### Form **990**

**Return of Organization Exempt From Income Tax** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

, 2022, and ending For the 2022 calendar year, or tax year beginning . 20 Check if applicable: D Employer identification number Address change Ocean Discovery League, Inc. 84-1827384 P.O. Box 182 Telephone number Name change Saunderstown, RI 02874 Initial return Final return/terminated Amended return **G** Gross receipts \$ 142,126. F Name and address of principal officer: H(a) Is this a group return for subordinates X Application pending **H(b)** Are all subordinates included? If "No," attach a list. See instructions. Same As C Above Yes No Tax-exempt status: X 501(c)(3) 4947(a)(1) or 527 501(c) ( (insert no.) Website: www.oceandiscoveryleague.org H(c) Group exemption number M State of legal domicile: RI Form of organization: X Corporation Trust Association L Year of formation: 2019 Part I Summary Briefly describe the organization's mission or most significant activities: The Ocean Discovery League's mission is to accelerate deep-ocean exploration by developing accessible systems to broaden the community of those who explore and understand the deep sea. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) ...... Number of independent voting members of the governing body (Part VI, line 1b)..... 1 5 0 Total number of volunteers (estimate if necessary)..... 6 0 Total unrelated business revenue from Part VIII, column (C), line 12 ..... **b** Net unrelated business taxable income from Form 990-T, Part I, line 11..... 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h)..... 989,005 21,865. 120,251. Program service revenue (Part VIII, line 2g)..... 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)..... 10. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)..... 11 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 989,005 12 142,126 Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... Benefits paid to or for members (Part IX, column (A), line 4)..... 14 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) . . . . 60,000 106,000. **16a** Professional fundraising fees (Part IX, column (A), line 11e)..... Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)..... 17 392,043. 15,287. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)..... 75,287 498,043. Revenue less expenses. Subtract line 18 from line 12..... 913,718. -355,917. **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16)..... 592,962 913,718. 21 Total liabilities (Part X, line 26) ..... 0. 35,161. Net assets or fund balances. Subtract line 21 from line 20..... 22 913,718. 557,801. Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Date Signature of officer Sign Here Katherine Croff Bell President Type or print name and title Print/Type preparer's name Preparer's signature P01394488 **Paid** Robert D. Giudici self-employed Preparer Firm's name Ward, Fisher & Company, Use Only Firm's address 250C Centerville Road Firm's EIN 05-0234540 Warwick, RI 02886 (401) 384-6464 

No

Part	: III	Statement of Program Service Accomplishments		1.7
		Check if Schedule O contains a response or note to any line in this Part III		X
1	-	y describe the organization's mission:		
		Ocean Discovery League's mission is to accelerate deep-ocean explorati		
	<u>deve</u>	eloping accessible systems to broaden the community of those who explor	e and	
	<u>unde</u>	erstand the deep sea.		
		e organization undertake any significant program services during the year which were not listed on the prior	1 г	_
		990 or 990-EZ?	Yes	X No
		s," describe these new services on Schedule O.	1 г	_
		ne organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
		s," describe these changes on Schedule O.		
4	Descri	ribe the organization's program service accomplishments for each of its three largest program services, as measured 501(2)(2) and 501(2)(4) arguerations are required to report the arguerate for the first three largest program services, as measured for the first three largest program services, as measured for the first three largest program services, as measured for the first three largest program services, as measured for the first three largest program services, as measured for the first three largest program services, as measured for the first three largest program services, as measured for the first three largest program services, as measured for the first three largest program services, as measured for the first three largest program services, as measured for the first three largest program services, as measured for the first three largest program services, as measured for the first three largest program services and the first three largest program services and the first three largest program services and the first three largest program services are three largest program services and the first three largest program services are three largest program services and the first three largest program services are three largest program services and the first program services are three largest program services and the first program services are three largest program services are three largest program services and the first program services are three largest program services and the first program services are three largest program services and three largest program services are three largest program servi	red by exp	penses.
	and re	on 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the evenue, if any, for each program service reported.	i totai exp	ienses,
Дa	(Code	e: ) (Expenses \$ 165,425. including grants of \$ ) (Revenue \$		
		organization published the 2022 Global Deep-Sea Capacity Assessment, a	hasel	ine
		essment of the technical and human capacity for deep-sea exploration and		
		every coastal area with deep ocean worldwide. This assessment includes		
		vey and manual research data for 186 geographical areas divided into si		
		ions: Europe, Asia, Northern America, Africa, Oceania, and Latin Americ		
		ibbean. The results demonstrate the unique regional and subregional cha		
		ortunities facing deep-sea research and exploration in each location. T		
		bal Deep-Sea Capacity Assessment is an official activity of the UN Deca		
		ence for Sustainable Development. More information can be found at	ide oi	<u>ocean</u>
		ps://deepseacapacity.oceandiscoveryleague.org		
	11 C C	ps://deepseacapacity.oceandiscoveryleague.org		
1h	(Code	e: ) (Expenses \$ 117,770. including grants of \$ ) (Revenue \$		
40	•		no n1o	
		organization is continuing work on the Ocean Vision AI Portal, an onli		ICTOTIII_
		re thousands of hours of deep-ocean video will be automatically transco		
		ects detected, and initial classification done with minimal human inter		
		s work will accelerate the processing of visual underwater data with a		
		egrated network of services, tools, and a diverse community of users. C is funded by the National Science Foundation, and the work is conducted		
		terey Bay Aquarium Research Institute, Purdue University, CVision AI, a		
		laborators.	iiid Ocii	1 <u>CT</u>
	<u>CO1.</u>	Tabolacols.		
10	(Code	e: ) (Expenses \$ 83,460. including grants of \$ ) (Revenue \$		
40			atabli	ah /
		organization is developing deep-sea capacity development programs to e		
		long-term technical and human capacity for deep-sea exploration and realising worldwide that do not surroutly have the capability to undertake		,
		ations worldwide that do not currently have the capability to undertake tical work. Activities in 2022 included two week-long Ocean Exploration		
		train Cook Islands students ages 16 to 24 in ocean exploration, enginee		
		earch techniques, in collaboration with Sharks Pacific and the Sharks F		
		ands Trust. The organization also began research and development of a f		
		ity program to identify, train, and support ocean explorers and research		
		torically excluded backgrounds to foster a global demographic and gener	aciona	<del>,</del>
	snii	ft that will change how we understand and care for our oceans.		
۱۸	Othor	r program services (Describe on Schedule O.)  See Schedule O		
	(Expe		`	
			)	
46	ıulai	program service expenses 429,550.		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		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		Х
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	4		Х
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		Х
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>	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? <i>If "Yes," complete Schedule D, Part IV.</i>	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Х	
b	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		Х
С	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Χ
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	Х	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII.	12a	Χ	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Χ	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		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 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. See instructions.	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Χ

# Form 990 (2022) Ocean Discovery League, Inc. Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22		Х
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? <i>If "Yes," complete Schedule J.</i>	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 a "Yes," answer lines 24b through 24d and complete 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		
	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		
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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		Х
	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	X	
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Χ	
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		Х
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 contributions? <i>If "Yes," complete Schedule M.</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Χ
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? <i>If "Yes," complete Schedule R, Part I.</i>	33		Х
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		Х
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? <i>If "Yes," complete Schedule R, Part VI.</i>	37		Х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Par	t 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	. No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		162	NO
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1.	X	
ВΛΛ	(garnbling) winnings to prize winners?	1c	Α	(0000

Form 990 (2022) Ocean Discovery League, Inc.

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

			res	NO
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Χ
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
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).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		X
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year	_		37
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		^
•	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> 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.  Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:	36		
	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 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	14a		X
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O.</i>	14a 14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	170		
,,	excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
	<b>Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
Α ^	If "Yes," complete Form 6069.  TEEA0105L 09/01/22	F-	000	2000
AΑ	LECHOLOSE 08/01/55	rorm	) DEC 1	2022)

Form 990 (2022) Ocean Discovery League, Inc. Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year. . . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent..... 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? See Schedule 0 Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 5 Χ 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 more members of the governing body?..... 7a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... X 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 organization's mailing address? If "Yes," provide the names and addresses on Schedule O..... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates?..... 10a Χ b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. Χ 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 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Χ Schedule O how this was done ...... 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ Χ **14** Did the organization have a written document retention and destruction policy?..... 14 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 **b** Other officers or key employees of the organization..... 15b X If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 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 16b organization's exempt status with respect to such arrangements?... Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Another's website X Upon request Own website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records.

Katherine Croff Bell P.O. Box 182 Saunderstown RI 02874 401-699-1161

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84-1827384

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Form 990 (2022)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

BAA

Check this box if neither the organization nor any relate	ed organiz	ation	con	nper	ısate	ed any	cu/	rrent officer, direct	or, or trustee.	
				(C)						
(A) Name and title	(B) Average hours per	is	both dir	an c	officer /truste	eck mo ss perso and a ee)		(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	<b>(F)</b> Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	elated organizations (W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) Katherine Croff Bell President	$-\frac{40}{0}$			Х				20,000.	100,000.	0.
(2) Susan Poulton Secretary	<u> 40</u> _			Х				96,000.	0.	0.
(3) Ellen Blix Treasurer	<u>2</u> 0			Х				0.	0.	0.
(4)										
(5)										
<u>(6)</u>										
<u>(7)</u>										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

TEEA0107L 09/01/22

Part	VII   Section A. Officers, Directors, Tru		Ney	En	_	_	es,	and	d Highest Com	pensated Emp	loyees	(conti	nued)
		(B)			(C	•							
	(A)	Average hours	Position (do not check more than one box, unless person is both an					one h an	<b>(D)</b> Reportable	<b>(E)</b> Reportable		(F)	
	Name and title	per week			nd a		or/trus	tee)	compensation from	compensation from related organizations	C	ated amo	
		(list any hours	or d	isul	Officer	Key	High	Former	the organization (W-2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	the o	nsation rganizat	ion
		for related	dividual director	oun	cer	emp	Highest co employee	ner Ter	MIGG/1033 NEG/	MICO/1033 NEO/		d related anization	
		organiza - tions	Di tr	nalt		Key employee	omp						
		below dotted line)	ndividual trustee or director	nstitutional trustee		ð	Highest compensated employee						
		ilile)		ď			ited						
(15)													
<u> </u>													
(16)													
(17)													
(18)													
(10)													
<u>(19)</u>													
(20)													
(_0)			-										
(21)													
			1										
(22)													
(23)													
(24)													
(24)													
(25)													
			•										
1b S	Subtotal								116,000.	100,000.			0.
c 1	otal from continuation sheets to Part VII, Section	on A							0.	0.			0.
	otal (add lines 1b and 1c)								116,000.	100,000.			0.
	otal number of individuals (including but not limited	to those I	isted	abo	ve) v	who	recei	ved	more than \$100,00	0 of reportable comp	ensatio	า	
	rom the organization 0												
												Yes	No
3 [	Did the organization list any <b>former</b> officer, direction line 1a? If "Yes,"complete Schedule J for suc	tor, truste <i>h individu</i>	ee, ke <i>al</i>	ey e	mpl	oyee	e, or	high	nest compensated	employee	. 3		Х
	·												
- t	or any individual listed on line 1a, is the sum of he organization and related organizations greate	r than \$1	50,00	00?	If "	Yes,	" cor	nple	ete Schedule J for	·			
	such individual										. 4		X
<b>5</b> [	Did any person listed on line 1a receive or accru- or services rendered to the organization? If "Yes	e comper	ısatio ete S	n fr che	om dule	any	unre	late ch r	ed organization or person	individual	5		Х
	on B. Independent Contractors	, ,						- /-				Į	
1 (	Complete this table for your five highest compen ompensation from the organization. Report compen	sated ind	epen	dent	t co	ntra	ctors	tha	it received more the	nan \$100,000 of			
			lile C	alen	uai	yeai	enun	ng v	(B)			~`	
	<b>(A)</b> Name and business addi	ress							Description of	of services	Compe	<b>C)</b> nsatio	n
	otal number of independent contractors (including b		ited to	o tho	ose I	iste	abo	ve)	who received more	than			
	100,000 of compensation from the organization	0											

# Form 990 (2022) Ocean Discovery League, Inc. 84-1827384 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII..... (B) Related or exempt function revenue (C) Unrelated business (D) Revenue excluded from tax under sections 512-514 (A) Total revenue revenue Gifts, Grants, ilar Amounts 1a Federated campaigns . . . . . . . . **b** Membership dues..... 1b c Fundraising events..... 1c **d** Related organizations..... 1d

ons, G Simila		Government grants (cont			1e					
Contributions, and Other Sin	f	All other contributions, g similar amounts not incl			1f	21 065				
Contributic and Other	g	Noncash contributions in	clude	ed in		21,865.				
and a		lines 1a-1f					01 065			
	n	Total. Add lines 1a	- I T			Business Code	21,865.			
Program Service Revenue	2a	<u>Program Serv</u>	ri c	o Foos		541715	120,251.	120,251.		
Seve	b						120,231.	120,231.		
ce	С									
ervi	d									
۳	е									
gra	f	All other program s	ervi	ce revenu	ıе					
<u>۾</u> ا	g	Total. Add lines 2a	-2f .				120,251.			
	3	Investment income (	inclu	ıding divid	ends,	interest, and				
	4	other similar amou	,				10.	10.		
	4	Income from invest Royalties				·				
	5	Royallies		(i) F		(ii) Personal				
	6a	Gross rents	6a	(,, .		(.7				
		Less: rental expenses	6b							
	С	Rental income or (loss)	6с							
	d	Net rental income of	or (lo	oss)						
	7a	Gross amount from		(i) Seci	urities	(ii) Other				
		sales of assets other than inventory	7a							
	b	Less: cost or other basis								
		and sales expenses	7b							
		Gain or (loss)  Net gain or (loss).	<b>7</b> c							
		, ,			г					
E	8a	Gross income from funda (not including \$	raisin	g events						
Other Revenue		of contributions reported	l on li	ine 1c).						
& 		See Part IV, line 18			8	Ва				
Je.	b	Less: direct expens	ses.		8	Bb				
₹	С	Net income or (loss	s) fro	om fundra	aising	events				
	9a	Gross income from gami	ng ac	tivities.						
		See Part IV, line 19			_	e e e e e e e e e e e e e e e e e e e				
		Less: direct expens Net income or (loss				<b>9b</b>				
					y act	IVILICS				
	ıUa	Gross sales of inventory, returns and allowances.	less		11 (	0a				
	b	Less: cost of goods	sol	d	-	0b				
	С	Net income or (loss	s) fro	om sales	of inv	entory				
						Business Code				
ब्	11a									
Revenue	b									
Revenue	C ,	All allows				_				
-	-	All other revenue.								
		Total Add lines 11:					140 100	100 001		
	12	Total revenue. See	ırıst	แนะแอกร .			142,126. A0109L 09/01/22	120,261.	0.	0 Form <b>990</b> (202

Form 990 (2022) Ocean Discovery League, Inc. 84
Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a re	sponse or note to any			
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	106,000.	106,000.	0.	0.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	· ·	0.	0.	· ·
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	600.		600.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
12	(A), amount, list line 11g expenses on Schedule 0.)	5,305.	4,803.	502.	
13	Office expenses	3,228.	2,579.	649.	
14	Information technology	3,180.	160.	2,432.	588.
15	Royalties.	3,100.	100.	2,432.	500.
16	Occupancy				
17	Travel.				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,939.	4,939.		
20	Interest	1,333.	1,333.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,151.	1,151.		
23	Insurance	,	,		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	Contract labor services	367,006.	304,476.	35,705.	26,825.
b	Printing and Publications	5,331.	5,096.	235.	
С		771.	228.	543.	
d	Taxes and licenses	326.		326.	
e	All other expenses.	206.	118.	88.	
25	Total functional expenses. Add lines 1 through 24e	498,043.	429,550.	41,080.	27,413.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here if following SOP 98-2 (ASC 958-720)				

		Check if Schedule O contains a response or note to	any lin	e in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash – non-interest-bearing			913,718.	1	550,438.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	14,131.
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these pe	er office I contribi	r, director, utor, or 35%		5	
	_			-		3	
	6	Loans and other receivables from other disqualified p section 4958(f)(1)), and persons described in section				6	
	_	*		· · · · ·		-	
	7	Notes and loans receivable, net		<u></u>		7	
ets	8	Inventories for sale or use		F-		8	
Assets	9	Prepaid expenses and deferred charges				9	
		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		29,544.			
	b	Less: accumulated depreciation		1,151.		10c	28,393.
	11	Investments — publicly traded securities				11	
	12	Investments – other securities. See Part IV, line 11				12	
	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	33)		913,718.	16	592,962.
	17	Accounts payable and accrued expenses				17	35,161.
	18	Grants payable		<u> </u>		18	
	19	Deferred revenue		<u> </u>		19	
<i>(</i> )	20	Tax-exempt bond liabilities		<u> </u>		20	
Ę.	21	Escrow or custodial account liability. Complete Part I		L		21	
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribu- controlled entity or family member of any of these per	utor, or 3	35%		22	
	23	Secured mortgages and notes payable to unrelated th	nird parti	es		23	
	24	Unsecured notes and loans payable to unrelated third	parties			24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com				25	
	26	<b>Total liabilities.</b> Add lines 17 through 25			0.	26	35,161.
Jces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	•	X			
<u>a</u>	27	Net assets without donor restrictions			913,718.	27	490,340.
m	28	Net assets with donor restrictions				28	67,461.
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck here				
ō	29	Capital stock or trust principal, or current funds				29	
इंट	30	Paid-in or capital surplus, or land, building, or equipm		<u> </u>		30	
SS	31	Retained earnings, endowment, accumulated income,		<u> </u>		31	
t A	32	Total net assets or fund balances		<u> </u>	913,718.	32	557,801.
2	33	Total liabilities and net assets/fund balances			913,718.	33	592,962.
RΔ				L 09/01/22	310,710.		Form <b>990</b> (2022)

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За

3b

As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits......

Guidance, 2 C.F.R Part 200, Subpart F?....

#### SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Ocean Discovery League, Inc. 84-1827384 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations ..... **g** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

84-1827384

Section	Section A. Public Support									
,	(Complete only if you che	•	rt I or if the or	ganization	failed to qualify under Part III. If the					
Dart II	Support Schedule	for Organizations Describe	d in Saction	ne 170	(b)(1)(A)(iv) and 170(b)(1)(A)(vi)					
ochedule	A (1 01111 330) 2022	ocean biscovery	ьеауце,	THC.	04-102/304	i age z				

begiı	ndar year (or fiscal year nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	<b>(f)</b> Total
1	Gifts, grants, contributions, and 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						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sect	tion B. Total Support			T			
	ndar year (or fiscal year nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	<b>(f)</b> 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 is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc. (see ins	structions)				
13	First 5 years. If the Form 990 is organization, check this box and						
Sec	tion C. Computation of Pul	olic Support P	ercentage				
	Public support percentage for 20 Public support percentage from 2						<u>%</u>
16a	<b>33-1/3% support test—2022.</b> If the and <b>stop here.</b> The organization	ne organization di qualifies as a pub	d not check the b olicly supported o	oox on line 13, and rganization	d line 14 is 33-1/3	3% or more, checl	this box
b	<b>33-1/3% support test—2021.</b> If th and <b>stop here.</b> The organization						
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	s test, check this I	oox and stop here	. Explain in Part	VI how
b	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the facts-and	meets the facts-a	nd-circumstances	s test, check this b	oox and stop here	. Explain in Part	VI how the
18	Private foundation. If the organiz	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see in	structions

BAA Schedule A (Form 990) 2022

Page 3

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.)

Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022	
Calcillating the period of th	(f) Total
1 Gifts, grants, contributions, and membership fees	
and membership fees received. (Do not include any "unusual grants.")	1 015 766
any "unusùal grants.")	1,015,766.
merchandise 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	0.
that are not an unrelated trade or business under section 513.	
4 Tax revenues levied for the	0.
organization's benefit and	
either paid to or expended on its behalf	0.
5 The value of services or	0.
facilities furnished by a governmental unit to the	
organization without charge	0.
6 Total. Add lines 1 through 5 0. 0. 994,005. 21,761.	1,015,766.
7a Amounts included on lines 1, 2, and 3 received from	
disqualified persons 0. 0. 0. 0.	0.
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	0.
	0.
c Add lines 7a and 7b	0.
c Add lines 7a and 7b	
8 Public support. (Subtract line	1,015,766.
8 Public support. (Subtract line 7c from line 6.)	
8 Public support. (Subtract line 7c from line 6.)	1,015,766.
8 Public support. (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal year beginning in)  9 Amounts from line 6	1,015,766.
8 Public support. (Subtract line 7c from line 6.)	1,015,766.  (f) Total 1,015,766.
8 Public support. (Subtract line 7c from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in)  9 Amounts from line 6	1,015,766.
8 Public support. (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal year beginning in) 9 Amounts from line 6	1,015,766.  (f) Total 1,015,766.
8 Public support. (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal year beginning in) 9 Amounts from line 6	1,015,766.  (f) Total 1,015,766.
8 Public support. (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal year beginning in) 9 Amounts from line 6	1,015,766.  (f) Total 1,015,766.
8 Public support. (Subtract line 7c from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in)  9 Amounts from line 6  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b  10. O. O. O. O. O. 10.  11 Net income from unrelated business	1,015,766.  (f) Total 1,015,766.
8 Public support. (Subtract line 7c from line 6.)	1,015,766.  (f) Total 1,015,766.
8 Public support. (Subtract line 7c from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in) 9 Amounts from line 6	1,015,766.  (f) Total 1,015,766.
8 Public support. (Subtract line 7c from line 6.)	1,015,766.  (f) Total 1,015,766.  10.  0. 10.
8 Public support. (Subtract line 7c from line 6.)	1,015,766.  (f) Total 1,015,766.  10.  0. 10.
8 Public support. (Subtract line 7c from line 6.)	1,015,766.  (f) Total 1,015,766.  10.  0. 10.
8 Public support. (Subtract line 7c from line 6.)	1,015,766.  (f) Total 1,015,766.  10.  0. 10.  0.
8 Public support. (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal year beginning in) 9 Amounts from line 6	1,015,766.  (f) Total 1,015,766.  10.  0. 10.  1,015,776.
8 Public support. (Subtract line 7c from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in)  9 Amounts from line 6	1,015,766.  (f) Total 1,015,766.  10.  0.  10.  1,015,776.
Public support. (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 6	1,015,766.  (f) Total 1,015,766.  10.  0. 10.  1,015,776.
8 Public support. (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal year beginning in)  9 Amounts from line 6	1,015,766.  (f) Total 1,015,766.  10.  0. 10.  1,015,776.  X
Public support. (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 6	1,015,766.  (f) Total 1,015,766.  10.  0. 10.  1,015,776.
8 Public support. (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal year beginning in) 9 Amounts from line 6 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. c Add lines 10a and 10b 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).  13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))  16 Public support percentage from 2021 Schedule A, Part III, line 15  17 Octobro Jone (Add Jone 9, 10c, 11, and 12)  18 Public support percentage from 2021 Schedule A, Part III, line 15  19 Octobro Jone (Add Jone 9, 10c, 11, and 12)  10 Octobro Jone (Add Jone 9, 10c, 11, and 12)  11 Octobro Jone (Add Jone 9, 10c, 11, and 12)  12 Octobro Jone (Add Jone 9, 10c, 11, and 12)  13 Total support. (Add Jone 9, 10c, 11, and 12)  14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  Section C. Computation of Public Support Percentage	1,015,766.  (f) Total 1,015,766.  10.  0. 10.  0. 1,015,776.  X
8 Public support. (Subtract line 7c from line 6.)	1,015,766.  (f) Total 1,015,766.  10.  0. 10.  1,015,776.  X
8 Public support. (Subtract line 7c from line 6.)	1,015,766.  (f) Total 1,015,766.  10.  0. 10.  0. 1,015,776.  X
8 Public support. (Subtract line 7c from line 6.)	1,015,766.  (f) Total 1,015,766.  10.  0. 10.  0. 1,015,776.  X
8 Public support. (Subtract line 7c from line 6.)	1,015,766.  (f) Total 1,015,766.  10.  0. 10.  0. 1,015,776.  X

Part IV Supporting Organizations

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

### **Section A. All Supporting Organizations**

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?  If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	: Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI,</b> including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was			
	accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?			
b	If "Yes," provide detail in <b>Part VI.</b> Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the	9a		
С	supporting organization had an interest? If "Yes," provide detail in <b>Part VI.</b> Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from,	9b		
0a	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 section 4943(f) (regarding	9c		
	certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Part	t IV	Supporting Organizations (continued)			
11	l laa k	the averagination accorded a gift or contribution from any of the following payment?		Yes	No
		the organization accepted a gift or contribution from any of the following persons?  son who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below,			
		overning body of a supported organization?	11a		
b	A fan	nily member of a person described on line 11a above?	11b		
		controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI.</b>	11c		
Sect	tion I	B. Type I Supporting Organizations			1
1	Did #	he governing body, members of the governing body, officers acting in their official capacity, or membership of one		Yes	No
	or mo office organ than	ore supported organizations have the power to regularly appoint or elect at least a majority of the organization's ers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported inization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers			
		g the tax year.	1		
	that o	the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Sect	tion (	C. Type II Supporting Organizations			•
				Yes	No
	of each	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the			
	supp	orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sect	tion I	D. All Type III Supporting Organizations			
1	Did th	the organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		Yes	No
	year,	(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	1		
	orgar	nization's governing documents in effect on the date of notification, to the extent not previously provided?			
2	Were	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how			
	the o	rganization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By rea	ason of the relationship described on line 2, above, did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at			
	all tin	nes during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played	3		
		is regard.  E. Type III Functionally Integrated Supporting Organizations			
_					
1		k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	吕	The organization satisfied the Activities Test. Complete line 2 below.			
b	吕	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	ШТ	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see	instru	uctions	s).
2	Activi	ities Test. Answer lines 2a and 2b below.	ľ	Yes	No
	suppo organ	substantially all of the organization's activities during the tax year directly further the exempt purposes of the organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported</b> nizations and explain how these activities directly furthered their exempt purposes, how the organization was possive to those supported organizations, and how the organization determined that these activities constituted			
		trantially all of its activities.	2a		
		he activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
		ons for the organization's position that its supported organization(s) would have engaged in these activities or the organization's involvement.	2b		
3	Parer	nt of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the each	the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? If "Yes" or "No," provide details in <b>Part VI.</b>	3a		
		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	t on No	ov. 20, 1970 (explain in	n Part VI). <b>See</b>
Sec	tion A — Adjusted Net Income	is illus	(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		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
ŀ	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	I Total (add lines 1a, 1b, and 1c)	1d		
•	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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2		2		
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		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	grated	Type III supporting or	ganization

BAA Schedule A (Form 990) 2022 10 Line 8 amount divided by line 9 amount

Pai	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)				
Section D – Distributions					
1	Amounts paid to supported organizations to accomplish exempt purposes	1			
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3			
4	Amounts paid to acquire exempt-use assets	4			
5	Qualified set-aside amounts (prior IRS approval required – provide details in Part VI)	5			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.	6			
7	Total annual distributions. Add lines 1 through 6.	7			
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	8			
9	Distributable amount for 2022 from Section C. line 6	9			

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required — <i>explain in Part VI</i> ). See instructions.			
3 Excess distributions carryover, if any, to 2022			
<b>a</b> From 2017			
<b>b</b> From 2018			
<b>c</b> From 2019			
<b>d</b> From 2020			
<b>e</b> From 2021			
f Total of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
<b>6</b> Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
<b>b</b> Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

BAA Schedule A (Form 990) 2022

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.)

## SCHEDULE D (Form 990)

**Supplemental Financial Statements** 

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

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

Ocean Discovery League, Inc. 84-1827384 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on 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)...... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds No are the organization's property, subject to the organization's exclusive legal control?.. Yes 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 No impermissible private benefit?.... Yes Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 a Total number of conservation easements..... 2 a **b** Total acreage restricted by conservation easements..... 2 b c Number of conservation easements on a certified historic structure included in (a) . . . . . . . . 2 c d Number of conservation easements included in (c) acquired after July 25, 2006 and not on a historic structure listed in the National Register ...... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear 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, No and enforcement of the conservation easements it holds?.... Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 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)?..... 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" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB 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 FASB 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 on Form 990, Part VIII, line 1..... (ii) Assets included in Form 990, Part X..... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1..... **b** Assets included in Form 990, Part X.....

Part III   Organizations Maintaining C	collections of Art, His	toricai i reasures, o	or Other Similar As	ssets	(contii	пиеа)
3 Using the organization's acquisition, accession items (check all that apply):	<u> </u>	,	ake significant use of its	collectio	n	
a Public exhibition	H 0	or exchange program				
<b>b</b> Scholarly research	e Other					
c Preservation for future generations		. 6				
4 Provide a description of the organization's colle Part XIII.	•	-				
5 During the year, did the organization solicit to be sold to raise funds rather than to be r				Yes		No
Part IV Escrow and Custodial Arran reported an amount on Form 990, Pa	i <b>gements.</b> Complete if th irt X, line 21.	e organization answered	"Yes" on Form 990, Par	t IV, line	e 9, or	
1 a Is the organization an agent, trustee, custo on Form 990, Part X?	dian or other intermediary	for contributions or othe	er assets not included	Yes	Γ	No
<b>b</b> If "Yes," explain the arrangement in Part XIII a					_	
2,	3 ··			Amoun	t	
c Beginning balance			1c			
<b>d</b> Additions during the year			1 d			
e Distributions during the year						
<b>f</b> Ending balance						_
2 a Did the organization include an amount on				Yes	<u> </u>	No
<b>b</b> If "Yes," explain the arrangement in Part X	III. Check here if the expla	nation has been provide	ed on Part XIII		· · · · · L	
Part V Endowment Funds. Complete	if the organization answere	1 "Vas" on Form 990 Par	+ IV line 10			
	rent year (b) Prior year		<del>- + '</del>	(e)	Four years	s hack
1 a Beginning of year balance	(b) Thoryon	(c) Two years back	(u) Tillee years back	(6)	Tour yours	) back
<b>b</b> Contributions						
c Net investment earnings, gains,						
and losses						
d Grants or scholarships						
e Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentage of the cu	rrent year end balance (lin	e 1g, column (a)) held a	as:			
<b>a</b> Board designated or quasi-endowment	%					
<b>b</b> Permanent endowment	-% -					
c Term endowment %						
The percentages on lines 2a, 2b, and 2c shoul	d equal 100%.					
3 a Are there endowment funds not in the possess	ion of the organization that a	re held and administered	for the	г		
organization by:				0.00	Yes	No
(i) Unrelated organizations				3a(i)		<b> </b>
(ii) Related organizations				3a(ii)		1
4 Describe in Part XIII the intended uses of the	•			. 3b		
Part VI Land, Buildings, and Equipr		int turius.				
Complete if the organization answere		IV line 112 See Form 90	On Part Y line 10			
				(-I\)	<b>3</b> 1	l
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	( <b>a</b> ) 1	Book va	ilue
<b>1 a</b> Land		(11.1)				
<b>b</b> Buildings						
c Leasehold improvements						
<b>d</b> Equipment		4,143.	1,151.		2,	,992.
e Other		25,401.				,401.
Total. Add lines 1a through 1e. (Column (d) musi	t equal Form 990, Part X, o	column (B), line 10c.)			28.	,393.

BAA Schedule D (Form 990) 2022

Part VII	Investments - Other Securities.		N/A	
	Complete if the organization answered "Yes" on			
	tion of security or category (including name of security)	<b>(b)</b> Book value	(c) Method of valuation: Cost or end-c	of-year market value
` '	I derivatives			
	neld equity interests			
(3) Other _				
(A) (B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
<u>(l)</u>				
	(b) must equal Form 990, Part X, column (B) line 12.)		27./2	
Part VIII	Investments — Program Related. Complete if the organization answered "Yes" on	Form 990 Part IV line	N/A 11c See Form 990 Part X line 13	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1)				•
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) (10)				
	(b) must equal Form 990, Part X, column (B) line 13.)			
Part IX	Other Assets.	N/A		
	Complete if the organization answered "Yes" on		11d. See Form 990, Part X, line 15.	455
(1)	(a) De	scription		<b>(b)</b> Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7) (8)				
(9)				
(10)				
Total. (Colu	mn (b) must equal Form 990, Part X, column (l	3) line 15.)		
Part X	Other Liabilities.	- 000 B . W. U	44. 446. 6 - 000. 5	
	Complete if the organization answered "Yes" on	Form 990, Part IV, line iption of liability	11e or 11f. See Form 990, Part X, line 2	25. <b>(b)</b> Book value
1. (1) Federa	Il income taxes	ірпон от павінту		(b) book value
(2)	ii iiiooiiio taxoo			
(3)				
(4)				
(5)				
(6) (7)				
(8)				
(9)				
(10)				
(11)				
	(b) must equal Form 990, Part X, column (B) line 25.)			
	uncertain tax positions. In Part XIII, provide the text of the fo			
	der FASB ASC 740. Check here if the text of the footnote has	•		ee Part XIII X
BAA		TEEA3303L 07/06/22	Sche	dule D (Form 990) 2022

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	142,126.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2e	
3 Subtract line 2e from line 1	3	142,126.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.	4 с	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 5	142,126.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	er Return.	
		498,043.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		498,043.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements		498,043.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements		498,043.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements		498,043.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements		498,043.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  2 Donated Services and Use of Security (2 b)  c Other losses.	1	498,043.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities. 2a b Prior year adjustments. 2b c Other losses. 2c d Other (Describe in Part XIII.) 2d	1	·
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities. 2a b Prior year adjustments. 2b c Other losses. 2c d Other (Describe in Part XIII.) 2d e Add lines 2a through 2d.	1	498,043.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities. 2a b Prior year adjustments. 2b c Other losses. 2c d Other (Describe in Part XIII.) 2d e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4a	1	·
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities. 2a b Prior year adjustments. 2b c Other losses. 2c d Other (Describe in Part XIII.) 2d e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4a b Other (Describe in Part XIII.) 4b	1 2e 3	·
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities. 2a b Prior year adjustments. 2b c Other losses. 2c d Other (Describe in Part XIII.) 2d e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4a b Other (Describe in Part XIII.) 4b c Add lines 4a and 4b.	1 2e 3	498,043.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities. 2a b Prior year adjustments. 2b c Other losses. 2c d Other (Describe in Part XIII.) 2d e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4a b Other (Describe in Part XIII.) 4b	1 2e 3	·

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### Part X - FASB ASC 740 Footnote

Ocean Discovery League, Inc. is exempt from income taxes under Code Section 501(c)(3) of the Internal Revenue Code.

Accounting principles generally accepted in the United States of America require

Agency management to evaluate tax positions taken by the Agency and recognize a tax

liability (or asset) if the Agency has taken an uncertain position that more likely

than not would not be sustained upon examination by taxing authorities. Managment

Schedule D (Form 990) 2022

Part XIII Supplemental Information (continued)

#### Part X - FASB ASC 740 Footnote (continued)

has analyzed the tax positions taken by the Agency and has concluded that as of December 31, 2022, there are no uncertain tax positions taken or expected to be taken that would require recognition of liability (or asset) or disclosure in the financial statements. The Agency is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

#### **SCHEDULE L** (Form 990)

(8) (9) (10)

### **Transactions With Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Employer identification number 84-1827384 Ocean Discovery League

ocean	DISCOVETÀ	шeague, .	1110.						04	102	100	4			
Part I	Excess Be organization	enefit Transa answered "Yes"	actions (secti on Form 990, F	on 501( Part IV,	(c)(3), se line 25a	ection 5 or 25b,	01(c)(4), and or Form 990	l section 501( )-EZ, Part V, li	c)(29) org ine 40b.	janiz	ations	only)	. Com	plete i	f the
1	(a) Name of disqua		<b>(b)</b> Relation	ship betw					escription of					(d) Cor	
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
sect	er the amount o tion 4958 er the amount o										- T				
Part II	Complete if the organization	and/or From he organization reported an am	answered "Yes ount on Form 9	" on For 90, Part	rm 990-E t X, line	5, 6, or	22.								
(a) Name o	of interested person	<b>(b)</b> Relationship with organization	(c) Purpose of loan	fror	an to or n the ization?	prin	e) Original cipal amount	(f) Balance	due (	<b>g)</b> In (	default?	by bo	proved pard or nittee?	(i) Wi agreei	ritten nent?
				То	From					Yes	No	Yes	No	Yes	No
(1)															
(2)															
(3)								1							
(4) (5)								+							
(6)															
(7)															
(8)															
(9)															
(10)															
Total							\$								
Part III	Grants or Complete if t	Assistance he organization	Benefiting I answered "Yes	<b>nteres</b> " on For	<b>sted Pe</b> rm 990, F	ersons Part IV,	s. line 27.								
	(a) Name of interes	sted person	(b) Relations person a	hip betwe nd the org	en intereste ganization	ed	(c) Amount	of assistance	<b>(d)</b> Type	of ass	istance	(e)	Purpose	e of assi	stance
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
(7)							<u> </u>								

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

Schedule L (Form 990) 2022

# Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing organization revenues	
				Yes	No
(1) Richard Bell	Former Treasurer		Spouse of the President		Х
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

#### Part V Supplemental Information.

Provide additional information for responses to questions on Schedule L (see instructions).

### **Supplemental Information**

President and Former Treasurer who served until April 2022 are spouses.

TEEA4501L 07/25/22

#### SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

#### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Ocean Discovery League, Inc.

Employer identification number 84-1827384

#### Form 990, Part III, Line 4d - Other Program Services Description

The organization is creating low-cost, easy-to-use deep-sea systems and supporting users around the world to gather the most critical data to inform deep-sea environmental decision-making. In 2022, the organization published two papers on the development of Maka Niu, a low-cost, modular imaging and sensor platform to increase observation capabilities of the deep ocean. It also supported a diverse group of Maka Niu users around the world to explore and understand their own deep-sea habitats.

Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

President and former Treasurer are spouses.

Form 990, Part VI, Line 11b - Form 990 Review Process

FORM 990 REVIEWED BY BOARD PRIOR TO FILING.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Financial statements are published on the organization's website.

Form 990, Part XII, Line 1 - Financial Statements and Reporting

The Organization changed its basis of accounting from cash to accrual.

7	n	22
Z	u	ZZ

## **Federal Worksheets**

Page 1

Ocean Discovery League, Inc.

84-1827384

# Form 990, Part III, Line 4e Program Services Totals

	Program Services Total	Form 990	Source
Total Expenses	429,550.	0.	Part IX, Line 25, Col. B
Grants	0.		Part IX, Lines 1-3, Col. B
Revenue	0.		Part VIII, Line 2, Col. A

# Form 990, Part IX, Line 24e Other Expenses

	(A)	(B)	(C)	(D)
	Total	Program Services	Management & General	Fundraising
	10001	DOLVICOD	<u>u concrar</u>	ranararbring
Membership and subscriptions	70.		70.	
Tools and equipment	136.	118.	18.	
Total	\$ 206.	\$ 118.	\$ 88.	\$ 0.