		** PUBLIC DISCLOSURE COPY	* *											
		Extended to May 15, 2025												
	-	Deturn of Organization Exampt From	Income Tax	OMB No. 1545-0047										
For	m	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (e		2023										
_		Do not enter social security numbers on this form as it may		Open to Public										
Dep Inter	Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2023 calendar year, or tax year beginning JUL 1, 2023 and ending JUN 30, 2024													
Α	For t	he 2023 calendar year, or tax year beginning $JUL 1$, 2023 and ending	<u>J</u> UN 30, 2024											
B Check if applicable: C Name of organization D Employer identification														
	cha			1										
	cha	Doing business as	52-0805473	L										
	retu	Number and street (or P.U. box if mail is not delivered to street address) Room/sul		7171										
	⊥retu terr		(202) 827	<u>-/1/1</u> 6,466,632.										
	ate Am	City or town, state or province, country, and ZIP or foreign postal code Mashington, DC 20005-5800	G Gross receipts \$											
	lretu Apr	F Name and address of principal officer: Chris Ostrander	H(a) Is this a group retu	rn Yes X No										
	tior	same as C above	TOT SUDORDINATES?											
<u> </u>	Toy		27 If "No," attach a lis											
	Web		H(c) Group exemption r											
			ar of formation: 1963 M S											
	art			allo of logal domining.										
_	1	Briefly describe the organization's mission or most significant activities: To promot	ce awareness,											
uce		understanding, advancement and application of	ology.											
srna	2	Check this box if the organization discontinued its operations or disposed of mo												
0V6	3	Number of voting members of the governing body (Part VI, line 1a)	11											
Activities & Governance	4	Number of independent voting members of the governing body (Part VI, line 1b)		11										
ies	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)		9										
ivit	6	Total number of volunteers (estimate if necessary)		165										
Act		a Total unrelated business revenue from Part VIII, column (C), line 12		5,192.										
		b Net unrelated business taxable income from Form 990-T, Part I, line 11		0.										
			Prior Year 112,220.	Current Year 2,214,027.										
Iue	8	Contributions and grants (Part VIII, line 1h)	1,920,726.	2,678,719.										
Revenue	9	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)	108,319.	153,443.										
Re	10		168,303.	320,913.										
	12	E CONTRACTOR E CONTRACT	2,309,568.	5,367,102.										
	13		61,356.	401,428.										
		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.										
ŝ			701,610.	1,292,292.										
Expenses	16	a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.										
be		b Total fundraising expenses (Part IX, column (D), line 25) 0 •												
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,812,520.	3,003,637.										
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,575,486.	4,697,357.										
	19	Revenue less expenses. Subtract line 18 from line 12	-265,918.	669,745.										
Net Assets or Fund Balances			Beginning of Current Year	End of Year										
sset	20	Total assets (Part X, line 16)	7,350,561.	8,933,159.										
et A:	21	Total liabilities (Part X, line 26)	516,010.	845,456.										
		Net assets or fund balances. Subtract line 21 from line 20	6,834,551.	8,087,703.										
	art	Signature Block		and a data and ball of 191										

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.

	$\wedge \wedge$											
Sign	Signature of officer (fris Ostrande	Date										
Here	Chris Ostrander, Chief Executive Office	er 1/23/25										
	Type or print name and title											
	Print/Type preparer's name Preparer's signature	Check PTIN										
Paid	Lori A. Collingsworth	01/23/25 ^{ff} P00639819										
Preparer	Firm's name Rogers & Company PILC	Firm's EIN 58-2676261										
Use Only	Firm's address 8300 Boone Boulevard, Suite 600)										
	Vienna, VA 22182	Phone no. (703) 893-0300										
May the I	RS discuss this return with the preparer shown above? See instructions	X Yes No										
LHA For	LHA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)											

Form	990 (2023) Marine Technology Society, Inc. 52-0805471 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Facilitate a broader understanding of the relevance of marine
	technology to wider global issues by enhancing the dissemination of
	marine technology information. Promote and improve marine technology and related educational programs.
	Did the organization undertake any significant program services during the year which were not listed on the
2	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
U	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 1,449,677. including grants of \$ 205,583.) (Revenue \$ 2,196,583.
	Conferences and Workshops: Annual regional, local, and international
	conferences on matters relating to the ocean and marine technology.
	Additionally, MTS offered several free-of-charge webinars during the
	fiscal year.
	MTS supports local Sections, which focus on events and programs unique to their specific geographic area in the United States and
	internationally.
	In addition, MTS operates Professional Committees ("Committees")
	representing technical interest groups that facilitate the exchange and
	transfer of technical information among professionals from academia,
	government, and industry.
	Continued in Schedule O
4b	(Code:) (Expenses \$ 1,488,444. including grants of \$ 147,855.) (Revenue \$ 98,904.
	Education programming: Other educational programs supporting the
	organization's mission.
4c	(Code:) (Expenses \$ 341,806. including grants of \$ 47,990.) (Revenue \$ 214,344.
	MATE ROV Competition: The MATE ROV Competition is an underwater
	robotics (aka remotely operated vehicle or ROV) challenge that engages
	a global community of learners each year.
	The MATE ROV Competition challenges students to apply math,
	electronics, engineering, and physics toward solving problems based on
	real-world workplace scenarios. The competition tasks students from
	K-12, community colleges and universities within five levels (EXPLORER,
	PIONEER, RANGER, NAVIGATOR, and SCOUT) to design, build and test
	underwater robots to complete specified, simulated real-world missions.
	Continued in Schedule O
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 661,082. including grants of \$) (Revenue \$ 418,990.)
4e	Total program service expenses 3,941,009.
	Form 990 (2023

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Form 990 (2023) Marine Technology Society, Inc. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
-	If "Yes," complete Schedule A	1	X X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Δ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	~		x
4	public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i> Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		
7	during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
-	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	-		v
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		x
44	or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,	10		А
11	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? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	X
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		х	
100	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i>	11f	А	
IZd	Schedule D. Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	IZU		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i>	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		- 23
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
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		X

			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? If "Yes," complete		v	
•••	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			x
	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
Ь	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2 4 0		
254	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	200		
~	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
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		X
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
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f			v
	"Yes," complete Schedule L, Part IV	28c		X X
29 00	Did the organization receive more than \$25,000 in noncash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		x
31	contributions? If "Yes," complete Schedule M	30 31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete</i>	31		
52	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	02		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		v	
Par	Note: All Form 990 filers are required to complete Schedule 0 t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
rai				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1-	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 31		162	NU
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
•	(gambling) winnings to prize winners?	1c	х	

Form 990 (2023)

<u>Marine Technology Society</u>, Inc. Statements Regarding Other IRS Filings and Tax Compliance (continued)

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 9												
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х										
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х										
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	Х										
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 Japan, India												
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).												
5a													
b	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?												
	c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?												
6a	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		X									
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).	_		v									
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									
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b											
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		v									
	to file Form 8282?	7c		Х									
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	_		v									
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X X									
t	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f											
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g											
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h											
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8											
٥	sponsoring organization have excess business holdings at any time during the year?												
э а	 9 Sponsoring organizations maintaining donor advised funds. Pid the appropriate arranization make any tayable distributions under section 40662. 												
b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b											
10	Section 501(c)(7) organizations. Enter:	55											
а	Initiation fees and capital contributions included on Part VIII, line 12 10a												
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b												
11	Section 501(c)(12) organizations. Enter:												
	Gross income from members or shareholders												
b	Gross income from other sources. (Do not net amounts due or paid to other sources against												
	amounts due or received from them.)												
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a											
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year												
13	Section 501(c)(29) qualified nonprofit health insurance issuers.												
а	Is the organization licensed to issue qualified health plans in more than one state?	13a											
	Note: See the instructions for additional information the organization must report on Schedule O.												
b	Enter the amount of reserves the organization is required to maintain by the states in which the												
	organization is licensed to issue qualified health plans 13b												
	Enter the amount of reserves on hand 13c												
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X									
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b											
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			37									
	excess parachute payment(s) during the year?	15		X									
	If "Yes," see the instructions and file Form 4720, Schedule N.			v									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X									
	If "Yes," complete Form 4720, Schedule O.												
17	Section 501(c)(21) organizations. 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											
	If "Yes," complete Form 6069.												

Form 990	(2023)
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Marine Technology Society, 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			X									
Sec	tion A. Governing Body and Management												
			Yes	No									
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 11												
	If there are material differences in voting rights among members of the governing body, or if the governing												
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.												
b	Enter the number of voting members included on line 1a, above, who are independent 1b 11												
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other												
	officer, director, trustee, or key employee?	2		Х									
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision												
	of officers, directors, trustees, or key employees to a management company or other person?	3		х									
4													
5													
6	Did the organization have members or stockholders?	5 6	Х										
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or												
	more members of the governing body?	7a	х										
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or												
	persons other than the governing body?	7b		х									
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:												
	The governing body?	8a	Х										
b	Each committee with authority to act on behalf of the governing body?	8b	Х										
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the												
-	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х									
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)												
	(·····, ····, ····, ····, ····, ····, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ···, ··, ···, ··, ···, ···, ···, ···, ··, ···, ··, ··, ···, ··, ··, ··, ···, ··, ··, ··, ··, ··, ···, ··, ··, ···, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··, ··,		Yes	No									
10a	Did the organization have local chapters, branches, or affiliates?	10a	X										
	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	х										
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х										
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.												
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х										
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х										
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe												
	on Schedule O how this was done	12c	х										
13	Did the organization have a written whistleblower policy?	13	Х										
14	Did the organization have a written document retention and destruction policy?	14	Х										
15	Did the process for determining compensation of the following persons include a review and approval by independent												
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?												
а	The organization's CEO, Executive Director, or top management official	15a	Х										
	Other officers or key employees of the organization	15b	Х										
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.												
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a												
	taxable entity during the year?	16a		Х									
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation												
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's												
	exempt status with respect to such arrangements?	16b											
Sec	tion C. Disclosure												
17	List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, FL, GA, HI, IL, KS, KY	, MD	, MA	,MI									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A, if applicable), 990, and 990 T (section 501(c)(3												
	for public inspection. Indicate how you made these available. Check all that apply.												
	X Own website Another's website X Upon request Other (explain on Schedule O)												
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	d finar	ncial										
	statements available to the public during the tax year.												
20	State the name, address, and telephone number of the person who possesses the organization's books and records												
	The Society - (202) 827-7171												
	One Thomas Circle, Suite 700, Washington, DC 20005-5800												

See Schedule O for full list of states

Part VII	Со	mpensation of C	Officers,	Directors,	Trustees,	Key E	Employees,	Highest	Compensa	atec
	Em	ployees, and Ind	depende	ent Contrac	ctors					

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.

(A)	(B)	B) (C)						(D)	(E)	(F)
Name and title	Average	Position (do not check more than one						Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	is bot pr/trus	h an	compensation	compensation	amount of
	week	<u> </u>				1		from	from related	other
	(list any hours for	Individual trustee or director				-		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	l trust	ıal tru		oyee	ompe		1099-NEC)		and related
	below	vidual	Institutional trustee	Ser	emplo	Highest compensated employee	Former			organizations
	line)	Indi	Inst	Officer	Key	Higher	For			
(1) Christopher Ostrander	40.00							010 140	0	20 100
Chief Executive Officer	40.00			X				210,143.	0.	32,170.
(2) Kristina Norman	40.00							100 077	0	
Sr Director Operations and Events	1 00					X		126,877.	0.	6,655.
(3) Justin Manley	1.00			37				0	0	0
President	1 00	X		X				0.	0.	0.
(4) Zdenka Willis	1.00	v		x				0.	0.	0
Past President	1.00	X		<u>^</u>				0.	0.	0.
(5) Susan Hunt President Elect	1.00	x		x				0.	0.	0.
(6) Jim Hanlon	1.00	^		^				0.	0.	0.
VP of Research/Industry & Technology	1.00	x		x				0.	0.	0.
(7) Steve Hall (began $10/1/23$)	1.00							0.	•	0.
VP of Communications	1.00	x		x				0.	0.	0.
(8) Richard (Dick) Crout	1.00								0.	0.
VP of Section Affairs		x		x				0.	0.	0.
(9) Debbi Kill	1.00									
VP of Budget & Finance and Treasurer		x		x				0.	0.	0.
(10) Jerry Miller	1.00									
VP of Government and Public Affairs		x		x				0.	0.	0.
(11) Josh Kohut	1.00									
VP of Education		X		X				0.	0.	0.
(12) Katharine Weathers	1.00									
VP of ECOP		X		Х				0.	0.	0.
(13) David Golden	1.00									
VP of MATE		Х		Х				0.	0.	0.
(14) Liesl Hotaling (ended 7/31/23)	1.00									
VP of Publications & Communications		Х		Х				0.	0.	0.
		-								
		<u> </u>								
		-								

Form 990 (2023)

	990 (2023) Marine Te									52-08	<u>05</u>	471	Pa	ge 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (C) (D) (E) (E)														
	(A) Name and title	bours por				(do not check more than one defined by the second sec						Est am	(F) imated ount o other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS 1099-NEC)		frc orga and	pensation the nization relate nization	on d
						-								
											\square			
	Subtotal Total from continuation sheets to Part VI								337,020.		0.		8,82	0.
 2	Total (add lines 1b and 1c) Total number of individuals (including but n								337,020.	000 of reportable	0.	38	3,82	25.
_	compensation from the organization			note	, a a		5,							2
3	Did the organization list any former officer,	,	,		•	,	,	0	, , ,	,			Yes	No v
4	line 1a? <i>If "Yes," complete Schedule J for s</i> For any individual listed on line 1a, is the su	im of reportab	le co	omp	ensa	atior	n and	d otl		the organization		3	v	X
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a	accrue comper	nsat	ion f	rom	any	unr	elat	ed organization or indiv	idual for services		4	x	v
Sec	rendered to the organization? If "Yes," com tion B. Independent Contractors	plete Schedule	eJf	or si	uch	pers	son .					5		X
1	Complete this table for your five highest co the organization. Report compensation for										pensa	ation fr	om	
	(A) Name and business			ONE					(B) Description of s		C	(C) ompen		
2	Total number of independent contractors (i \$100,000 of compensation from the organized strength of the organized strength		ot lii	mite	d to		se lis)	stec	above) who received n	nore than				

1 a						(A)	L	(C)	(D)
1 a						Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue exclud from tax unde sections 512 - 5
	Federated campaigns		1 a						
	Membership dues								
с	Fundraising events								
	Related organizations								
е	Government grants (contr	ributi	ons) 1e		1,169,281.				
f	All other contributions, gifts,	grant	s, and						
	similar amounts not included	abov	e 1f		1,044,746.				
g	Noncash contributions included in	lines	1a-1f 1g	\$	22,906.				
h	Total. Add lines 1a-1f					2,214,027.			
					Business Code				
_			la		900099	2,196,583.	2,196,583.		
b	MATE ROV competitio	n			900099	214,344.	214,344.		
с	Membership dues				900099	139,501.	139,501.		
d	Consulting revenue		900099	98,044.	98,044.				
е	Publications and Journals		513120	25,055.	25,055.				
f	All other program service revenue			541800	5,192.		5,192.		
g	Total. Add lines 2a-2f					2,678,719.			
3 Investment income (including dividends, interest, and									
						170,432.			170,4
4	Income from investment of	of tax	-exempt b	ond p	proceeds				
5	Royalties			<u></u>		12,537.			12,5
			(i) Rea		(ii) Personal				
6 a	Gross rents	6a							
b	Less: rental expenses \dots	6b							
	. ,	6c							
)							
7 a	Gross amount from sales of				(ii) Other				
	assets other than inventory	7a	678,	877.					
b									
	and sales expenses								
				·		-16,989.			-16,9
8 a		ng eve	ents (not						
	including \$		of						
	-								
				8a					
					128,081.				
			-			50,274.			50,2
9 a									
				9a					
		•	U U	s					
0 a									
b	Less: cost of goods sold			10b	275,583.				
с	Net income or (loss) from	sales	s of invento	ory		250,102.	250,102.		
					Business Code				
1 a	Other revenue				900099	8,000.			8,0
b									
с									
d	All other revenue								
е	Total. Add lines 11a-11d	<u></u> .		<u></u>		8,000.			
	gh 2 2 2 2 3 4 5 6 b 7 0 2 3 4 5 6 b 7 0 2 3 4 5 6 b C 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	similar amounts not included 9 Noncash contributions included in h Total. Add lines 1a-1f 2 a Conferences and mee b MATE ROV competitio c Membership dues d Consulting revenue e Publications and Jo f All other program service g Total. Add lines 2a-2f 3 Investment income (included) other similar amounts) 4 Income from investment of 5 Royalties 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net gain or (loss) c Gain or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) a Gross income from fundraisi including \$ c ontributions reported on Part IV, line 18 b Less: direct expenses c Net income or (loss) from 9 a Gross sales of inventory, and allowances b Less: cost of goods sold c Net income or (loss) from 1 a Other revenue b Less: cost of loss) from 1 a Other revenue e Total. Add lines 11a-11d	similar amounts not included abov 9 Noncash contributions included in lines h Total. Add lines 1a-1f 2 a Conferences and meeting b MATE ROV competition c Membership dues d Consulting revenue e Publications and Journa f All other program service rever g Total. Add lines 2a-2f	similar amounts not included above 1 g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f 2 a Conferences and meetings b MATE ROV competition c Membership dues d Consulting revenue e Publications and Journals f All other program service revenue g Total. Add lines 2a-2f 3 Investment income (including dividends, other similar amounts) 4 Income from investment of tax-exempt be 5 Royalties 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) 7 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising eve g Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from gaming activities 0 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventor 1 a Other revenue b C d All other revenue e Total. Add lines 11a-11d	similar amounts not included above 1f 1g \$ Noncash contributions included in lines 1a-1f 1g \$ Noncash contributions and Journals f All other program service revenue g Total. Add lines 2a-2f	similar amounts not included above If 1,044,746. g Noncash contributions included in lines 1a-1f Ig 22,906. h Total. Add lines 1a-1f Business Code 2 a Conferences and meetings 900099 b MATE ROV competition 900099 c Membership dues 900099 d Consulting revenue 900099 e Publications and Journals 513120 f All other program service revenue 541800 g Total. Add lines 2a-2f 3 a Investment income (including dividends, interest, and other similar amounts) 4 4 Income from investment of tax-exempt bond proceeds 5 F Royalties 6b - d Rest amounts) 6b - d Less: rental expenses 6c - d Net rental income or (loss) 7a 678,877. b Less: cost or other basis and sales expenses 6f - a Gross income from fundraising events (not including \$	similar amounts not included above If 1,044,746. Noncesh contributions included in lines 1a-if 2,214,027. 2 a Conferences and meetings 900099 2 a Conferences and meetings 900099 2 mathematical diagram 900099 2,196,583. b MATE ROV competition 900099 2,196,583. c Membership dues 900099 2,196,583. d Consulting revenue 900099 33,501. d Consulting revenue 541800 5,192. g Total. Add lines 2a-2f 2,678,719. 3 3 Investment income (including dividends, interest, and other similar amounts) 170,432. 4 Income from investment of tax-exempt bond proceeds 12,537. 6 a Gross amount from sales of assets other than inventory 5 65 a Gross amount from sales of assets other than inventory 7 6 65,866. -16,989. d Net gain or (loss)	similar amounts not included above 11 1,044,746. g Noncesh contributions included in lines to till 12,2,906. A Total. Add lines 1a.11 900099 2,196,583. b MATE RXV competition 900099 214,344. 214,344. c Mare RXV competition 900099 139,501. 139,501. d Consulting revenue 900099 98,044. 98,044. g Notestion and Journals 51320 22,678,719. 31320 g Total. Add lines 2a.21 541800 5,192. 5 g Total. Add lines 2a.21 2,678,719. 310 312,012,023. 312,012,023. g Total. Add lines 2a.21 6 900099 12,537. 312,012,023. g Total. Add lines 2a.21 6 900099 12,537. 312,012,023. g Total. Add lines 0 (oss) 6 900099 12,537. 312,012,023. g ross rents 6 6 6 6 6 g asset other than inventory 6 6 6 6 6 g asset other than inventory 6 6 6 6 6 6 6 6 <td>similar amounts not included above</td>	similar amounts not included above

Form 99 Part VIII

90 (20	023)	Marine	Technology	Society,	Inc.
VIII		Statement of Revenue			

Marine Technology Society, Inc. 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).

Do	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
_	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic	401 400	401 400		
_	individuals. See Part IV, line 22	401,428.	401,428.		
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,		010 100		
	trustees, and key employees	292,680.	218,136.	74,544.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	=== (1)			
7	Other salaries and wages	753,618.	561,674.	191,944.	
8	Pension plan accruals and contributions (include		~~		
	section 401(k) and 403(b) employer contributions)	40,474.	30,165.	10,309.	
9	Other employee benefits	121,659.	90,673.	30,986.	
10	Payroll taxes	83,861.	62,502.	21,359.	
11	Fees for services (nonemployees):				
а	Management				
b	Legal	27,096.		27,096.	
с	Accounting	48,389.		48,389.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	14,591.		14,591.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	763,412.	721,377.	42,035.	
12	Advertising and promotion	3,091.	3,091.		
13	Office expenses	116,924.	72,648.	44,276.	
14	Information technology	95,345.	36,071.	59,274.	
15	Royalties				
16	Occupancy	11,170.		11,170.	
17	Travel	53,621.	10,093.	43,528.	
18	Payments of travel or entertainment expenses				
-	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,771,897.	1,700,204.	71,693.	
20	Interest			· · ·	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	11,996.	629.	11,367.	
23	Insurance	54,122.	335.	53,787.	
24	Other expenses. Itemize expenses not covered	- , •			
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	MTS Journal	31,983.	31,983.		
b		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
c c					
d					
u e	All other expenses				
е 25	Total functional expenses. Add lines 1 through 24e	4,697,357.	3,941,009.	756,348.	0
26	Joint costs. Complete this line only if the organization	_,,	-,,		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

Form 990 (2023)		Technology	Society,	Inc.
Part X Balance Shee	t			

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		Check if Schedule O contains a response or no	te to an	/ line in this Part X			
		I		,	(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			1,530,427.	2	1,632,288.
	3	Pledges and grants receivable, net	0.	3	333,581.		
	4	Accounts receivable, net			166,182.	4	234,388.
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs	stantial c	ontributor, or 35%			
		controlled entity or family member of any of the	ese perso	ons		5	
	6	Loans and other receivables from other disqua	lified per	sons (as defined			
		under section 4958(f)(1)), and persons describe	ed in sec	tion 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net		Г		7	
Assets	8	Inventories for sale or use			0.	8	116,950.
Ä	9	Prepaid expenses and deferred charges			186,713.	9	131,598.
	10a	Land, buildings, and equipment: cost or other	1 1				
		basis. Complete Part VI of Schedule D	10a	27,240.			
	b	Less: accumulated depreciation		21,722.	3,103.	10c	5,518.
	11	Investments - publicly traded securities			5,456,390.	11	5,518. 6,478,836.
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets	7,746.	14	0.		
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equ			7,350,561.	16	8,933,159.
	17	Accounts payable and accrued expenses	181,869.	17	565,927.		
	18	Grants payable				18	
	19	Deferred revenue			92,639.	19	113,555.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
S	22	Loans and other payables to any current or for	mer offic	er, director,			
Liabilities		trustee, key employee, creator or founder, subs	stantial c	ontributor, or 35%			
abi		controlled entity or family member of any of the		22			
	23	Secured mortgages and notes payable to unrel	lated thi	d parties		23	
	24	Unsecured notes and loans payable to unrelate	ed third p	parties		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on line	s 17-24)	. Complete Part X			
		of Schedule D			241,502.	25	165,974.
	26	Total liabilities. Add lines 17 through 25			516,010.	26	845,456.
ŝ		Organizations that follow FASB ASC 958, ch	eck her	e X			
ice.		and complete lines 27, 28, 32, and 33.					
alar	27	Net assets without donor restrictions			6,776,191.	27	7,974,558. 113,145.
ΪB	28	Net assets with donor restrictions			58,360.	28	113,145.
un		Organizations that do not follow FASB ASC 9					
г		and complete lines 29 through 33.					
tso	29	Capital stock or trust principal, or current funds				29	
sse	30	Paid-in or capital surplus, or land, building, or e	quipmer	nt fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in				31	
Ne	32	Total net assets or fund balances			6,834,551.	32	8,087,703.
	33	Total liabilities and net assets/fund balances .			7,350,561.	33	8,933,159. Form 990 (2023)

Form **990** (2023)

Form	Marine Technology Society, Inc.	52-08	05471	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,36	7,1	02.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,69		
3	Revenue less expenses. Subtract line 2 from line 1	3			45.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	6,83		
5	Net unrealized gains (losses) on investments	5	58	3,4	07.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	8,08	7,7	03.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
			_	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	
				000	

Form **990** (2023)

Public

SCHED	OULE A		OMB No. 1545-0047							
(Form 99	0)	Public Charity Status and Public Support	つりつつ							
·	,	Complete if the organization is a section 501(c)(3) organization or a section	Ζυζυ							
Department o	f the Treasury	4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.		Open to Public						
Internal Rever		Go to www.irs.gov/Form990 for instructions and the latest information.		Inspection						
Name of t	he organizati	on	Employer	identification number						
		Marine Technology Society, Inc.		2-0805471						
Part I	Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.									
The organ	ization is not a	private foundation because it is: (For lines 1 through 12, check only one box.)								
1	A church, co	nvention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2	A school des	cribed 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 res	earch organization operated in conjunction with a hospital described in section 170(b)(1) (A	()(iii). Enter t	the hospital's name,						
	city, and stat									
5 📖	0	on operated for the benefit of a college or university owned or operated by a governmental	unit describ	ed in						
		(b)(1)(A)(iv). (Complete Part II.)								
6		te, or local government or governmental unit described in section 170(b)(1)(A)(v).								
7 📖	0	on that normally receives a substantial part of its support from a governmental unit or from	the general	public described in						
•	-	b)(1)(A)(vi). (Complete Part II.)								
	-	trust described in section 170(b)(1)(A)(vi). (Complete Part II.)								
9	0	al research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a		•						
		or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state o	i the college	eor						
10 X	university:	on that normally receives (1) more than 33 1/3% of its support from contributions, members	hin foos ar	d gross receipts from						
	•	ted to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of	•	•						
		inrelated business taxable income (less section 511 tax) from businesses acquired by the o								
		509(a)(2). (Complete Part III.)	rgamzation							
11		on organized and operated exclusively to test for public safety. See section 509(a)(4).								
12		on organized and operated exclusively for the benefit of, to perform the functions of, or to c	arry out the	purposes of one or						
	-	supported organizations described in section 509(a)(1) or section 509(a)(2). See section	-							
	lines 12a thro	ugh 12d that describes the type of supporting organization and complete lines 12e, 12f, ar	d 12g.							
a	Type I. A si	upporting organization operated, supervised, or controlled by its supported organization(s),	typically by	giving						
	the suppor	ted organization(s) the power to regularly appoint or elect a majority of the directors or trust	ees of the s	upporting						
	organizatio	n. You must complete Part IV, Sections A and B.								
b	Type II. A s	ype II. A supporting organization supervised or controlled in connection with its supported organization(s), by having								
	control or n	nanagement of the supporting organization vested in the same persons that control or man	age the sup	ported						
	organizatio	n(s). You must complete Part IV, Sections A and C.								
c 🗆	Type III fur	nctionally integrated. A supporting organization operated in connection with, and function	ally integrate	ed with,						
	its support	ed organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.								
d 🗌		n-functionally integrated. A supporting organization operated in connection with its support	-							
	that is not functionally integrated. The organization generally must satisfy a distribution requirement and an atter									

that is not functionally integrated. Th 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 II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions)) Total

	A (Form 990)) 2023
Part II	Suppor	t Sc

Marine Technology Society, Inc.

L	Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
	(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization
	felle to successful and the teste listed below, where a constant Devi III (

fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")									
2	Tax revenues levied for the organ-									
	ization's benefit and either paid to									
	or expended on its behalf									
3	The value of services or facilities									
	furnished by a governmental unit to									
	the organization without charge									
4	Total. Add lines 1 through 3									
	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.									
Sec	ction B. Total Support				-					
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total			
7	Amounts from line 4									
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties,									
	and income from similar sources \dots									
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 activities,	, etc. (see instructi	ions)			12				
13	First 5 years. If the Form 990 is for the	ne organization's fi	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3)				
	organization, check this box and stop									
	ction C. Computation of Publ		-							
14	Public support percentage for 2023 (14	%			
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	%			
16 a	33 1/3% support test - 2023. If the o									
	stop here. The organization qualifies									
b	33 1/3% support test - 2022. If the o	-								
	and stop here. The organization qual									
17a	10% -facts-and-circumstances tes									
	and if the organization meets the fact			-	-	VI how the organiz	zation			
	meets the facts-and-circumstances te	•	•		•					
b	10% -facts-and-circumstances tes	-	-				10% or			
	more, and if the organization meets the				• •					
	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization									
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a					
						Schedule A	(Form 990) 2023			

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.)

Section A Public Support

Se	ction A. Public Support								
Cale	endar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	4,967.	51,555.	296,796.	112,220.	2,214,027.	2,679,565.		
2	Gross receipts from admissions,								
	merchandise sold or services per-								
	formed, or facilities furnished in any activity that is related to the								
	organization's tax-exempt purpose	1,202,369.	232,808.	1,407,765.	1,917,303.	3,199,212.	7,959,457.		
3	Gross receipts from activities that								
	are not an unrelated trade or bus-								
	iness under section 513	142,632.	15,505.	140,027.	243,128.	178,355.	719,647.		
4	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
5	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge \dots								
6	Total. Add lines 1 through 5	1,349,968.	299,868.	1,844,588.	2,272,651.	5,591,594.	11,358,669.		
7a	Amounts included on lines 1, 2, and								
	3 received from disqualified persons						0.		
k	Amounts included on lines 2 and 3 received								
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the								
	amount on line 13 for the year					19,218.	19,218.		
c	Add lines 7a and 7b					19,218.	19,218.		
	Public support. (Subtract line 7c from line 6.)						11,339,451.		
Se	ction B. Total Support								
Cale	endar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total		
9	Amounts from line 6	1,349,968.	299,868.	1,844,588.	2,272,651.	5,591,594.	11,358,669.		
10a	Gross income from interest,								
	dividends, payments received on securities loans, rents, royalties,								
	and income from similar sources	155,320.	163,995.	94,214.	116,989.	182,969.	713,487.		
k	Unrelated business taxable income								
	(less section 511 taxes) from businesses								
	acquired after June 30, 1975								
	Add lines 10a and 10b	155,320.	163,995.	94,214.	116,989.	182,969.	713,487.		
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			0 501			64 66 7		
	assets (Explain in Part VI.)	3,525.	1.6.0	8,721.	41,421.	8,000.	61,667.		
13	Total support. (Add lines 9, 10c, 11, and 12.)	1,508,813.	463,863.	1,947,523.	2,431,061.	5,782,563.	12,133,823.		
14	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3) organizati	on,		
_	check this box and stop here								
-	ction C. Computation of Publ								
	Public support percentage for 2023 (I			column (f))		15	93.45 %		
	Public support percentage from 2022					16	92.57 %		
See	ction D. Computation of Inves	stment Incom	e Percentage				<u> </u>		
17	Investment income percentage for 20	23 (line 10c, colun	nn (f), divided by li	ne 13, column (f))		17	5.88 %		
18	Investment income percentage from					18	6.80 %		
19 a	a 33 1/3% support tests - 2023. If the								
	more than 33 1/3%, check this box a						X		
k	o 33 1/3% support tests - 2022. If the	•							
	line 18 is not more than 33 1/3%, che								
20	20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions								

Marine Technology Society, Inc. Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

10b Schedule A (Form 990) 2023

	52-080547	1 _{Pa}	age 5
Part IV Supporting Organizations (continued)			
		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
11c below, the governing body of a supported organization?	11a		
b A family member of a person described on line 11a above?	11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
detail in Part VI.	11c		
Section B. Type I Supporting Organizations			
		Yes	No

directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	
 2 Did the organization operate for the benefit of any supported organization other than the supported 	

organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C.	туре п	Supporting	Organizations	

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			

	Such D. An Type in Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions). 1
- а The organization satisfied the Activities Test. Complete line 2 below.
- The organization is the parent of each of its supported organizations. Complete line 3 below. b
- The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions) С
- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes. how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Yes No

1

2

1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on	Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	ust complete	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	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	Distributable Amount. 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-function	ally integrat	ed Type III supporting or	anization (see

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2023

Schedule A	4 (Form 990)	2023	
			_

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continu	ied)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	З	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	Э		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2023	าร	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2019				
b	Excess from 2020				
с	Excess from 2021				
d	Excess from 2022				
е	Excess from 2023				

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023 Marine Technology Society, Inc. 52-0805471 Page 8
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 A, Part III, Line 12, Explanation for Other Income:
CC Rewards/ Other Misc. Receipts
2019 Amount: \$ 3,525.
2020 Amount: \$ 0.
2021 Amount: \$ 8,721.
2022 Amount: \$ 41,421.
2023 Amount: \$ 8,000.

** PUBLIC DISCLOSURE COPY **

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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



Employer identification number

	Marine Technology Society, Inc.	52-0805471
Organization type (che	sck one):	
Filers of:	Section:	
Form 990 or 990-EZ	\fbox 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* religious is received *nonexclusively* religious.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2023)

	B (Form 990) (2023)		Pag
Name of o	rganization		Employer identification number
Marin	e Technology Society, Inc.		52-0805471
Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a)	(b)	(c) Total contributior	(d) Type of contribution
<u>No.</u>	Name, address, and ZIP + 4	\$742,1	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Is Type of contribution
2		\$623,7	71. Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Type of contribution
3		\$427,0	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Is Type of contribution
4		\$100,0	00. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Is Type of contribution
5		\$75,0	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Is Type of contribution
<u>6</u>		\$ 55,0	Person X Payroll

noncash contributions.) Schedule B (Form 990) (2023)

(Complete Part II for

22

Schedule B	(Form	990)	(2023)
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Marine Technology Society, Inc.

Name of organization

Part I

(a)

No.

(a)

No.

(a)

No.

(a)

No.

10

(a) No.

11

(a)

No.

12

9

8

7

52-0805471

(c)

Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll 15,000. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) Type of contribution Name, address, and ZIP + 4 **Total contributions** Person Payroll 15,000. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroll 10,000. Noncash \$ (Complete Part II for noncash contributions.) (c) (b) **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroll 8,025. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll 6,378. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Pavroll 6,110. Noncash \$ (Complete Part II for noncash contributions.) Schedule B (Form 990) (2023) 23

(d)

(d)

(d)

(d)

(d)

(d)

X

X

X

X

X

X

Page 2

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(b)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
10	Waterbottles		
10			
		\$8,025.	06/30/24
(a)		(0)	
No. from	(b)	(c) FMV (or estimate)	(d)
Part I	Description of noncash property given	(See instructions.)	Date received
	Products/Prizes		
11			
		\$6,378.	06/30/24
(a)			
No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
	Cable & shipping costs		
12			
		\$ 6,110.	04/01/24
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
Part I			
		\$	
(a)		(c)	
No. from	(b)	(C) FMV (or estimate)	(d) Dete received
Part I	Description of noncash property given	(See instructions.)	Date received
		\$	
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
Part I			
		¢	
		\$	

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

Schedule B (Form 990) (2023)

Employer identification number

52-0805471

Schedule B (Form 990) (2023)

Marine Technology Society, Inc.

Name of organization

Part II

Schedule	B (Form 990) (2023)			Page 4						
Name of c	organization		Employer ide	entification number						
Marin	e Technology Society, I	nc.	52-08	05471						
Part III		ions to organizations described in se	ction 501(c)(7), (8), or (10) that total more							
	Use duplicate copies of Part III if additional	space is needed.								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how	v gift is held						
		(e) Transfer of gift								
	Transferee's name, address, a		Relationship of transferor to tra	nsferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how	v gift is held						
			_							
			<u> </u>							
	(e) Transfer of gift									
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to tra	nsferee						
(a) No.										
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of hov	v giπ is neid						
		(e) Transfer of gift								
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to tra	nsferee						
(a) No. from										
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how	v gift is held						
		(e) Transfer of gift								
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to tra	nsferee						

SCHEDULE D)
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(Form	990)
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Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.



Department of the Treasury Internal Revenue Service Name of the organization

Marine Technology Society, Inc. 52-080547 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.Complete if the

Employer identification number 52-0805471

	organization answered "Yes" on Form 990, Part IV, lin	ne 6.		
		(a) Donor advised	funds (b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in		l in donor advised fun	lds
	are the organization's property, subject to the organization's	exclusive legal control?		Yes 🗌 N
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor of			-
	impermissible private benefit?		· ·	
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes"	on Form 990, Part IV,	, line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).		
	Preservation of land for public use (for example, recrea	ation or education)	Preservation of a histo	prically important land area
	Protection of natural habitat	L F	Preservation of a certi	fied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribut	ion in the form of a co	
	day of the tax year.			Held at the End of the Tax Yes
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
с	Number of conservation easements on a certified historic str	ructure included on line 2a		2c
d	Number of conservation easements included on line 2c acqu	uired after July 25, 2006, ar	nd not	
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or te	rminated by the organ	nization during the tax
	year			
4	Number of states where property subject to conservation ea	sement is located		
5	Does the organization have a written policy regarding the per	riodic monitoring, inspectic	on, handling of	
	violations, and enforcement of the conservation easements i	t holds?		Yes 📖 N
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and	enforcing conservation	on easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enfo	rcing conservation ea	asements during the year
-				
8	Does each conservation easement reported on line 2d above	•		
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservati		-	
	balance sheet, and include, if applicable, the text of the footr	note to the organization's f	inancial statements th	hat describes the
Da	organization's accounting for conservation easements. t III Organizations Maintaining Collections o	f Art Historical Trea	sures or Other	Similar Assots
Fai	Complete if the organization answered "Yes" on Form			Similar Assets.
Ia	If the organization elected, as permitted under FASB ASC 95			
	of art, historical treasures, or other similar assets held for pul			nce of public
b	service, provide in Part XIII the text of the footnote to its final			
b	If the organization elected, as permitted under FASB ASC 95			
	art, historical treasures, or other similar assets held for public	c exhibition, education, or r	esearch in furtherance	e of public service,
	provide the following amounts relating to these items.			¢
	(i) Revenue included on Form 990, Part VIII, line 1			
0	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historical tre		0,	provide
_	the following amounts required to be reported under FASB A	-		¢
	Revenue included on Form 990, Part VIII, line 1			
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instruction	5 101 FUTIII 990.		Schedule D (Form 990) 20
JJ205	09-28-23			

	dule D (Form 990) 2023 Marine t III Organizations Maintaining O	Technology				or Othe	5 r Simila	2-08	0547	1 Page 2
	Using the organization's acquisition, accessi								quonnin	
3	collection items (check all that apply).	ion, and other record	is, check any			at make Si	ignincant c			
а	Public exhibition			or eych	nange progra	am				
b	Scholarly research	e			lange progra					
c	Preservation for future generations	e								
4	Provide a description of the organization's c	ollections and evolat	n how they f	urthar th	ne organizati	ion's over	not purpos	so in Dar	• XIII	
5	During the year, did the organization solicit of							sennai		
5	to be sold to raise funds rather than to be m								Yes	No No
Par	t IV Escrow and Custodial Arran									
I ui	reported an amount on Form 990, Pa		te il the olya	mzation	answereu		0111 990,	raitiv, i	116 9, 01	
12	Is the organization an agent, trustee, custod		diany for con	tribution	s or other a	esote not	included			
Ia									Yes	
h	on Form 990, Part X? If "Yes," explain the arrangement in Part XIII							····· └──	165	
b		and complete the it	nowing table	•					Amount	
~	Reginning balance						10		, ano an	
	Beginning balance									
	Additions during the year									
	Distributions during the year									
f	Ending balance						. 1 f		N	
	Did the organization include an amount on F						ty?	·····	Yes	No
	If "Yes," explain the arrangement in Part XIII.						·····			
Par	t V Endowment Funds Complete if							ara baak	(a) Four	vooro book
		(a) Current year	(b) Prior	/ear	(c) Two year	IS DACK (a) Three ye	ars Dack	(e) Four	years back
	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
	End of year balance									
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1g, co	olumn (a)) held as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
с	Term endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.								
3a	Are there endowment funds not in the posse		ation that are	held ar	nd administe	ered for th	ne.			
	organization by:	sector of the organiz							Г	Yes No
	(i) Unrelated organizations?								3a(i)	
	(ii) Related organizations?									
h	If "Yes" on line 3a(ii), are the related organizations?									
4	Describe in Part XIII the intended uses of the								30	
	t VI Land, Buildings, and Equipm			5.						
I UI	Complete if the organization answere		0 Part IV line	- 112 S	ee Form 990) Part X	line 10			
								_		webuc
	Description of property	(a) Cost or c		-	or other		cumulated	·	(d) Bool	k value
<u> </u>		basis (investr		basis (ourier)	dep	reciation			
	Land									
	Buildings									
	Leasehold improvements				7 740		01 70			E E10
	Equipment			2	7,240.		21,72	Z•	-	5,518.
	Other									
Total	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, line 10c,	column	(B))					5,518.

Schedule D (Form 990) 2023

Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	nd-of-vear market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, co	I. (B))		
Part X Other Liabilities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 2	
1.(a) Description of liability			(b) Book value
(1) Federal income taxes			
	ferences		27,640
(2) Funds held for Oceans Con			138,334
(3) Refundable advances			-
(3) Refundable advances			
(3) Refundable advances (4)			
(3) Refundable advances (4) (5)			
<pre>(3) Refundable advances (4) (5) (6)</pre>			
(3) Refundable advances (4) (5) (6) (7)			165,974

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Sche	dule D (Form 990) 2023		Technology					0805471	Page 4
Par	t XI Reconciliation o	of Revenue	per Audited Finar	ncial Stateme	nts Wit	h Revenue per R	eturr	ו	
	Complete if the organ	ization answer	ed "Yes" on Form 990,	Part IV, line 12a.					
1	Total revenue, gains, and oth	ner support per	audited financial state	ements			1	6,386	<u>,815.</u>
2	Amounts included on line 1 I	out not on Form	n 990, Part VIII, line 12	:					
а	Net unrealized gains (losses)	on investment	s		2a	583,407.			
b	Donated services and use of	facilities			2b	47,233.			
С	Recoveries of prior year gran	nts			2c				
d	Other (Describe in Part XIII.)				2d	403,664.			
е	Add lines 2a through 2d						2e	1,034	
3	Subtract line 2e from line 1						3	5,352	,511.
4	Amounts included on Form §	990, Part VIII, li	ne 12, but not on line 1	:					
а	Investment expenses not inc	cluded on Form	990, Part VIII, line 7b		4a	14,591.			
b	Other (Describe in Part XIII.)				4b				
С	Add lines 4a and 4b						4c		,591.
5							5	5,367	,102.
Pa	t XII Reconciliation of	-	-		ents Wi	th Expenses per	Retu	Irn	
	Complete if the organ	ization answer	ed "Yes" on Form 990	Part IV, line 12a.				- 100	
1	Total expenses and losses p	er audited fina	ncial statements				1	5,133	,663.
2	Amounts included on line 1 I	out not on Forn	n 990, Part IX, line 25:						
а	Donated services and use of	f facilities			2a	47,233.			
b	Prior year adjustments				2b				
С	Other losses				2c				
d	Other (Describe in Part XIII.)				2d	403,664.			
е	Add lines 2a through 2d						2e		,897.
3	Subtract line 2e from line 1						3	4,682	,766.

14,591

4c

5

14,591.

275,583.

Schedule D (Form 990) 2023

4,697,357.

4a

4b

Management	has	evaluated	MTS':	s tax	positions	and	concluded	that	MTS '	S
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Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI,

financial statements do not include any uncertain tax positions.

Part XI, Line 2d - Other Adjustments:	
Special events direct expenses	128,081.
Cost of goods sold- SeaMATE	275,583.
Total to Schedule D, Part XI, Line 2d	403,664.
Part XII, Line 2d - Other Adjustments:	
Special events direct expenses	128,081.

Cost of goods sold- SeaMATE

4 Amounts included on Form 990, Part IX, line 25, but not on line 1:

c Add lines 4a and 4b

Part XIII Supplemental Information

Part X, Line 2:

a Investment expenses not included on Form 990, Part VIII, line 7b

b Other (Describe in Part XIII.)

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule	D (Forr	n 990) 2023 pplemental In]	Marine	e Tec	hnolog	gy Society,	Inc.	52-0805471 Page 5
Part XII	I Su	pplemental In	form	ation (co	ontinued)				
		Schedule				Line	2d		403,664

SCHEDULE F (Form 990)	Stateme Complete if the		OMB No. 1545-0047					
Department of the Treasury			Attach to Form 990.			Open to Public		
Internal Revenue Service	Go to w	ww.irs.gov/Form	n990 for instructions and the latest	information.		Inspec		
Name of the organization					Employer	identific	ation number	
Marine Technol					52-08			
		Activities Ou	tside the United States. Compl	ete if the orgar	ization ansv	vered "Ye	es" on	
Form 990, Part		a maintain raaar	de te cubatantista the amount of ite ar	anto and other	accietance			
-	-		ds to substantiate the amount of its gr the selection criteria used to award the				'es 🗌 No	
2 For grantmakers. De United States.	scribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and o	ther assistar	nce outsi	de the	
			an be duplicated if additional space is					
(a) Region	(b) Number of offices in the region	employees,	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	vity listed in gram service specific typ (s) in the reg	e, De	(f) Total expenditures for and investments in the region	
East Asia and the Pacific	C	0	Program Services	OCEANS 2024	l Singapor	re	289,412.	
East Asia and the				Oceans Tech	nnology			
Pacific	0	0	Program Services	Conference			763.	
3 a Subtotal		(290,175.	
b Total from continuatio							0.	
sheets to Part I c Totals (add lines 3a							υ.	
and 3b)	. c) (290,175.	

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

Schedule F (Form 990) 2023

OMB No. 1545-0047

52-0805471

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax

exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities ...

Schedule F (Form 990) 2023

Page 2

52-0805471

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance (g) Description of noncash assistance		(e) Manner of (f) Amount of (g) cash disbursement assistance		(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023 Marine Technology Society, Inc. Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)</i>	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)</i>	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)</i>	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2023

Schedule F	(Form 990) 2023	Marine	Technology	Society,	Inc.	
Part V	Supplement	tal Information	on			

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Part I, line 3:

Foreign expenses are directly tracked and accounted for on the accrual

method of accounting.

SCHEDULE G	Suppleme	ntal Information Regardi	ing Fun	drais	ing or Gaming	Activiti	es 🛛 🛛	OMB No. 1545-0047
(Form 990)		e organization answered "Yes" organization entered more than				or 19, or i	fthe	2023
Department of the Treasury Internal Revenue Service	0.1	Attach to Form 99						Open to Public Inspection
Name of the organization		_o www.irs.gov/Form990 for ins	uctions	anu t	ne latest mormatio		ployer ide	ntification number
	Marine	Technology Socie	ty, I	nc.		52	2-0805	471
	complete this par	 Complete if the organization and t. 	swered "Y	es" oi	n Form 990, Part IV,	line 17. F	orm 990-E2	Z filers are not
 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations b Internet and email solicitations f Solicitation of government grants c Phone solicitations g Special fundraising events d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. 								
(i) Name and addres or entity (fund		(, ,		Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	fundraiser to (or retaine		(vi) Amount paid to (or retained by) organization
			Yes	No				
Total								
	ich the organizatio	on is registered or licensed to soli	icit contrik	outions	s or has been notified	d it is exe	mpt from r	egistration

Marine Technology Society, Inc.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990.FZ lines 1 and 6b. List events with gross receipts greater than \$5,000

		(a) Event #1 Houston Clay Shoot	(b) Event #2 Houston BBQ	(c) Other events None	(d) Total events (add col. (a) through
10		(event type)	(event type)	(total number)	- col. (c))
	1 Gross receipts	153,308.	25,047.		178,355
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	153,308.	25,047.		178,355
	4 Cash prizes				
,	5 Noncash prizes				
	6 Rent/facility costs	76,365.	7,567.		83,932
	7 Food and beverages		7,600.		7,600
	8 Entertainment	00 515	F 020		
	9 Other direct expenses		· · · · · · · · · · · · · · · · · · ·		36,549 128,081
	10 Direct expense summary. Add lines 4 through				50,274
	11 Not income summary Subtract line 10 from I				
	11 Net income summary. Subtract line 10 from I rt III Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.				
Par					(d) Total gaming (add
Par	rt III Gaming. Complete if the organization	answered "Yes" on Form	n 990, Part IV, line 19, or r (b) Pull tabs/instant	reported more than	(d) Total gaming (add col. (a) through col. (c
Par	rt III Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	n 990, Part IV, line 19, or r (b) Pull tabs/instant	reported more than	(d) Total gaming (add
	rt III Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. 1 Gross revenue	answered "Yes" on Form	n 990, Part IV, line 19, or r (b) Pull tabs/instant	reported more than	(d) Total gaming (add
	rt III Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. 1 Gross revenue	answered "Yes" on Form	n 990, Part IV, line 19, or r (b) Pull tabs/instant	reported more than	(d) Total gaming (add
	rt III Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. 1 Gross revenue	answered "Yes" on Form	n 990, Part IV, line 19, or r (b) Pull tabs/instant bingo/progressive bingo	reported more than (c) Other gaming	(d) Total gaming (add
	rt III Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. 1 Gross revenue	answered "Yes" on Form	n 990, Part IV, line 19, or r (b) Pull tabs/instant bingo/progressive bingo	reported more than	(d) Total gaming (add

9 Enter the state(s) in which the organization conducts gaming activities:

8 Net gaming income summary. Subtract line 7 from line 1, column (d)

a Is the organization licensed to conduct gaming activities in each of these states?	L	Yes	No
b If "No," explain:			

.....

332082 09-13-23

Schedule G (Form 990) 2023

Sch	nedule G (Form 990) 2023	Marine	Technology	Society,	Inc. 52	2-080	5471	Page 3
11	Does the organization conduct ga	aming activities	with nonmembers?				Yes	No
12	Is the organization a grantor, bene to administer charitable gaming?						Yes	No
13	Indicate the percentage of gaming							
á	a The organization's facility					13a	a	%
	b An outside facility						b	%
14	Enter the name and address of th	e person who p	prepares the organiza	tion's gaming/spe	cial events books and records:			
	Name							
	Address							
15a	a Does the organization have a con	tract with a thir	d party from whom th	e organization rec	eives gaming revenue?		Yes	🗌 No
ł	o If "Yes," enter the amount of gam	ing revenue rea	ceived by the organiza	ation \$	and the amour	nt		
	of gaming revenue retained by the			·				
C	c If "Yes," enter name and address	of the third par	ty:	_				
	Name							
	Address							
16	Gaming manager information:							
	Name							
	Gaming manager compensation	\$						
	Description of services provided							
	Director/officer	Employee	e Inc	dependent contrac	ctor			
	Mandatory distributions: a Is the organization required under	r state law to m	ako charitahlo distrihi	itions from the ga	ming proceeds to			
	retain the state gaming license?	State law to m	are chantable distribu	ations norm the ga			Yes	
ł	b Enter the amount of distributions	required under	state law to be distrib	outed to other exe	mpt organizations or spent in t	he		
	organization's own exempt activit	U						
Pa	Supplemental Infor 15b, 15c, 16, and 17b, as				line 2b, columns (iii) and (v); an ee instructions.	ıd Part III,	lines 9	9b, 10b,

Schedule G	6 (Form 990
Dort IV	Suppla

I all IV	Supplemental mornation (communica)	

SCHEDULE I (Form 990)		Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.								
Department of the Treasury Internal Revenue Service			Go to www.irs	Attach to Forr a.gov/Form990 for		ation.		Open to Public Inspection		
Name of the organiza		chnology	Society, In	IC.				Employer identification number $52 - 0805471$		
Part I General Information on Grants and Assistance										
criteria used to	nization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection o award the grants or assistance?									
Part II Grants a	and Other Assistance to that received more than	Domestic Organi	zations and Domesti	c Governments.	Complete if the org	anization answered "\	es" on Form 990, Par	t IV, line 21, for any		
	address of organization overnment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance		
2 Enter total nun	2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table									

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2023

52-0805471

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Scholarships	19	65,500.	0.		
Sponsorships and Awards	24	52,205.	0.		
Travel Support	133	283,723.	0.		
Part IV Supplemental Information. Provide the information red	quired in Part I, lin	ie 2; Part III, column	(b); and any other a	dditional information.	
Part I, Line 2:					
An open solicitation for scholars	nip appli	cations is	held and	applications	
are first reviewed by staff to ens	sure prop	er format	and comple	teness. The	
prepared scholarship package is th	nen sent	to a commi	ttee for g	rading and	
selection of the recipients. Funds	s are dis	bursed dir	ectly to t	he bursar of	

the colleges attended who then apply funds to the scholarship winners'

tuition.

sc	SCHEDULE J Compensation Information		I	OMB No. 1545-0047			
	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest	F	2022		,	
•	,	Compensated Employees		2023			
_		Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Open to Public		
	rtment of the Treasury al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe			
Nan	ne of the organizatio		Employer	identificati	on nu	mber	
		Marine Technology Society, Inc.	52-0	080547	1		
Pa	rt I Question	s Regarding Compensation					
					Yes	No	
1a	Check the appropr	ate box(es) if the organization provided any of the following to or for a person listed on Forn	n 990,				
	Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or o	harter travel Housing allowance or residence for perso	onal use				
	Travel for com	panions X Payments for business use of personal re	esidence				
	Tax indemnific	ation and gross-up payments Health or social club dues or initiation fee	s				
	Discretionary	spending account Personal services (such as maid, chauffe	ur, chef)				
			-				
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or					
	reimbursement or p	provision of all of the expenses described above? If "No," complete Part III to explain		1b	Х		
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,					
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		Х	
3	Indicate which, if a	ny, of the following the organization used to establish the compensation of the organization	s				
	CEO/Executive Dire	ector. Check all that apply. Do not check any boxes for methods used by a related organizat	tion to				
	establish compens	ation of the CEO/Executive Director, but explain in Part III.					
	X Compensation	n committee Written employment contract					
	Independent of	compensation consultant III Compensation survey or study					
	Form 990 of o	ther organizations X Approval by the board or compensation of	committee				
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing					
	organization or a re	lated organization:					
а		e payment or change-of-control payment?				X	
b		eive payment from a supplemental nonqualified retirement plan?				X	
С		eive payment from an equity-based compensation arrangement?		4c		X	
	If "Yes" to any of li	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.					
_		c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on				
	contingent on the r			_		v	
						X	
b		ation?		5b		X	
-		or 5b, describe in Part III.					
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on				
_	contingent on the r	5		0-		x	
						X	
b		ation?		6b			
-		or 6b, describe in Part III.					
1		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment		-		x	
•		nes 5 and 6? If "Yes," describe in Part III		7			
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to				x	
•		ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8			
9		id the organization also follow the rebuttable presumption procedure described in		9			
For		n 53.4958-6(c)?			n 000	0000	
гor	raperwork Reduct	ion Act Notice, see the Instructions for Form 990.	Schee	dule J (Forr	11 220	j 2023	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Christopher Ostrander	(i)	182,743.	25,000.	2,400.	8,979.	23,191.	242,313.	0.
Chief Executive Officer	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Part I, Line 1a:

Employees receive a \$200 per month stipend (amount subject to change

annually) as a remote-working allowance to cover office related costs.

This is reported as taxable compensation on Form W-2.

Schedule J (Form 990) 2023

	OMB No. 1545-0047					
SCHEDULE O (Form 990) Supplemental Information to Form 990 or 990 Complete to provide information for responses to specific questions on	-EZ 2023					
Department of the Treasury Form 990 or 990-EZ or to provide any additional information. Internal Revenue Service Go to www.irs.gov/Form990 for the latest information.	Open to Public Inspection					
Name of the organization Marine Technology Society, Inc.	Employer identification number 52-0805471					
Form 990, Part III, Line 1, Description of Organization M	ission:					
Advance the development of the tools and procedures require	red to					
explore, study and further the responsible and sustainable	e use of the					
oceans.						
Form 990, Part III, Line 2, New Program Services:						
On December 30, 2022, MTS entered into a Transaction Agree	ement ("the					
Transaction Agreement") with MATE II. Incorporated in the	e state of					
California as a 501(c)(3) nonprofit organization in 2016,	MATE					
Inspiration for Innovation (MATE II) was founded to support	rt and sustain					
ongoing education activities initiated at the MATE Center, including						
the SeaMATE Store and MATE ROV Competition.						
As outlined in the Agreement, MATE II assigned and transfo	erred to MTS					

all of its assets and related liabilities, including its global K-16

remotely operated vehicles (ROV) competition platform, alumni network,

and other assets related to the MATE ROV Competition. The final

transfer of all assets and liabilities of MATE II to MTS was finalized

in November 2023.

MTS now operates the SeaMATE Store and MATE ROV Competition under its program service activities.

Form 990, Part III, Line 4a, Conferences and Workshops:

Committees are focusing on the concerns of the specific subject area

within three major groups:Research, Industry, and Technology;For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.Schedule O (Form 990) 2023LHA332211 11-14-23

Schedule O (Form 990) 2023						
Name of the organization Marine Technology Society, Inc.	Employer identification number 52-0805471					
Government and Public Affairs; and Education.						

Form 990, Part III, Line 4c, MATE ROV Competition:

Students also must organize themselves into mock companies, encouraging

them to develop entrepreneurial thinking and business and project

management skills while spurring innovation and collaboration to

produce and compete with ROVs.

Form 990, Part III, Line 4d, Other Program Services:

Membership: Support and service to members

The Society's members and member companies work in all aspects of marine technology including underwater imaging and engineering; underwater vehicle design and operation; ocean observation and exploration; oceanography and meteorology; diving; mooring technology; remote sensing; offshore structures; renewable energy; marine physical and cyber security; underwater archaeology; dynamic positioning; marine law and policy; and more.

```
Membership in the Society creates opportunities through networking,
events, mentorships, and career advancement.
Expenses $ 300,358. including grants of $ 0. Revenue $ 139,501.
```

SeaMATE is an online store that offers beginning and intermediate underwater robotics kits, building guides and instructional materials aligned with standards, and other products that support the teaching, designing, and building of ROVs. Working at the SeaMATE store, student interns learn many aspects of running a business, from inventory to 32212 11-14-23 Schedule O (Form 990) 2023

Name of the organization Marine Technology Society, Inc.	Employer identification number 52-0805471
production, accounting, and product promotion, as they pr	epare for
their future careers.	
Expenses \$ 133,287. including grants of \$ 0. Revenue	\$ 250,102.
Communications: provides news and information to members	and the
broader marine science and technology community on a vari	ety of
channels including newsletters, MTS's website, and social	media.
Currents is the Society's monthly digital newsletter, foc	using on
society-wide and industry news and events, business annou	ncements and
information, scientific briefs and articles, and member n	ews.
Expenses \$ 140,465. including grants of \$ 0. Revenue	\$ 4,332.
Publications: Distribution of ocean and marine technology	literature
and periodicals	
The Marine Technology Society Journal is the Society's fl	agship
publication, which has been published under its current t	itle since
1969. The Journal includes the highest caliber, peer-revi	ewed papers on
subjects including marine technology, ocean science, mari	ne policy, and
more.	
Expenses \$ 86,972. including grants of \$ 0. Revenue \$	25,055.
Form 990, Part VI, Section A, line 1a:	
The Executive Committee is comprised of the President, Pr	esident Elect, and
Immediate Past President. The Committee meets as needed t	o approve changes
to CEO/Executive Director's salary and benefit package, C	EO/Executive
Director's tenure, and to carry out any other duties and	
332212 11-14-23 47	Schedule O (Form 990) 2023

Page **2**

Schedule O (Form 990) 2023

by the Board of Directors.

Form 990, Part VI, Section A, line 6:

The Society has dues paying members.

The classes of MTS membership are as follows: Individual member, Student member, Associate member, Emeritus member, Patron member, Corporate Gold member, Corporate Silver member, Corporate Platinum member, Life member, Small Business member, Institutional member, ECOP member.

Any member shall be eligible to vote on any action, so long as the member's name appears on the rolls of the Society in good standing as of a date set by the Board not more than fifty (50) nor less than ten (10) days before the date of the meeting.

Form 990, Part VI, Section A, line 7a:

All officers shall be elected by a plurality of Members eligible to vote, in person and by proxy, at the Annual Meeting. Each Member is entitled to one vote.

Form 990, Part VI, Section B, line 11b:

Form 990 is prepared by an independent accounting firm and reviewed by the Society's Executive Director and Treasurer/VP of Budget and Finance. The 990 is then provided to the full Board of Directors prior to the filing with the Internal Revenue Service

Form 990, Part VI, Section B, Line 12c:

The Society requires completion of annual disclosure form of any potential 332212 11-14-23 Schedule O (Form 990) 2023

Name of the organization	Employer identification number
Marine Technology Society, Inc.	52-0805471
conflicts of interest by all officers, directors, and co	ommittee chairs.
Form 990, Part VI, Section B, Line 15:	
The Society's Board of Directors approves the compensati	on of the
CEO/Executive Director and documents the arrangement thr	ough an employment
contract.	
Form 990, Part VI, Line 17, List of States receiving cop	by of Form 990:
AL, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC	C, OR, PA, RI, SC, TN, UT
VA,WV,WI	
Form 990, Part VI, Section C, Line 18:	
Form 990 is made available to the public on the Society'	s website.
Form 990, Part VI, Section C, Line 19:	
The Society makes its Form 1023, governing documents, co	onflict of interest
policy, and financial statements available upon request.	
Form 990, Part IX, Line 11g, Other Fees:	
Other professional services:	
Program service expenses	721,377.
Management and general expenses	42,035
Fundraising expenses	0.
Total expenses	763,412.
Total Other Fees on Form 990, Part IX, line 11g, Col A	763,412.
Form 990, Part XII, Line 2c:	

The Society has a Budget and Finance Committee responsible for the

Schedule O (Form 990) 2023	Page 2
Name of the organization Marine Technology Society, Inc.	Employer identification number 52-0805471
oversight of the audit and selection of the independent a	
	ccouncant.
The process has not changed from prior years.	

Form	886	8		

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service

File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

must use Form 7004 to request an extension of time to file in	come tax retur	rns.		
Part I - Identification				
Type orName of exempt organization, employer, or other	r filer, see instr	uctions.	Taxpayer identification number (TIN)	
Print				
File by the Marine Technology Society			52-0805	471
due date for filing your One Thomas Circle, Suite		tions.		
return. See				
instructions. City, town or post office, state, and ZIP code. For Washington, DC 20005-58		iress, see instructions.		
Enter the Return Code for the return that this application is for		ate application for each return)		01
Application Is For	Return			Return
	Code	Application is For		Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)		09
	01	· · · · · · · · · · · · · · · · · · ·		10
Form 4720 (individual) Form 990-PF		Form 5227		
	04	Form 6069 Form 8870		11
Form 990-T (sec. 401(a) or 408(a) trust)	06	Form 5330 (individual)		12
Form 990-T (trust other than above)	08			
Form 990-T (corporation) Form 1041-A	07	Form 5330 (other than individual)		14
After you enter your Return Code, complete either Part II or				
If this application is for an extension of time to file Form 533 Plan Name	30, you must e	enter the following information.		
Plan Number				
Plan Year Ending (MM/DD/YYYY)				
Part II - Automatic Extension of Time To File for Exempt O		see instructions)		
The books are in the care of The Organizatio	on mla Gui	the 700 the shirt set		
One Thomas Circ	cie, su:	ite /uu - wasningt		
Tolophono No $(/ //) \times //-////$	-	-	on, DC $20005-3$	5800
Telephone No. (202) 827-7171		Fax No.		
If the organization does not have an office or place of busi	iness in the Ur	Fax No		
 If the organization does not have an office or place of busi If this is for a Group Return, enter the organization's four-organization. 	iness in the Ur digit Group Exe	Fax No nited States, check this box emption Number (GEN)	f this is for the whole group	D, check this
 If the organization does not have an office or place of business. If this is for a Group Return, enter the organization's four-constraints. If it is for part of the group, check this box 	iness in the Ur digit Group Exe	Fax No	f this is for the whole group all members the extension	 o, check this n is for.
 If the organization does not have an office or place of busing If this is for a Group Return, enter the organization's four-optication. If it is for part of the group, check this box I request an automatic 6-month extension of time until 	iness in the Ur digit Group Exe 	Fax No	f this is for the whole group	 o, check this n is for.
 If the organization does not have an office or place of busic If this is for a Group Return, enter the organization's four composition of the group, check this box	iness in the Ur digit Group Exe 	Fax No	f this is for the whole group all members the extension	 o, check this n is for.
 If the organization does not have an office or place of busing If this is for a Group Return, enter the organization's four-opposite to the group, check this box If it is for part of the group, check this box I request an automatic 6-month extension of time until the organization named above. The extension is for the calendar year 20 or 	iness in the Ur digit Group Exe and atta <u>May 15</u> e organization's	Fax No	f this is for the whole group all members the extension the exempt organization r	 o, check this n is for. return for
 If the organization does not have an office or place of busic If this is for a Group Return, enter the organization's four composition of the group, check this box	iness in the Ur digit Group Exe and atta <u>May 15</u> e organization's	Fax No	f this is for the whole group all members the extension the exempt organization r	 o, check this n is for. return for
 If the organization does not have an office or place of busines. If this is for a Group Return, enter the organization's four-optimation. If it is for part of the group, check this box	iness in the Ur digit Group Exe and atta <u>May 15</u> e organization's	Fax No	f this is for the whole group all members the extension the exempt organization r JUN 30.,	 o, check this n is for. return for
 If the organization does not have an office or place of busines. If this is for a Group Return, enter the organization's four-obox If it is for part of the group, check this box I request an automatic 6-month extension of time until the organization named above. The extension is for the calendar year 20 or 	iness in the Ur digit Group Exe and atta <u>May 15</u> e organization's	Fax No	f this is for the whole group all members the extension the exempt organization r	 o, check this n is for. return for
 If the organization does not have an office or place of busines. If this is for a Group Return, enter the organization's four-optication. If it is for part of the group, check this box I request an automatic 6-month extension of time until the organization named above. The extension is for the calendar year 20 or tax year beginning JUL 1 If the tax year entered in line 1 is for less than 12 month 	iness in the Ur digit Group Exe and atta May 15 e organization's , 20 hs, check reas	Fax No. inited States, check this box emption Number (GEN) inch a list with the names and TINs or	f this is for the whole group all members the extension the exempt organization r JUN 30.	20 24
 If the organization does not have an office or place of busis If this is for a Group Return, enter the organization's four-obox If it is for part of the group, check this box I request an automatic 6-month extension of time until the organization named above. The extension is for the calendar year 20 or I tax year beginning JUL 1 If the tax year entered in line 1 is for less than 12 month Change in accounting period 	iness in the Ur digit Group Exe and atta May 15 e organization's , 20 hs, check reas	Fax No. inited States, check this box emption Number (GEN) inch a list with the names and TINs or	f this is for the whole group all members the extension the exempt organization r JUN 30.	 o, check this <u>n is for.</u> return for 20 <u>2 4</u>
 If the organization does not have an office or place of busing If this is for a Group Return, enter the organization's four-observation. If it is for part of the group, check this box I request an automatic 6-month extension of time until the organization named above. The extension is for the calendar year 20 or a tax year beginning JUL 1 If the tax year entered in line 1 is for less than 12 month Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or forms 100 and 100 and	iness in the Ur digit Group Exe and atta <u>May 15</u> e organization's , 20 hs, check reas	Fax No.	f this is for the whole group all members the extension the exempt organization r JUN 30., Final return	 o, check this <u>n is for.</u> return for 20 <u>2 4</u>
 If the organization does not have an office or place of busines. If this is for a Group Return, enter the organization's four-optimation. If it is for part of the group, check this box	iness in the Ur digit Group Exe <u>May 15</u> e organization's , 20 <u>2</u> hs, check reas 6069, enter the	Fax No.	f this is for the whole group all members the extension the exempt organization r JUN 30., Final return	 o, check this n is for. return for
 If the organization does not have an office or place of busines. If this is for a Group Return, enter the organization's four-optimation. If it is for part of the group, check this box	iness in the Ur digit Group Exe <u>May 15</u> e organization's , 20 <u>2</u> hs, check reas 6069, enter the 6069, enter any poverpayment a	Fax No.	f this is for the whole group i all members the extension the exempt organization r JUN 30 . , Final return 3a \$	b, check this <u>n is for.</u> eturn for $20 \underline{24}$ 0.

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