

Return of Organization Exempt From Income Tax

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

For the 2011 calendar year, or tax year beginning 10/01, 2011, and ending 09/30, 2012

Part I Summary: Name of organization, address, telephone number, EIN, and other identifying information.

Part II Signature Block: Signature of officer and preparer, date, and type of preparer.

Part III Statement of Program Service Accomplishments

Main body of the form containing financial statements (Revenue, Expenses, Assets, Liabilities, Net Assets) and program service accomplishments.

Part IV Checklist of Required Schedules (continued)

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Description of requirement, and Yes/No checkboxes. Questions range from 1 to 38, covering various organizational activities and financial reporting requirements.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Part VI Governance, Management, and Disclosure

Form 990 (2011) 13-5563011 Page 5. Section A: Governing Body and Management. Section B: Policies. Section C: Disclosure. Questions 1a-14b regarding governance, management, and disclosure.

Form 990 (2011) 13-5563011 Page 6. Section A: Governing Body and Management. Section B: Policies. Section C: Disclosure. Questions 1a-14b regarding governance, management, and disclosure.

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

Check if Schedule O contains a response to any question in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JAMES R. GRAYSHAW PRESIDENT	5.00	X	0	0	0
(2) STEPHEN T. WHELAN 1ST V.P.	5.00	X	0	0	0
(3) ANDREW W. RUSSELL 2ND V.P.	1.00	X	0	0	0
(4) CHRISTOPHER M. NORFLEET 3RD V.P.	1.00	X	0	0	0
(5) MICHAEL P. CONEYS SECRETARY	4.00	X	0	0	0
(6) AMERGE RICHARDSON III TREASURER	4.00	X	0	0	0
(7) RAYMOND J. MANNING REGISTRAR	1.00	X	0	0	0
(8) REV. CHRISTOPHER W. CULLEN CHAPLAIN	1.00	X	0	0	0
(9) ROBERT A. BELL BOARD MEMBER	1.00	X	0	0	0
(10) KENNETH H. CHASE BOARD MEMBER	1.00	X	0	0	0
(11) JOHN P. COOMBE BOARD MEMBER	1.00	X	0	0	0
(12) BRIAN GILL BOARD MEMBER	1.00	X	0	0	0
(13) DANIEL H. HARMAN III BOARD MEMBER	1.00	X	0	0	0
(14) BRUCE E. JONES BOARD MEMBER	1.00	X	0	0	0

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization: 0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
15) CORNWELL C. MARTIN BOARD MEMBER	1.00	X	0	0	0
16) WESLEY M. OLER IV BOARD MEMBER	1.00	X	0	0	0
17) GEORGE J. OWEN BOARD MEMBER	1.00	X	0	0	0
18) FREDERICK W. PATRISON BOARD MEMBER	1.00	X	0	0	0
19) REV. THOMAS F. PIKE BOARD MEMBER	1.00	X	0	0	0
20) CHARLES A. POEKEL, JR. BOARD MEMBER	1.00	X	0	0	0
21) JONATHAN WOLK RIDGEWAY BOARD MEMBER	1.00	X	0	0	0
22) EDWIN DAVID ROBERTSON BOARD MEMBER	1.00	X	0	0	0
23) DAVID N. SANCHEZ, JR. BOARD MEMBER	1.00	X	0	0	0
24) STEVEN P. TRUSNOVEC BOARD MEMBER	1.00	X	0	0	0
25) CRAIG H. WEAVER BOARD MEMBER	1.00	X	0	0	0

1b Sub-total: 0

c Total from continuation sheets to Part VII, Section A: 0

d Total (add lines 1b and 1c): 0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization: 0

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual: 3 X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual: 4 X

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person: 5 X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization: 0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with columns (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from organization, (E) Reportable compensation from other organizations, (F) Estimated amount of other compensation. Rows include DANIEL L. COLEMAN, GEORGE DOTY, KEVIN HANSLEY, JOHN M. HILLIARD, CHARLES LUCAS, WILLIAM T. LIVINGSTON, III, J. ROBERT LUNNEY, ROBERT N. MCKAY, JOHN O' MALLEY, LAURENCE S. SIMPSON, JAMES F. STEBRINS.

1b Sub-total, c Total from continuation sheets to Part VII, Section A, d Total (add lines 1b and 1c), 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with columns 3, 4, 5 and Yes/No columns. 3 Did the organization list any former officer, director, or trustee... 4 For any individual listed on line 1a, is the sum of reportable compensation... 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization...

Section B. Independent Contractors

Table with columns (A) Name and business address, (B) Description of services, (C) Compensation. Row 2: Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with columns (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from organization, (E) Reportable compensation from other organizations, (F) Estimated amount of other compensation. Rows include KENT STRAAT, GEORGE WATSON, JAMES S. GRAYSHAW, CHARLES POEKEL, JR., FREDERICK W. PATTON, KENNETH H. CHASE, DANIEL J. O'CONNELL, DONALD WESTERVELT.

1b Sub-total, c Total from continuation sheets to Part VII, Section A, d Total (add lines 1b and 1c), 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with columns 3, 4, 5 and Yes/No columns. 3 Did the organization list any former officer, director, or trustee... 4 For any individual listed on line 1a, is the sum of reportable compensation... 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization...

Section B. Independent Contractors

Table with columns (A) Name and business address, (B) Description of services, (C) Compensation. Row 2: Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VIII Statement of Revenue

Table with columns (A) Total revenue, (B) Related or exempt income revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax. Rows include Federated campaigns, Membership dues, Fundraising events, etc.

Part IX Statement of Functional Expenses

Table with columns (A) Total expenses, (B) Program service expenses, (C) Management and general expenses, (D) Fundraising expenses. Rows include Grants and other assistance to governments, Grants and other assistance to individuals, etc.

Part VIII Statement of Revenue

Table with columns (A) Total revenue, (B) Related or exempt income revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax. Rows include Investment income, Income from investment of tax-exempt bond proceeds, etc.

Part IX Statement of Functional Expenses

Table with columns (A) Total expenses, (B) Program service expenses, (C) Management and general expenses, (D) Fundraising expenses. Rows include Management, Legal, Accounting, etc.

Other Revenue

Table with columns (A) Total revenue, (B) Related or exempt income revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax. Rows include Gross income from fundraising events, Gross income from sales of assets, etc.

Part X Balance Sheet

Table with columns (A) Beginning of year, (B) End of year. Rows 1-26 covering assets and liabilities.

Part XI Reconciliation of Net Assets

Table with 6 columns for reconciliation items and 2 columns for Yes/No responses.

Part XII Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: [] Cash [X] Accrual [] Other
2a Were the organization's financial statements compiled or reviewed by an independent accountant?
2b Were the organization's financial statements audited by an independent accountant?
2c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or completion of its financial statements and selection of an independent accountant?
2d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
3b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE A (Form 990 or 990-EZ) Public Charity Status and Public Support

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

OMB No. 1545-0047

2011 Open to Public Inspection

Name of the organization SONS OF THE REVOLUTION IN THE STATE

Employer identification number 13-5563011

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

- 1 The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)
A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
A community trust described in section 170(b)(1)(A)(vii). (Complete Part II.)
An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)

10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
a Type I
b Type II
c Type III - Functionally integrated
d Type III - Other
By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box.

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
(f) A person who directly or indirectly controls, either alone or together with persons described in (f) and (iii) below, the governing body of the supported organization?
(i) A family member of a person described in (i) above?
(ii) A 35% controlled entity of a person described in (i) or (ii) above?

Table with 4 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Amount of support. Includes rows (A) through (E) and a Total row.

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

Section A. Public Support

Table with 6 columns: Calendar year (or fiscal year beginning in), (a) 2007, (b) 2008, (c) 2009, (d) 2010, (e) 2011, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total; 5 The portion of total contributions by governmental unit; 6 Public support.

Section B. Total Support

Table with 6 columns: Calendar year (or fiscal year beginning in), (a) 2007, (b) 2008, (c) 2009, (d) 2010, (e) 2011, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities (other than royalties and income from similar sources); 9 Net income from unrelated business activities; 10 Other income; 11 Total support.

Section C. Computation of Public Support Percentage

- 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))
15 Public support percentage from 2010 Schedule A, Part II, line 14
16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here.
16b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here.
17a 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.
17b 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

SONS OF THE REVOLUTION IN THE STATE

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions.)

Part IV

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions.)

FACTS-AND-CIRCUMSTANCES TEST

PART II, SECTION C. - QUESTION 17A

FACTS-AND-CIRCUMSTANCES TEST:

THE SONS OF THE REVOLUTION IS AN ORGANIZATION DEVOTED TO EDUCATING THE PUBLIC ABOUT THE STRUGGLE TO ACHIEVE AMERICAN LIBERTY. MEMBERS ARE DESCENDANTS OF SOMEONE WHO FOUGHT IN THE REVOLUTIONARY WAR OR OTHERWISE PLACED THEMSELVES AT RISK FOR THE AMERICAN CAUSE. THE SONS OF THE REVOLUTION IN THE STATE OF NEW YORK OWNS AND OPERATES FRAUNCES TAVERN® MUSEUM WHICH IS DESIGNATED A HISTORIC LANDMARK.

FOR 125 YEARS, THE SOCIETY HAS BEEN INVOLVED IN PRESERVING THE MEMORY OF THE REVOLUTIONARY PATRIOTS. MAJOR PROJECTS HAVE INCLUDED ERECTING THE STATUE OF NATHAN HALE IN CITY HALL PARK, PURCHASING, RESTORING AND PRESERVING FRAUNCES TAVERN, OPERATING THE FRAUNCES TAVERN® MUSEUM AND PLACING PLAQUES AND MEMORIALS AT IMPORTANT REVOLUTIONARY WAR SITES IN NEW YORK CITY.

THE COLLECTIONS OF THE SONS OF THE REVOLUTION AND FRAUNCES TAVERN MUSEUM INCLUDE MORE THAN 200 REPLICAS OF REVOLUTIONARY WAR FLAGS, MORE THAN 50 VALUED PAINTINGS OF THE ERA, AN EXTENSIVE SELECTION OF WEAPONS AND FURNITURE AND FURNISHINGS, AND PERSONAL EFFECTS OF GEORGE WASHINGTON AND HIS COMPATRIOTS. THE LIBRARY HOLDS MANY SIGNIFICANT DOCUMENTS, INCLUDING ORDERS SIGNED BY WASHINGTON, LETTERS WRITTEN BY HALE AND THE ORDERLY BOOK OF WASHINGTON'S SPYMASTER BENJAMIN TALLMADGE.

SONS OF THE REVOLUTION IN THE STATE

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 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

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)						

Section C. Computation of Public Support Percentage

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2010 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2010 Schedule A, Part III, line 17

19a 33 1/3% support tests - 2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2011

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part III, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information. (See instructions).

DESCRIPTION	SCHEDULE A, PART II - OTHER INCOME				TOTAL
	2007	2008	2009	2010	
MISCELLANEOUS	75,000.	240.	95,355.	31,933.	215,528.
TOTALS	75,000.	240.	95,355.	31,933.	215,528.

SCHEDULE D (Form 990)

Department of the Treasury
 Internal Revenue Service
 Name of the organization
 OF NEW YORK, INC.

Supplemental Financial Statements

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

OMB No. 1545-0047
 2011
 Open to Public Inspection

Employer identification number
 13-5563011

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		Yes <input type="checkbox"/> No <input type="checkbox"/>
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		Yes <input type="checkbox"/> No <input type="checkbox"/>

Part III Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

- Purpose(s) of conservation easements held by the organization (check all that apply):
 - Preservation of land for public use (e.g., recreation or education)
 - Preservation of a historically important land area
 - Protection of natural habitat
 - Preservation of open space
 - Preservation of a certified historic structure
- Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	2a	2b	2c	2d
a Total number of conservation easements				
b Total acreage restricted by conservation easements				
c Number of conservation easements on a certified historic structure included in (a)				
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register				

- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
- Number of states where property subject to conservation easement is located
- Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
- Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year
- Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
- Does each conservation easement reported on line 2(c) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
- In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
 - Revenues included in Form 990, Part X
 - Assets included in Form 990, Part X
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
 - Revenues included in Form 990, Part X
 - Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
 a Public exhibition
 b Scholarly research
 c Preservation for future generations
 d Loan or exchange programs
 e Other
 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 5, or reported an amount on Form 990, Part X, line 21.
 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
 b If "Yes," explain the arrangement in Part XIV and complete the following table.

	Amount			
	1c	1d	1e	1f
c Beginning balance				
d Additions during the year				
e Distributions during the year				
f Ending balance				

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
 b If "Yes," explain the arrangement in Part XIV.
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.
 1a Beginning of year balance
 1b Contributions and losses
 1c Net investment earnings, gains, and losses
 1d Grants or scholarships and other programs
 1e Administrative expenses
 1f End of year balance
 2 Provide the estimated percentage of the current year end balance (line 1g, column (e)) held as:
 a Board designated or quasi-endowment
 b Permanent endowment
 c Temporarily restricted endowment

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	3,972,464	4,236,340	4,623,681	8,099,625	
1b	50,172	242,932	317,803	478,311	
1c	674,485	67,647	452,257	-377,232	
1d	294,936	527,887	895,606	3,362,294	
1e	8,454	46,568	261,795	214,729	
1f	4,393,731	3,972,464	4,236,340	4,623,681	
2a	15.5800%				
2b	83.9400%				
2c	4800%				

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
 (i) unrelated organizations
 (ii) related organizations
 b If "Yes" to 3a(i), are the related organizations listed as required on Schedule R?
 4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value	
				3a(i)	3b
1a Land					
b Buildings		1,147,501			1,147,501
c Leasehold improvements		1,132,268			1,132,268
d Equipment					
e Other		522,173			522,173
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)					2,801,942

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	296
(2) RENT SECURITY	10,610
(3) CASH OVERDRAFT	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	10,906

ORGANIZATIONS MAINTAINING COLLECTIONS OF ART, HISTORICAL TREASURER
 PART III - QUESTION 4
 THE ORGANIZATION'S COLLECTION OF ART AND ARTIFACTS ARE PRESERVED AND
 INTERPRETED, FOR THE MEMBERS AND PUBLIC, AS AN EDUCATIONAL RESOURCE IN
 ORDER TO PROMOTE A GREATER UNDERSTANDING OF THE AMERICAN REVOLUTIONARY
 PERIOD AND THE EARLY HISTORY OF NEW YORK.

THE PIECES IN THE COLLECTION ARE FROM, OR REPRESENT, THE EARLY COLONIAL
 AND REVOLUTIONARY PERIOD OF AMERICA, IN GENERAL AND OF NEW YORK CITY
 SPECIFICALLY.

ENDOWMENT FUNDS

PART V - QUESTION 4

BOARD DESIGNATED FUNDS - AMOUNTS THAT ARE RESTRICTED AT THE DISCRETION OF
 THE BOARD. INCLUDED IN THESE FUNDS ARE THE RESERVE FUND, FLAG FUND,
 PERMANENT FUND, CAPITAL CAMPAIGN, MUSEUM ENDOWMENT FUND AND DEACCESSION
 COLLECTIONS FUNDS. THE CAPITAL CAMPAIGN FUND WAS ESTABLISHED TO RAISE
 FUNDS FOR THE RESTORATION AND IMPROVEMENT OF FRAUNCES TAVERN AND OTHER
 BUILDINGS OWNED BY THE SOCIETY. THE RELATED SUPPORT, REVENUE AND
 EXPENSES ARE RECORDED IN THIS FUND. THE MUSEUM ENDOWMENT FUND WAS
 SEGREGATED FOR THE MUSEUM ENDOWMENT ASPECT OF THE CAPITAL CAMPAIGN, AND
 THE DESIGNATED AMOUNTS ARE AVAILABLE FOR PROGRAMS AND ACTIVITIES
 CONDUCTED BY THE FRAUNCES TAVERN MUSEUM. THE DEACCESSION COLLECTIONS
 FUND CONSISTS OF PROCEEDS FROM THE SALE OF THE SOCIETY'S COLLECTION AND
 OTHER WORKS OF ART AND MAY BE USED FOR THE DIRECT CARE AND/OR
 PRESERVATION OF THE SOCIETY'S EXISTING COLLECTION OR TO BUY ADDITIONAL

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	578,229.
2	Total expenses (Form 990, Part IX, column (A), line 25)	669,950.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	-91,721.
4	Net unrealized gains (losses) on investments	523,425.
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV.)	
9	Total adjustments (net). Add lines 4 through 8	523,425.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	431,704.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1,331,696.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a	Net unrealized gains on investments	523,425.
b	Donated services and use of facilities	
c	Recoveries of prior year grants	
d	Other (Describe in Part XIV.)	230,042.
e	Add lines 2a through 2d	753,467.
3	Subtract line 2e from line 1	578,229.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b	
b	Other (Describe in Part XIV.)	
c	Add lines 4a and 4b	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	578,229.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	899,992.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a	Donated services and use of facilities	
b	Prior year adjustments	
c	Other losses	
d	Other (Describe in Part XIV.)	230,042.
e	Add lines 2a through 2d	230,042.
3	Subtract line 2e from line 1	669,950.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b	
b	Other (Describe in Part XIV.)	
c	Add lines 4a and 4b	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	669,950.

Part XIV Supplemental Information

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

SEE PAGE 5

ITEMS FOR THE COLLECTION AND/OR OTHER WORKS OF ART.
PERMANENTLY RESTRICTED NET ASSETS, WHICH CONSIST OF GIFTS TO THE SOCIETY,
THE PRINCIPAL OF WHICH IS PERMANENTLY RESTRICTED.
-SHELBY C. DAVIS FUND - ESTABLISHED THROUGH A GIFT MADE BY THE SHELBY C.
DAVIS FOUNDATION. THE PRINCIPAL PORTION CANNOT BE EXPENDED.
-BUILDING MAINTENANCE ENDOWMENT FUND - THE BUILDING MAINTENANCE ENDORMENT
FUND IS TO REMAIN FOREVER TO THE USE OF THE SOCIETY, THE INCOME ONLY OF
WHICH SHALL BE EXPENDED SOLELY FOR THE MAINTENANCE OF THE BUILDINGS
COMPRISING OF THE FRANCOIS TAVERNE MUSEUM COMPLEX, AS DETERMINED BY THE
BOARD OF MANAGERS.

MUSEUM ENDOWMENT FUND IS SEGREGATED FOR THE MUSEUM ENDORMENT ASPECT OF
THE CAPITAL CAMPAIGN.

OTHER LIABILITIES

PART X - LINE 2

AT SEPTEMBER 30, 2012, NO AMOUNTS HAVE BEEN RECOGNIZED FOR UNCERTAIN
INCOME TAX POSITIONS. THE SOCIETY'S TAX RETURNS FOR THE FISCAL YEAR 2009
AND FORWARD ARE SUBJECT TO THE USUAL REVIEW BY THE APPROPRIATE
AUTHORITIES.

RECONCILIATION OF REVENUE
PART XII - LINES 2D & 4B
2D. DIRECT SPECIAL EVENT EXPENSES: 43,521.
2D. DIRECT RENTAL EXPENSES: 186,521.
RECONCILIATION OF EXPENSES
PART XIII - LINES 2D & 4B
2D. DIRECT SPECIAL EVENT EXPENSES: 43,521.
2D. DIRECT RENTAL EXPENSES: 186,521.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047
2011
Open to Public Inspection

Supplemental Information Regarding Fundraising or Gaming Activities

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

SONS OF THE REVOLUTION IN THE STATE
OF NEW YORK, INC.
Employer identification number
13-5563011

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2a 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? Yes No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

1	(f) Name and address of individual or entity (fundraiser)	(g) Activity	(h) Did fundraiser have custody or control of contributions?		(i) Amount paid to (or retained by) fundraiser listed in col. (f)	(j) Amount paid to (or retained by) organization
			Yes	No		
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

Revenue	(a) Event #1 (event type)	(b) Event #2 (event type)	(c) Other Events (total number)	(d) Total events (add col. (a) through col. (c))
1	G.W. BALL			49,175
2				49,175
3				25,095
4				24,080
5				138
6				29,103
7				2,600
8				11,680
9				11,680

10 Direct expense summary. Add lines 4 through 9 in column (d) **43,521**
11 Net income summary. Combine line 3, column (d), and line 10 **-19,441**

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

Revenue	(a) Bingo	(b) Pull tab/signant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
1				
2				
3				
4				
5				
6				
7				
8				

9 Enter the state(s) in which the organization operates gaming activities:
a Is the organization licensed to operate gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
b If "Yes," explain: _____

11 Does the organization operate gaming activities with nonmembers?
 Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?
 Yes No

13 Indicate the percentage of gaming activity operated in:
 a The organization's facility 13a %
 b An outside facility 13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name

Address

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?
 Yes No

b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ and the

c If "Yes," enter name and address of the third party:

Name

Address

16 Gaming manager information:

Name

Gaming manager compensation \$

Description of services provided \$

Director/officer Employee Independent contractor

17 Mandatory distributions:
 a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
 Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Name of the organization: SONS OF THE REVOLUTION IN THE STATE
 Internal Revenue Status: Non-Profit For-Profit
 Employer identification number: 13-5563011

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

PART III - LINE 1

TO PERPETUATE THE MEMORY OF THE MEN WHO, IN MILITARY, NAVAL OR CIVIL SERVICE, BY THEIR ACTS OR COUNSEL, ACHIEVED AMERICAN INDEPENDENCE. TO PROMOTE AND ASSIST IN VARIOUS CELEBRATIONS OF THE ANNIVERSARIES RELATING TO OR CONNECTED WITH THE WAR OF THE AMERICAN REVOLUTION. TO INSPIRE AMONG THE MEMBERS, THEIR DECENDANTS AND THE PUBLIC AT LARGE THE PATRIOTIC SPIRIT OF THE FOREFATHERS OF THE MEMBERS. TO ENCOURAGE AND MAINTAIN AN AWARENESS OF THE AMERICAN REVOLUTIONARY PERIOD THROUGH THE INTERPRETATION OF ARTIFACTS FROM THE PERIOD AND THROUGH EDUCATIONAL SERVICES.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION A. - QUESTION 2
 RAYMOND MANNING, REGISTRAR, IS THE NEPHEW OF DONALD WESTERVELT, PAST PRESIDENT.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION A. - QUESTION 6
 THE SONS OF THE REVOLUTION IN THE STATE OF NEW YORK, INC., WAS INCORPORATED AS A MEMBERSHIP ORGANIZATION.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION A. - QUESTION 7A
 AT THE ANNUAL MEETING OF THE MEMBERSHIP IN DECEMBER, THE MEMBERS PRESENT

Schedule O (Form 990 or 990-EZ) 2011

IN PERSON OR BY PROXY VOTE TO ELECT THE OFFICERS AND THE BOARD OF DIRECTORS.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION A. - QUESTION 7B

ANY CHANGES IN THE CONSTITUTION OR BY-LAWS MUST BE APPROVED BY VOTE OF THE MEMBERSHIP AT THE ANNUAL MEETING OF THE MEMBERSHIP IN DECEMBER OR AT A SPECIAL MEETING OF THE MEMBERSHIP.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION B. - QUESTION 11B

THE FORM 990 IS DISTRIBUTED TO THE EXECUTIVE COMMITTEE AND THE AUDIT COMMITTEE FOR REVIEW PRIOR TO FILING.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION B. - QUESTION 12C

A COPY OF THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED ANNUALLY TO ALL BOARD MEMBERS AND THE ORGANIZATION OBTAINS A WRITTEN ACKNOWLEDGEMENT OF RECEIPT THEREOF FROM EACH BOARD MEMBER.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION C. - QUESTION 19

THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.

RECONCILIATION OF NET ASSETS

PART XI - LINE 5

5. UNREALIZED GAIN ON INVESTMENTS: 523,425.

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box.
Note: Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Name of exempt organization or other filer, see instructions.
SONS OF THE REVOLUTION IN THE STATE
Employer identification number (EIN) or
Enter filer's identifying number, see instructions
13-5563011
Social security number (SSN)

Table with columns: Application Is For, Return Code, Application Code, Return Code. Rows include Form 990-BL, Form 990-EZ, Form 990-PF, Form 990-T.

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.
The books are in the care of SONS OF THE REVOLUTION IN NYS
Telephone No. 212 425-1776 FAX No.
If this organization does not have an office or place of business in the United States, check this box.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.
8a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.
8b \$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.
8c \$

Signature and Verification must be completed for Part II only.
Under penalty of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.
ACCOUNTANTS AUTHORIZED TO SIGN RETURNS
Date: MAY 13 2013

Signature: CONDON O'BRIEN MCGINTY & DONNELLY LLP
1 BATTERY PARK PL, 14th Floor
NEW YORK, NY 10004-1405

Form 8868 (Rev. January 2012) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1708
File a separate application for each return.
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box.
If you are filing for an Automatic (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only.
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Name of exempt organization or other filer, see instructions.
SONS OF THE REVOLUTION IN THE STATE
Employer identification number (EIN) or
Enter filer's identifying number, see instructions
13-5563011
Social security number (SSN)

Table with columns: Application Is For, Return Code, Application Code, Return Code. Rows include Form 990, Form 990-BL, Form 990-EZ, Form 990-PF, Form 990-T.

The books are in the care of SONS OF THE REVOLUTION IN NYS
Telephone No. 212 425-1776 FAX No.
If this organization does not have an office or place of business in the United States, check this box.

1 I request an automatic 3-month (6 months for a corporation) extension to file Form 990-T extension of time until 05/15, 20 13, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
calendar year 20 11, and ending 09/30, 20 12.
2 If the tax year entered in line 1 is for less than 12 months, check reason:
Initial return
Final return
Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.
3a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.
3b \$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.
3c \$

Caution: If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8845-EO and Form 8879-EO for payment instructions.
CONDON O'BRIEN MCGINTY & DONNELLY LLP
1 BATTERY PARK PL, 14th Floor
NEW YORK, NY 10004-1405
Form 8868 (Rev. 1-2012)
8BC04T 0030 1/28/2013 10:10:24 AM V 11-6.4 NEW YORK, NY 10004-1405

CONDON O'NEARA MCGINTY & DONNELLY LLP
 ONE BATTERY PARK PLAZA, 7TH FLOOR
 NEW YORK, NY 10004-1405

Instructions for filing
 SONS OF THE REVOLUTION IN THE STATE
 OF NEW YORK, INC.
 NY Form 500
 New York 500 - Annual Filing for Charitable Org.
 for the period ended September 30, 2012

Signature...
 The original return should be dated and signed by two officers
 of organization.

Filing...
 The signed return should be filed on or before August 15, 2013
 with...

NYS Department of Law
 (Office of the Attorney General)
 Charities Bureau - Registration Section
 120 Broadway
 New York, New York 10271

A filing fee of \$275. must be submitted with the report payable
 to the NYS Department of Law.

Form CHAR500 <small>The form used for filing Articles 7-A and 7-B (replaces forms CHAR 487, CHAR 493 and CHAR 499)</small>	Annual Filing for Charitable Organizations New York State Department of Law (Office of the Attorney General) Charities Bureau - Registration Section 120 Broadway New York, NY 10271 http://www.charitiesnys.com	2 0 1 1 Open to Public Inspection
1. General Information		
a. For the fiscal year beginning (mm/dd/yyyy) <u>10/01/2011</u> and ending (mm/dd/yyyy) <u>09/30/2012</u>		
b. Check if applicable for NYS: c. Name of organization: SONS OF THE REVOLUTION IN THE STATE OF NEW YORK, INC. Address change: _____ Name change: _____ Initial filing: _____ Final filing: _____ Amended filing: _____ NY registration pending: _____		
d. Fed. employer ID no. (EIN) (see instructions): 13-5563011		
e. NY State registration no. (if #4#): 44783		
f. Telephone number: (212) 425-1776		
g. Email: ADMINISTRATORS@SONS		

2. Certification - Two Signatures Required
 We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

Signature	Printed Name	Title	Date
Signature	Printed Name	Title	Date

a. President or Authorized Officer
 b. Chief Financial Officer or Treas.

3. Annual Report Exemption Information

a. Article 7-A annual report exemption (Article 7-A registrants and dual registrants)
 Check if total contributions from NY State (including residents, foundations, corporations, government agencies, etc.) did not exceed \$25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during this fiscal year.
 NOTE: An organization may claim this exemption if no PFR or FRC was used and either: 1) It received an allocation from a federated fund, United Way or incorporated community appeal and contributions from other sources did not exceed \$25,000 or 2) It received all or substantially all of its contributions from one government agency to which it submitted an annual report similar to that required by Article 7-A.
 b. EPTL annual report exemption (EPTL registrants and dual registrants)
 Check if gross receipts did not exceed \$25,000 and assets (market value) did not exceed \$25,000 at any time during this fiscal year.
 For EPTL or Article-7A registrants claiming the annual report exemption under the one law under which they are registered and for dual registrants claiming the annual report exemptions under both laws, simply complete part 1 (General Information), part 2 (Certification) and part 3 (Annual Report Exemption Information) above. **Do not submit a fee, do not complete the following schedules and do not submit any attachments to this form.**

4. Article 7-A Schedules
 If you did not check the Article 7-A annual report exemption above, complete the following for this fiscal year:
 a. Did the organization use a professional fund raiser, fund raising counsellor or commercial coventurer for fund raising activity in NY State? Yes* No
 * If "Yes", complete Schedule 4a.
 b. Did the organization receive government contributions (grants)? Yes* No
 * If "Yes", complete Schedule 4b.

5. Fee Submitted: See last page for summary of fee requirements.
 Indicate the filing fee(s) you are submitting along with this form:
 a. Article 7-A filing fee \$ 25.
 b. EPTL filing fee \$ 250.
 c. Total fee \$ 275.
 Submit only one check or money order for the total fee, payable to "NYS Department of Law"

6. Attachments - For organizations that are not claiming annual report exemptions under both laws, see last page for required attachments → → →

