Part IV,	line 9, or	
	reported an amount on Form 990, Pa	<del></del> -								
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	r contribution	ns or other assets n	ot inc	luded		_	
	on Form 990, Part X?			•	•			<u> </u>	_ Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table:		1				
									Amount	
	Beginning balance .		•				1c			
	Additions during the year						1d			
е	Distributions during the year .		-				1e			
f	Ending balance					-	1f			
	Did the organization include an amount on F						)	L.	Yes	∐ No
	If "Yes," explain the arrangement in Part XIII.									
Par	t V Endowment Funds. Complete									
		(a) Current year	(b)	Prior year	(c) Two years back	(d)	Three	years back	(e) Four	ears back_
1a	Beginning of year balance		-			<u> </u>				
þ	Contributions					<del> </del>				
C	Net investment earnings, gains, and losses					+				
d	Grants or scholarships									
e	Other expenditures for facilities									
_	and programs									
f	Administrative expenses									
9	End of year balance				N. 11				L	<del></del>
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1	1g, column (a	a)) held as:					
a	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
•	The percentages in lines 2a, 2b, and 2c should be a seen and the seen		-41		and and an interest for					
3a	Are there endowment funds not in the posse	ssion of the organiza	ation th	at are nelo a	ino administered to	rine	organiz	zation	Г	res No
	by:									es No
	(i) unrelated organizations		•						3a(i) 3a(ii)	-
L	(ii) related organizations  If "Yes" to 3a(ii), are the related organizations	 clipted as required a	 n Sche	 Idula B2	• ••		••		3b	
4	Describe in Part XIII the intended uses of the	•					•		<u> </u>	
	t VI Land, Buildings, and Equipm		William	idilds.						
	Complete if the organization answere		, Part I	V. line 11a. S	ee Form 990. Part )	K, line	10.			
	Description of property	(a) Cost or of		1			mulate	ed	(d) Book	value
	boothplion of proporty	basis (investm		1 ''			ation		(-,	
12	Land	<del></del>	<u>-</u>	1		<del></del>	<u>-</u>			
	Buildings	•								
	Leasehold improvements									
	Equipment								-	<del></del>
	Other								•	<del></del>
	. Add lines 1a through 1e. (Column (d) must e	gual Form 990, Part	X, colu	mn (B), line 1	10c.)			<b>&gt;</b>	-	0.

Schedule D (Form 990) 2014

	11111		00101			-		~ -
Schedule D (Form 990) 2014	C/0	ROE	BERT	C.	ZILTZ,	JF	₹	

Complete if the organization answered "Yes" to	o Form 990, Part IV, line 1	11b. See Form 990, Pa	rt X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value			d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A) EQUITY MUTUAL FUNDS	557,117.	END-OF-YEA		
(B) CORPORATE BONDS	55,194.	END-OF-YE	AR MARKET	VALUE
(C)		-		
(D)				
(E)			<del></del>	
(F)				
(G)			<u>-</u>	
(H)	612,311.		<del>+</del>	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ Part VIII Investments - Program Related.	012,311.		<u></u>	
	Form 000 Bort IV line 1	1a Saa Farm 000 Par	t V line 12	
Complete if the organization answered "Yes" to  (a) Description of investment	(b) Book value			i-of-year market value
<u></u>	(0) 2001 10.00	(0) 11011100 01 1010	4.0111 0001 01 0110	or your market raids
(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" to		1d. See Form 990, Par	t X, line 15	<del></del>
	escription			(b) Book value
(1)				
(2)				
(3)	<del></del>			
(4)				<del></del>
				<del> </del>
(7)				
(8)	· <del>-</del>			
(9)	<del></del>			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)		<b>•</b>	
Part X Other Liabilities.	·			
Complete if the organization answered "Yes" to	Form 990, Part IV, line 1	1e or 11f. See Form 99	0, Part X, line 25.	
1. (a) Description of liability		b) Book value		11 11 11 11 11 11 11 11 11 11 11 11 11
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				•
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line				
<ol><li>Liability for uncertain tax positions. In Part XIII, provide t</li></ol>				
organization's liability for uncertain tax positions under F	IN 48 (ASC 740) Check	here if the text of the fo	otnote has been	provided in Part XIII L

Schedule D (Form 990) 2014

Sche	dule D (Form 990) 2014 C/O ROBERT C. ZILTZ, JR.		<u>25–1313893</u>	Page
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per	Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.			
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		"	
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	. 2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2 <sub>e</sub>	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b		4c	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
	t XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses no		
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	-	er neturn.	
1	Total expenses and losses per audited financial statements		1	
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	11		
	Donated services and use of facilities	2a	_	
	Prior year adjustments	2b	_	
	Other losses	2c	_	
	Other (Describe in Part XIII.)	2d	<b>→</b>	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	
	t Xtif Supplemental Information.			
1es 2	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	litional information.		

## SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

Open to Public Department of the Treasury ► Attach to Form 990 or Form 990-EZ. Internal Revenue Service Inspection www.irs.gov/form 990 Name of the organization MARINE CORPS LEAGUE OF PENNSYLVANIA, INC **Employer identification number** C/O ROBERT C. ZILTZ, JR. 25-1313893 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations □ Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or No No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten 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) or entity (fundraiser) from activity fundraiser organization listed in col. (i) Yes No

Total •		. ▶			
3 List all states in which the organization or licensing.	n is registered or licensed to soli	cit contributions	or has been notified	d it is exempt from re	egistration
<u> </u>					
<del></del>					
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432081 08-28-14

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2014

Schedule G (Form 990 or 990-EZ) 2014 C/O ROBERT C. ZILTZ, JR. 25-1313893 Page 2 Fundraising Events. Complete if the organization answered "Yes" to 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 MARKSMANSHIP (add col. (a) through PROGRAM col. (c)) (event type) (total number) (event type) Revenue 12,955. 3,312. 16,267. Gross receipts 2 Less: Contributions 12,955. 3,312. 16,267. Gross income (line 1 minus line 2) 4 Cash prizes Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 7,340. 1,800 9,140. Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (add (b) Pull tabs/instant Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) 65,620. 65,620. Gross revenue 22,375. 22,375. 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs 5,408. 5,408. 5 Other direct expenses Yes 100 % Yes Volunteer labor 27,783. 7 Direct expense summary. Add lines 2 through 5 in column (d) 37,837. 8 Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities. PA a is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: Yes 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain: \_ Schedule G (Form 990 or 990-EZ) 2014 432082 08-28-14

Schedule G (Form 990 or 990 EZ) 2014 C/O ROBERT C. ZILTZ, JR. 25-	1313893	Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes	X No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
to administer charitable gaming?	Yes	X No
13 Indicate the percentage of gaming activity conducted in:	1 1	
a The organization's facility	13a	%
<b>b</b> 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 >		<del></del>
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	X No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount		
of gaming revenue retained by the third party > \$		
c If "Yes," enter name and address of the third party:		
Name		
Address ▶		
Addicas 2		
16 Gaming manager information:		
Name ▶		
Gaming manager compensation ▶ \$		
Description of services provided 🕨		
Director/officer Employee Independent contractor		
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	Yes	V Na
retain the state gaming license?	res	۱۷۵ لم
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$		
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III,	ines 9, 9b, 10	)b 15b
15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
100) To your and the process of the		
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Schedule G	(Form 990 or 990-EZ) Supplemental Inf	C/O ROBERT	r C. z	ZILTZ,	JR.		25-	1313893	Page 4
Part IV	Supplemental Inf	ormation (continued)	·						_
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SCHEDULE I		U best start O	Grant and Uther Authornee to Organizations					OMB No 1545-0047
(Form 990)		Overnment and hadridout in the Un	Overnmente med badfeldente in ine United States	\ <u>\</u>				2014
Department of the Treasury			i the organization	■ Attach to Form 990.	.to rorm 990, Fa m 990.	organization answered Tes to Form 350, Part IV, line 21 of 22.  Attach to Form 990.		Open to Public
Internal Revenue Service		▶ Information about	about	Form 990) and its	s instructions is a	t www.irs.eav/form990		Inspection
Name of the organization	MARINE CORPS C/O ROBERT C	LEAGUE ZILTZ	OF JR	LVANIA, I	NC	PENNSYLVANIA, INC		Employer identification number 25-1313893
Part i General Info	General Information on Grants and Assistance	stance						
1 Does the organizat	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	antiate the ar	nount of the grants	or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the selectiv	
criteria used to aw: 2 Describe in Part IV	criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	for monitori	ng the use of grant	funds in the United	d States.	٠		A Yes No
Part II Grants and (	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	ic Organizat	ions and Domestic	Governments. C	complete if the organic	anization answered "\	res" to Form 990, Part IV	/, line 21, for any
recipient tha	25,00	art II can be	duplicated if additi	onal space is need	ded.	(f) Method of		
1 (a) Name and address of organization or government		( <b>p)</b>	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(I) Metition of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
		_						
2 Enter total number	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nment organ	nizations listed in the	e line 1 table			-	
۱,	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Instruction	s for Form 990.					Schodule I (Form 000) (2014)
	•							107) (066 IIII) 10 (100) (70)
432101 10-15-14				24				

Schedule I (Form 990) (2014)

C/O ROBERT C. ZILTZ, JR.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Page 2

25-1313893

110 27, 500. 0.  'art i, line 2, Part III, column (b), and any other additional information.	110 27,500. 0. Part I. line 2, Part III, column (b), and any other additional information.	27,500.	Part I, line 2, Part III, column (b), and any other additional information.	(a) Type of grant or assistance recipients
art i, line 2, Part III, column (b), and any other additional information.	Part I, line 2, Part III, column (b), and any other additional information.	Part I, line 2, Part III, column (b), and any other additional information.	Part I, line 2, Part III, column (b), and any other additional information.	
art I, line 2, Part III, column (b), and any other additional information.	Part I, line 2, Part III, column (b), and any other additional information.	Part I, line 2, Part III, column (b), and any other additional information.	Part I, line 2, Part III, column (b), and any other additional information.	
art I, line 2, Part III, column (b), and any other additional information.	Part I, line 2, Part III, column (b), and any other additional information.	Part I, line 2, Part III, column (b), and any other additional information.	Part I, line 2, Part III, column (b), and any other additional information.	
art I, line 2, Part III, column (b), and any other additional information.	Part I, line 2, Part III, column (b), and any other additional information.	Part I, line 2, Part III, column (b), and any other additional information.	Part I, line 2, Part III, column (b), and any other addittonal information.	
art I, line 2, Part III, column (b), and any other additional information.	Part I, line 2, Part III, column (b), and any other additional information.	Part I, line 2, Part III, column (b), and any other additional information.	Part I, line 2, Part III, column (b), and any other additional information.	
				u pa

432102 10-15-14

Schedule I (Form 990) (2014)

## SCHEDULE O (Form 990 or 990-EZ)

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

**Open to Public** 

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

MARINE CORPS LEAGUE OF PENNSYLVANIA, INC Employer identification number

Inspection

C/O ROBERT C. ZILTZ, JR.	25-1313893
FORM 990, PART VI, SECTION A, LINE 6:	
THE ORGANIZATION'S MEMBERS ARE CURRENT AND FORMER MARINES	. THE ORGANIZATION
CHARGES ANNUAL DUES AS A CONDITION OF MEMBERSHIP.	
FORM 990, PART VI, SECTION A, LINE 7A:	
THE ORGANIZATION'S MEMBERS VOTE FOR A SLATE OF OFFICERS A	T ITS ANNUAL
MEETING.	
FORM 990, PART VI, SECTION A, LINE 8B:	
CERTAIN COMMITTEES DO NOT MAINTAIN WRITTEN CONTEMPORANEOU	S COMMITTEE
MEETING MINUTES.	
FORM 990, PART VI, SECTION B, LINE 11:	
THE BOARD OF DIRECTORS ARE EACH PROVIDED WITH AN ELECTRON	IC VERSION OF THE
FORM 990 PROPOSED FOR FILING. DIRECTORS HAVE THE OPPORTUN	ITY TO COMMENT ON
THE FORM 990 AT THE NEXT SCHEDULED BOARD MEETING, AFTER W	HICH THE FORM 990
IS EITHER REVISED OR FILED WITH NO CHANGES.	
FORM 990, PART VI, SECTION C, LINE 18:	
UPON REQUEST.	
FORM 990, PART VI, SECTION C, LINE 19:	
UPON REQUEST.	

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