Form **990-EZ**

Department of the Treasury

Short Form Return of Organization Exempt From Income Tax

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

2018

OMB No 1545-1150

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

Open to Public Inspection

		of the Treasury nue Service	► Go to www.irs.gov/For	m990EZ for instructions	and the latest infor	mation. ۲		spection
A F	or the	2018 calend	ar year, or tax year beginning	October 1	, 2018, and endi		otember 30	, 20 19
В	heck if ap	pplicable	C Name of organization		•	D Emp	loyer identific	ation number
	Address o	change	Naval Order of the United States Fou	ndation			010840)239
	Name cha	ange	Number and street (or P O box, if mail is i	not delivered to street address	Room/su	te E Tele	phone number	
_	Initial retu		108 Ann Arbor Ct				408-358	-1477
_	Final retur Amended	m/terminated	City or town, state or province, country, as	nd ZIP or foreign postal code	15) F Gro	up Exemption	<u> </u>
=		n pending	Los Gatos, CA 95032-4703		() ') Nur	mber 🕨	
		ting Method	✓ Cash	ecify) ▶		H Check	▶ ☐ If the c	organization is n
	Vebsite	_	navalorder org			1	d to attach So	
J T	ax-exen	npt status (che	eck only one) - 🗸 501(c)(3) 🔲 501(c	(insert no) ☐ 4	947(a)(1) or 527	(Form 9	990, 990-EZ, d	or 990-PF)
		organization	✓ Corporation ☐ Trust	Association [Other 🔨			
			7b to line 9 to determine gross receipt		00,000 or more, or if	total assets		
(Pa	t II, col	umn (B)) are \$	500,000 or more, file Form 990 instea	ıd of Form 990-EZ		•	▶ \$	8874
P	art I	Revenu	e, Expenses, and Changes in	Net Assets or Fund	d Balances (şee	the instru	ctions for f	⁵ art I)
		Check if	the organization used Schedule	O to respond to any o	question in this R	art 1	<u>.</u>	[
	1	Contribution	ons, gifts, grants, and similar amou	unts received/	quéstion in this R	1/8/	1	359
	2	Program s	ervice revenue including governme	ent fees and contracts			2	
	3	Membersh	p dues and assessments		10037 3	2002	3/	
	4	Investment	income			~ / /	74	4
	5a	Gross amo	unt from sale of assets other than	ı ınventory .	5a 💛	$\sum Z_{0}^{2}$		
	b	Less: cost	or other basis and sales expenses	5	5b	<u> </u>		
	с	Gain or (lo	ss) from sale of assets other than	inventory (Subtract line	5b from line 5a) .	∖. ./.	5c	
	6	Gaming an	d fundraising events			~	•	
ē	а	Gross inc. \$15,000)	ome from gaming (attach Scho	edule G if greater th	an 6a			
Revenue	ь		me from fundraising events (not ir	ncluding \$	of contribu	itions	`	
ě	~		aising events reported on line 1)	<u> </u>				
u			h gross income and contributions		6b			
	C	Less, direc	t expenses from gaming and fund	Iraising events	6c			
	d		e or (loss) from gaming and fund	_	es 6a and 6b and	subtract	1 1	
		line 6c) .					6d	
	7a	Gross sale	s of inventory, less returns and alle	owances	7a			
	ь		of goods sold		7b		[
	С	Gross prof	it or (loss) from sales of inventory	(Subtract line 7b from li	ne 7a) .		7c	
	8		nue (describe in Schedule O)				8	5278
	9	Total reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7	'c, and 8 .		▶	9	8874
	10	Grants and	similar amounts paid (list in Sche	edule O) .			10	
	11	Benefits pa	aid to or for members				11	
S	12	Salaries, of	ther compensation, and employee	benefits .			12	
ns.	13	Profession	al fees and other payments to indi	ependent contractors	•		13	369
Expense	14	Occupancy	, rent, utilities, and maintenance				14	
ũ	15	Printing, pi	iblications, postage, and shipping				15	
	16	Other expe	nses (describe in Schedule O)			•	16	12793
_	17	Total expe	nses. Add lines 10 through 16			. •	17	1317
ģ	18		deficit) for the year (Subtract line				18	(4297
set	19		or fund balances at beginning o		olumn (A)) (must a	gree with		
Net Assets		end-of-yea	r figure reported on prior year's re	eturn)			19	11812
et	20	Other char	ges in net assets or fund balance	s (explain in Schedule (O) .		20	
Z	21	Net assets	or fund balances at end of year (Combine lines 18 throug	gh 20 .	•	21	751

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 10642I

Form 990-EZ (2018)

.",

	330-LZ (2010)					
Pa	rt II Balance Sheets (see the instruction					_
	Check if the organization used Sched	ule O to respond to a	ny question in this			<u>. </u>
			<u> </u>	(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	•	_	118122	22	75152
23	Land and buildings		· -		24	
24	Other assets (describe in Schedule O) Total assets		-	118122	 	75152
25 26	Total liabilities (describe in Schedule O)	•			26	
27	Net assets or fund balances (line 27 of colu	mn (B) must agree with	h line 21)	118122		75152
Par				Part III)		- 1
	Check if the organization used Sched					Expenses
Wha	t is the organization's primary exempt purpose?		rvation of Naval Histor			ured for section (3) and 501(c)(4)
as m	cribe the organization's program service acconneasured by expenses. In a clear and concise ons benefited, and other relevant information for	manner, describe the	f its three largest pe services provided	rogram services, , the number of	orgar other	nizations, optional for s)
	(Grants \$) If this amo	unt includes foreign gra	ants, check here	▶ □	28a	
29						
30	<u> </u>	unt includes foreign gra		▶ ⊔_	29a	
00	•					
	(Grants\$) If this amo	unt includes foreign gra	ants, check here	▶ □	30a	
31	Other program services (describe in Schedule					
		unt includes foreign gra	ants, check here	. ▶ 🗆	31a	
	Total program service expenses (add lines 2			<u> </u>	32	
Par	List of Officers, Directors, Trustees, and Check if the organization used Sched				nstruc	tions for Part IV)
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	(d) Health benefits, contributions to employ	of	Estimated amount of their compensation
Allan	F P Cruz, President & Director	3				
David	d G Kaiser, Vice President & Director	1				
Thon	nas L. Snyder, Secretary & Director	2				-
Kenn	neth E Arendt, Treasurer & Director	3				
Vanc	ce H Morrison, Director	1				
Geor	rge A Huchting, Director	1				
Doug	glas M Moore	1				
Mich	ele Lockwood, Director	1				
Greg	jory F Streeter, Director	1				 -
			-			

300

OBA

Part				
	instructions for Part V) Check if the organization used Schedule O to respond to any question in thi	s Part	Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		103	110
	detailed description of each activity in Schedule O	33		✓
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed		i	
•	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business	34	 -	\ \ \ \
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		✓
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			2423
+ 385	Did the organization file Form 1120-POL for this year? Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	37b	Sie Za	And the second
∗ 38a	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	XI Sec	
b				278.5
39	Section 501(c)(7) organizations Enter			3.00
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities . [39b]	-		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► ; section 4912 ► ; section 4955 ►			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958			
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that,has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed		福西	
	on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line			
ŭ	40c reimbursed by the organization			
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		→
41	List the states with which a copy of this return is filed ▶ Oregon			
42a		408-35	8-147 2-4703	
b	Located at ► 108 Ann Arbor Ct, Los Gatos, CA ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority over	95032	Yes	
<u> </u>	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	103	7
,	If "Yes," enter the name of the foreign country ▶	200	建設	330
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
_	Financial Accounts (FBAR) At any time during the colondar year, did the organization mointain on office outside the United States?		ME	
С	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country ▶	42c	<u> </u>	I
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		1	▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year . 43		Van	Ala.
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		Yes	_
	completed instead of Form 990-EZ	44a	2004	√
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	<u> </u>	7.** •/
С	Did the organization receive any payments for indoor tanning services during the year?	44c		√
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	NE.	XX.
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		√
b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions			
	FORM 390-EZ. See Mistractions	45b		>

Form 990)-EZ (20	118)						P	age 4
46	Did the	e organization engage, directly or in	ndirectly, in political c	ampaign activities o	on behalf	of or in opposi	ion 46	Yes	No
Part \	/1	Section 501(c)(3) Organization: All section 501(c)(3) organization 50 and 51.	s Only					or line	es
		Check if the organization used Sc	hedule O to respond	to any question in	this Part	VI	. .		
				······································				Yes	No
		ne organization engage in lobbying if "Yes," complete Schedule C, Par		section 501(h) elect		ect during the	tax 47		1
48	is the	organization a school as described in	n section 170(b)(1)(A)(i	i)? If "Yes," complete	e Schedul	eE	. 48		1
		e organization make any transfers t			nization?		. 49a		1
		s," was the related organization a so					. 49b	1	<u> </u>
		elete this table for the organization's byses) who each received more than							
		Name and trile of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC	(d) H contribu benefit p	eaith benefits, tions to employee lans, and deferred impensation	(e) Estimate other con	orna be	unt of
NONE									
								····	
51	Comp	number of other employees paid ovolete this table for the organization 000 of compensation from the organization	's five highest comp		nt contrac	ctors who each	received	more	than
	(a)	Name and business address of each Independ	dent contractor	(b) Type of s	ervice	(c	Compensat	lon	
NONE									
									
	*******			1					
		***************************************						· · · · ·	
				1		j			
									
				\$400.000					
52	Did 1	number of other independent contrible organization complete Schedule A	-		. ►ganization	s must attac	ha . ⊳⊘ Ye :		No
Under po	ensities rect, an	of perjury, I declare that I have examined this d complete. Declaration of preparer (other tha	return, including accompar n officer) is based on all info	nying schedules and state primation of which prepare	er has any ki	to the best of my k nowledge.	na egbelwon	d belief,	, it is
	- 	alle APP Const				<u> </u>	 		· · · · · · · · · · · · · · · · · · ·
Sign	-	Signature of officer				Dete //			
Here		Allan F.P. Cruz, President				1/11/2	OTO		
		Type or print name and title	Toursell 1		Data		(nan-		
Paid		Print/Type preparer's name	Preparer's algnature		Date	Check C			
Prepa		Firm's name b				self-empk	700		
Use (July	Firm's name ► Firm's address ►				Firm's EIN ▶ Phone no.			
May th	e IRS	discuss this return with the prepare	r shown above? See	Instructions			► □ Ye		No
							Form 9 5	10-EZ	(2018)

٠,

e.,

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2018

Treasury

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

► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

Nava	Naval Order of the United States Foundation 010840239							
Pai	rt I	Reason for Public Cha	rity Status (All	organizations must	comple	te this p	art.) See instructio	ns.
The 6 1 2 3 4	A C	cation is not a private foundath church, convention of church school described in section hospital or a cooperative hos medical research organization ispital's name, city, and state	hes, or association 170(b)(1)(A)(ii). (aspital service orgon operated in content of the content	on of churches descri (Attach Schedule E (F ganization described i onjunction with a hosp	ibed in se form 990 in sectior pital desc	ection 17 or 990-E 170(b)(1 ribed in s	0(b)(1)(A)(i). Z)) ()(A)(iii). section 170(b)(1)(A)(
5	_	organization operated for ction 170(b)(1)(A)(iv). (Com		college or university	owned o	r operate	d by a government	al unit described in
6 7	☐ An	federal, state, or local govern n organization that normally scribed in section 170(b)(1)	receives a subs	tantial part of its sup				the general public
8	□ A (community trust described ii	n section 170(b)	(1)(A)(vi). (Complete I	Part II.)			
9	or un	agricultural research organi university or a non-land-gra iversity	nt college of agr	iculture (see instruction	ons). Ente	r the nan	ne, city, and state of	the college or
10	red su	n organization that normally in ceipts from activities related pport from gross investment quired by the organization a	to its exempt fui t income and uni	nctions—subject to c related business taxal	ertain exc ble incom	ceptions, ie (less se	and (2) no more that ection 511 tax) from	n 33¹/₃% of its
11	☐ An	organization organized and	operated exclus	sively to test for public	c safety	See sect i	ion 509(a)(4).	
12	of	organization organized and one or more publicly suppo neck the box in lines 12a thro	orted organization	ns described in secti	on 509(a)(1) or se	ection 509(a)(2). Se	e section 509(a)(3).
а	_	Type I. A supporting organithe supported organization supporting organization. Yes	(s) the power to ou must comple	regularly appoint or e ete Part IV, Sections	lect a ma	ijority of t	he directors or trust	ees of the
b	• 🗆	Type II. A supporting organization(s) You must	the supporting o complete Part I	rganization vested in V, Sections A and C	the same	persons	that control or man	age the supported
С	: 🗌	Type III functionally integ its supported organization(ally integrated with,
d	ı 🗀	Type III non-functionally it that is not functionally integrequirement (see instructionally integred).	grated The orga	nization generally mu	st satisfy	a distribu	ution requirement an	
е	: 🗆	Check this box if the organ functionally integrated, or 1						e II, Type III
f	Ente	er the number of supported o	organizations					
g	Prov	ride the following information	about the supp	orted organization(s).				
	(i) Nan	ne of supported organization	(II) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)								
(C)	<u>-</u>							
(D)		1						
(E)								

Total

							/ . ugo =
Par							
	(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to fullify under						
	Part III. If the organization fails to qualify under the tests listed below, please complete PartAll.)						
	ion A. Public Support	·	τ	-	·		
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	/(e) 2018	(f) Total
1	Gifts, grants, contributions, and				/	Í l	
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Tax revenues levied for the						
	organization'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	,					
A	Total. Add lines 1 through 3			/			
-	J		7856654786698	140 115 12 TACK	ICA STORES	**************************************	
ູ5	The portion of total contributions by			Z			
	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)		1				
6	Public support. Subtract line 5 from line 4	PORTER S	//	5 * W. C.	A LONG WORK		
Sect	on B. Total Support	130 20 100 100 100					
Caler	idar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	· /					
8	Gross income from interest, dividends,						
	payments received on securities loans,					,	•
	rents, royalties, and income from						
	similar sources						
9	Net income from unrelated business	/					
	activities, whether or not the business	1					
40	is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets				_		
	(Explain in Part VI)				_		
11		12076	SATISFIED FOR	#177222224 (A)	A CHINE KADSE		
12	Gross receipts from related activities, etc			Crating & abboar	Section of the sectio	12	· · · · · · · · · · · · · · · · · · ·
13	First five years. If the Form 990 is for the			d. third. fourth	. or fifth tax ve		n 501(c)(3)
	organization, check this box and stop he				-		
Sect	on C. Computation of Public Suppo	rt Percentag	e				
14	Public support percentage for 2018 (line		-	1, column (f))		14	%
15	Public support percentage from 2017 Sci					15	%
16a	331/3% support test-2018. If the organ				nd line 14 is 33	31/3% or more,	check this
	box and stop here. The organization qua			-	•	•	🕨 🗀
b	331/3% support test - 2017. If the organi					ıs 331/3% or m	ore, check
	this box and stop here. The organization	qualifies as a	publicly suppo	rted organizati	on		. ▶ 🗆
17a	10%-facts-and-circumstances test - 2						
	10% or more, and if the organization m						
	Part VI how the organization meets the '	tacts-and-circ	umstances" te	est The organi	zation qualifies	s as a publicly	supported
	organization	•		•			. ▶ ⊔
b	10%-facts-and-circumstances test—2						
	15 is/10% or more, and if the organization						
	Explain in Part VI how the organization r supported organization	neets the "fact	ts-and-circum	stances" test.	rne organizati	on qualifies as	a publicly
19	,	id not obsalt =	hov on line 12	160 165 17-	. or 17h oh	، ، ، ا- عمر عمل منطعا	. 🕨 📙
18	Private foundation. If the organization di instructions	ю посспеска	DOX ON LINE 13	, 10a, 100, 1/8	i, or 17b, chec	k triis box and	see • ¬
	modulono	• • •	· · · · ·	<u> </u>	· · · · · ·	odulo A /Form 00/	

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.)

	ii trie organization rails to quality	under the tes	sis listed beit	ow, please co	mpiete Fart i	1.)	
	on A. Public Support	T					
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received (Do not include any "unusual grants") Gross receipts from admissions, merchandise	4425	7861	23451	16762	35919	88418
2	sold or services performed, 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 business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities					į	
	furnished by a governmental unit to the					Ī	
	organization without charge .						
6	Total. Add lines 1 through 5	4425	7861	23451	16762	35919	88418
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .	L					
b	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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from	N 7 12 18 18	(等) まな	1	1 / 2/4/3/3	en'z , ant jour?	
	line 6)			1, 10, 18	* * *	, , , , , , , ,	88418
	on B. Total Support			,			
Calen	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	4425	7861	23451	16762	35919	88418
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,				ı		
	royalties, and income from similar sources	10	10	11	18	46	95
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b	10	10	11	18	46	95
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or					Î	
	loss from the sale of capital assets						
	(Explain in Part VI)				75000	52781	127781
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	4435	7871	23462	91780	88746	216294
14	First five years. If the Form 990 is for the	_	's first, secon	d, third, fourth,	or fifth tax ye	ar as a section	1 501(c)(3)
<u> </u>	organization, check this box and stop he			· · · · · · · · · · · · · · · · · · ·		· · · · ·	· · • 🗀
	on C. Computation of Public Suppor	.				1 1	
15	Public support percentage for 2018 (line to		-	13, column (t))		15	40 88 %
16 Cooti	Public support percentage from 2017 Scl				<u> </u>	16	46 38 %
	on D. Computation of Investment In			lma 10!	(6)	147	04.04
17	Investment income percentage for 2018 (by line 13, colur	TIN (T))	17	04 %
18	Investment income percentage from 2017			. on line 44		18	04 %
19a	331/3% support tests—2018. If the organ						
	17 is not more than 33½%, check this box					_	_
b	331/3% support tests—2017. If the organiz						
00	line 18 is not more than 3312%, check this		_			· ·	_
_20	Private foundation. If the organization di	o not check a l	oox on line 14,	, 19a, or 19b, c	neck this box a	and see instruc	tions ▶ 📙

Yes No

Part IV **Supporting Organizations**

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

Section A. All Supp	orting Or	ganizations
---------------------	-----------	-------------

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

- Did the organization have any supported organization that does not have an IRS determination of state under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the support 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," answ (b) and (c) below.
- Did the organization confirm that each supported organization gualified under section 501(c)(4), (5), or (6) a satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how organization made the determination
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- Was any supported organization not organized in the United States ("foreign supported organization"). "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the fore supported organization? If "Yes," describe in Part VI how the organization had such control and discreti despite being controlled or supervised by or in connection with its supported organizations
- Did the organization support any foreign supported organization that does not have an IRS determinati under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization us to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Ye. answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and E numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such activ (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the acti was accomplished (such as by amendment to the organizing document)
- Type I or Type II only. Was any added or substituted supported organization part of a class alrea designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefit by one or_more of its supported organizations, or-{iii}-other supporting organizations that also support benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contribution (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled ent with regard to a substantial contributor? If "Yes,":complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Was the organization controlled directly or indirectly at any time during the tax year by one or mo disqualified persons as defined in section 4946 (other than foundation managers and organizations describ in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in whi the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal beni from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of secti 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, determine whether the organization had excess business holdings)

ing			729
by ·	1		
-,	1		20002.23
tus	9533		
ted			1
	2	TOTAL ST	2000
ver	(# .	15. 58	\$55.00
• • •	3a	241845	2232
and		45.20%	50565.1
the	3b		
\(\mathcal{O}\)		503.3886	200000000
)(B)	3c	in Maria	
) IF		20000000	5837843
? If			3.2
	4a	0.00.14	Starting.
ıgn			
ion			
	4b		,2.000,300
ion	205915	NA.	509
		MARKET STATE	
sed			
(B)	200	2	
	4c		
s,"			
ΞIN	77.7		
on;			
ion		7.3	
		AKA	2222
	oa		To Dis Brook and
ady			
	5b		
	5c		
to (200		
ted			
or			
	6	Sissississis	CEEE Condition
itor			
tity		334	
,	7	A STATE OF THE PARTY OF THE PAR	LIME
7?		900	31 graf
	8	200	1600
ore	ALXX.	20 X	Deep (
ed			
,		Alexand	Sign
	9a	A 305 CH	iteratio med
ıch		3804	
	9b		
efit		300	
	9c		•
ion			
ted			
	10a	Trans.	
to		Fig. Specific	70550
to			22
	10b		
Form :	990 or	990-E2	2) 2018

Part	V Supporting Organizations (continued)			
	<u> </u>		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		<u> </u>
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		L
Secti	ion B. Type I Supporting Organizations		¥	
	Did the dissertant twinters on manufacturing of one or manufacturing about the necessity	89632	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1	or minis	J-MAR
. 2	Did the organization operate for the benefit of any supported organization other than the supported	122		
_	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		
Secti	ion 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			44.5
	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	132		
	the supported organization(s)	1		
Secti	ion D. All Type III Supporting Organizations	 -	¥	T
	Did Alice accompanies a construction of the accompanies are by the least day of the fifth morable of the	193130E	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		1	15
	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		1
`2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	375		3464
	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 in (2), did the organization's supported organizations have a		1	
	significant voice in the organization's investment policies and in directing the use of the organization's	7.2		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		L
	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instruc	ction	s).
a	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.	/000 In	-t	lanal
с 2	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity. Activities Test. Answer (a) and (b) below.	see ms	Yes	No.
		interior C	: Linux	7.5186
а	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	246-74 6 6)	-84.000.3
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	液性		300
	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 (a) and (b) 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? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			120
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard	3h]

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V	jan	izations					
1 Check here if the organization satisfied the Integral Part Test as a qualifying	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI). See						
instructions. All other Type III non-functionally integrated supporting organ	ıızat	ions must complete Section	ns A through E.				
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)				
1 Net short-term capital gain	1						
2 Recoveries of prior-year distributions	2						
3 Other gross income (see instructions)	3	, , , , , , , , , , , , , , , , , , , ,	•				
4 Add lines 1 through 3	4						
5 Depreciation and depletion	5						
6 Portion of operating expenses paid or incurred for production or			-				
collection of gross income or for management, conservation, or							
maintenance of property held for production of income (see instructions)	6						
7 Other expenses (see instructions)	7		•				
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8						
Section B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)				
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)		TO THE STATE OF TH					
a Average monthly value of securities	1a						
b Average monthly cash balances	1b		1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1				
c Fair market value of other non-exempt-use assets	1c						
d Total (add lines 1a, 1b, and 1c)	1d						
e Discount claimed for blockage or other							
factors (explain in detail in Part VI)							
2 Acquisition indebtedness applicable to non-exempt-use assets	2						
3 Subtract line 2 from line 1d	3						
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,							
see instructions)	4						
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5						
6 Multiply line 5 by .035	6	•					
7 Recoveries of prior-year distributions	7						
8 Minimum Asset Amount (add line 7 to line 6)	8	2) 407 1994 ** 1494 7334 (c. 223 72 433 72 433 72 444 734 74					
Section C—Distributable Amount			Current Year				
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	经过的证据是一种特别					
2 Enter 85% of line 1.	_	CHARMAN STRUCK	** **				
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3						
4 Enter greater of line 2 or line 3.	4	性の 物 が 対 対 対 対 対 対 対					
5 Income tax imposed in prior year	5	HAME CHARLEST AND TO					
6 Distributable Amount. Subtract line 5 from line 4, unless subject to							
emergency temporary reduction (see instructions)	6	WORLD AND AND AND AND AND AND AND AND AND AN					
7 Check here if the current year is the organization's first as a non-functionall instructions.	y in	tegrated Type III supporting	organization (see				

Part	I ype III Non-Functionally Integrated 509(a)(3	s) Supporting Organ	izations (continuea)	,
Secti	Current Year			
1	Amounts paid to supported organizations to accomplish exempt purposes			
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of supported organizations			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6				
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions			,
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6		MINUS COME DE LA GARA	
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2018	对对关系		
a	From 2013	AND		
b	From 2014 .	MEGANIZATE PEN		
c	From 2015			
d	From 2016			
е	From 2017			
<u>f</u>	Total of lines 3a through e	ra Francis Toda de la Artigo mancia del Giología de Carlo		
<u>g</u>	Applied to underdistributions of prior years		It is to the more of the transfer control of the more	
<u>h</u>	Applied to 2018 distributable amount			and the second section of the second section and the second section of the section of the second section of the s
<u>i</u> _	Carryover from 2013 not applied (see instructions)			
<u>j</u> _	Remainder. Subtract lines 3g, 3h, and 3i from 3f	AT . THE STATE OF		
4	Distributions for 2018 from Section D, line 7.			
a	Applied to underdistributions of prior years	BANCH SEE TO SEE	C. SAMESAGERA M. WANTER & MARCHEN A.	
<u> </u>	Applied to 2018 distributable amount			DE CORRECTION CONTRACTOR CONTRACT
<u>c</u>	Remainder. Subtract lines 4a and 4b from 4.	STREAM AND A COMMENT AND A STREAM AND A COMMENT OF THE ACT OF THE	SEASON STATE	
5	Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:	78 de marco (1975)	THE RESERVE THE PROPERTY OF THE PERSON OF TH	No. of the second
а	Excess from 2014		STATE OF THE STATE	
b	Excess from 2015	12704 (1965) 4434		WINDSON AND AND AND AND AND AND AND AND AND AN
С	Excess from 2016		CAR CHARLES	
d	Excess from 2017			
е	Excess from 2018		片有 是在 500世纪6000年8	STATE OF THE STATE

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Part II, Sect	ion B, line 12 - This amount of \$52781 was the second bequeath from the same donor directed to a newly formed colleague
Naval Order	Foundation called the San Francisco Naval Order Commandery Foundation, a separate organization It is undergoing its 501c3 application
process Th	ne monies, which total 75000 from the prior year plus this year's amount equal \$127781, are being held in escrow for them and
will be repor	ted by them as income on their first reporting of their own tax return. The total of those monies was released to them by the end of
this fiscal ye	ear
,	

	······································
	
	······································

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.

2018

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Naval Order of the United States Foundation	010840239				
Part 1, Line 8 \$52781 was received from a deceased donor as a bequeath to a newly formed colleague Foundation, called the San					
Francisco Naval Order Foundation, undergoing its 501c3 application process. The monies are being held "in escrow" for them and will be					
reported on their tax return in the next fiscal year	<u>.</u>				
Part I, Line 16 \$127781 was released from escrow to the newly formed Foundation, called the San Francisco Naval Order Foundation, which					
received its 501c3 status, this organization will be recording this income on its initial reporting on its 990-EZ					
Part 1, Line 16 additional expenses as to government fees to the State of Oregon for \$102 plus Oregon annual filing fee of \$50 plus a \$1 ATM fee					
·					