EXTENDED TO AUGUST 15, 2019

Form **990**

Return of Organization Exempt From Income Tax

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

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

2017 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasu

► Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service and ending SEP 30, 2018 OCT 1, 2017 A For the 2017 calendar year, or tax year beginning D Employer identification number C Name of organization SONS OF THE REVOLUTION IN THE STATE Address change OF NEW YORK, INC. Name change 13-5563011 Doing business as Initial return E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite (212) 425-1778]Final return/ 54 PEARL STREET G Gross receipts \$ 1,932,340, City or town, state or province, country, and ZIP or foreign postal code Amended return NEW YORK, NY 10004-4300 H(a) Is this a group return Applica-tion F Name and address of principal officer: PETER C. HEIN Yes X No for subordinates? _____ pending H(b) Are all subordinates included? SAME AS C ABOVE Tax-exempt status: X 501(c)(3) If "No," attach a list. (see instructions) 501(c) () ◀ (insert no.) 4947(a)(1) or J Website: WWW.SONSOFTHEREVOLUTION.ORG H(c) Group exemption number L Year of formation: 1884 Other > M State of legal domicile: NY K Form of organization: X Corporation Trust Association Part I | Summary Briefly describe the organization's mission or most significant activities: TO PERPETUATE THE MEMORY OF THE Governance MEN WHO ACHIEVED AMERICAN INDEPENDENCE. SEE ALSO SCHEDULE O. if the organization discontinued its operations or disposed of more than 25% of its net assets. Check this box 39 Number of voting members of the governing body (Part VI, line 1a) 39 Number of independent voting members of the governing body (Part VI, line 1b) Activities & 14 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 65 6 Total number of volunteers (estimate if necessary) ٥. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 4,266. b Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** 484.849. 219,465 Contributions and grants (Part VIII, line 1h) Revenue 190,762. 184.144. Program service revenue (Part VIII, line 2g) 168,064. 216,847, 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 635,169. 605,626. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,478,844. 1,226,082. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ٥. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. ٥. Benefits paid to or for members (Part IX, column (A), line 4) 14 427,628, 531,213. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. ٥. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 693,888. 700,550. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,231,763. 1,121,516. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 247,081. 104,566, Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 5 8,000,606. 7,653,658 20 Total assets (Part X, line 16) 230 053 211,898, 21 Total liabilities (Part X, line 26) 7,788,708. 7,423,605. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Date Signature of officer Sign Here Type or print name and title PTIN Preparer's signature Print/Type preparer's name Caruso 2019 P0074946 Paid 13-3628255 CONDON O'MEARA MCGINTY & DONNELLA IL Firm's EIN Preparer Firm's name Firm's address ONE BATTERY PARK PLAZA TH FL. Use Only Phone no. 212-661-7777 NEW YORK, NY 10004 X Yes May the IRS discuss this return with the preparer shown above? (see instructions)

732,433.

including grants of \$

Form 990 (2017)

) (Revenue \$

4d Other program services (Describe in Schedule O.)

Total program service expenses

13-5563011

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	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 Revenue Procedure 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		X
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		X
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?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
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		<u> </u>
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		<u> </u>
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		<u> </u>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			**
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	١		
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			•
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
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			
		14b		х
45	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	1-7-15		<u> </u>
15		15		x
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	<u> </u>		
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>		
10	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,"			
13	complete Schedule G. Part III	19		х
	COMPLETE SUREGUE S. FAIL III		990	(2017)

Form	990 (2017) OF NEW YORK, INC. 13-5563	011	P	<u>age 4</u>
Par	t IV Checklist of Required Schedules (continued)		,	
			Yes	No_
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		
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		Х
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		X
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			
	Schedule J	23		X
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			
	Schedule K. If "No", go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<u> </u>	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			l
	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, 6, or 22 for receivables from or payables to any current or		l	
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		- 1 No.	
	instructions for applicable filing thresholds, conditions, and exceptions):			لتيا
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		-	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		 	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	. 29	<u> </u>	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	1	l	
	contributions? If "Yes," complete Schedule M	30	X	├
31	Did the organization liquidate, terminate, or dissolve and cease operations?		1	
	If "Yes," complete Schedule N, Part I	31	<u> </u>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	\vdash	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? 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_	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	. <u>35a</u>	 	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		\vdash
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		1	
	If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	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 in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Forn	1 990	(2017)

orm	990 (2017) OF NEW YORK, INC. 13-55630	1	P	age 5
	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u>.</u>		\Box
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	COMPANY NAME OF THE OWNER OF
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	2847A5A5A5A
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		H83	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in 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	Palate Market	X
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	l _		,,
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>	<u> </u>	<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	١		
	were not tax deductible?	6b	SEPREMENTE.	
7	Organizations that may receive deductible contributions under section 170(c).		X	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a_	x	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b_		_
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			x
_	to file Form 8282? If "Yes." indicate the number of Forms 8282 filed during the year 7d	7c	33464	
d		7e	1200/2748	X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	N/A	
g		79 7h	N/A	
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	XXXX		ST.
8	sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8	3552433	2015
	Sponsoring organizations maintaining donor advised funds.			3 N
9 .	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a	MENTAL P	F#F 45.053
a	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10 D	Section 501(c)(7) organizations. Enter:		, m	
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
. а	Gross income from members or shareholders N/A 11a	11.0		
	C to the state of			
_	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.			
	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			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	х
	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		l

13-5563011

OF NEW YORK, INC.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 6a, 8b, or 10b below, describe the circumstances, processes, or changes in ochecute 3. 335 mistrations.			
	Check if Schedule O contains a response or note to any line in this Part VI			Х
Sec1	tion A. Governing Body and Management			
		w newspecial	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			9.4.2
	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, or trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		х
	Did the organization have members or stockholders?	6	х	
6	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
7a		7a	x	
	more members of the governing body?	,,,		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7b	х	
	persons other than the governing body?			564
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		X	
а	The governing body?	8a_	x	
b	Each committee with authority to act on behalf of the governing body?	8b_		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			ا
	organization's mailing address? If "Yes." provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			· · · · ·
	•		Yes	
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	TO F		
	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	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
·	in 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	
	Did the process for determining compensation of the following persons include a review and approval by independent	T.C.F	35.5	200
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_	The organization's CEO, Executive Director, or top management official	15a		Х
		15b		х
Ø	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		120.1	
40	IT TES TO THE 108 OF 100, describe the process in scriedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16a		X
	taxable entity during the year?	10 Att	Market St.	₹06¥2
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation		33.	
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		Arrest in	100
	exempt status with respect to such arrangements?	16b		L
Sec	tion C. Disclosure			_
17	List the states with which a copy of this Form 990 is required to be filed NY	11 - 1- 1		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) as	/allable	;	
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	ial	
	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:			
	MS. JACQUELINE MASSEO - 212-425-1778			
	54 PEARL STREET, NEW YORK, NY 10004-4300			
73200	3 11-28-17	Form	1990	(2017)

OF NEW YORK, INC.

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

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

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

- 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.

X 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	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) AMBROSE M. RICHARDSON III	12.00								_ :	
PRESIDENT		х		х	_	_		0.	0.	0.
(2) PETER C. HEIN	12.00									1
FIRST VICE PRESIDENT		х	_	х	_			0.	0.	0.
(3) WELEY OLER IV	1.00	ļ							_	_
SECOND VICE PRESIDENT		x	_	х	_	<u> </u>		0.	0.	0.
(4) ROBERT A. BELL	1.00	1						<u> </u>		
THIRD VICE PRESIDENT		x	<u> </u>	х	<u> </u>	ļ		0.	0.	0.
(5) THOMAS P. ROGERS	5.00									
TREASURER		х		х	_	_		0.	0.	. 0.
(6) MATTHEW NORGARD	5.00			İ					ĺ	_
SECRETARY		х	_	Х	_	<u> </u>		0.	0.	0.
(7) REV. CHRISTOPHER CULLEN	2.00	1								_
CHAPLAIN		X_		х	<u> </u>	<u> </u>		0.	0.	0.
(8) P. LAYTON SANDERS	2.00				ĺ			1		
REGISTRAR		х	<u> </u>	х	L	_	_	0.	0.	0.
(9) ALAN W. BORST, JR.	1.00	4								
BOARD MEMBER		Х	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
(10) ANDREW W. RUSSELL	1.00	ļ								_
BOARD MEMBER		Х	_	_	<u> </u>	L-		0.	0.	0.
(11) MICHAEL P. CONEYS	1.00						l			
BOARD MEMBER		х	_	_	┡	<u> </u>	<u> </u>	0.	0.	0.
(12) KENNETH H. CHASE	1.00	┨			l					l ,
BOARD MEMBER		х		<u> </u>	<u> </u>	<u> </u>	_	0.	0.	0.
(13) RAYMOND J. MANNING	2.00	1	l		1		1			
BOARD MEMBER		Х	<u> </u>	<u> </u>	<u> </u>	<u> </u>	 	0.	0.	0.
(14) ANTHONY G. GRAY	1.00	┨				1	1		_	,
BOARD MEMBER		х	<u> </u>	<u> </u>	-	\vdash	<u> </u>	0.	0.	0.
(15) KEVIN J. LEHMANN	1.00	- _ }				1	1		0.	_
BOARD MEMBER		х	_	_	\vdash	 	<u> </u>	0.	0.	0.
(16) BRIAN GILL	1.00	 				1			_	_
BOARD MEMBER		Х	\vdash	├	<u> </u>	\vdash	<u> </u>	0.	0.	0.
(17) CHARLES M. HUG	1.00	١				1	Ì			_
BOARD MEMBER		Х	<u> </u>					0.	0.	0. Form 990 (2017)

732007 11-28-17

Form 990 (2017)

Part VII Section A. Officers, Directors, Trus	1	oloy	ees,			ghes	it C			$\overline{}$	
(A)	(B)				C)	_		(D)	(E)		(F)
Name and title	Average		not c		more	than e		Reportable	Reportable		Estimated amount of
	hours per week		, unle: cer ar					compensation from	compensation from related		other
	(list any	Ē					Ė	the	organizations	ء ا	ompensation
	hours for	direc				, E			(W-2/1099-MISC)		from the
	related	tee or	ustee			ensat		(W-2/1099-MISC)			organization
	organizations	al trus	nal tr		doyee	E 9				- 1	and related
	below line)	ndividual trustee or director	institutional trustee	Officer	y emp	Highest compensated employee	i iii			'	organizations
(18) JONATHAN JENSEN	1.00	트	트	┡╾	¥	포함	=			+	
BOARD MEMBER		x						0.	0		0.
(19) STEPHEN NOONAN	1.00										
BOARD MEMBER		x_						0.	0	.	0.
(20) CHRISTOPHER NORFLEET	1.00										
BOARD MEMBER		Х			<u> </u>	<u> </u>	_	0.	0	-	0.
(21) DAVID W. NORGARD	1.00	1						_		1	•
BOARD MEMBER		Х	ļ	_	_	▙	<u> </u>	0.			0.
(22) DAVID B. RICH III	1.00	 				l			0		0.
BOARD MEMBER	1 00	X	⊢	⊢	-	╁	├	0.	0		<u> </u>
(23) WILLIAM B. RICHARDS	1.00	- x						0.	o	.	0.
BOARD MEMBER (24) CRAIG WEAVER	1.00	<u> </u>	╁	-	╁─	+	├	<u> </u>		╁	
BOARD MEMBER	1.00	x						0.	o		0.
(25) ADAM P. HESS	5.00		t			T	ı			1	
BOARD MEMBER		x			1			0.	0		0.
(26) CHARLES LUCAS	1.00								<u> </u>		
PAST PRESIDENT		х			L.			0.	0	<u>. </u>	0.
1b Sub-total							ightharpoons	0.	C	Ť	0.
c Total from continuation sheets to Part VI	I, Section A						ightharpoons	110,000.		-	25,349.
d Total (add lines 1b and 1c)							<u> </u>	110,000.		•	25,349.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d al	bove	e) wh	o re	eceived more than \$100,	000 of reportable		1
compensation from the organization											Yes No
3 Did the organization list any former officer,	director or tr	ueta	ما م	w er	mnlo	wee	or	highest compensated er	nplovee on		
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s											3 X
4 For any individual listed on line 1a, is the su	ım of reportab	le co	amo	ensa	ation	anc	oth	ner compensation from t	he organization		
and related organizations greater than \$150											4 X
5 Did any person listed on line 1a receive or a											
rendered to the organization? If "Yes." con									, <u>,,,,,,</u>		5 X
Section B. Independent Contractors									·	·	
Complete this table for your five highest co										satior	n from
the organization. Report compensation for	the calendar y	ear	endi	ng w	vith •	or w	ithin		ear.		(0)
(A) Name and business	address	NC	NE					(B) Description of s	services	Con	(C) opensation
Traine and beautiful				-							
								<u></u>			
		_	_								
							-				
2 Total number of independent contractors (i	noludina but =		mita	d +^	the	se lie	stad	I above) who received m	ore than		
2 Total number of independent contractors (in \$100,000 of compensation from the organic		iot II	unte	U	0	0	JUGU	above, who received the			
\$100,000 of compensation from the organi		rrc									rm 990 (2017)

OF NEW YORK, INC.

Form 990 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) (C) (D) (A) (B) Estimated Reportable Reportable Position Name and title Average (check all that apply) compensation compensation amount of hours from from related other per organizations compensation week the organization (W-2/1099-MISC) from the Individual trustee or director (list any (W-2/1099-MISC) organization hours for Highest compensated and related related organizations organizations below Officer line) 1.00 (27) WILLIAM T. LIVINGSTON III 0 ٥. ٥. PAST PRESIDENT X (28) J. ROBERT LUNNEY 1.00 ٥. X PAST PRESIDENT (29) ROBERT N. MCKAY 1.00 0. 0. ٥. PAST PRESIDENT 1.00 (30) JOHN O'MALLEY ٥. 0. 0. PAST PRESIDENT 1.00 (31) LAURENCE SIMPSON 0 ٥. ٥. PAST PRESIDENT X (32) JAMES F. STEBBINS 1.00 ٥. ٥. ٥. Х PAST PRESIDENT 1.00 (33) KENT STRAAT ٥. X 0 0 PAST PRESIDENT 1.00 (34) GEORGE WATSON ٥. 0. 0 PAST PRESIDENT 1.00 (35) DONALD WESTERVELT 0, ٥. PAST PRESIDENT X 1.00 (36) F. DANIEL COLEMAN ٥. 0. 0. Х PAST PRESIDENT (37) JAMES R. GRAYSHAW 1.00 0. ٥. X 0. PAST PRESIDENT 1.00 (38) JOHN M. HILLIARD 0. ٥. 0 PAST PRESIDENT 1.00 (39) KEVIN HANLEY 0. 0. 0. X PAST PRESIDENT 40.00 (40) JESSICA B. PHILLIPS 110,000. 0. 25,349. x EXECUTIVE DIRECTOR

110,000

25,349.

Total to Part VII, Section A, line 1c

Page 9

OF NEW YORK, INC.

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under sections 512 - 514 (C) Related or Unrelated Total revenue exempt function business revenue revenue Grants Federated campaigns 41,975 Membership dues 1b 62,972. Fundraising events 1c Related organizations 1d 229,415 1e Government grants (contributions) All other contributions, gifts, grants, and 150,487 similar amounts not included above 10,968. Noncash contributions included in lines 1a-1f: \$ 484,849 Total. Add lines 1a-1f Business Code 190,762 900099 190,762. PROGRAM SERVICES Program Service All other program service revenue 190,762. Total. Add lines 2a-2f Investment income (including dividends, interest, and 93,878. 93,878 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 837,802 6 a Gross rents 188,451. b Less: rental expenses 649,351. Rental income or (loss) 649,351 649,351 Net rental income or (loss) (i) Securities (ii) Other Gross amount from sales of 298,457 assets other than inventory b Less: cost or other basis 224,271 and sales expenses Gain or (loss) 74 186 Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue 62,972. of including \$ contributions reported on line 1c). See 25,228 Part IV, line 18 40.774 b Less: direct expenses _____ b -15.546 -15,546 c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 900099 OTHER INCOME 11 a All other revenue 1,364 Total. Add lines 11a-11d 190,762 1,478,844 803,233. Total revenue. See instructions. 12

732009 11-28-17

Form 990 (2017)

13-5563011

Part X Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (B) Program service expenses (D) Fundraising Do not include amounts reported on lines 6b. Management and general expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 58,370. 314,042. 35,014. 407,426 Other salaries and wages Pension plan accruals and contributions (include 1,485. 1,620. section 401(k) and 403(b) employer contributions) 16,794 13,689. 57,939. 14,021. 2,158. 74,118. Other employee benefits 6,590. 789. 32,875. 25,496. Payroll taxes 10 Fees for services (non-employees): Management 375 375 Legal 85,756. 66,890. 15,436. 3,430. Accounting Lobbying _____ Professional fundraising services, See Part IV, line 17 Investment management fees Other, (If line 11g amount exceeds 10% of line 25, 4,612, 20,966. 16,354 column (A) amount, list line 11g expenses on Sch O.) 4,444. 4,444 Advertising and promotion 12 69,566. 13,330. 27,763, 28,473. Office expenses _____ 13 754. 3,344. 4,275. 177. Information technology 14 Royalties 15 29,107. 30,294. 59,401. 16 Occupancy 34. 4,910. 1,302. 3,574. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 22,011. 22,011. 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 205,708, 92,569. 113,139 Depreciation, depletion, and amortization 22 75,023 75,023. 23 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) MAINTENANCE & REPAIRS 53,947, 27,513, 26,434 19,648. 18,876. 38,524. SECURITY 31,686. PROGRAM RELATED SERVICE 31,686, 14.787. 4,887 19,763. 89. MISCELLANEOUS 4,195. 4,195 All other expenses 1,231,763. 732,433, 377,753 121,577 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

732010 11-28-17

Form 990 (2017)

Form 990 (2017)
Part X Balance Sheet

Ęą;	rV-	Balance Sneet	.				
		Check if Schedule O contains a response or note	e to any	line in this Part X		<u></u>	/B)
					(A) Beginning of year		(B) End of year
		Cook was interest begains	•		193,149.	1	77,421.
	1			······	47,063.	2	74 812.
.	2	Savings and temporary cash investments				3	,
	3	Pledges and grants receivable, net			118,555.	4	99,418.
.	- 4	Accounts receivable, net Loans and other receivables from current and for		inana dipartara			ZEPASA SAKONESKA KANA
	5						
-		trustees, key employees, and highest compensa Part II of Schedule L			2505 000 000 0000 0000	5	
	6	Loans and other receivables from other disqualif					
	0	section 4958(f)(1)), persons described in section	•	•			AND SECURE
ŀ		employers and sponsoring organizations of section					
		employees' beneficiary organizations (see instr).				6	
Assets	7	Notes and loans receivable, net				7	
Ass	8	Inventories for sale or use				8	
-	9				33,234.	9.	45,175.
	_	Land, buildings, and equipment: cost or other	 I I				
	iva	basis. Complete Part VI of Schedule D	102	5,685,747.		2.0	
	ь	Less: accumulated depreciation	10b	2,162,365.	and the second s	10c	3,523,382.
	11	Investments - publicly traded securities			3,525,609.	11	4,078,650.
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line 1				13	
	14	Intangible assets			•	14	
	15	Other assets. See Part IV, line 11			100,624.	15	101,748.
	16	Total assets. Add lines 1 through 15 (must equa		· · · · · · · · · · · · · · · · · · ·	7,653,658.	16	8,000,606.
	17	Accounts payable and accrued expenses			129,429.	17	110,150.
	18	Grants payable				18	
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete F			*.	21	
اي	22	Loans and other payables to current and former					
Liabilities		key employees, highest compensated employee	s, and c	isqualified persons.			
ğ						22	·
ן בֿי	23	Secured mortgages and notes payable to unrela	ted third	parties	·	23	
	24	Unsecured notes and loans payable to unrelated	third p	arties		24	
	25	Other liabilities (including federal income tax, pay	yables t	o related third			,
1		parties, and other liabilities not included on lines	17-24).	Complete Part X of			4
		Schedule D			100,624.	. 25	101,748.
	26	Total liabilities. Add lines 17 through 25		<u></u>	230,053.	26	211,898.
		Organizations that follow SFAS 117 (ASC 958)		here X and			
ဖွ		complete lines 27 through 29, and lines 33 and	d 34.				
2	27	Unrestricted net assets			4,352,402.	27	4,607,620.
ala	28	Temporarily restricted net assets			3.	28	0.
B	29				3,071,200.	29	3,181,088.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (AS	SC 958)	, check here 🕨 💹			
<u></u>		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
ISS	31	Paid-in or capital surplus, or land, building, or eq				31	
et/	32	Retained earnings, endowment, accumulated inc			F 100 CC	32	5 500 500
	33	Total net assets or fund balances			7,423,605.	33	7,788,708.
z	-	Total liabilities and net assets/fund balances			7,653,658.	34	8,000,606.

732011 11-28-17

Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

732012 11-28-17

Form 990 (2017)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name	of t	he organization SONS O	F THE REVOLUTION	N IN THE STATE				Employer	identification number						
		OF NEW	YORK, INC.						13-5563011						
Par	t I	Reason for Public (Charity Status (/	All organizations must co	omplete th	is part.) Se	e instructions	3.	<u> </u>						
The o	rgan	ization is not a private found	lation because it is: (F	For lines 1 through 12, c	heck only	one box.)									
1 [A church, convention of ch	urches, or associatio	n of churches described	l in sectio	n 170(b)(1	I)(A)(i).								
2 [A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	n 990 or 99	90-EZ).)									
з [A hospital or a cooperative	hospital service orga	nization described in s	ection 170	(b)(1)(A)(ii	ii).								
4 [A medical research organiz)(iii). Enter	the hospital's name,						
		city, and state:							···						
5 [An organization operated for the benefit of a college or university owned or operated by a governmental unit described in														
	section 170(b)(1)(A)(iv). (Complete Part II.)														
6 [A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).													
7 [
	section 170(b)(1)(A)(vi). (Complete Part II.)														
8 [A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete Par	t II.)										
9 [An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	ınction with a	land-grant	college						
		or university or a non-land-g	grant college of agrici	ulture (see instructions).	Enter the	name, city	, and state of	the college	or						
		university:													
10 [An organization that norma	Illy receives: (1) more	than 33 1/3% of its sup	port from c	contributio	ns, membersl	nip fees, an	d gross receipts from						
		activities related to its exen	npt functions - subjec	ct to certain exceptions,	and (2) no	more than	n 33 1/3% of i	ts support f	rom gross investment						
		income and unrelated busin													
		See section 509(a)(2). (Con													
11 [An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50	09(a)(4).								
12 [An organization organized	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or						
		more publicly supported or	ganizations describe	d in section 509(a)(1)	r section	509(a)(2).	See section	509(a)(3). (Check the box in						
		lines 12a through 12d that	describes the type of	f supporting organization	n and com	plete lines	12e, 12f, and	12g.							
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	oorted org	anization(s), t	pically by	giving						
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	tors or truste	es of the su	pporting						
		organization. You must o	complete Part IV, Se	ections A and B.											
b		Type II. A supporting org	anization supervised	or controlled in connec	tion with it:	s supporte	ed organizatio	n(s), by hav	ring						
		control or management of													
		organization(s). You mus	t complete Part IV,	Sections A and C.											
c		Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functional	lly integrate	d with,						
		its supported organization	n(s) (see instructions)). You must complete	Part IV, Se	ections A,	D, and E.								
d		Type III non-functionally	y integrated. A supp	orting organization oper	ated in co	nnection v	vith its suppo	ted organiz	zation(s)						
		that is not functionally int	tegrated. The organiz	ation generally must sat	isfy a distr	ibution red	quirement and	l an attentiv	reness						
		requirement (see instruct	ions). You must con	nplete Part IV, Sections	s A and D,	and Part	V.								
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type	II, Type III							
		functionally integrated, or	r Type III non-function	nally integrated supporti	ng organiz	ation.									
f	Ente	er the number of supported o	organizations												
g_		vide the following information	n about the supporte	d organization(s).											
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) is the orga in your govern	ing document?	(v) Amount of support (see in	-	(vi) Amount of other support (see instructions)						
		organization		above (see instructions))	Yes	No	support (see ii	- Istructions)	support (see matructions)						
						ļ									
					 		-		<u> </u>						
					1										
			Patrick Association (Principles of Principles of Principle	gara ya akiyewa e aa	2 TH 1 C 2 TO 2	a - 1 - 2 - 2 - 2 - 2									
Total							l		<u> </u>						

13-5563011

Partill 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.)

<u>Se</u>	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	164,658.	192,117.	511,537.	219,465.	484,849.	1,572,626.
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	a .					
4	Total. Add lines 1 through 3	164,658.	192,117.	511,537.	219,465.	484,849.	1,572,626.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						* * * * * * * * * * * * * * * * * * *
	column (f)					Are I fell i date	38,518.
	Public support. Subtract line 5 from line 4.						1,534,108.
Sec	ction B. Total Support			•		· · · · · · · · · · · · · · · · · · ·	
Cale	ndar year (or fiscal year beginning in) ⊳	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	164,658.	192,117.	511,537.	219,465.	484,849.	1,572,626.
8	Gross income from interest,	, * .*	. , .				And the second second
	dividends, payments received on				V.		
	securities loans, rents, royalties,				3.1		
	and income from similar sources	826,876.	848,647.	858,825.	881,002.	931,680.	4,347,030.
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					4 264	00.454
	assets (Explain in Part VI.)	8,430.	1,740.	77,315.	605.	1,364.	89,454.
	Total support. Add lines 7 through 10						6,009,110.
	Gross receipts from related activities,	•	•			12	840,428.
13	First five years. If the Form 990 is for	•	first, second, third	d, fourth, or fifth ta	x year as a section	501(c)(3)	
80/	organization, check this box and storection C. Computation of Publi	c Support Per	centage				>
				-1 (0)		44	25.53 %
	Public support percentage for 2017 (li					15	
	Public support percentage from 2016				· · · · · · · · · · · · · · · · · · ·		<u></u>
16a	33 1/3% support test - 2017. If the contains the support test - 2017 is the contains the support test - 2017.						
	stop here. The organization qualifies 33 1/3% support test - 2016. If the o						
D							. —
47.	and stop here. The organization qual 10% -facts-and-circumstances test						
ı/a	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
	meets the "facts-and-circumstances" 10% -facts-and-circumstances test	•					
. 10	more, and if the organization meets the						
	organization meets the "facts-and-circ						, P
10	Private foundation. If the organization						
18	Frivate foundation. It the organization	n did not check a	DOX OIT IIITE TO, TO	<u>., .00, 17a, 01 170</u>		dule A (Form 990	
1.8					Cone	(. 51111 550	J. 000

		. 0. 000, -0		·		
Part III	Suppor	t Schedule	for Organization	ns Described	l in Section	on 509(a)(2)

Schedule A (Form 990 or 990-EZ) 2017 OF	NEW YORK, IN	c.			13-556301	1 Page 3
Part III Support Schedule for O	rganizations	Described in S	ection 509(a)((2)		
(Complete only if you checked t	the box on line 10	of Part I or if the o	rganization failed	to qualify under Pa	rt II. If the organizat	ion fails to
qualify under the tests listed be						
Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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 per- formed, 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 bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf			.			<u>-</u>
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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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					<u> </u>	
c Add lines 10a and 10b	<u> </u>				<u> </u>	
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						

	assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)		<u> </u>	<u> </u>			
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a section	n 501(c)(3) organiza	ition,
	check this how and stop here						

Se	ction C. Computation of Public Support Percentage		
15	Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)	15	%
16	Public support percentage from 2016 Schedule A, Part III, line 15	16	%
Se	ction D. Computation of Investment Income Percentage		
17	Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	<u>%</u>
18	Investment income percentage from 2016 Schedule A, Part III, line 17	18	%
	a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 3	33 1/3%, and line 1	7 is not

a 33 1/3% support tests = 2017. If the organization did not check the box of fine 14, and line 10 is there are no 15 the organization did not check the box of fine 14, and line 10 is the organization did not check the box of fine 14, and line 10 is the organization did not check the box of fine 14.
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 - 2016. 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

732023 10-06-17

Schedule A (Form 990 or 990-EZ) 2017

12 Other income. Do not include gain or loss from the sale of capital

Page 4

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

Section A. All 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) 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?
- 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 (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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 in 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 in 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.
- 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 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.)

		Yes	No
		24	
	144172.108	3433.00	74-25-14
	1	mr.2844, 2284, alik	ANGLESCHELS
Ì			
			7
ı			Service Service
1	2	Series Amagen	* property country
		2	
-	3a		
- 1	216535	13.4n	31123
		100000	
	3b		
		1	
	3c	codesistant a Phi	STATUTE STEEL
		223	
	4a		
			10/21/200
			130
	4b		
	THE STATE OF		Telegan
	4c	estimate in the	
	4C	nasorom	THE STREET
1			Y 3
i			
		74.7	
- 1		4723	
i	5a		
		N	
		KOLATRILIZA.	TECHNOLOGY.
	_5b	-	
	5c		
	5 C	3	
		A DEC	
		,	
	6	[
		75792	-News
٠			1000
	7		
	i i		
		12002	75134U
	8	. Novige on	
	9a	Delite and a	COMPANIE SEL
	9b		
		£ 55.3	
	9c		
	_	W. 24-52	
	10a	377.05 1 22	-
		經濟	
	10b	[
	יטט		

SONS OF THE REVOLUTION IN THE STATE 13-5563011 Schedule A (Form 990 or 990-EZ) 2017 OF NEW YORK, INC. Page 5 Supporting Organizations (continued) Ye<u>s</u> 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 in (b) and (c) below, the governing body of a supported organization? 11a 11b **b** A family member of a person described in (a) above? c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 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. Type II Supporting Organizations Yes 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). Section D. All Type III Supporting Organizations 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? 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). By reason of the relationship described in (2), 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 plaved in this regard. 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 year (see instructions). 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. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions, Yes 2 Activities Test. Answer (a) and (b) 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 in (a) 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

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Schedule A (Form 990 or 990-EZ) 2017

activities but for the organization's involvement.

Parent of Supported Organizations. Answer (a) and (b) below.

trustees of each of the supported organizations? Provide details in Part VI.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

Schedule A (Form 990 or 990-EZ) 2017

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

The second second

4

Enter greater of line 2 or line 3 Income tax imposed in prior year

instructions).

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

Par	Type III Non-Functionally Integrated 509	a)(3) Supporting Orga	nizations (continued)	
C. I.	on D - Distributions	<u>, , , , , , , , , , , , , , , , , , , </u>		Current Year
	Amounts paid to supported organizations to accomplish exe	mpt purposes		
	Amounts paid to perform activity that directly furthers exemp			
-	organizations, in excess of income from activity	• •		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions.	. ,		
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
<u></u>		(i)	(ii)	(iii)
Section	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
	• • • • • • • • • • • • • • • • • • •		Pre-2017	Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
a				
b	From 2013			
	From 2014			
d	From 2015			
	From 2016			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.		and the second s	
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c.	1000		
8	Breakdown of line 7:			
a	Excess from 2013			
b	Excess from 2014			The second secon
с	Excess from 2015			AND
d	Excess from 2016		Description of the Control of the Co	
е	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

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 II, LINE 10, EXPLANATION FOR OTHER INCOME:
MISCELLANEOUS
2013 AMOUNT: \$ 8,430.
2014 AMOUNT: \$ 1,740.
2015 AMOUNT: \$ 2,315.
2013 AMOUNT: \$ 2,313.
2016 AMOUNT: \$ 605.
2017 AMOUNT: \$ 1,364.
TARIED NOTE DECORREDG
INSURANCE PROCEEDS
2015 AMOUNT: \$ 75,000.
PART II, SECTION C, LINE 17A, FACTS AND CIRCUMSTANCES TEST:
SONS OF THE REVOLUTION IN THE STATE OF NEW YORK, INC (THE "SOCIETY"),
QUALIFIES AS PUBLICLY SUPPORTED BECAUSE IT MEETS THE 10%
FACTS-AND-CIRCUMSTANCES TEST UNDER TREAS. REG 1.170A-9(E) (3) FOR THE YEAR
ENDED SEPTEMBER 30, 2018 IN THE FOLLOWING RESPECTS:
10% OF SUPPORT LIMITATION:
THE SOCIETY'S PUBLIC SUPPORT PERCENTAGE FOR FISCAL 2018 IS 25.53% WHICH
EXCEEDED 10%.
ATTRACTION OF PUBLIC SUPPORT AND PUBLIC MISSION:
THE SOCIETY PERPETUATES 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 THE PROPER CELEBRATION OF THE ANNIVERSARIES OF
WASHINGTON'S BIRTHDAY, THE BATTLES OF LEXINGTON AND BUNKER HILL, THE
732028 10-06-17 Schedule A (Form 990 or 990-EZ) 2017

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.)
FOURTH OF JULY, THE CAPITULATIONS OF SARATOGA AND YORKTOWN, THE EVACUATION
OF NEW YORK BY THE BRITISH ARMY, AND OTHER PROMINENT EVENTS RELATING TO OR
CONNECTED WITH THE WAR OF THE REVOLUTION; TO COLLECT AND SECURE FOR
PRESERVATION THE MANUSCRIPT ROLLS, RECORDS AND OTHER DOCUMENTS RELATING TO
THAT WAR; TO INSPIRE AMONG THE MEMBERS AND THEIR DESCENDANTS THE PATRIOTIC
SPIRIT OF THEIR FOREFATHERS; TO INCULCATE IN THE COMMUNITY IN GENERAL,
SENTIMENTS OF NATIONALITY AND RESPECT FOR THE PRINCIPLES FOR WHICH THE
PATRIOTS OF THE REVOLUTION CONTENDED; TO ASSIST IN THE COMMEMORATIVE
CELEBRATION OF OTHER GREAT HISTORICAL EVENTS OF NATIONAL IMPORTANCE, AND
TO PROMOTE SOCIAL INTERCOURSE AND THE FEELING OF FELLOWSHIP AMONG ITS
MEMBERS.
IN ADDITION, THE SOCIETY OPERATES A MUSEUM OPEN TO THE PUBLIC WITH THE
MISSION TO EDUCATE THE PUBLIC AND CREATE GENUINE APPRECIATION FOR NEW YORK
CITY HISTORY AS IT RELATES TO COLONIAL AMERICA, THE AMERICAN REVOLUTIONARY
WAR, AND THE EARLY REPUBLIC; THIS MISSION IS FULFILLED THROUGH THE
PRESERVATION OF ITS COLLECTION AND INTERPRETATION OF THE SOCIETY'S
LANDMARKED 1719 BUILDING ALONG WITH VARIED EXHIBITIONS OF ART AND
ARTIFACTS AS THEY RELATE TO THE HISTORIC SITE AND THE AMERICAN REVOLUTION.
THE MUSEUM STRIVES TO BE AN INSPIRING RESOURCE IN PROVIDING A THOROUGH
UNDERSTANDING OF VARIOUS ELEMENTS OF EARLY AMERICAN LIFE WHILE PROMOTING A
PARTICULAR APPRECIATION FOR THE AMERICAN REVOLUTIONARY WAR AND THE RICH
HISTORY THAT EXISTS IN LOWER MANHATTAN, WITH A CULTURALLY SIGNIFICANT
COLLECTION, THE MUSEUM WILL CONTINUE TO BE A VITAL INSTITUTION TO A
GROWING AUDIENCE THAT OFFERS COMPELLING PROGRAMS AND EXHIBITIONS WHILE
EXPANDING ON PUBLIC ACCESSIBILITY BOTH ON AND OFF SITE.
732028 10-06-17 Schedule A (Form 990 or 990-EZ) 20

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.)
SOURCES OF SUPPORT:
THE SOCIETY'S FUNDING COMES FROM DIVERSE SOURCES OF SUPPORT, INCLUDING A
NUMBER OF ORGANIZATIONS, INDIVIDUALS, INSTITUTIONS AND GOVERNMENTAL
ENTITIES THAT SUPPORT ITS PURPOSES. AS THE SOCIETY CONTINUES TO GROW IT
SEEKS TO DEVELOP ADDITIONAL FUNDRAISING ACTIVITIES TO ATTRACT A BROAD
RANGE OF PUBLIC SUPPORT FROM INDIVIDUALS AND INSTITUTIONS AND GOVERNMENTAL
ENTITIES WHO SUPPORT ITS MISSION. CURRENTLY THE SOCIETY HAS 878 MEMBERS
AND THE MUSEUM HAS 162 MEMBERS.
REPRESENTATIVE GOVERNING BODY:
THE SOCIETY IS GOVERNED BY IT S BOARD OF MANAGERS, WHICH REFLECTS A BROAD
RANGE OF INDIVIDUALS, INCLUDING INDIVIDUALS WITH SPECIAL BACKGROUND AND
EXPERTISE IN MANAGING AND OPERATING A NONPROFIT ORGANIZATION.
AVAILABILITY OF PUBLIC FACILITIES OR SERVICES; PUBLIC PARTICIPATION IN
PROGRAMS OR POLICIES:
THE SOCIETY'S FACILITIES AND PROGRAMS ARE OPEN TO ALL INDIVIDUALS WHO WISH
TO LEARN ABOUT THE HISTORY OF COLONIAL AMERICA, THE AMERICAN REVOLUTIONARY
WAR, AND THE EARLY REPUBLIC. THE SOCIETY MAINTAINS ITS LANDMARKED 1719
BUILDING, WHICH ON THE FIRST FLOOR SERVES AS THE SITE OF AN ESTABLISHMENT
OPEN TO THE PUBLIC SERVING FOOD AND DRINKS, A USAGE SIMILAR TO THAT WHICH
EXISTED ON THE PREMISES DURING THE REVOLUTIONARY WAR ERA. THE SECOND,
THIRD AND FOURTH FLOORS OF THE FIVE BUILDINGS THAT MAKE-UP THE FRAUNCES
TAVERN COMPLEX ARE USED FOR THE SOCIETY'S PUBLIC EDUCATIONAL PROGRAMMING.
PROGRAMS OFFERED TO THE PUBLIC BY THE SON'S OF THE REVOLUTION IN THE STATE

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section E, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for (See instructions.)	ion B, lines 1 and 2; Part IV, Section C, line 1; Part V, Section B, line 1e; Part V,
OF NEW YORK, INC. INCLUDE:	
A. FRAUNCES TAVERN MUSEUM - OPEN TO THE PUBLIC SEVEN DAYS A WEEK	
FOCUSING ON THE AMERICAN REVOLUTION, THE MUSEUM'S EDUCATIONAL PROGRAMING	
FOCUSING ON THE AMERICAN REVOLUTION, THE MODEL E ESCRITTURE PROCEEDING	
TARGETS BOTH ADULT LEARNERS AND CHILDREN. IT HAS BECOME A STAPLE IN THE	
NEW YORK CITY SCHOOL SYSTEM. ADULT VISITORS WHO HAVE RETURNED TO FRAUNCES	
NEW YORK CITY DERICOR DEPTH. IDDET	
TAVERN FOR VARIOUS OCCASIONS RECALL STANDING IN THE MUSEUM WHILE ON AN	
ELEMENTARY SCHOOL FIELD TRIP EVEN IF IT HAPPENED SEVERAL DECADES AGO. ONE	
PARENT RECALLED IN THE MUSEUM COMMENT BOOK, "I CAME WHEN I WAS IN	
ELEMENTARY SCHOOL, BUT AFTER MANY YEARS AND AT 54, I CAN APPRECIATE IT	
MORE. THANK YOU FOR KEEPING THE MUSEUM RUNNING FOR ME AND EVERYONE ELSE	
TO ENJOY."	
AS LEARNING THEORIES HAVE EVOLVED THROUGH THE YEARS, THE MUSEUM'S TEACHING	
TECHNIQUES HAVE ADAPTED TO COMPLEMENT UP-TO-DATE EDUCATION MODELS TO	
ENSURE EXCELLENT QUALITY IN PROGRAMMING. FOR THE 2016/2017 SCHOOL YEAR,	
The state of the s	
THE EDUCATIONAL PROGRAMMING SERVED 4,740 STUDENTS AND 177 CLASSES. CLASSES	
RANGED FROM 6 TO 60 STUDENTS AT A TIME AND EACH PROGRAM IS 90 MINUTES	
LONG. THE PROGRAM TYPICALLY OCCURS IN THE MORNING (BETWEEN 10AM -12)	10
BEFORE THE MUSEUM'S DAILY PUBLIC HOURS. THIS ALLOWS STAFF TO PRIORITIZE	
THE STUDENTS' EXPERIENCE IN THE MUSEUM AND NOT BE CONCERNED WITH	
OVERCROWDING BY THE PUBLIC.	
THE REGULAR SCHOOL PROGRAM IS TITLED, REVOLUTIONARY HEROES & TAVERN LIFE.	
THE THE PROPERTY OF THE TAXABLE PROPERTY OF THE PROPERTY OF TH	
THROUGH THIS PROGRAM STUDENTS VISIT THE LONG ROOM, WHERE GEORGE WASHINGTON	
BID FAREWELL TO HIS OFFICERS AFTER THE REVOLUTIONARY WAR, TO LEARN ABOUT	
THE TAVERN'S ROLE DURING THE REVOLUTION AND IN COLONIAL LIFE. IN THE JOHN	
732028 10-06-17	Schedule A (Form 990 or 990-EZ) 2017

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section II; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, III Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for (See instructions.)	on B, lines 1 and 2; Part IV, Section C, ne 1; Part V, Section B, line 1e; Part V,
WARD DUNSMORE GALLERY, STUDENTS USE VISUAL THINKING STRATEGIES TO LEARN	
ABOUT VARIOUS REVOLUTIONARY WAR PARTICIPANTS. INTERACTIVE ACTIVITIES ARE	
USED TO EXPERIENCE AND INTERPRET COLONIAL LIFE IN NEW YORK.	
TO EXPAND ON OUR CURRENT SCHOOL PROGRAM, WE LAUNCHED IN THE FALL OF 2017 A	
NEW QUILL WRITING PROGRAM ENTITLED "DOCUMENTING HISTORY" BASED ON THE	
STUDY OF PRIMARY SOURCES.	
THIS PROGRAM TARGETS GRADES 4-12. STUDENTS LEARN QUILL WRITING AND STUDY	
	-
PRIMARY DOCUMENTS SUCH AS REVOLUTIONARY WAR SPY BENJAMIN TALLMADGE'S	
DIARY, AND OATH OF ALLEGIANCES TO THE CROWN OR PATRIOT CAUSE. STUDENTS	
WILL SPEND THE FIRST HALF OF THIS PROGRAM IN THE MUSEUM'S LONG ROOM AND	
MCENTEE GALLERY LEARNING ABOUT COLONIAL LIFE BY STUDYING PRIMARY DOCUMENTS	
THAT REVEAL THIS HISTORY, A REENACTMENT OF WASHINGTON'S FAREWELL TO HIS	
OFFICERS WILL TAKE PLACE IN THE MESICK GALLERY. QUILL WRITING WILL TAKE	
PLACE IN THE MUSEUM'S FLAG GALLERY WHERE STUDENTS WILL SIGN THEIR NAMES	
WITH A QUILL AND INK, CHOOSING WHETHER TO SWEAR AN OATH OF ALLEGIANCE TO	
THE CROWN OR COLONIES.	
THE COURSE WITH PROTECTION IN THE PROTECTION OF COURSE PROCESS ARE DIVERGE	
THE SCHOOLS THAT PARTICIPATE IN THE EDUCATIONAL SCHOOL PROGRAM ARE DIVERSE	
AND COME FROM ALL FIVE BOROUGHS OF NEW YORK CITY. CLASSES THAT	
PARTICIPATED INCLUDE: 54 7TH GRADE STUDENTS FROM IS 238 IN BROOKLYN, 100	
5TH GRADE STUDENTS FROM PS 136 IN QUEENS, 96 5TH GRADE STUDENTS FROM PS	
234 IN MANHATTAN, AND 52 4TH GRADE STUDENTS FROM BRONX COMMUNITY CHARTER	
SCHOOL. IN TOTAL, 168 STUDENT GROUPS WERE IN THE 1ST THROUGH 5TH GRADES.	
EIGHT STUDENT GROUPS WERE IN THE 6TH THROUGH 8TH GRADE, AND 1 STUDENT	
GROUP WAS IN 9TH THROUGH 12TH GRADE. OF THE 4,740 TOTAL STUDENTS WHO	
732028 10-06-17	Schedule A (Form 990 or 990-EZ) 2017

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.)
ATTEND THE MUSEUM'S SCHOOL TOUR PROGRAM 2,047 WERE FROM TITLE I SCHOOLS,
WHICH ARE SCHOOLS WITH A HIGH PERCENTAGE OF STUDENTS FROM LOW-INCOME
FAMILIES.
EACH SCHOOL PROGRAM CAN ACCOMMODATE A SINGLE CLASS AS WELL AS LARGER GROUP
SIZES OF 36-54 STUDENTS AT A TIME WHEN REQUESTED. DUE TO THE MUSEUM'S
GROWING VOLUNTEER PROGRAM, WE ARE ABLE TO OFFER MORE THAN ONE SCHOOL
PROGRAM PER DAY.
EDUCATORS, TRAINED BY THE EDUCATION & PUBLIC PROGRAMS COORDINATOR, HELP TO
ENSURE EXCEPTIONAL QUALITY IN THE SCHOOL PROGRAM WHICH PROMOTES CRITICAL
THINKING TO GIVE STUDENTS AN AUTHENTIC AND PERSONAL ENCOUNTER WITH HISTORY
(NYS LEARNING STANDARDS SOCIAL STUDIES, LANGUAGE ARTS, ARTS) THE PROGRAM
INCORPORATES USAGE OF HANDLING OBJECTS WHICH IS ESSENTIAL TO STUDENTS
EXPERIENCING HISTORY, THIS PART OF THE PROGRAM RECEIVES EXCEPTIONAL PRAISE
YEAR AFTER YEAR. STUDENTS ARE GIVEN TAKE-HOME TRI-LINGUAL BROCHURES
(ENGLISH, SPANISH, MANDARIN) TO ENCOURAGE DIALOGUE AT HOME ABOUT WHAT THE
STUDENT LEARNED DURING OUR PROGRAM. ADDITIONALLY, THESE BROCHURES SERVE AS
A PASS TO RETURN TO THE MUSEUM FREE FOR THE ENTIRE FAMILY.
PROVIDING ACCESS TO THE MISSION FOR THOSE WHO ARE DIFFERENTLY ABLE HAS
BECOME ESSENTIAL TO SERVING THE COMMUNITY. IN APRIL OF 2014 THE MUSEUM
HOSTED ITS FIRST ACCESS PROGRAM IN ASSOCIATION WITH AUTISM FRIENDLY
SPACES. THIS PROGRAM INCLUDED STAFF TRAINING, SPECIAL CRAFTS AND
ACTIVITIES FOR CHILDREN AND THEIR FAMILIES TO ENJOY WHILE EXPERIENCING THE
MUSEUM.

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.)
THE MUSEUM OFFERS SIX WALKING TOURS THROUGHOUT THE YEAR: "A REBELLIOUS
BREW: THE NEW YORK TEA PARTY OF 1774" IN APRIL (2 HOURS), "A TOAST TO
HISTORY: INDEPENDENCE EVE IN JULY" (2 HOURS), "THE AMERICAN
REVOLUTION: DAWN OF INDEPENDENCE" (2 HOURS), "EVACUATION DAY" IN
NOVEMBER (2 HOURS), "WASHINGTON & HAMILTON IN NEW YORK CITY" IN AUGUEST
(2 HOURS), AND "SYMPATHETIC SPIES: GEORGE WASHINGTON'S EYES AND EARS IN
LOWER MANHATTAN" IN SEPTEMBER (2 HOURS). THERE ARE 30 PARTICIPANTS PER
TOUR,
DUE TO THE POPULARITY OF THESE WALKING TOURS, THE MUSEUM NOW OFFERS
EACH OF THE TOURS ON MULTIPLE DATES. TO ENSURE QUALITY PROGRAMMING,
THE MUSEUM CAPS TOURS AT 30 PARTICIPANTS PER TOUR.
SINCE 2014, THE MUSEUM HAS PARTICIPATED IN "NIGHT AT THE MUSEUMS", A
COLLABORATIVE EVENT WITH DOWNTOWN CULTURAL GROUP AND RIVER TO RIVER
FESTIVAL. THIS EVENT TAKES PLACE IN JUNE AND AIMS TO PROVIDE GREATER
ACCESSIBILITY BY KEEPING CULTURAL INSTITUTIONS OPEN LATER THAN
TRADITIONAL PUBLIC HOURS AND OFFERING FREE ADMISSION FROM 4:00-8:00PM.
IN 2017, THE MUSEUM RECEIVED 410 VISITORS, TRIPLE THE STANDARD DAILY
ATTENDANCE, [ON ONE DAY]
SPECIAL FAMILY PROGRAMMING IS AVAILABLE DURING NIGHT AT THE MUSEUMS
THAT INCLUDES LIVE 18TH CENTURY MUSIC AND THE TRICORNE DANCE ENSEMBLE,
WHO TEACH VISITORS COLONIAL DANCE. DOCENT LED TOURS ARE OFFERED
THROUGH THE EVENING FROM 4:00-8:00PM.
THE MUSEUM OFFERS ANNUAL SPECIAL PUBLIC PROGRAMMING IN SEPTEMBER: SPY

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.)
WEEK, FOR NATHAN HALE DAY (REVOLUTIONARY WAR SPY). THIS WEEK-LONG
THEMED PROGRAM FOCUSES ON ESPIONAGE DURING THE REVOLUTIONARY WAR. IT
INCLUDES A RELATED THEMED LECTURE AND A SPECIAL DOCENT-LED ESPIONAGE
THEMED PUBLIC TOUR OFFERED DAILY FOR THE WEEK. THIS TOUR FOCUSES ON
WASHINGTON'S CULPER SPY RING, NATHAN HALE, BENJAMIN TALLMADGE, LYDIA
DARRAGH, AND OTHER NOTABLE SPIES FEATURED IN THE MUSEUM'S GALLERIES.
SPECIAL ARTIFACTS FROM THE MUSEUM'S COLLECTION ARE ALSO BE ON DISPLAY.
IN 2017 WE ALSO INCLUDED A FAMILY DAY WITH CHILDREN'S AUTHOR CLAUDIA
FRIDDELL, WHO LED CHILDREN-FRIENDLY SPY ACTIVITIES IN THE EDUCATIONAL
CENTER.
"SPY WEEK" IS IN RESPONSE TO A 2015 SUMMER SURVEY ADMINISTERED BY THE
MUSEUM. FORTY ONE PERCENT OF PARTICIPANTS WERE INTERESTED IN
ESPIONAGE-RELATED TOPICS, MAKING IT THE MOST POPULAR RESULT ON THE
SURVEY.
PART II, SETION C - LINE 17A
IN RESPONSE TO INQUIRIES ABOUT CHILDREN'S PROGRAMMING, A SCAVENGER HUNT
ACTIVITY WAS CREATED. THIS NEW INTERACTIVE ACTIVITY AIMS TO ENGAGE
CHILDREN AND FAMILIES USING QUESTIONS AND HINTS ALL FOCUSED ON
ALEXANDER HAMILTON TO FIND SELECTED ARTIFACTS WITHIN THE MUSEUM'S
GALLERIES. IT IS AVAILABLE AT THE FRONT DESK (COMPLIMENTARY WITH
ADMISSION) AND DOES NOT REQUIRE THE GUIDANCE OF MUSEUM STAFF.
DUE TO THE POPULARITY OF THE HAMILTON SCAVENGER HUNT, THE MUSEUM ALSO
OFFERS A SKETCH ACTIVITY AVAILABLE AT THE FRONT DESK, ENCOURAGING
VISITORS TO PICK AN ARTIFACT IN THE MUSEUM AND DRAW IT "BROUGHT TO
732028 10-06-17 Schedule A (Form 990 or 990-EZ) 2017

SONS OF THE REVOLUTION IN THE STATE 13-5563011 Page 8 Schedule A (Form 990 or 990-EZ) 2017 OF NEW YORK, 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. LIFE" DURING ITS TIME OF USE. THESE "COLONIES IN CONTEXT" SKETCHES ARE FEATURED ON THE MUSEUM'S SOCIAL MEDIA. TO CONTINUE CELEBRATING THE POPULARITY OF HAMILTON, THE MUSEUM LAUNCHED ITS FIRST PROGRAM COMMEMORATING THE DATE OF ALEXANDER HAMILTON'S DEATH. THIS EVENT INCLUDED A READING OF HAMILTON'S EULOGY AT HIS GRAVE IN TRINITY CHURCHYARD, WITH A SOLD OUT CROW OF 70 ATTENDEES. IN 2017 THE MUSEUM STARTED A BOOK CLUB. THE CLUB MEETS ONCE PER CALENDAR QUARTER TO DISCUSS A RECENTLY PUBLISHED BOOK RELATED TO THE THIS PROGRAM PROVIDES AN ALTERNATIVE WAY TO ACCESS MUSEUM'S MISSION. THE MISSION AND FACILITATE THOUGHTFUL DISCUSSION ON CURRENT PERSPECTIVES REGARDING THE REVOLUTIONARY WAR. SINCE 2015 THE MUSEUM CELEBRATES GEORGE WASHINGTON'S FAREWELL TO HIS OFFICERS ON DECEMBER 4, 1783 WITH A REENACTMENT OF THE FAREWELL IN THE MUSEUM'S HISTORIC LONG ROOM. A WASHINGTON REENACTOR PERFORMS THE FAREWELL IN THE LONG ROOM ACCORDING TO THE TEXT IN BENJAMIN TALLMADGE'S MEMOIR. THERE ARE USUALLY 5-7 CYCLED PERFORMANCES ON THIS DATE ALLOWING 25 VIEWERS PER SOLD OUT PERFORMANCE THE MUSEUM HAS NINE GALLERIES FOR EXHIBITION OF ITS 8,000 PIECE THERE ARE THREE ROTATING GALLERIES AND AN ANNUAL AVERAGE COLLECTION. OUR CURRENT ROTATING EXHIBITS INCLUDE, "FEAR & OF TWO NEW EXHIBIONS. FORCE: NEW YORK CITY'S SONS OF LIBERTY", WHICH FOCUSES ON THE LOCAL BRANCH OF THE SONS OF LIBERTY, THE NEW YORK TEA PARTY, AND HAS AN

TEA VISITORS CAN SMELL.

INTERACTIVE COMPONENT THAT INCLUDES A HISTORICALLY ACCURATE CHEST OF

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.)
THE SECOND OF THE ROTATING EXHIBITS IS "CONFIDENTIAL: THE AMERICAN
REVOLUTION'S AGENTS OF ESPIONAGE". THIS EXHIBITION HIGHLIGHTS THE
INDIVIDUALS INVOLVED IN THE CULPER SPY RING AND INCLUDES AN INTERACTIVE
CYPHER ACTIVITY FOR VISITORS.
THE THIRD ROTATING EXHIBITION FEATURES TEN OF THE MUSEUM'S MOST
INTELLECTUALLY VALUABLE OBJECTS, INCLUDING THE CARRIAGE DOOR OF GEORGE
WASHINGTON'S COACH AND DENIS MALONE CARTER'S PAINTING "MOLLY PITCHER."
DUE TO THESE OBJECTS SENSITIVITY TO LIGHT AND IMPORTANCE TO AMERICAN
HISTORY THEY ARE RARELY ON DISPLAY. IT WILL BE A ONCE IN A LIFETIME
OPPORTUNITY TO VIEW SOME OF FRAUNCES TAVERN MUSEUM'S CROWN JEWELS.
THE SIX PERMANENT EXHIBITS INCLUDE THE ORIENTATION ROOM WHERE A BRIEF
VIDEO ACCOMPANIES PANELS AND ARTIFACTS TELLING THE STORY OF THE MUSEUM.
A STOIC COUNTENANCE: PORTRAITS OF GEORGE WASHINGTON IS LOCATED IN THE
ELIZABETH AND STANLEY DEFOREST SCOTT GALLERY, THIS EXHIBITION FEATURES
LATE 1700S PORTRAITS OF GEORGE WASHINGTON FROM AROUND THE WORLD. IT
INCLUDES A LOUVRE COPY OF THE FAMOUS HOUDON BUST. THE LONG ROOM ON THE
SECOND FLOOR OF 54 PEARL STREET IS THE SITE OF GENERAL GEORGE
WASHINGTON'S FAMOUS FAREWELL TO HIS OFFICERS AT THE END OF THE
REVOLUTION. THIS PERIOD ROOM IS A RE-CREATION OF AN 18TH CENTURY
PUBLIC DINING ROOM BASED ON EXTENSIVE RESEARCH OF INVENTORIES AND
ESTATES OF TAVERN KEEPERS OF THIS PERIOD. THE CLINTON ROOM IS A
RECREATION OF A FEDERALIST STYLE DINING ROOM. THE ROOM IS NAMED FOR
GEORGE CLINTON, NEW YORK STATE'S FIRST AMERICAN GOVERNOR WHO HOSTED A
DINNER PARTY FOR GENERAL GEORGE WASHINGTON AT FRAUNCES TAVERN TO
CELEBRATE THE BRITISH EVACUATION OF BRITISH TROOPS FROM NEW YORK ON
732028 10-06-17 Schedule A (Form 990 or 990-EZ) 2017

SONS OF THE REVOLUTION IN THE STATE 13-5563011 Schedule A (Form 990 or 990-EZ) 2017 OF NEW YORK, Page 8 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.) NOVEMBER 25, 1783. THE SECOND TO LAST PERMANENT EXHIBITION IS THE HISTORY OF THE SONS OF THE REVOLUTION IN THE STATE OF NEW YORK LOCATED ABOVE THE LONG ROOM IN THE MCENTEE GALLERY, THIS EXHIBIT EXPLAINS THE HISTORY OF THE ORGANIZATION THAT SAVED FRAUNCES TAVERN. VISITORS CAN LEARN ABOUT THE SRNY AND ITS COMMUNITY INVOLVEMENT THROUGH THE DISPLAYS OF ARTIFACTS, IMAGES AND PLAQUES, WHICH ARE KEPT IN ORIGINAL EARLY 20TH CENTURY MUSEUM CASES, BUILT BY TIFFANY & COMPANY. THE FINAL PERMANENT EXHIBITION IS A FLASH OF COLOR: EARLY AMERICAN FLAGS AND STANDARDS WHICH FEATURES OVER FORTY OF THE MORE THAN 200 FLAGS FROM THE COLLECTION ARE ON DISPLAY IN THE KATHRYN & SHELBY CULLOM DAVIS IN THIS EXHIBIT VISITORS WILL EDUCATION CENTER FOR AMERICAN HISTORY. LEARN HOW THE DESIGN AND COLORS OF THE AMERICAN FLAG DEVELOPED. REPRESENTING THE STATES AND FRENCH REGIMENTS WHO FOUGHT FOR THE CAUSE ARE ALSO ON DISPLAY. IN 2015 THE MUSEUM STARTED TO PROVIDE ACCESS TO THE AUDIO COMPONENTS OF THE VISITOR EXPERIENCE TO THOSE WHO ARE HEARING IMPAIRED. THIS INCLUDED ADDING CAPTIONING TO THE ORIENTATION VIDEO AND INDUCTION LOOPS. PART II, SETION C - LINE 17A B. NATHAN HALE DAY IS CELEBRATED ANNUALLY ON SEPTEMBER 22 AT CITY HALL PARK IN FRONT OF THE NATHAN HALE STATUE WITH A PUBLIC CEREMONY AND WREATH LAYING. THE CELEBRATION IS TO COMMEMORATE NATHAN HALE WHO DISGUISED AS A DUTCH SCHOOL TEACHER, ATTEMPTED TO INFILTRATE THE

DISCOVERED ON SEPTEMBER 21, 1776 AND BROUGHT BEFORE GENERAL WILLIAM

BRITISH RANKS TO GATHER BRITISH MILITARY INTELLIGENCE. HALE WAS

732028 10-06-17

Schedule A (Form 990 or 990-EZ) 2017 OF NEW YORK, INC.	13-5563011	Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section II; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, lines 1c, 2a, 2b, 3a, and 3b; Part V, lines 2ction D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for (See instructions.)	n B, lines 1 and 2; Part IV, Section ne 1; Part V, Section B, line 1e; F	on C, Part V,
HOWE, COMMANDER IN CHIEF OF THE BRITISH ARMY, AT HIS HEADQUARTERS AT		
THE BEEKMAN MANSION (APPROXIMATELY 51ST STREET AND FIRST AVENUE). HALE		
WAS HANGED FOR TREASON, WITHOUT TRIAL, THE NEXT MORNING.		
		<u></u>
THE STATUE OF NATHAN HALE, BY FREDERICK MACMONNIES (1863-1937), WAS		
PRESENTED TO NEW YORK CITY BY THE SONS OF THE REVOLUTION ON NOVEMBER		
25, 1893. HALE'S FAMOUS LAST WORDS ARE INSCRIBED ON THE STATUE, "I ONLY		···
REGRET THAT I HAVE BUT ONE LIFE TO LOSE FOR MY COUNTRY."	·	
C. EVACUATION DAY IS COMMEMORATED AS PART OF THE SOCIETY'S MISSION TO		
PROMOTE AND ASSIST IN THE PROPER CELEBRATION OF THE ANNIVERSARY OF THE		
EVACUATION OF NEW YORK BY THE BRITISH ARMY. ON NOVEMBER 25, 1783, THE		
DEFEATED BRITISH ARMY LEFT NEW YORK CITY AFTER A SEVEN-YEAR OCCUPATION.		
THAT NIGHT, THE FIRST AMERICAN-BORN GOVERNOR OF NEW YORK, GEORGE		
CLINTON, HONORED COMMANDER-IN-CHIEF GEORGE WASHINGTON WITH A		
CELEBRATION HELD IN FRAUNCES TAVERN (THE SITE OF THE SOCIETY'S MUSEUM).		
DURING THE DINNER, THIRTEEN TOASTS WERE OFFERED, BEGINNING WITH "THE		
UNITED STATES OF AMERICA" AND ENDING WITH "MAY THE REMEMBRANCES OF THIS		
DAY BE A LESSON TO PRINCES".		
THE SOCIETY PROMOTES AND CELEBRATES EVACUATION DAY WITH AN ANNUAL		
DINNER TO WHICH THE PUBLIC IS INVITED, HOSTED AT THE FRAUNCES TAVERN		
RESTAURANT. THE THIRTEEN ORIGINAL TOASTS ARE GIVEN. THE RESTAURANT'S		
LARGEST ROOM, THE BISSELL ROOM, IS USED FOR THIS DINNER.		
D. TALLMADGE DAY IS A CELEBRATION OF THE BIRTHDAY OF FREDERICK SAMUEL		
TALLMADGE, LATE PRESIDENT OF THE SOCIETY, TO HONOR TALLMADGE FOR HIS	0.1.4.1.4.7	0 EZ) 0043
732028 10-06-17	Schedule A (Form 990 or 99	U-EZJ 2017

SONS OF THE REVOLUTION IN THE STATE 13-5563011 Page 8 Schedule A (Form 990 or 990-EZ) 2017 OF NEW YORK, INC 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. DEVOTION TO AND BENEFICENCE TO THE SOCIETY. MEMBERS OF THE PUBLIC ARE INVITED TO THIS EVENT. THE GEORGE WASHINGTON BIRTHDAY BALL IS HELD ANNUALLY AS A DINNER IN FEBRUARY TO CELEBRATE THE ANNIVERSARY OF THE WASHINGTON'S BIRTH. MEMBERS OF THE PUBLIC ARE INVITED TO THE BALL, WHICH IS ATTENDED BY OVER 100 PEOPLE. THE BALL PROGRAM INCLUDES A PROCESSION OF HONORED GUESTS, SOCIETY AND NATIONAL COLOR PRESENTATION, PLEDGE, INVOCATION, TOASTS, DISTINGUISHED PATRIOT AWARD AND COCKED HAT CEREMONY. THE DISTINGUISHED PATRIOT AWARD IS PRESENTED AT THE BALL. THE AWARD WAS FIRST GIVEN IN 1961 AT THE 84TH BALL TO AN AMERICAN WHO HAS MADE AN OUTSTANDING CONTRIBUTION TO HIS OR HER FIELD OF ENDEAVOR AND WHO PERSONIFIES THE PRINCIPLES UPON WHICH THIS COUNTRY WAS FOUNDED. AT THE SOCIETY'S 2018 BALL, THE AWARD WAS PRESENTED TO ROBERT M.S. MCDONALD, PHD, A PROFESSOR OF HISTORY AT THE UNITED STATES MILITARY ACADEMY AT WEST POINT. THE COCKED HAT CEREMONY IS THE PRESENTATION OF A REPRODUCTION TRI-CORN HAT TO THE SOCIETY PRESIDENT. IT IS ACCOMPANIED BY THE READING OF THE COCKED HAT POEM. THE GEORGE WASHINGTON BIRTHDAY BALL ALSO SERVES AS A FUNDRAISER FOR FRAUNCES TAVERN MUSEUM, F. BATTLES OF LEXINGTON AND CONCORD DINNER (INCLUDING FRAUNCES TAVERN

IN ADDITION, SOCIETY MEMBERS WHO HAVE ACHIEVED FORTY AND FIFTY YEARS OF

MUSEUM BOOK AWARD PRESENTATION).

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.)
MEMBERSHIP ARE RECOGNIZED. MEMBERS OF THE PUBLIC ARE INVITED TO THIS
EVENT. SINCE THE 1970S IT HAS BEEN THE EVENT WHERE THE FRAUNCES TAVERN
MUSEUM BOOK AWARD HAS BEEN PRESENTED. AT THE 2018 BATTLES OF LEXINGTON
AND CONCORD DINNER, WE PRESENTED THE BOOK AWARD TO RUSSELL SHORTO FOR
"REVOLUTION SONG: A STORY OF AMERICAN FREEDOM" ON WHICH HE GAVE A BRIEF
PRESENTATION DURING THE DINNER.
G. AWARDS & BENEVOLENCE - EVERY YEAR THE SOCIETY PRESENTS FOUR AWARDS.
THE KNOX TROPHY WAS ESTABLISHED IN 1910 AND IS THE OLDEST AWARD GIVEN
TO A WEST POINT CADET. THE GUSTAVUS CONYNGHAM AWARD IS GIVEN TO A U.S.
MERCHANT MARINE ACADEMY MIDSHIPMAN WITH THE BEST OVERALL PERFORMANCE AT
SEA WHO INTENDS TO SAIL AFTER GRADUATION. THE FRAUNCES TAVERN MUSEUM
BOOK AWARD HAS BEEN ANNUALLY PRESENTED SINCE 1972 TO THE AUTHOR OF THE
BEST, NEWLY PUBLISHED WORK ON THE AMERICAN REVOLUTION, COMBINING
ORIGINAL SCHOLARSHIP, INSIGHT AND GOOD WRITING. THE WINNER, RUNNER UP
AND HONORABLE MENTION ARE ALL INVITED TO BATTLES OF LEXINGTON AND
CONCORD DINNER AND PRESENTED WITH A PLAQUE. THE BOOK AWARD IS TOUTED BY
PUBLISHERS AND AUTHORS AND RECOGNIZED AS A PRESTIGIOUS AWARD BY THOSE
ORGANIZATIONS WHO RECOMMEND BOOKS.
WE ALSO HOST AN ESSAY CONTEST ON FLAG DAY FOR ELEMENTARY STUDENTS ON
THE TOPIC, "WHAT THE AMERICAN FLAG MEANS TO ME." THE WINNERS AND THEIR
SCHOOLS RECEIVE A CASH PRIZES AND PLAQUES. THE SOCIETY HAS HELD AN
ESSAY CONTEST SINCE AT LEAST 1914. THE ESSAY CONTEST REACHES HUNDREDS
OF SCHOOL KIDS THROUGH THEIR PARTICIPATION. DURING THE FLAG DAY
CELEBRATION CEREMONY IN FRONT OF 54 PEARL STREET THE WINNING ESSAYS ARE
READ. ALL THE BYSTANDERS WATCHING AND LISTENING ARE ACCESSING PART OF
732028 10-06-17 Schedule A (Form 990 or 990-EZ) 2017 35

13-5563011 Schedule A (Form 990 or 990-EZ) 2017 OF NEW YORK, INC. 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.) THE SOCIETY MISSION. THE FINAL AWARD WAS FIRST GIVEN IN 1961 AT THE 84TH ANNUAL GEORGE WASHINGTON BIRTHDAY BALL; THE DISTINGUISHED PATRIOT AWARD HAS HISTORICAL BEEN GIVEN TO AN AMERICAN WHO HAS MADE AN OUTSTANDING CONTRIBUTION TO HIS OR HER FIELD OF ENDEAVOR AND WHO PERSONIFIES THE PRINCIPLES UPON WHICH THIS COUNTRY WAS FOUNDED. IN RECENT YEARS THE DISTINGUISHED PATRIOT AWARD HAS BEEN GIVEN TO AN INDIVIDUAL WHO HAS MADE GREAT EFFORTS IN THE AREA OF HISTORIC PRESERVATION AND THE PUBLIC EDUCATION OF COLONIAL AMERICA, THE AMERICAN REVOLUTIONARY WAR AND THE EARLY REPUBLIC. THE TWO MILITARY-RELATED AWARDS ARE PRESENTED BY THE SOCIETY AT GRADUATION CEREMONIES. THE THOUSANDS OF PARENTS, FAMILY MEMBERS FACULTY AND STUDENTS WHO WATCH THE CEREMONIES ARE EXPOSED TO THE THE PATRIOT OF THE YEAR AWARD IS PRESENTED AT THE SOCIETY MISSION. BALL WHERE OVER 100 GUESTS ARE REACHED. THE BOOK AWARD IS KNOWN BY PUBLISHERS AND AUTHORS WORKING WITHIN OUR MISSION PERIOD. IT EXPANDS THE MUSEUM'S REACH AND ADS TO MISSION RELEVANCE OF BATTLES OF LEXINGTON AND CONCORD DINNER BY BEING PRESENTED DURING THAT DINNER. H. FLAG DAY PARADE & CEREMONY THE ONE-HUNDRED AND ELEVEN YEAR OLD TRADITION OF THE SOCIETY KICKS OFF WITH A PUBLIC PARADE FROM CITY HALL PARK WITH OVER 1000 MARCHERS FROM DIFFERENT HISTORICAL SOCIETIES, LOCAL ORGANIZATION AND SCHOOLS. THE PARADE ENDS AT FRAUNCES TAVERN WHERE LOCAL SCHOOL CHILDREN PERFORM SONGS FOR ONLOOKERS AND THE WINNERS OF "WHAT THE AMERICAN FLAG MEANS TO

Schee

Schedule A (Form 990 or 990-EZ) 2017 OF NEW YORK, INC.	13-5563011	Page 8
Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, 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; Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any a (See instructions.)	lines 1 and 2; Part IV, Sectior Part V, Section B, line 1e; Pa	n C, art V,
ME" STUDENT ESSAY CONTEST READ THEIR ESSAYS TO CHEERS FROM THE CROWD.		
I. COLOR GUARD		
THE COLOR GUARD IS A STANDING COMMITTEE. EVERY YEAR THE COLOR GUARD		
MARCHES WITH A SELECTION OF SOME OF THE 400 FLAGS IN THE COLLECTION AND		
LAYS WREATHS IN A NUMBER OF PUBLIC CEREMONIES AROUND THE TRI-STATE		
AREA. THIS INCLUDES FEDERAL HALL'S ANNUAL GEORGE WASHINGTON		
INAUGURATION CEREMONY, THE ANNUAL WREATH LAYING AND MEMORIAL SERVICE AT		
THE HISTORIC SHEARITH ISRAEL CEMETARY, BATTLE OF BROOKLYN		
COMMEMORATION, DOWNTOWN NEW YORK 4TH OF JULY PARADE, SARATOGA AND		
YORKTOWN COMMEMORATION, AND THE NATHAN HALE DAY CEREMONY AND WREATH	,	
LAYING AT CITY HALL PARK.		
		
		-
	· · · · · · · · · · · · · · · · · · ·	

SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

2017
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

SONS OF THE REVOLUTION IN THE STATE

OF NEW YORK INC.

Employer identification number 13-5563011

Par	I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or	Accounts. Complete if the
I ai	organization answered "Yes" on Form 990, Part IV, lin		
-	organization answered Tes On Com 550, Fartiv, in	(a) Donor advised funds	(b) Funds and other accounts
	Total number at end of year		
1	Aggregate value of contributions to (during year)		
2	Aggregate value of grants from (during year)		
3 4	Aggregate value at end of year		
-	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advised f	unds
5	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be use	d only
·	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose con	ferring
	impermissible private benefit?		
Par			
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or e		ally important land area
	Protection of natural habitat	Preservation of a certified	d historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form of a	conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
			1
	Number of conservation easements on a certified historic str		
	Number of conservation easements included in (c) acquired a		
-	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel		
	year >		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserv	ation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense sta	tement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the	organization's accounting for
	conservation easements.		O'miles Assets
Pai	t III Organizations Maintaining Collections of		r Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statement	t and balance sheet works of art,
	historical treasures, or other similar assets held for public ext		of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement and	d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ea	ducation, or research in furtherance of public	service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical tre		in, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2017

	SONS OF THE	REVOLUTION IN T	THE STATE							
C-b-							13-556	3011	Pa	age 2
	dule D (Form 990) 2017 OF NEW YORK TIII Organizations Maintaining Co		Historical Tre	asures, or	Othe	r Sim	ilar Assets	S (contin		
3	Using the organization's acquisition, accession									
3	(check all that apply):	,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			•				
а	X Public exhibition	d	X Loan or exch	hange progra	ams					
b	X Scholarly research	e	Other				_			
c	Preservation for future generations	_								
4	Provide a description of the organization's co	llections and explain h	how they further th	e organizatio	n's exe	mpt pu	rpose in Part	XIII.		
5	During the year, did the organization solicit or									
Ü	to be sold to raise funds rather than to be ma						ſ	Yes	X	No_
Pai	t IV Escrow and Custodial Arrang				'Yes" or	Form	990, Part IV,	line 9, or		
	reported an amount on Form 990, Part									
	Is the organization an agent, trustee, custodia	an or other intermedia	ry for contributions	or other ass	ets not	include	ed			_
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII a					_				
								Amount	t	
С	Beginning balance					1	с			
d	Additions during the year		,			1	d	-		
е	Distributions during the year					1	е			
f	Ending balance	,				[_1	f			
	Did the organization include an amount on Fo						L_	_ Yes	<u>_</u>	No
<u>b</u>	If "Yes," explain the arrangement in Part XIII.									<u></u>
Pa	t V Endowment Funds. Complete if	the organization ans	wered "Yes" on Fo	rm 990, Part	IV, line	10.		T		
	ļ	(a) Current year	(b) Prior year	(c) Two year			ee years back	(e) Four		
1a	Beginning of year balance	3,319,537.	3,428,437.		,094.	<u> </u>	1,097,323.	4,	322,	
b	Contributions	275,262.	76,097.		438.	<u> </u>	4,688.	 	<u>_</u>	000.
c	Net investment earnings, gains, and losses	286,086.	440,475.	400	6,681.		-217,153.	-	356,	828.
d	Grants or scholarships							-		
е	Other expenditures for facilities	251 500	505 450				CEO 764	1	E00	120
	and programs	264,688.	625,472.		1,776.		659,764.	 	300,	129.
f	Administrative expenses	0.515.407	2 240 527	2.420			3,225,094.		007	323.
g	End of year balance	3,616,197.	3,319,537.		3,437.	<u> </u>	,223,034.	· ·	037,	<u> </u>
2	Provide the estimated percentage of the curre) held as:						
а	• •		_%							
b	Permanent endowment 87.97	%								
С		%								
_	The percentages on lines 2a, 2b, and 2c shou		با ما ما ما ما با با با			ha a-a-	nization			
За	Are there endowment funds not in the posses	ssion of the organizati	ion that are neid an	ia administer	ea for ti	ne orga	mzadon	ſ	Yes	No
	by:							3a(i)	162	X
	(i) unrelated organizations							3a(ii)		x
	(ii) related organizations									
b				•••••						
D ₂	Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm		ment tunos.							
Га	Complete if the organization answered		Part IV line 11s C	ee Form 990	Part Y	line 10)			
		(a) Cost or oth		or other	1	Accumu		(d) Boo	k valu	
	Description of property	basis (investme	, , ,	or other (other)		eprecia	I	(4) 500	vaiu	•
	Lond	- `		\/		•	er gegen far far			
	Land	[· · ·	3	941,557.	. circ: hitchthurine		96,692.	2	,544,	865.
	Buildings			,132,268.			19,009.			259.
С	Leasehold improvements			252 592			16 664			928

Schedule D (Form 990) 2017

5,928.

359,330.

3,523,382.

252,592.

359,330.

246,664.

d Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. column (B). line 10c.)

OΕ	MINIT	VODV	TMO
OF	NLW	YORK.	INC.

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" o		e 11b. See Form 990, Part X, line 12.	and of year morket value
(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)			
(F)			
(H)	-		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" or	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 end-of-year market value
(1)			
(2)			
(3)			
(4)		·	
(5)	· .		
(6)			
(7)	· · · · · · · · · · · · · · · · · · ·		·
(8)			
(9)	·		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" o		e 11d. See Form 990, Part X, line 15.	(b) Book value
(a) L	Description	•	(b) Book value
			-
(2)			
(3)			
(4)			
(5)			
(6)		· · · · · · · · · · · · · · · · · · ·	
(7)			
(8)			
(9)	15)	-	•
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	15.)		· • • · · · · · · · · · · · · · · · · ·
Complete if the organization answered "Yes" o	on Form 990. Part IV. lin	e 11e or 11f. See Form 990, Part X, li	ne 25.
(a) Description of liability	<u> </u>	(b) Book value	
11			
(1) Federal income taxes			
(1) Federal income taxes (2) SECURITY DEPOSIT		101,748.	
(2) SECURITY DEPOSIT		101,748.	
(2) SECURITY DEPOSIT (3)		101,748.	
(2) SECURITY DEPOSIT (3) (4)		101,748.	
(2) SECURITY DEPOSIT (3) (4) (5)		101,748.	
(2) SECURITY DEPOSIT (3) (4) (5) (6)		101,748.	
(2) SECURITY DEPOSIT (3) (4) (5) (6)		101,748.	
(2) SECURITY DEPOSIT (3) (4) (5) (6) (7) (8)		101,748.	
(2) SECURITY DEPOSIT (3) (4) (5) (6) (7) (8) (9)	25.)	101,748.	
(2) SECURITY DEPOSIT (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X. col. (B) line 2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote	101,748.	ents that reports the
(2) SECURITY DEPOSIT (3) (4) (5) (6) (7) (8)	the text of the footnote	101,748.	ents that reports the

OF NI	EW YO	י שם	INC.

	Reconciliation of Revenue per Audited Financial States Complete if the organization answered "Yes" on Form 990, Part IV, line 1				
1	Total revenue, gains, and other support per audited financial statements			1	1,596,866.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			133	
а	Net unrealized gains (losses) on investments	2a	118,022.	C F	
b	Donated services and use of facilities	2b	·		
	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d			
	Add lines 2a through 2d			2e	118,022.
	Subtract line 2e from line 1			3	1,478,844.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII.)	1 1		7.72	
	Add lines 4a and 4b			4c	0.
_	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	1,478,844.
Par	t XIII Reconciliation of Expenses per Audited Financial State	ments With E	xpenses per F	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a			
1	Total expenses and losses per audited financial statements			1	1,231,763.
	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
-	Donated services and use of facilities	2a			
b	Prior year adjustments	91			•
c	Other losses	1 . 1			
d	Other (Describe in Part XIII.)	1 1			
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	1,231,763.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
•	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII.)	1 1			
	Add lines 4a and 4b			4c	0.
_	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	1,231,763.
	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; P 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a				
PART	III, LINE 4:				
THE	SOCIETY'S COLLECTIONS ARE MADE UP OF ARTIFACTS OF HISTORICA	L			
SIGN	IFICANCE AND ART OBJECTS THAT ARE HELD FOR EDUCATIONAL EXHI	BIT AND	<u> </u>		
CURA	TORIAL PURPOSES. ACCESSION AND DE-ACCESSION OF ITEMS FOR T	не			
COLL	ECTIONS ARE SUBJECT TO THE FRAUNCES TAVERN MUSEUM COLLECTIO	ns			
MANA	GEMENT POLICY, MOST RECENTLY APPROVED BY THE BOARD OF MANAG	ERS ON MAY	· <u>-</u> -		<u> </u>
21,	2018. PROCEEDS FROM DE-ACCESSIONS OR INSURANCE RECOVERIES	ARE USED TO			
ACQU	IRE OR PRESERVE OTHER ITEMS FOR COLLECTION. CONTRIBUTIONS	FOR THE			<u>.</u> .
PURC	HASE OF ITEMS FOR THE COLLECTION ARE CLASSIFIED AS TEMPORAR	RILY			
REST	RICTED NET ASSETS UNTIL ACQUISITIONS ARE MADE. THE SOCIETY	r's		··· · · · · · · · · · · · · · · · · ·	
COLL	ECTIONS AND EXHIBITS ARE NOT CAPITALIZED IN THE STATEMENT O	F FINANCIAL			
	THE DEPOSIT OF A THE SAME AND DESIGNED THE WEST MADE AND MADE	THENE SEE			
POSI	TION. PURCHASES OF ITEMS ARE EXPENSED IN THE YEAR THAT THE	ATEMS ARE		0-1-1	I. D./F 000\ 004
732054	. 10-09-17			Schedu	le D (Form 990) 201

Schedule D (Form 990) 2017

CARE AND/OR PRESERVING THE SOCIETY'S EXISTING COLLECTION OR TO BUY

ADDITIONAL ITEMS FOR THE COLLECTION AND/OR OTHER WORKS OF ART.

SCHEDULE G

Department of the Treasury

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 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.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service		Go to www.irs.gov/Form99	o for th	e late:	st instructions.		Inspection
Name of the organization	SONS OF THE	REVOLUTION IN THE STAT	E			Employer i	dentification number
ū	OF NEW YORK	I INC.				13-5563	011
		Complete if the organization an	swered "\	'es" or	Form 990, Part IV, I	ine 17. Form 990-	EZ filers are not
a Mail solicitation b Internet and er c Phone solicitat d In-person solic 2 a Did the organization key employees listed	ns nail solicitations iions itations have a written o i in Form 990, Pa	f Soli	icitation of icitation of ecial fundration of the control of the c	non-g gover aising ding of ional fu	overnment grants nment grants events ficers, directors, trus undraising services?	Y	′es
compensated at leas	t \$5,000 by the	organization.					
(i) Name and address of or entity (fundra		(ii) Activity	have o	Did raiser custody ntrol of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by fundraiser listed in col. (i)	organization
			Yes	No			
		-					
	·						
			L	_			
		n is registered or licensed to sol	licit contril	outions	or has been notified	I it is exempt from	registration
or noonang.	·						
	-						

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

Schedule G (Form 990 or 990-EZ) 2017

13-5563011	Page :
	i aue i

		of fundraising event contributions and g	ross income on Form 990-			ts greater than 45,000.
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
١			G.W. BALL			col. (c))
اھ			(event type)	(event type)	(total number)	\-\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Hevenue	1	Gross receipts	88,200.			88,200
1	2	Less: Contributions	62,972.			62,972
	3	Gross income (line 1 minus line 2)	25,228.			25,228
	4	Cash prizes				
	5	Noncash prizes				
202	6	Rent/facility costs				6,347
Dilect Experises		Food and beverages				28,275
5				-		2,750
ļ	8	Entertainment				3,402
Ì	9	Other direct expenses				40,774
1	10	Direct expense summary. Add lines 4 through				-15,546
	<u>11</u> rt l	Net income summary. Subtract line 10 from II Gaming. Complete if the organization	ine 3, column (a)	000 Part IV line 19 orr	aparted more than	1 23,510
الم	111		answered res on Form	1990, Fait IV, line 19, Of 1	eported more trials	
_		\$15,000 on Form 990-EZ, line 6a.		(b) Pull tabs/instant		(d) Total gaming (add
Hevenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c
2	1_	Gross revenue				
g	2	Cash prizes				
Direct Expenses	3	Noncash prizes			· · · · · · · · · · · · · · · · · · ·	
200	4	Rent/facility costs				
ᅦ						
١	5	Other direct expenses		i i		
+	5	Other direct expenses	Yes %	Yes%	Yes %	
		Other direct expenses Volunteer labor		Yes% No	Yes %	
			Yes % No		No	
	6 7	Volunteer labor Direct expense summary. Add lines 2 through	Yes % No gh 5 in column (d)	No No	No ►	
	6	Volunteer labor	Yes % No gh 5 in column (d)	No No	No ►	
•	6 7 8	Volunteer labor Direct expense summary. Add lines 2 through the summary. Subtract line	yes % No gh 5 in column (d) 7 from line 1, column (d)	No No	No P	
	6 7 8 Ent	Volunteer labor Direct expense summary. Add lines 2 through	yes % No sh 5 in column (d) 7 from line 1, column (d)	No No	No ►	
а	6 7 8 Ent	Volunteer labor Direct expense summary. Add lines 2 through the gaming income summary. Subtract line ter the state(s) in which the organization conditions.	Yes% No 9h 5 in column (d) 7 from line 1, column (d) Plucts gaming activities: activities in each of these	No No states?	No ►	
а	6 7 8 Ent	Volunteer labor Direct expense summary. Add lines 2 through the gaming income summary. Subtract lines ter the state(s) in which the organization concidering and the organization licensed to conduct gaming and the organiza	Yes% No 9h 5 in column (d) 7 from line 1, column (d) Plucts gaming activities: activities in each of these	No No states?	No ►	
a b	6 7 8 Ent Is t	Volunteer labor Direct expense summary. Add lines 2 through the state (s) in which the organization concide organization licensed to conduct gaming a No," explain:	Yes% No sh 5 in column (d) 7 from line 1, column (d) cucts gaming activities: activities in each of these shows the second column (d)	states?	No Page 1	. Yes No
a b	6 7 8 Ent Is t	Volunteer labor Direct expense summary. Add lines 2 through the state (s) in which the organization conclude organization licensed to conduct gaming a No," explain:	Yes% No sh 5 in column (d) 7 from line 1, column (d) cucts gaming activities: activities in each of these shows the second column (d)	states?	No Page 1	. Yes No
a b	6 7 8 Ent Is t	Volunteer labor Direct expense summary. Add lines 2 through the state (s) in which the organization concide organization licensed to conduct gaming a No," explain:	Yes% No sh 5 in column (d) 7 from line 1, column (d) cucts gaming activities: activities in each of these shows the second column (d)	states?	No Page 1	. Yes No
a b a b	6 7 8 Ent Is t If " We If "	Volunteer labor Direct expense summary. Add lines 2 through the state (s) in which the organization concide organization licensed to conduct gaming a No," explain:	Yes% No sh 5 in column (d) 7 from line 1, column (d) cucts gaming activities: activities in each of these shows the second column (d)	states?	No P	. Yes N

SONS OF THE REVOLUTION IN THE STATE

Schedu	le G (Form 990 or 990-EZ) 2017 OF NEW YORK, INC.	13-556	3011		Page 3
11 Do	es the organization conduct gaming activities with nonmembers?	[Y	'es	No No
	the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed				
	administer charitable gaming?	[Y	'es	☐ No
	licate the percentage of gaming activity conducted in:				
	e organization's facility	1	13a		%
	outside facility		13b		 %
	ter the name and address of the person who prepares the organization's gaming/special events books and records:	····· _			
14 🖽	ter the name and address of the person who prepares the organization's gaming/special events books and rooses.				
Na	ame >				
Ad	Idress >		·		
15a Do	bes the organization have a contract with a third party from whom the organization receives gaming revenue?	[Y	'es	No No
b If "	'Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amoun	t			
	gaming revenue retained by the third party >\$				
	'Yes," enter name and address of the third party:				
Na	me >				
Ad	ddress ▶				
	aming manager information:				
Na	ame	-		-	
_	· · · · · · · · · · · · · · · · · · ·				
Ga	aming manager compensation > \$				
	and the Marian and a constitution of the const				
De	escription of services provided				
_					
[Director/officer Employee Independent contractor				
47 NA	andatory distributions:				
	the organization required under state law to make charitable distributions from the gaming proceeds to				
		1		es/	No
	tain the state gaming license? ter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the				
Part I	ganization's own exempt activities during the tax year \$ Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part	III line	e 9 9	h 10	h 15h
Farti		,	3 3, 3	0, 10	D, 13D,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.				

SONS OF THE REVOLUTION IN THE STATE

Schedule G (Form 990 or 990-EZ) OF NEW YORK, INC.	13-5563011	Page 4
Schedule G (Form 990 or 990-EZ) OF NEW YORK, INC. Part IV: Supplemental Information (continued)		
	_	
	<u> </u>	
		*
		-

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Name of the organization

SONS OF THE REVOLUTION IN THE STATE

OF NEW YORK, INC.

OMB No. 1545-0047

inspection : **Employer identification number**

13-5563011

Par	tig types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported or Form 990, Part VIII, line	n no	(d) Method of de oncash contribu			
1	Art - Works of art			<u> </u>					
2	Art - Historical treasures								
3	Art · Fractional interests			-					
-	Books and publications			 					
4	•		######################################						
5	Clothing and household goods		OVER THE OWN THE PROPERTY.	· · · · · · · · · · · · · · · · · · ·		·· ·			
6				-		<u> </u>			
7	Boats and planes			· 		<u> </u>			
8	Intellectual property			*- *-	 -				
9	Securities - Publicly traded								
10	Securities - Closely held stock			:					
11	Securities - Partnership, LLC, or								
	trust interests	 -	-	——————————————————————————————————————					,
12	Securities - Miscellaneous						····		
13	Qualified conservation contribution								
	Historic structures								—
14	Qualified conservation contribution - Other		-						
15	Real estate - Residential			 ,					
16	Real estate - Commercial	-		·					
17	Real estate - Other				<u> </u>				
18	Collectibles								
19	Food inventory		<u> </u>	-		<u></u>			—
20	Drugs and medical supplies								
21	Taxidermy				0.			-	
22	Historical artifacts	X							
23	Scientific specimens		 		<u> </u>				
24	Archeological artifacts	-	-			<u> </u>			
25	Other ()								
26	Other								
27	Other • ()								
28	Other (<u> </u>	<u> </u>	, l .				
29	Number of Forms 8283 received by the organization completed Form 828							, <u>,,,</u>	No
30a	During the year, did the organization receive by					nat it		es	
	must hold for at least three years from the date		ıl contribution, and	which isn't required to	be used for	ļ	DEALE OF		
	exempt purposes for the entire holding period?						30a	୍ୟୁକ୍ତେ ଓ	A STANSON
b	If "Yes," describe the arrangement in Part II.							MALLON. N	
31	Does the organization have a gift acceptance p						31	X	
32a	Does the organization hire or use third parties of	or related or	ganizations to soli	cit, process, or sell nonc	ash				
	contributions?						32a	S SEASON S	X
þ	If "Yes," describe in Part II.							20	
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of property	for which column (a) is	checked,				
	describe in Part II.						5866 9		
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99).		Schedule M	l (Form 9	990) :	2017

732141 09-07-17

LHA

Part II. Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
SCHEDULE M, LINE 32B:
THE SONS OF THE REVOLUTION IN THE STATE OF NEW YORK, INC. DOES NOT
TREAT DONATIONS OF ART, HISTORICAL TREASURES, AND OTHER SIMILAR ITEMS
DESCRIBED IN PART I, LINE 22 OF SCHEDULE M AS REVENUE OR CAPITALIZE AS
ASSETS ON ITS BALANCE SHEET. SHOULD SUCH PROPERTY BE SOLD, PROCEEDS
FROM SUCH SALE WOULD BE USED SOLELY TO ACQUIRE OTHER ITEMS FOR THE
COLLECTION.
THE SOCIETY'S COLLECTIONS ARE MADE UP OF ARTIFACTS OF HISTORICAL
SIGNIFICANCE AND ART OBJECTS THAT ARE HELD FOR EDUCATIONAL EXHIBIT AND
CURATORIAL PURPOSES. PROCEEDS FROM DE-ACCESSIONS OR INSURANCE
RECOVERIES ARE USED TO ACQUIRE OR PRESERVE OTHER ITEMS FOR COLLECTION.
CONTRIBUTIONS FOR THE PURCHASE OF ITEMS FOR THE COLLECTION ARE
CLASSIFIED AS TEMPORARILY RESTRICTED NET ASSETS UNTIL ACQUISITIONS ARE
MADE. THE SOCIETY'S COLLECTIONS AND EXHIBITS ARE NOT CAPITALIZED IN THE
STATEMENT OF FINANCIAL POSITION, PURCHASE OF ITEMS ARE EXPENSED IN THE
YEAR THAT THE ITEMS ARE ACQUIRED. THE COST OF THESE ITEMS IS REPORTED
AS A SEPARATE PROGRAM EXPENSE, CONTRIBUTED COLLECTION ITEMS ARE NOT
REFLECTED IN THE FINANCIAL STATEMENTS.

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

SONS OF THE REVOLUTION IN THE STATE

OF NEW YORK, INC.

Employer identification number 13-5563011

PART I & PART III - LINE 1
SONS OF THE REVOLUTION IN THE STATE OF NEW YORK, INC. (THE "SOCIETY")
PERPETUATES 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 THE PROPER CELEBRATION OF THE ANNIVERSARIES OF
WASHINGTON'S BIRTHDAY, THE BATTLES OF LEXINGTON AND BUNKER HILL, THE
FOURTH OF JULY, THE CAPITULATIONS OF SARATOGA AND YORKTOWN, THE
EVACUATION OF NEW YORK BY THE BRITISH ARMY, AND OTHER PROMINENT EVENTS
RELATING TO OR CONNECTED WITH THE WAR OF THE REVOLUTION; TO COLLECT AND
SECURE FOR PRESERVATION THE MANUSCRIPT ROLLS, RECORDS AND OTHER
DOCUMENTS RELATING TO THAT WAR; TO INSPIRE AMONG THE MEMBERS AND THEIR
DESCENDANTS THE PATRIOTIC SPIRIT OF THEIR FOREFATHERS; TO INCULCATE IN
THE COMMUNITY IN GENERAL, SENTIMENTS OF NATIONALITY AND RESPECT FOR THE
PRINCIPLES FOR WHICH THE PATRIOTS OF THE REVOLUTION CONTENDED; TO
ASSIST IN THE COMMEMORATIVE CELEBRATION OF OTHER GREAT HISTORICAL
EVENTS OF NATIONAL IMPORTANCE, AND TO PROMOTE SOCIAL INTERCOURSE AND
THE FEELING OF FELLOWSHIP AMONG ITS MEMBERS.
FORM 990, PART VI, SECTION A, LINE 2:
MATTHEW C. NORGARD IS THE SON OF DAVID W. NORGARD. RAYMOND J. MANNING IS
THE NEPHEW OF DONALD WESTERVELT.
FORM 990, PART VI, SECTION A, LINE 6:
THE SOCIETY WAS INCORPORATED AS A MEMBERSHIP ORGANIZATION.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 732211 09-07-17

Schedule O (Form 990 or 990-EZ) (2017)

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

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

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

SONS OF THE REVOLUTION IN THE STATE

OF NEW YORK, INC.

Name of the organization

Parti

Department of the Treasury Internal Revenue Service

©open to Public ⊞ Inspection # 2017

OMB No. 1545-0047

Employer identification number

13-5563011

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Schedule R (Form 990) 2017 (g) Section 512(b)(13) controlled ٩ × Direct controlling Yes entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. Direct controlling entity End-of-year assets X X <u>e</u> status (if section Public charity 501(c)(3)) PENDING Total income Exempt Code section PENDING Legal domicile (state or Legal domicile (state or foreign country) foreign country) NEW YORK Primary activity Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. CHARITABLE SAMUEL FRAUNCES AMERICAN HERITAGE SOC. Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity 54 PEARL STREET NEW YORK, NY 10004 Part II

732161 09-11-17 LHA

Schedule R (Form 990) 2017 OF NEW YORK, INC.

Personal Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(k) centage nership	elated	Section 512(b)(13) controlled entity?					
General or Percentage managing ownership Percentage Percentage No Ves No	Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related	1 -					
JBI German man de la company d	had one	(h) Percentage ownership		_		_	
Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	pecause it	(g) Share of end-of-year assets					:
ntionate ions?	, line 34, t						
	0, Part IV	(f) Share of total income					
(g) Share of end-of-year assets	Form 99				••••		
	'Yes" or	(e) Type of entity (C corp, S corp, or trust)					
Share of total income	answered				-		
	 janization	(d) Direct controlling entity					
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	if the org					_	
Predo (rela exclude section)	Complete	(c) Legal domicile (state or foreign		100			
(d) Direct controlling entity		vity					
	oration c year.	(b) Primary activity	:				
Legal demicile (state or foreign country)	is a Corp ig the tax	Q i <u>r</u>					
ctivity	Faxable a						
(b) Primary activity	izations						
	d Organ	and EIN lization	:				
ation EIN	Identification of Related Organizations Taxable as a Corporation or Trust. organizations treated as a corporation or trust during the tax year.	(a) Name, address, and EIN of related organization					
(a) Name, address, and EIN of related organization	tification rizations	Name, of rela					
Name, a of relati							
	Partiv						

Schedule R (Form 990) 2017 OF NEW YORK, INC.

Schedule R (Form 990) 2017 × × × Yes 르 2 ٩ 우 ₽ ş Method of determining amount involved ₽ ပ္ 7 19 두 ¥ = ÷ Reimbursement paid by related organization(s) for expenses e Loans or loan guarantees by related organization(s) 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds Sale of assets to related organization(s) During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. (c) Amount involved Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity (b) Transaction type (a-s) m Performance of services or membership or fundraising solicitations by related organization(s) l Performance of services or membership or fundraising solicitations for related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Lease of facilities, equipment, or other assets to related organization(s) c Gift, grant, or capital contribution from related organization(s) Other transfer of cash or property from related organization(s) Reimbursement paid to related organization(s) for expenses Other transfer of cash or property to related organization(s) b Gift, grant, or capital contribution to related organization(s) d Loans or loan guarantees to or for related organization(s) Sharing of paid employees with related organization(s) (a)
Name of related organization Purchase of assets from related organization(s) Exchange of assets with related organization(s) Dividends from related organization(s) 732163 09-11-17 ۵ ø <u>ල</u> **a** 3 මු Ξ গ্ৰ

Page 4

OF NEW YORK, INC.

Part-VI. Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Schedule R (Form 990) 2017

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue)

(h) (i) (k) (k)

Disproportionate amount in box 20 managing ownership of Schedule K-1

Ves No (Form 1065) Yes No end-of-year assets Share of <u>(6</u> Share of total income Are all partners sec. 501(c)(3) orgs.? Yes No Predominant income predicted, incomed from tax under sections 512-514) that was not a related organization. See instructions regarding exclusion for certain investment partnerships. (state or foreign ecountry) Legal domicile <u>ပ</u> Primary activity Name, address, and EIN of entity

Schedule R (Form 990) 2017

9

SONS OF THE REVOLUTION IN THE STATE

Schedule R (Form 990) 2017 OF NEW YORK, INC.	13-5563011	Page 5
Part VIII Supplemental Information.		
Provide additional information for responses to questions on Schedule R. See instructions.		
Provide additional information for respondes to gardened an estimation of the state	· · · · · · · · · · · · · · · · · · ·	
PART II - LINE 1		
THE SAMUEL FRAUNCES AMERICAN HERITAGE SOCIETY, INC. ("SFAHS") WAS		
INCORPORATED IN THE STATE OF NEW YORK ON NOVEMBER 21, 2014 AS A NEW		
YORK NOT-FOR-PROFIT CORPORATION AS DEFINED IN SUBPARAGRAPH (A)(5) OF		
SECTION 102 OF THE NEW YORK NOT-FOR-PROFIT CORPORATION LAW, SFAHS HAS		
NOT HAS ANY ACTIVITIES SINCE ITS INCEPTION. IN ADDITION, SFAHS IS		
CURRENTLY IN PROCESS OF OBTAINING AN EIN AS WELL AS FILING FEDERAL FORM		
1023 TO REQUEST STATUS AS A FEDERAL RECOGNIZED 501(C)(3) CHARITABLE		
ORGANIZATION.	· 102	
	· · · · · · · · · · · · · · · · · · ·	

"NOTICE 2018-100" Form 990-T Exempt Organization Business Income Tax Return OMB No. 1545-0687 (and proxy tax under section 6033(e)) calendar year 2017 or other tax year beginning OCT 1, 2017 ► Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury Internal Revenue Service Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). D Employer identification number Check box if Name of organization (Check box if name changed and see instructions.) (Employees' tinstructions.) SONS OF THE REVOLUTION IN THE STATE 13-5563011 B Exempt under section Print OF NEW YORK, INC. E Unrelated business activity codes X 501(c)(3) or Number, street, and room or suite no. If a P.O. box, see instructions. Туре 408(e) 7220(e) 54 PEARL STREET 408A ____530(a) City or town, state or province, country, and ZIP or foreign postal code 1529(a) NEW YORK, NY 10004-4300 C Book value of all assets at end of year F Group exemption number (See instructions.) G Check organization type ► X 501(c) corporation 501(c) trust 401(a) trust Other trust H Describe the organization's primary unrelated business activity. X No During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If "Yes," enter the name and identifying number of the parent corporation. Telephone number ▶ 212-425-1778 J The books are in care of MS. JACQUELINE MASSEO (C) Net Part I Unrelated Trade or Business Income (A) Income (B) Expenses 1 a Gross receipts or sales c Balance **b** Less returns and allowances 10 THE SECOND STATE OF THE SECOND Cost of goods sold (Schedule A, line 7) 2 2 AND REPORTED IN Gross profit. Subtract line 2 from line 1c 3 4a Capital gain net income (attach Schedule D) THE PERMIT 4a b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b KELOLON KELUKTI KA c Capital loss deduction for trusts 4c 5 Income (loss) from partnerships and S corporations (attach statement) 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 10 Advertising income (Schedule J) 11 11 Other income (See instructions; attach schedule) STATEMENT 1 5,266. 12 5,266. 13 Total. Combine lines 3 through 12 Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) Part II (Except for contributions, deductions must be directly connected with the unrelated business income.) Compensation of officers, directors, and trustees (Schedule K) 14 14 Salaries and wages 15 15 16 Repairs and maintenance 16 17 17 18 18 Interest (attach schedule) 19 19 Taxes and licenses 20 Charitable contributions (See instructions for limitation rules) Depreciation (attach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return 22a 22h 22 23 Contributions to deferred compensation plans 24 24 25 25 Employee benefit programs 26 Excess exempt expenses (Schedule I) 26 27 27 Excess readership costs (Schedule J) 28 28 Other deductions (attach schedule) 0. Total deductions. Add lines 14 through 28 29 29

723701 01-22-18 LHA For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13

Net operating loss deduction (limited to the amount on line 30)

Unrelated business taxable income before specific deduction. Subtract line 31 from line 30

Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)

Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or

30

31

32

33

34

5,266.

5,266.

1,000.

line 32

30

31

32

33

STONE STONE	The Committee of the co	13-33	03011	
EKau.	Tax Computation		Ir naromi	
35	Organizations Taxable as Corporations. See instructions for tax computation.			
	Controlled group members (sections 1561 and 1563) check here 🕨 🔛 See instructions a			
a	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order			
	(1) \$ (2) \$ (3) \$			
b	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)	1		
	(2) Additional 3% tax (not more than \$100,000)			
c	Income tax on the amount on line 34 SEE STATEM	ENT 2	► 35c	831.
36	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount	on line 34 from:		
•	Tax rate schedule or Schedule D (Form 1041)		1 1	
37	Proxy tax. See instructions		▶ 37	
38				
-	Alternative minimum tax Tax on Non Complicat English Income. Society extractions	• • • • • • • • • • • • • • • • • • • •	39	
39 40	Tax on Non-Compliant Facility Income. See instructions		40	831.
40	Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies Vi Tax and Payments		. / 40 /	
			20.00	
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)			
b	Other credits (see instructions)			
C	General business credit. Attach Form 3800	41c		
đ	Credit for prior year minimum tax (attach Form 8801 or 8827)			
е	Total credits. Add lines 41a through 41d			
42	Subtract line 41e from line 40	······	42	831.
43	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 88	866 Other (attach schedule) 43	
44	Total tax. Add lines 42 and 43		44	831.
45 a				
b	2017 estimated tax payments			
	Tax deposited with Form 8868		o.	
4	Foreign organizations: Tax paid or withheld at source (see instructions)			
	Backup withholding (see instructions)			
	Credit for small employer health insurance premiums (Attach Form 8941)			
		431		
g	Other credits and payments: Form 2439	45-		
	☐ Form 4136 ☐ Other ☐ Total ►	[450]		1 000
46	Total payments. Add lines 45a through 45g			1,000.
47	Estimated tax penalty (see instructions). Check if Form 2220 is attached		1	
48	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed			
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid		49	169.
50	Enter the amount of line 49 you want. Credited to 2018 estimated tax	169. Refunded >	50	0.
Part	Statements Regarding Certain Activities and Other Information	n (see instructions)		
51	At any time during the 2017 calendar year, did the organization have an interest in or a signature			Yes No
	over a financial account (bank, securities, or other) in a foreign country? If YES, the organization	may have to file		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the	foreign country		
	here >			X
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or tr	ansferor to, a foreign trust?		Х
	If YES, see instructions for other forms the organization may have to file.			
53	Enter the amount of tax-exempt interest received or accrued during the tax year >\$			
	Under penaltics of perjury, I declare that I have examined this return, including accompanying schedules and sta	atements, and to the best of my know	ledge and belief, i	t is true,
Sign	correct, and complete. Declaration of proparer (other than taxpayer) is based on all information of which preparer	r has any knowledge.	Manually IDC dina	and the nature with
Here	D NZ 19 PRESIDENT	Ĭ	the preparer show	uss this return with on below (see
	Signature of officer Date Title		instructions)?	Yes No
	Print/Type preparer's name Preparer's signature Da	ite Check	if PTIN	
D		A- A A	1	
Paid	Daivatore in a car and	C I O COID. CITATION	P007	49467
_	Preparer Ise Only Firm's name CONDON O'MEARA MCGINEY & DONNELLY LLP Firm's EIN			628255
Use 0	ONE BATTERY PARK PLAZA, 7TH FL.	T A A CALL		
	Firm's address NEW YORK, NY 10004	Phone no.	212-661-77	177
	1,	1 . 110110 1101		rm 990-T (2017)

FORM 990-T	OTHER	INCOME	STATEMENT 1
DESCRIPTION .			AMOUNT
QUALIFIED TRANSPORTATION FRINGE	UNDER	IRC SECTION 512(A)(7)	5,266.
TOTAL TO FORM 990-T, PAGE 1, LI	NE 12		5,266.

FORM	990-T LINE 35C TAX COMPUTA	TION		STATEMENT	2
1.	TAXABLE INCOME		. 4,266		
2.	LESSER OF LINE 1 OR FIRST BRACKET AMOUNT	r .	. 4,266		
3.	LINE 1 LESS LINE 2		. 0		
4.	LESSER OF LINE 3 OR SECOND BRACKET AMOUNT	T.	. 0		
5.	LINE 3 LESS LINE 4		. 0		
6.	INCOME SUBJECT TO 34% TAX RATE		. 0		
7.	INCOME SUBJECT TO 35% TAX RATE		. 0		
8.	15 PERCENT OF LINE 2		. 640		
9.	25 PERCENT OF LINE 4		. 0		
10.	34 PERCENT OF LINE 6		. 0		
11.	35 PERCENT OF LINE 7		. 0		
12.	ADDITIONAL 5% SURTAX		. 0		
13.	ADDITIONAL 3% SURTAX		. 0		
14.	TOTAL INCOME TAX		=		640
15.	TAX AT 21% RATE EFFECTIVE AFTER 12/31/20	17	896		
		DAYS			
16. 17.	TAX PRORATED FOR NUMBER OF DAYS IN 2017 TAX PRORATED FOR NUMBER OF DAYS IN 2018	92 273			
18.	TOTAL TAX PRORATED	365			831