

Return of Organization Exempt From Income Tax

2005

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2005 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization NAVY LEAGUE OF THE UNITED STATES Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2300 WILSON BOULEVARD 1000 City or town, state or country, and ZIP + 4 ARLINGTON, VA 22201-3308	D Employer identification number 53-0116710
		E Telephone number 703-528-1775	F Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)
	* Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).		H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates **N/A**
H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

G Website: WWW.NAVYLEAGUE.ORG

J Organization type (check only one) 501(c) (3) (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. **Some states require a complete return.**

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **10,221,626.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1	Contributions, gifts, grants, and similar amounts received:			
	a	Direct public support	1a	1,295,049.	
	b	Indirect public support	1b		
	c	Government contributions (grants)	1c		
	d	Total (add lines 1a through 1c) (cash \$ 1,295,049. noncash \$)	1d	1,295,049.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	3,638,047.	
	3	Membership dues and assessments	3	2,638,230.	
	4	Interest on savings and temporary cash investments	4		
	5	Dividends and interest from securities	5	289,569.	
	6a	Gross rents SEE STATEMENT 1	6a	433,093.	
	b	Less: rental expenses SEE STATEMENT 2	6b	2,429,701.	
	c	Net rental income or (loss) (Subtract line 6b from line 6a)	6c	<1,996,608.>	
7	Other investment income (Describe: LOSS ON INVESTMENT IN SUBSIDIARY)	7	<74,911.>		
8a	Gross amount from sales of assets other than inventory	8a	1,828,579.		
	(A) Securities		(B) Other		
b	Less: cost of other basis and sales expenses	8b	77,739.		
c	Gain or (loss) (attach schedule)	8c	<77,739.>		
d	Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 3 STMT 4	8d	69,338.		
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
a	Gross revenue (not including \$ of contributions reported on line 1a)	9a			
b	Less: direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less: cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11	Other revenue (from Part VII, line 103)	11	173,970.		
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	6,032,684.		
Expenses	13	Program services (from line 44, column (B))	13	5,518,826.	
	14	Management and general (from line 44, column (C))	14	2,204,343.	
	15	Fundraising (from line 44, column (D))	15	348,146.	
	16	Payments to affiliates (attach schedule)	16		
17	Total expenses (add lines 16 and 44, column (A))	17	8,071,315.		
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	<2,038,631.>	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	13,765,745.	
	20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 5	20	362,878.	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	12,089,992.	

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Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ <u>515,000.</u> noncash \$ <u>0.</u>) If this amount includes foreign grants, check here <input type="checkbox"/>			STATEMENT 8	
22		515,000.	515,000.		
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc **	191,403.	93,578.	85,804.	12,021.
26	Other salaries and wages	1,893,371.	919,245.	855,850.	118,276.
27	Pension plan contributions	83,561.	43,085.	35,003.	5,473.
28	Other employee benefits	194,134.	100,095.	81,323.	12,716.
29	Payroll taxes	158,421.	81,681.	66,363.	10,377.
30	Professional fundraising fees				
31	Accounting fees				
32	Legal fees				
33	Supplies	62,225.	21,701.	36,122.	4,402.
34	Telephone	37,913.	18,203.	19,710.	
35	Postage and shipping	245,052.	223,341.	18,857.	2,854.
36	Occupancy	717,172.	181,768.	510,845.	24,559.
37	Equipment rental and maintenance	114,249.	30,885.	79,440.	3,924.
38	Printing and publications	476,077.	455,537.	17,475.	3,065.
39	Travel	90,608.	73,296.	1,090.	16,222.
40	Conferences, conventions, and meetings	133,159.	2,415.	130,744.	
41	Interest	1,115,434.	61,173.	1,046,490.	7,771.
42	Depreciation, depletion, etc. (attach schedule)	989,135.	63,791.	917,240.	8,104.
43	Other expenses not covered above (itemize):				
a					
b					
c					
d					
e					
f					
g	SEE STATEMENT 6	1,054,401.	2,634,032.	<1,698,013.>	118,382.
44	Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	8,071,315.	5,518,826.	2,204,343.	348,146.

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;
 (iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

** SEE STATEMENT 7

Part III Statement of Program Service Accomplishments (See the instructions)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments

What is the organization's primary exempt purpose? ► <u>SEE STATEMENT 9</u>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a <u>SEA POWER MAGAZINE & ALMANAC ARE INTERNATIONAL PUBLICATONS RELATING TO NAVAL ACTIVITIES; THE NAVY LEAGUER IS A NEWSPAPER DOCUMENTING THE ACTIVITIES OF THE NAVY LEAGUE HEADQUARTERS & ITS COUNCILS.</u>	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	1,770,840.
b <u>SEA-AIR-SPACE - AN ANNUAL SERIES OF SEMINARS & EXHIBITS CONCERNING THE STATUS OF THE U.S. ARMED FORCES, MILITARY TECHNOLOGY & OTHER NATIONAL SECURITY ISSUES. MILITARY & GOVERNMENT PERSONNEL ATTEND THE PROGRAM.</u>	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	1,555,921.
c <u>COUNCIL DEVELOPMENT MEMBERSHIP - MAINTAINS MEMBERSHIP RECORDS & ISSUES CERTIFICATES, PINS, ETC.</u>	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	1,306,975.
d <u>U.S. NAVAL SEA CADETS - GRANT TO FEDERALLY CHARTERED SECTION 501(C)(3) YOUTH ORGANIZATIONS ENGAGED IN NAVAL RELATED EDUCATIONAL PROGRAMS.</u>	
(Grants and allocations \$ 515,000.) If this amount includes foreign grants, check here ► <input type="checkbox"/>	546,534.
e Other program services (attach schedule) <u>SEE STATEMENT 10</u>	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	338,556.
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	5,518,826.

Form 990 (2005)

Part IV Balance Sheets (See the instructions)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing	88,315.	150.
	46 Savings and temporary cash investments	1,363,285.	1,305,016.
	47 a Accounts receivable	47a 1,005,654.	
	b Less: allowance for doubtful accounts	47b	47c 1,005,654.
	48 a Pledges receivable	48a 83,368.	
	b Less: allowance for doubtful accounts	48b 19,000.	48c 64,368.
	49 Grants receivable		49
	50 Receivables from officers, directors, trustees, and key employees		50
	51 a Other notes and loans receivable	51a	
	b Less: allowance for doubtful accounts	51b	51c
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges	400,913.	523,841.
	54 Investments - securities STMT 11 STMT 12 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	11,896,230.	12,374,529.
	55 a Investments - land, buildings, and equipment basis	55a	
b Less: accumulated depreciation	55b	55c	
56 Investments - other SEE STATEMENT 13	29,156,331.	7,594,084.	
57 a Land, buildings, and equipment basis	57a 39,157,703.		
b Less: accumulated depreciation STMT 14	57b 1,546,949.	57c 37,610,754.	
58 Other assets (describe SEE STATEMENT 15)	141,667.	58 2,306,303.	
59 Total assets (must equal line 74). Add lines 45 through 58	43,596,284.	59 62,784,699.	
Liabilities	60 Accounts payable and accrued expenses	4,053,887.	60 5,066,179.
	61 Grants payable		61
	62 Deferred revenue	3,624,802.	62 3,893,528.
	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	b Mortgages and other notes payable STMT 16	22,151,850.	64b 41,735,000.
	65 Other liabilities (describe SEE STATEMENT 15)		65 0.
66 Total liabilities. Add lines 60 through 65	29,830,539.	66 50,694,707.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74		
	67 Unrestricted	13,106,922.	67 11,486,004.
	68 Temporarily restricted	455,094.	68 400,259.
	69 Permanently restricted	203,729.	69 203,729.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74		
	70 Capital stock, trust principal, or current funds		70
	71 Paid-in or capital surplus, or land, building, and equipment fund		71
	72 Retained earnings, endowment, accumulated income, or other funds		72
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	13,765,745.	73 12,089,992.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73	43,596,284.	74 62,784,699.

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements		a	8,955,772.
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1	362,878.	
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify) _____	b4		
	Add lines b1 through b4		b	362,878.
c	Subtract line b from line a		c	8,592,894.
d	Amounts included on Part I, line 12, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify) <u>SEE STATEMENT 18</u>	d2	<2,560,210.>	
	Add lines d1 and d2		d	<2,560,210.>
e	Total revenue (Part I, line 12). Add lines c and d		e	6,032,684.

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements		a	10,631,525.
b	Amounts included on line a but not on Part I, line 17:			
1	Donated services and use of facilities	b1		
2	Prior year adjustments reported on Part I, line 20	b2		
3	Losses reported on Part I, line 20	b3		
4	Other (specify) <u>SEE STATEMENT 17</u>	b4	2,560,210.	
	Add lines b1 through b4		b	2,560,210.
c	Subtract line b from line a		c	8,071,315.
d	Amounts included on Part I, line 17, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify) _____	d2		
	Add lines d1 and d2		d	0.
e	Total expenses (Part I, line 17). Add lines c and d		e	8,071,315.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
STEPHEN R. PIETROPAOLI ARLINGTON, VA 22201	NAT'L EXECUTIVE DIRECTOR	169,814.	16,858.	4,731.
SEE ATTACHED SCHEDULE ARLINGTON, VA 22201		0.	0.	0.

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 253
75 b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)
75 c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control?
Note. Related organizations include section 509(a)(3) supporting organizations.
If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization.
75 d Does the organization have a written conflict of interest policy?

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

Table with 5 columns: (A) Name and address, (B) Loans and Advances, (C) Compensation, (D) Contributions to employee benefit plans & deferred compensation plans, (E) Expense account and other allowances. Row 1 contains 'NONE' in column A.

Part VI Other Information (See the instructions)

76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?
b If "Yes," has it filed a tax return on Form 990-T for this year?
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?
b If "Yes," enter the name of the organization SEE STATEMENT 19 and check whether it is exempt or nonexempt
81 a Enter direct or indirect political expenditures. (See line 81 instructions) 81a 0
b Did the organization file Form 1120-POL for this year?

Part VI Other Information (continued)	Yes	No
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III)	82b	N/A
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	N/A
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85b	N/A
c Dues, assessments, and similar amounts from members	85c	N/A
d Section 162(e) lobbying and political expenditures	85d	N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86 501(c)(7) organizations Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87 501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	N/A
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911 <u>0.</u> ; section 4912 <u>0.</u> ; section 4955 <u>0.</u>		
b 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
90 a List the states with which a copy of this return is filed <u>VA</u>		
b Number of employees employed in the pay period that includes March 12, 2005	90b	35
91 a The books are in care of <u>THE LEAGUE</u> Telephone no. <u>703-528-1775</u> Located at <u>2300 WILSON BOULVEVARD, ARLINGTON, VA</u> ZIP + 4 <u>22201</u>		
b 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)? If "Yes," enter the name of the foreign country <u>N/A</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	X
c At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country <u>N/A</u>	91c	X
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

Part VII Analysis of Income-Producing Activities (See the instructions)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a SEA-AIR SPACE EXPO.			07	2,099,358.	282,195.
b PUBLICATIONS	541800	1,244,314.			12,180.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					2,638,230.
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	289,569.	
97 Net rental income or (loss) from real estate:					
a debt-financed property	531120	<1,996,608.>			
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income			18	<74,911.>	
100 Gain or (loss) from sales of assets other than inventory			18	69,338.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a ROYALTIES			15	2,895.	
b OTHER			01	171,075.	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		<752,294.>		2,557,324.	2,932,605.
105 Total (add line 104, columns (B), (D), and (E))					4,737,635.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	SEE STATEMENT 21

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
SEE STATEMENT 20	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? **Howard B. Siegel** Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **Senior Director of Finance** Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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.

Signature of officer: *Howard B. Siegel* **Date:** 6/2/06 **Type or print name and title:** **Howard B. Siegel, Senior Director of Finance**
 2300 Wilson Boulevard
 Arlington, Virginia 22201-3308

Paid Preparer's Use Only:
Preparer's signature: *E. Albert Walker* **Date:** 6/2/06 **Check if self-employed:** **Preparer's SSN or PTIN:** _____
Firm's name (or yours if self-employed), address, and ZIP + 4: RSM MCGLADREY, INC.
 700 N. FAIRFAX STREET, STE. 400
 ALEXANDRIA, VA 22314-2040 **EIN:** _____ **Phone no.:** 703-549-7800

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2005

Name of the organization: **NAVY LEAGUE OF THE UNITED STATES**
Employer identification number: **53 0116710**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
<u>HOWARD B. SIEGEL</u> <u>ARLINGTON, VA 22201</u>	SR. FIN. DIR. 40.00	101,823.	12,138.	1,872.
<u>RICHARD D. BARNARD</u> <u>ARLINGTON, VA 22201</u>	ED. IN CHIEF 40.00	94,749.	10,552.	4,935.
<u>EVA HOCHARD</u> <u>ARLINGTON, VA 22201</u>	DIR. OF FIN. 40.00	84,433.	11,158.	0.
<u>LINDA HOFFMAN</u> <u>ARLINGTON, VA 22201</u>	SR. DIR. ADMIN 40.00	88,569.	11,383.	1,863.
<u>SUSAN K. FALLON</u> <u>ARLINGTON, VA 22201</u>	SR. DIR. DEVEL 40.00	89,048.	8,980.	10,198.
Total number of other employees paid over \$50,000 ▶	11			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
<u>NONE</u>		
Total number of others receiving over \$50,000 for professional services ▶	0	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
<u>JAMES G. DAVIS CONSTRUCTION CO.</u> <u>MCLEAN, VA 22102</u>	GENERAL CONTRACTOR	10300978.
<u>DIETZE CONSTRUCTION GROUP</u> <u>CHANTILLY, VA 20151</u>	GENERAL CONTRACTOR	2436105.
Total number of other contractors receiving over \$50,000 for other services ▶	0	

Part III Statements About Activities (See page 2 of the instructions.)

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ \$ <u>212,261</u> . (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) VI-A, LINE 38B Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	X	
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, FORM 990	X	
e	Transfer of any part of its income or assets?		X
3 a	Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) SEE STATEMENT 22	X	
b	Do you have a section 403(b) annuity plan for your employees?	X	
c	During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?		X
4 a	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X
b	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ► _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 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 charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: Type 1 Type 2 Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting.
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	877,763.	971,726.	1,155,351.	996,073.	4,000,913.
16 Membership fees received	2,282,893.	2,416,808.	816,400.	2,531,083.	8,047,184.
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	2,640,276.	3,001,053.	3,865,873.	2,253,239.	11,760,441.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	489,099.	273,790.	585,263.	661,309.	2,009,461.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	6,290,031.	6,663,377.	6,422,887.	6,441,704.	25,817,999.
24 Line 23 minus line 17	3,649,755.	3,662,324.	2,557,014.	4,188,465.	14,057,558.
25 Enter 1% of line 23	62,900.	66,634.	64,229.	64,417.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 281,151.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 218,849.
c Total support for section 509(a)(1) test; Enter line 24, column (e)					26c 14,057,558.
d Add: Amounts from column (e) for lines: 18 2,009,461. 19 _____ 22 _____ 26b 218,849.					26d 2,228,310.
e Public support (line 26c minus line 26d total)					26e 11,829,248.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 84.1487%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c N/A
d Add: Line 27a total _____ and line 27b total _____					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test; Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

NONE

Part V Private School Questionnaire (See page 7 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) _____ _____		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) _____ _____	32d	
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) _____ _____	33h	
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	5,448.
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	206,813.
38	Total lobbying expenditures (add lines 36 and 37)	38	212,261.
39	Other exempt purpose expenditures	39	10,288,755.
40	Total exempt purpose expenditures (add lines 38 and 39)	40	10,501,016.
41	Lobbying nontaxable amount. Enter the amount from the following table -		
	If the amount on line 40 is -		
	Not over \$500,000		
	Over \$500,000 but not over \$1,000,000		
	Over \$1,000,000 but not over \$1,500,000		
	Over \$1,500,000 but not over \$17,000,000		
	Over \$17,000,000		
	The lobbying nontaxable amount is -		
	20% of the amount on line 40		
	\$100,000 plus 15% of the excess over \$500,000		
	\$175,000 plus 10% of the excess over \$1,000,000		
	\$225,000 plus 5% of the excess over \$1,500,000		
	\$1,000,000		
41		41	675,051.
42	Grassroots nontaxable amount (enter 25% of line 41)	42	168,763.
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	0.
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	0.

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount	675,051.				675,051.
46 Lobbying ceiling amount (150% of line 45(e))					1,012,577.
47 Total lobbying expenditures	212,261.				212,261.
48 Grassroots nontaxable amount	168,763.				168,763.
49 Grassroots ceiling amount (150% of line 48(e))					253,145.
50 Grassroots lobbying expenditures	5,448.				5,448.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (Add lines c through h.)

Yes	No	Amount
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	
		0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

2005 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 2

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	FURNITURE & EQUIPMENT	VARIESSL		7.00	17	1427964.			1427964.	557,814.		144,165.
2	LAND	VARIESL				4102268.			4102268.			0.
3	BUILDING	VARIESSL		39.00	17	24517537.			24517537.			209,552.
4	LAND IMPROVEMENTS	VARIESSL		15.00	17	994,532.			994,532.			49,726.
5	TENANT IMPROVEMENTS	VARIESSL		5.00	17	5587667.			5587667.			80,145.
6	BUILDING INFORMATION SYSTEMS	VARIESSL		5.00	17	2527735.			2527735.			505,547.
	* TOTAL 990 PAGE 2											
	DEPR					39157703.		0.	39157703.	557,814.	0.	989,135.

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December 14, 2005

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Arlene Fraser
Sara Jane Fritz
Catherine A. Hansen
Glen J. Huber

Grant W. Ivey
Connie O. Los
Lisa K. Macklin
William A. Mansfield
Norma W. Orr
John A. Pettitt
John M. Rau
Katherine O. Rogerson
Warren H. Savage, Jr.
Laurent F. Sidon
Alan P. Stelzer
Maria E. Taggart
John F. Watkins

ROCKY MOUNTAIN REGION

Daniel B. Branch, Jr.
Richard M. Brown

R. Stanley Lowe

SOUTH ATLANTIC COAST REGION

William S. Culler
Philip S. Duwel
Donald A. Giles
Franklin A. Hart, Jr.
Gary A. Johnson
Hubert W. Lang III
Hugh H. Mayberry

Sheila M. McNeill
Robert J. O'Neill
Rockwell O'Sheill
Owen W. Siler
Corwin D. Strong
Thomas W. Wright

SOUTHERN REGION

James M. Beaty
Roger W. Burke
Robert C. Crates
John Michael Denkler
Ronald M. Eytchison
Hans H. Krucke

Robert L. Kuhner
Thomas J. McGuire
Benjamin L. Pendleton
Thomas J. Pruter
Walter H. Reese
John J. Spittler

FORM 990	RENTAL INCOME	STATEMENT	1
KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME	
OFFICE BUILDING	1	433,093.	
TOTAL TO FORM 990, PART I, LINE 6A		433,093.	

FORM 990	RENTAL EXPENSES	STATEMENT	2
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
PAYROLL EXPENSES		108,349.	
SUPPLIES		23,080.	
TELEPHONE		9,276.	
POSTAGE AND DELIVERY		517.	
UTILITIES		140,072.	
JANITORIAL SUPPLIES		35,369.	
SECURITY AND PEST CONTROL		24,110.	
OWNER CHARGES		12,473.	
REPAIRS AND MAINTENANCE		41,674.	
BANK CHARGES		1,939.	
TRASH REMOVAL		763.	
DATA PROCESSING		1,898.	
EQUIPMENT EXPENSE		17,405.	
INTEREST EXPENSE		996,790.	
DEPRECIATION AND AMORTIZATION		791,982.	
AMORTIZATION OF LEASE COMMISSIONS		33,077.	
MANAGEMENT FEES		21,000.	
TENANT RELATIONS		8,589.	
LEGAL FEES		83,178.	
REAL ESTATE TAXES		66,496.	
OTHER EXPENSES		11,664.	
- SUBTOTAL -	1		2,429,701.
TOTAL TO FORM 990, PART I, LINE 6B			2,429,701.

FORM 990 **GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES** **STATEMENT** **3**

<u>DESCRIPTION</u>	<u>GROSS SALES PRICE</u>	<u>COST OR OTHER BASIS</u>	<u>EXPENSE OF SALE</u>	<u>NET GAIN OR (LOSS)</u>
SALES OF SECURITIES	1,828,579.	1,681,502.	0.	147,077.
TO FORM 990, PART I, LINE 8	1,828,579.	1,681,502.	0.	147,077.

FORM 990 **GAIN (LOSS) FROM SALE OF OTHER ASSETS** **STATEMENT** **4**

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED		
LOSS ON DISPOSAL OF FIXED ASSETS	VARIOUS	VARIOUS	PURCHASED		
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	0.	263,256.	0.	185,517.	<77,739.>
TO FM 990, PART I, LN 8		263,256.	0.	185,517.	<77,739.>

FORM 990 **OTHER CHANGES IN NET ASSETS OR FUND BALANCES** **STATEMENT** **5**

DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENTS	362,878.
TOTAL TO FORM 990, PART I, LINE 20	362,878.

FORM 990 **OTHER EXPENSES** **STATEMENT** **6**

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
ADS. & PROMOTION	44,498.	44,458.	40.	
BAD DEBT & RENOUNCED PLEDGES	10,968.	10,968.		
BANK AND INVESTMENT FEES	121,644.	62,036.	51,810.	7,798.
EMPLOYMENT FEES	1,969.	1,015.	825.	129.
AUTHOR FEES	43,358.	43,358.		
INSURANCE	58,153.	39,785.	15,884.	2,484.
PRESIDENT'S & EXECUTIVE SUPPORT	85,575.		85,575.	
PROFESSIONAL FEES	130,189.	33,824.	94,455.	1,910.
PROF. DEVELOPMENT	1,216.	743.	414.	59.
CONGRESSIONAL	15,460.	15,460.		
SAS HOSPITALITY	596,406.	596,406.		
SAS TRANSPORTATION	45,202.	45,202.		
SAS PRODUCER'S FEE	564,791.	564,791.		

AWARDS	40,263.	40,263.		
MEMBERSHIP SUPPORT AND SERVICE	54,442.	54,442.		
OTHER	15,402.	2,012.	13,322.	68.
FULFILLMENT	8,711.	8,711.		
COMMISSIONS	381,636.	381,636.		
PROMOTIONAL MATERIAL	138,146.		115,684.	22,462.
REFUNDS	542,001.	542,001.		
TAXES-GENERAL	11,425.	5,891.	4,785.	749.
PROSPECT RESEARCH	2,794.			2,794.
DONOR RECOGNITION	14,759.			14,759.
DIRECT MAIL	58,868.			58,868.
REFERENCE SERVICES	6,639.	6,333.	265.	41.
AMORTIZATION	103,910.	70,833.	33,077.	
YOUTH PROGRAM DEVELOPMENT	4,306.	4,306.		
EDITORIAL ASSISTANCE	4,508.	4,508.		
CHARTERS	315.	315.		
GRASS ROOTS PROGRAM	5,448.	5,448.		
MOVING EXPENSES	31,792.	16,392.	13,318.	2,082.
MANAGEMENT FEES TENANT RELATIONS/SPECIAL EVENTS	8,589.		8,589.	
REAL ESTATE TAXES	66,496.		66,496.	
DATA PROCESSING SERVICE	65,697.	32,895.	28,623.	4,179.
TEMPORARY SERVICES	110,081.		110,081.	
RENT EXPENSES REPORTED ON LINE 6B	<2,429,701.>		<2,429,701.>	
TOTAL TO FM 990, LN 43	<u>1,054,401.</u>	<u>2,634,032.</u>	<u><1,698,013.></u>	<u>118,382.</u>

FORM 990 OFFICER COMPENSATION ALLOCATION STATEMENT 7
PART II, LINE 25

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS OF A, B & C
STEPHEN R. PIETROPAOLI	169,814.	13,432.	8,158.	
A. PROGRAM SERVICES	82,446.	6,926.	4,206.	93,578.
B. MANAGEMENT AND GENERAL	76,760.	5,627.	3,417.	85,804.
C. FUNDRAISING	10,608.	879.	534.	12,021.
TOTAL PROGRAM SERVICES				93,578.
TOTAL MANAGEMENT AND GENERAL				85,804.
TOTAL FUNDRAISING				12,021.
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON LINE 25				191,403.

FORM 990 CASH GRANTS AND ALLOCATIONS STATEMENT 8

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
	NAVAL SEA CADET CORPS	2300 WILSON BLVD, ARLINGTON, VA 22201	RELATED PARTY	515,000.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				515,000.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 9
PART III

EXPLANATION

THE NAVY LEAGUE OF THE UNITED STATES IS A PROFESSIONAL ORGANIZATION WHOSE PRIMARY OBJECTIVE IS TO BE A SOURCE OF INFORMATION TO THE GENERAL PUBLIC, PROVIDE DIRECT ASSISTANCE TO MEN AND WOMEN IN THE SEA SERVICES AND SPONSOR A NUMBER OF SCHOLARSHIPS, PUBLIC RECOGNITION, AND YOUTH PROGRAMS WHICH ARE GEARED TOWARDS THE SEA SERVICES. FINALLY, THE NAVY LEAGUE SERVES AS AN ADVOCATE FOR THE SEA SERVICES IN VARIOUS PUBLIC FORUMS.

FORM 990	OTHER PROGRAM SERVICES	STATEMENT	10
DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES	
EDUCATIONAL PROGRAMS		338,556.	
TOTAL TO FORM 990, PART III, LINE E		338,556.	

FORM 990	NON-GOVERNMENT SECURITIES	STATEMENT	11		
SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
EQUITY SECURITIES	FMV			6,780,207.	6,780,207.
MUTUAL FUNDS	FMV			4,450,945.	4,450,945.
CORPORATE BONDS	FMV		131,258.		131,258.
TO FORM 990, LINE 54, COL B			131,258.	11,231,152.	11,362,410.

FORM 990	GOVERNMENT SECURITIES	STATEMENT	12	
DESCRIPTION	COST/FMV	U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV'T SECURITIES
GOVERNMENT BONDS	FMV	1,012,119.		1,012,119.
TOTAL TO FORM 990, LINE 54, COL B		1,012,119.		1,012,119.

FORM 990	OTHER INVESTMENTS	STATEMENT	13
DESCRIPTION	VALUATION METHOD	AMOUNT	
PAINTING	MARKET VALUE	42,000.	
CASH SURRENDER VALUE OF INSURANCE	MARKET VALUE	65,631.	
INVESTMENT IN SUBSIDIARY	COST	7,486,453.	
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		7,594,084.	

<u>LENDER'S NAME</u>	<u>TERMS OF REPAYMENT</u>
CORUS BANK, N.A.	MONTHLY, WITH VARIOUS RATES, INTEREST ONLY

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>
02/27/03	12/31/05	1,300,000.	15.00%

<u>SECURITY PROVIDED BY BORROWER</u>	<u>PURPOSE OF LOAN</u>
--------------------------------------	------------------------

RELATIONSHIP OF LENDER

NONE

<u>DESCRIPTION OF CONSIDERATION</u>	<u>FMV OF CONSIDERATION</u>	<u>BALANCE DUE</u>
	0.	1,300,000.
<u>TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B</u>		<u>41,735,000.</u>

<u>FORM 990</u>	<u>OTHER EXPENSES NOT INCLUDED ON FORM 990</u>	<u>STATEMENT 17</u>
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<u>DESCRIPTION</u>	<u>AMOUNT</u>
RENTAL EXPENSE	2,429,701.
LOSS ON DISPOSAL	55,598.
LOSS ON INVESTMENT IN SUBSIDIARY	74,911.
<u>TOTAL TO FORM 990, PART IV-B</u>	<u>2,560,210.</u>

<u>FORM 990</u>	<u>OTHER REVENUE INCLUDED ON FORM 990</u>	<u>STATEMENT 18</u>
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<u>DESCRIPTION</u>	<u>AMOUNT</u>
RENTAL EXPENSES	<2,429,701.>
LOSS ON DISPOSAL	<55,598.>
LOSS ON INVESTMENT IN SUBSIDIARY	<74,911.>
<u>TOTAL TO FORM 990, PART IV-A</u>	<u><2,560,210.></u>

FORM 990

IDENTIFICATION OF RELATED ORGANIZATIONS
PART VI, LINE 80B

STATEMENT 19

<u>NAME OF ORGANIZATION</u>	<u>EXEMPT</u>	<u>NONEXEMPT</u>
THE NAVY LEAGUE FOUNDATION	X	
NAVAL SEA CADET CORPS	X	
NAVY LEAGUE DEVELOPMENT CORPORATION		X
NAVY LEAGUE BUILDING, LLC		X

FORM 990 PART IX - INFORMATION REGARDING TAXABLE SUBSIDIARIES AND DISREGARDED ENTITIES STATEMENT 20

NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

NAVY LEAGUE BUILDING, LLC

ADDRESS

2300 WILSON BOULEVARD, ARLINGTON, VA 22201

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
54-2061880	100.00%	TO OWN, OPERATE, LEASE, SELL, AND/OR MANAGE		

NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

ADDRESS

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
		COMMERICAL REAL ESTATE.	723,416.	47,833,323.

NAME OF CORPORATION, PARTNERSHIP OR DISREGARDED ENTITY

NAVY LEAGUE DEVELOPMENT CORPORATION

ADDRESS

2300 WILSON BOULEVARD, ARLINGTON, VA 22201

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
20-2522528	100.00%	WHOLLY OWNED SUBSIDIARY OF NAVY LEAGUE BUILDING, LLC	57,161.	7,496,737.

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
 - If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)

Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization NAVY LEAGUE OF THE UNITED STATES	Employer identification number 53-0116710
	Number, street, and room or suite no. If a P.O. box, see instructions. 2300 WILSON BOULEVARD, NO. 1000	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ARLINGTON, VA 22201-3308	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ **THE LEAGUE**
Telephone No. ▶ **703-528-1775** FAX No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the **whole group**, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

- I request an automatic 3-month (6-months for a **Form 990-T corporation**) extension of time until **AUGUST 15, 2006** to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 - ▶ calendar year **2005** or
 - ▶ tax year beginning _____, and ending _____
- If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____
- b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ _____
- c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ **N/A**

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.