Form	8879-EO	

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IRS e-file Signature Authorization

OMB No. 1545-1878

Form 8879-EO	for an Exempt Organization		
	For calendar year 2017, or fiscal year beginning, 2017, and ending	, 20	2017
Department of the Treasury	Do not send to the IRS. Keep for your records.		2017
Internal Revenue Service	Go to www.irs.gov/Form8879EO for the latest information.		
Name of exempt organization		Employer id	entification number
NATIONAL SOCI	ETY OF THE SONS OF THE		
AMERICAN REVO	LUTION	53-01	16355
Name and title of officer		I	
DON SHAW			
EXECUTIVE DIR	ECTOR		
Part I Type of	Return and Return Information (Whole Dollars Only)		
on line 1a, 2a, 3a, 4a, or 5	rn for which you are using this Form 8879-EO and enter the applicable amount, if any, f a, below, and the amount on that line for the return being filed with this form was blank ank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applical	, then leave lir	ne 1b, 2b, 3b, 4b, or 5b,
1a Form 990 check here	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	2,357,386.
2a Form 990-EZ check he	ere 🕨 🛄 📕 b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check	s here	3b	
4a Form 990-PF check he	ere b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	

Part II **Declaration and Signature Authorization of Officer**

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

5a Form 8868 check here

X Lauthorize DEAN DORTON ALLEN FORD, PLLC ERO firm name	to enter my PIN 11899 Enter five numbers, but do not enter all zeros
as my signature on the organization's tax year 2017 electronically filed return is being filed with a state agency(ies) regulating charities as part of the IRS enter my PIN on the return's disclosure consent screen.	
As an officer of the organization, I will enter my PIN as my signature on the indicated within this return that a copy of the return is being filed with a star program, I will enter my PIN on the return's disclosure consent screen.	
Officer's signature	Date
Part III Certification and Authentication	
ERO's EFIN/PIN. Enter your six-digit electronic filing identification	
number (EFIN) followed by your five-digit self-selected PIN.	61529711899 Do not enter all zeros
I certify that the above numeric entry is my PIN, which is my signature on the 2017 ele confirm that I am submitting this return in accordance with the requirements of Pub. <i>e-file</i> Providers for Business Returns.	,
ERO's signature	Date
ERO Must Retain This Form - S Do Not Submit This Form to the IRS Un	

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



Department of the Treasury Internal Revenue Service

ΑF	or the	e 2017 calendar year, or tax year beginning and e	ending	_	
B c a	heck if pplicab	NATIONAL SOCIETI OF THE SONS OF THE		D Employer identifie	cation number
	Addre chang				
	Name Chang	e Doing business as		53-0	116355
	Initial return Final return	809 WEST MAIN STREET	Room/suite	E Telephone number (502)589-1776
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	3,433,863.
	Amen	LOOISVILLE, KI 40202		H(a) Is this a group re	eturn
	Applic tion pendi	F Name and address of principal officer:DON SHAW		for subordinates	? Yes 🔀 No
	-	H(b) Are all subordinates in	Icluded? Yes No		
		empt status: X 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) o	r 🛄 527	If "No," attach a	list. (see instructions)
-		te: WWW.SAR.ORG		H(c) Group exemption	
_	_	forganization: X Corporation Trust Association Other ►	L Year	of formation: 1906	State of legal domicile: DC
Pa	rt I	Summary			
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO ED AMERICAN REVOLUTION AND FOSTER PATRIOTISM	DUCATE	THE PUBLIC	ABOUT THE
nar	2	Check this box		than 25% of its net as	eete
ver	3		3	104	
Ğ		Number of independent voting members of the governing body (r are vi, into ra)			104
80		Total number of individuals employed in calendar year 2017 (Part V, line 2a)			30
/itie		Total number of volunteers (estimate if necessary)			325
Çţ	7a	Total unrelated business revenue from Part VIII, column (C), line 12			29,472.
∢		Net unrelated business taxable income from Form 990-T, line 34			0.
				Prior Year	Current Year
Ð	8	Contributions and grants (Part VIII, line 1h)		2,092,441.	1,797,031.
Revenue	9	Program service revenue (Part VIII, line 2g)		344,775.	368,079.
sev.	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		78,311.	59,002.
-	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		127,853.	133,274.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,643,380.	2,357,386.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,924.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) $_{\rm}$		924,542.	947,707.
ens		Professional fundraising fees (Part IX, column (A), line 11e)	<u> </u>	0.	0.
Expenses		Total fundraising expenses (Part IX, column (D), line 25)	0.	1 007 470	1 200 (10
_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,087,470.	1,309,610.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,013,936.	2,257,317. 100,069.
<u> </u>	19	Revenue less expenses. Subtract line 18 from line 12		629,444.	-
Net Assets or Fund Balances		Tatal seconds (Darth V. Visco 10)		ginning of Current Year 15,017,032.	End of Year 14,929,850.
Asse Bala		Total assets (Part X, line 16)		859,417.	511,297.
Vet / und		Total liabilities (Part X, line 26)		14,157,615.	14,418,553.
-	rt II	Net assets or fund balances. Subtract line 21 from line 20		<u>,-</u> ,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-	TI,ITO,JJJ.
<u> </u>					

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.

	Cimpeture of officer					
Sign	Signature of officer		Da	ate		
Here	DON SHAW, EXECUTIVE D	RECTOR				
	Type or print name and title					
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN		
Paid	AMELIA SEBASTIAN			self-employed P01251828		
Preparer	Firm's name 🕞 DEAN DORTON ALLE	EN FORD, PLLC	Fi	rm's EIN 27-3858252		
Use Only Firm's address 500 W. JEFFERSON ST., STE 1400						
	LOUISVILLE, KY 4	hone no. (502) 589-6050				
May the II	RS discuss this return with the preparer shown ab	ove? (see instructions)		X Yes No		
732001 11-2	2001 11-28-17 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2017)					

_	NATIONAL SOCIETY OF THE SONS OF THE
	990 (2017) AMERICAN REVOLUTION 53-0116355 Page 2
Pa	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III X
1	Check if Schedule O contains a response or note to any line in this Part III
	TO EDUCATE THE MEMBERSHIP AND THE GENERAL PUBLIC ABOUT THE AMERICAN
	REVOLUTION AND ITS PATRIOTS AND TO FOSTER PATRIOTISM AND APPRECIATION
	OF AMERICAN FREEDOMS
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 635,850 · including grants of \$) (Revenue \$ 430,329 ·)
	GENEALOGY VALIDATION - EVALUATE AND AUTHENTICATE CURRENT GENEALOGICAL
	RESEARCH AND DOCUMENTATION FOR USE BY FUTURE GENERATIONS. TRAIN
	MEMBERS AND OTHERS IN GENEALOGICAL METHODS. IN 2017, RECEIVED 5,785
	APPLICATIONS FOR REVIEW AND APPROVED 4,895.
4b	(Code:) (Expenses \$ 431,698. including grants of \$) (Revenue \$ 36,248.)
	SAR MAGAZINE - PUBLISHED QUARTERLY. ARTICLES DEAL WITH AMERICA'S
	HERITAGE AND PATRIOTISM. PURPOSE IS EDUCATIONAL AND INFORMATIONAL. IN
	2017, 126,375 MAGAZINES WERE PRINTED.
	210 161 0 72E
4c	(Code:) (Expenses \$ 319,161. including grants of \$) (Revenue \$ 2,735.) OUTREACH EDUCATION - SUPPORT MEMBER ACTIVITIES WITHIN THE EDUCATION
	COMMUNITY AND PROVIDE RESOURCES, ALONG WITH IMPLEMENTATION, THAT
	INCLUDE EDUCATIONAL PROGRAMS AND HANDS ON ACTIVITIES. ALSO CONDUCTS
	THE ANNUAL CONFERENCE ON THE AMERICAN REVOLUTION.
	THE ANNOAL CONFERENCE ON THE AMERICAN REVOLUTION.
4 -1	Other program convises (Deservice in Schedule O.)
40	Other program services (Describe in Schedule O.) (Expenses \$ 592,430. including grants of \$) (Revenue \$ 2,456.)
40	(Expenses \$ 592,430 · including grants of \$) (Revenue \$ 2,450 ·) Total program service expenses ▶ 1,979,139.
-++	Form 990 (2017)

Part IV Checklist of Required Schedules 1 Is the organization described in section 901(c)(3) or 4947(a)(1) (other than a private foundation)? 1 X 2 Is the organization required to complete Schedule 8, Schedule of Contributors? 2 X 3 Did the organization required to complete Schedule C, Part 1 3 X 4 Section 901(c)(3) organizations. Did the organization engage in biblying activities, or have a section 501(f) election in effect during the schedule C, Part 1 3 X 5 It the organization ascelins 01(c)(4), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts a defined in Persuna Procedure BP119 frost; complete Schedule D, Part 1 6 X 6 Uth organization martain any done advised funds or any similar funds or accounts? If Wes; complete Schedule D, Part 1 6 X 7 Uth organization martain collections of works of art, historical treasures, or other similar assets? If Yes; complete Schedule D, Part 1 7 X 9 Did the organization required to through a related organization, hold assets in tempornity restricted endowments, person and the section servicea? 7 X 7 Did the organization required to through a related organization, hold assets in tempornity restricted endowments, person and the section secontary 1	Form	990 (2017) AMERICAN REVOLUTION 53-0116	355	Pa	age 3
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? 1 X 2 X 2 Is the organization required to complete Schedule A. 2 X 2 X 3 Did the organization required to complete Schedule C. Part I. 3 X 2 X 4 Section 501(c)(3) organizations. Did the organization engage in lobbing activities on behalf of or in opposition to candidate for during the section 501(c)(4). S010(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Reverue Proceeding 40: Part II. 5 X 6 Did the organization receive or hold at conservation eassements. Including assements to presence open space, the environment, hietoric load mass, or historic structures // Y*'s, complete Schedule D. Part II. 6 X 7 Did the organization reselve or hold at conservation eassement, including assements to presence open space, the environment, hietoric load mass, or historic structures // Y*'s, complete Schedule D. Part II. 8 X 9 Did the organization mental nucleic conselling, debt management, credit repair, or debt negotation services? 7 X 10 Did the organization report an amount in Part X, line 21, for secrew or custodial account lability, serve as a custodian for amounts nor listed organization, hold assets in temporarily restric	Par	t IV Checklist of Required Schedules			
If "Yes," complete Schedule A. 1 X 2 Is the organization required to complete Schedule C, Part I 2 X 3 Did the organization required to complete Schedule C, Part I 3 X 4 Section 501(c)(3) organizations. Dut the organization engage in lobbying activities, or have a section 501(h) election in effect 4 X 5 Is the organization a section 501(h) election in effect 4 X 6 Did the organization a section 501(h) election in effect 4 X 7 Did the organization restime the Schedule C, Part I 6 X 8 Did the organization restime any doner advice of the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 6 X 7 Did the organization respect in bodia Conservation cluding easements in cycle thereagin or dbit negative schedule D, Part II 8 X 8 Did the organization report an amount in Part X, line 21, for secrow or custodial account fiability, serve as a custodian for anouts or particular schedule D, Part IV 8 X 9 Did the organization report an amount in Part X, line 21, for secrow or custodial account fiability, serve as a custodian for anouts or particular schedule D, Part V 8 X 10 Did the organizati				Yes	No
2 Is the organization required to complete Schedule 6, Schedule of Contribution? 2 X 3 Did the organization angagin direct or indirect political campaign activities on behalf of or in opposition to candidates for during the syrain? If "se," complete Schedule C, Part I 3 X 4 Bection SO1(c)(8) organizations. Did the organization engage in lobbying activities, or have a section SO1(n) election in effect during the syrain? If "se," complete Schedule C, Part II 4 X 5 Is the organization as defined in Revenue Procedure SP:191 I "se," complete Schedule C, Part II 6 X 6 Did the organization asochem SO1(c)(4). SO1(c)(5), or SO1(c)(6) or ganization thances or accounts for which donors have the refere to part I 6 X 7 Z X 6 X 7 X 7 Did the organization maintain colections of works of art, historical treasures, or other similar assoche? If "Yes," complete Schedule D, Part II 8 X 9 Did the organization report an amount in Part X, line 21, for secrow or custodial account liability, serve as a custodian for amounts no liste in Part X. or provide credit conseling, debit maragement, credit repair, or debt negotation service? 9 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of the total ass	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
2 Is the organization equive to complete Schedule B, Schedule C Contributors 2 X 3 Did the organization equive in letted or indirect problem company in attrities on behaft of n in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part II 3 X 4 Section 501(R) equivalations. Dit the organization engage in bobying activities, or have a section 501(R) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II. 4 X 5 Is the organization maintain any dono advised funds or any similar funds or accounts for which donos have the right to provide active in the distribution or investment of amounts in sub-funds or accounts for which donos have the right to provide active on the distribution or investment of amounts in sub-funds or accounts for which donos have the right to provide active on the distribution or investment of amounts in sub-funds or accounts for which donos have the right to provide active to hold a conservation essement, including essements to preserve open space, the environment, historic all mass, or historic all treasures, or or other doll account liability, serve as a custodian for amounts not listed in Part X, ine 21, for secrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ine 21, for secrow or custodial account liability, serve as a custodian for amounts in or linest, or gravide credit counseling, debt management, credit repair, or distributed schedule D, Part II 10 X 10 Did the organization report an amount for line, schedule D, Part VI 11 X 11 X <		If "Yes," complete Schedule A	1		
public office? If ''ves,' complete Schedule C, Part I 3 X 4 Sectors 01(c)(3) organizations. Did the organization angue in lobbying activities, or have a section 501(h) election in effect 4 X 5 Is the organization a section 501(h)(4).501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or aimilar amounts as defined in Revenue Proceedure Be191 ''Yes,' complete Schedule C, Part II 5 X 6 Did the organization maintain any doron advised funds or any similar funds or accounts 7 if 'ves, ' complete Schedule D, Part II 7 X 7 Did the organization maintain collections of works of at, historical treasures, or other similar asset? If 'Yes,' complete Schedule D, Part II 7 X 8 Did the organization report an amount in Part X, line 21, for scrow or custodial account liability, serve as a custodian for amounts in If 'Yes,' complete Schedule D, Part I 8 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 21, for scrow or custodial account liability, serve as a custodian for amounts in fires, ' complete Schedule D, Part V 10 X 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If ''res,' complete Schedule D, Part V 10 X 12 Did the organization report an amount for investments - order asceutines in Part X, line 12?	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
4 Section 501(c)(3) organizations. Did the organization angage in tobbying 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)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 // "Yes," complete Schedule C, Part III. 5 X 6 Did the organization maintain any doorn advised funds or any sourcents for which doors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. 6 X 7 Did the organization maintain collections of works of art, historical treasures, or other similar asset? If "Yes," complete Schedule D, Part II. 7 X 9 Did the organization, filed UP and X, line 21, for escrow or custodial account liability, serve as a custolian for amounts no listed in Part X, or provide credit conselling, debt management, credit repair, or debt negotiation services? 9 X 10 Did the organization report an amount for lead, buildings, and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII 10 X 11 M Did the organization report an amount for lead, buildings, and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X <td< th=""><th>3</th><td>Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for</td><td></td><td></td><td></td></td<>	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the taxy and <i>H</i> 'res' complete Schedule <i>C</i> , Part <i>II</i> . X 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 96-1971 <i>H</i> 'se, "complete Schedule <i>C</i> , Part <i>II</i> . 6 X D Dot the organization maintain any doma advised funds or any sources for which domors have the right to provide advice on the distribution or investment of amounts in such funds or accounts <i>IV</i> 'Wes, "complete Schedule D, Part <i>II</i> . 6 X D Dot the organization maintain collections of works of art, historical treasures, or other similar assets? <i>IV</i> 'Yes, "complete Schedule D, Part <i>II</i> . 7 X D Dot 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 cardia conselling, debt management, credit repair, or debt negoliation services? 9 X 1D Dit the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>II</i> 'Yes, "complete Schedule D, Part V 10 X 11 Hit do reganization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>II</i> 'Yes, "complete Schedule D, Part V 11 X 12 Did the organization report an amount for investments - other securitis in Part X, line 13 that is 5% or more of its total asse		public office? If "Yes," complete Schedule C, Part I	3		Х
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 891? If "Yes," complete Schedule O, Part II 5 X D Dt the organization maintain any donor advised funds or ascounts 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 II 6 X B Dd the organization readves or hold a conservation easometry, including easomets to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II. 7 X B Dd the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts no tilsed in Part X, line 71, for escrow or custodial account liability, serve as a custodian for amounts no tilsed in Part X, line 71, for escrow or custodial account liability, serve as a custodian for amounts no tilsed in Part X, line 71, line reserve or custodial account liability, serve as a custodian for amounts no tilsed in Part X, line 71, line scromplete Schedule D, Part W 10 X 10 Dd the organization report an amount for investments - organization report an amount for investments - program related in Part X, line 17 H 'Yes," complete Schedule D, Part W 10 X 11 Dd the organization report an amount for investments - organization report an amount for investments - organization report an amount for investments - program related in Part X, line 18 that is 5% or more of its total assets reported in Part X	4				
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar anounts as defined in Revenue Proceedure 98-197 (<i>V</i> *es, "complete Schedule <i>D</i> , Part <i>II</i> 5 X 6 Did the organization receives or hold a conservation easterning, including easternets to preserve open space. 6 X 7 Z Did the organization receives or hold a conservation easterning, including easternets to preserve open space. 7 X 8 Did the organization receives or hold a conservation easternet, including easternets to preserve open space. 7 X 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amouts not listed in Part X, ior provide eartic counseling, dot the management, or did the organization, including easters in temporarily restricted endowments, permanet endowments, or quasiendowments of the solution services? 9 X 9 Did the organization, receive an amount for investments - other securities in Part X, line 107 If 'Yes,' complete Schedule D, Part IV 10 X 11 If the organization include the assets 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 V 10 X 12 Did the organization include the management X, line 12 that is 5% or more of its total assets reported in Part X, line 16 If 'Y		during the tax year? If "Yes," complete Schedule C, Part II	4		Х
6 Did the organization regions and vised 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 II 7 Did the organization regions or hold a conservation easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 X 9 Did the organization matine collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 8 X 9 Did the organization, funder to conseling, debt management, redit regar, or debt negotiation services? If "Yes," complete Schedule D, Part IV 8 X 9 Did the organization, funder to conseling, debt management, redit regar, or debt negotiation services? 9 X 11 If the organization, funder to conseling, debt management, redit regar, or debt negotiation services? 9 X 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 10 X 11 Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part V NI 11 X 11 Did the organization port an amount for investments - program related in Part X, line 13 that is 5% or more of its total asests reported in Part X, line 16? If "Yes,"	5				
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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 111 X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 12a X b Was the organization included in consolidated, independent audited financial statements for the tax year? 112b X 13 Is the organization as school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report an Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 X 17 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 X 18 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and	е				Х
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19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			18		Х
	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
			19		Х

NATIONAL SOCIETY OF THE SONS OF THE

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Form	AMERICAN REVOLUTION 53-011	5355	Р	age 4
	rt 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
	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			<u> </u>
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	<u> </u>		<u> </u>
	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			<u> </u>
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
		23		x
242	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	20		
2-70	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
		04-		x
	Schedule K. If "No", go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		┣───
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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 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			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
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			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	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	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
00	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?	- 50		<u> </u>
51	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/f "Yes," complete	31		
32		32		x
22	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		- 23
33				x
~ ~	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		x	
	Part V, line 1	34		
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			v
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			1
	Note. All Form 990 filers are required to complete Schedule O	38	Х	1

Pa	t V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 15	5		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b (<u>ง</u>		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and		1		
	(gambling) winnings to prize winners?		1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 30)		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction				
3a			3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule		3b	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other				
	financial account in a foreign country (such as a bank account, securities account, or other financial	•	4a		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).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-		5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t				
	any contributions that were not tax deductible as charitable contributions?		6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contribu				
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	ervices provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	<u> </u>	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v				
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	1 1			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file F		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintainer				
		,	8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1		
11	Section 501(c)(12) organizations. Enter:	··			
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		1		
	amounts due or received from them.)	11b			
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	12b			
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	13b			
с	Enter the amount of reserves on hand	13c			
	Did the construction was the construction of the terminal sector of		14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu		14b	<u> </u>	

Form	990	(2017)
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Form 990 (2017)

NATIONAL SOCIETY OF THE SONS OF THE AMERICAN REVOLUTION

Pa	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 th	rough i	b below, and for	a "No" i	respor	ise
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule C	. See in	structions.			
	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	10	4		
	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	1b	10	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with a	any other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the					
	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					Х
5	Did the organization become aware during the year of a significant diversion of the organization's as					Х
6	Did the organization have members or stockholders?			6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a					
	more members of the governing body?			7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockho	lders, or			
	persons other than the governing body?			7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue	Code.)			
					Yes	No
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 c	hapters	, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes? \ldots			10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly befor	e filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
	• • • • • • • • • • • • • • • • • • • •			12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y					
	in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approv		dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official			15a	X	37
b	Other officers or key employees of the organization			15b		X
<i>.</i> -	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment w	th a			37
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	-	-			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga					
800	exempt status with respect to such arrangements?	<u></u>		16b		
<u>3ec</u> 17	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed \blacktriangleright KY					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	[(Section	n 501(c)(3)s only	availat	hle	
10	for public inspection. Indicate how you made these available. Check all that apply.			avaiidi		
	X Own website Another's website X Upon request Other (explain)	in Sch	edule ()			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co			nd finar	ncial	
	statements available to the public during the tax year.			.a miai		
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks an	d records: ►			
	DON SHAW $-502-589-1776$					

809 WEST MAIN STREET, LOUISVILLE, KY 40202

NATIONAL SOCIETY OF THE SONS OF THE	NATIONAL	SOCIETY	OF	\mathbf{THE}	SONS	OF	THE
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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 VI

AMERICAN REVOLUTION

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average hours per week	box	not c , unle	Pos heck ss pe	itior more rson	than is bot pr/trus	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) LARRY T GUZY	47.00									
PRESIDENT GENERAL 17-18	5.00	х		Х				0.	0.	0.
(2) WARREN M ALTER	10.00									
SECRETARY 17-18	2.00	Х		х				0.	0.	0.
(3) JOHN T MANNING	20.00									
TREASURER GENERAL 17-18	5.00	Х		х				0.	0.	0.
(4) DAVIS LEE WRIGHT	10.00									
CHANCELLOR GENERAL 16-18	5.00	Х		х				0.	0.	0.
(5) JOHN D SINKS	15.00									
GENEALOGIST GENERAL 16-18		х		х				0.	0.	0.
(6) RUSSELL F DEVENNEY JR	10.00									
REGISTRAR GENERAL 15-17		х		х				0.	0.	0.
(7) C BRUCE PICKETTE	10.00									
REGISTRAR GENERAL 17-18		x		Х				0.	0.	0.
(8) JACK T MANNING	5.00									
HISTORIAN GENERAL 15-17	5.00	х		Х				0.	0.	0.
(9) JOHN O THORNHILL	5.00									
HISTORIAN GENERAL 17-18	10.00	X		X				0.	0.	0.
(10) C BRUCE PICKETTE	10.00									
LIBRARIAN GENERAL 15-17		x		Х				0.	0.	0.
(11) DOUGLAS T COLLINS	10.00									
LIBRARIAN GENERAL 17-18	10.00	X		X				0.	0.	0.
(12) DR. LARRY M LESLIE	10.00									
SURGEON GENERAL 15-17		x		Х				0.	0.	0.
(13) DR MATTHEW JOHN BARLOW JR	10.00									
SURGEON GENERAL 17-18		x		Х				0.	0.	0.
(14) JOHN CONRAD WAKEFIELD	10.00									
CHAPLAIN GENERAL 17-18		x		Х				0.	0.	0.
(15) RT. REV. LOUIS V CARLSON, JR	10.00			<u>-</u> -						<u>^</u>
CHAPLAIN GENERAL 16-17	5.00	X		X	<u> </u>	<u> </u>		0.	0.	0.
(16) WAYNE H MALLAR	2.00								_	<u>^</u>
VICE PRESIDENT GENERAL 16-17		X		X				0.	0.	0.
(17) WARREN CHARLES FRISTENSKY	2.00	.,								<u>^</u>
VICE PRESIDENT GENERAL 16-17		Х		Х				0.	0.	0. Form 990 (2017)

Form 990 (2017)

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Form 990 (2017) AMERICAN	REVOLU	ri(ON						53-01	16	355	Page 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	vees	, and	d Hi	ighe	st (Compensated Employe	es (continued)			
(A)	(B)				C)	•		(D)	(E)			(F)
Name and title	Average			Pos	itior	า		Reportable	Reportable			mated
Name and the	hours per					than is bot			compensation	n		ount of
	week	offic	cer an	d a d	lirecto	or/trus	tee)	from	from related	''		ther
	(list any	tor						the	organizations			ensation
	hours for	direc				P		organization	(W-2/1099-MIS			m the
	related	e or	stee			ısate		(W-2/1099-MISC)	(-,		nization
	organizations	trust	al tru		/ee	mpe		, , ,			•	related
	below	dual	nstitutional trustee	5	nplo	est co oyee	er				organ	izations
	line)	Individual trustee or director	n stitı	Officer	Key employee	Highest compensated employee	Former				Ũ	
(18) MARK S BRENNAN SR	2.00				-							
VICE PRESIDENT GENERAL 16-17		x		х				0.		0.		0.
(19) LAWRENCE G FEHRENBAKER	2.00											
VICE PRESIDENT GENERAL 16-17		x		х				0.		0.		0.
(20) GERALD P BRENT	2.00											
VICE PRESIDENT GENERAL 16-17		x		х				0.		0.		0.
(21) THOMAS L PAYNE	2.00											
VICE PRESIDENT GENERAL 16-17		x		х				0.		0.		0.
(22) WILLIAM G VETTE	2.00											• •
VICE PRESIDENT GENERAL 16-17		x		х				0.		0.		0.
(23) DAVID K KENTSMITH	2.00											
VICE PRESIDENT GENERAL 16-17		x		х				0.		0.		Ο.
(24) LESLIE R MAGEE	2.00									<u> </u>		
VICE PRESIDENT GENERAL 16-17	2.00	x		х				0.		0.		Ο.
(25) WALTER G SEATON	2.00									••		••
VICE PRESIDENT GENERAL 16-17	2.00	x		х				0.		0.		0.
(26) REGAN G GRANDY	2.00			Δ						••		0.
VICE PRESIDENT GENERAL 16-17	2.00	x		х				0.		Ο.		0.
		Δ		Λ				0.		0.		0.
1b Sub-total		•••••						148,378.		0.	20	,322.
c Total from continuation sheets to Part VI										0.		,322.
d Total (add lines 1b and 1c)								148,378.		-	20	, 344.
2 Total number of individuals (including but n	ot limited to th	lose	liste	ed al	bove	e) wł	10 r	received more than \$100	,000 of reportable	е		~
compensation from the organization												0
											`	res No
3 Did the organization list any former officer,								•				
line 1a? If "Yes," complete Schedule J for s	uch individual										3	X
4 For any individual listed on line 1a, is the su	m of reportab	le co	omp	ensa	atior	n and	d ot	ther compensation from	the organization			
and related organizations greater than \$150),000? If "Yes,	" со	mple	ete S	Sche	edule	J	for such individual			4	X
5 Did any person listed on line 1a receive or a	Iccrue compei	nsat	ion f	rom	any	/ unr	ela	ted organization or indiv	idual for services			
rendered to the organization? If "Yes," com	plete Schedul	e J f	or su	ıch	pers	son .					5	X
Section B. Independent Contractors												
1 Complete this table for your five highest co	mpensated in	depe	ende	ent c	ont	racto	ors ·	that received more than	\$100,000 of com	pens	ation fro	m
the organization. Report compensation for	-											
(A)	,							(B)	,		(C)	
Name and business	address							Description of s	ervices	С	ompens	
VESTED PUBLISHING, LLC												
P.O. BOX 559, FRANKFORT,	KY 4060)2						MAGAZINE PUB	LISHING		166	,831.
		-										
2 Total number of independent contractors (ii	ncludina but n	ot li	mite	d to	tho	se lie	ster	d above) who received n	ore than			
\$100,000 of companyation from the organi	•					1						

Form 990 AMERICAN	REVOLU		ON						53-011	6355
Part VII Section A. Officers, Directors, Tru	ustees, Key Er	nplo	oyee	s, a	nd H	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(cl	heck	all	that	app	ly)	compensation	compensation	amount of
	per					æ		from	from related	other
	week (list any	to				plo ye		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direc				ed em		(W-2/1099-MISC)	(11 2) 1000 11100)	organization
	related	tee or	ustee			en sate		· · · · · · · · · · · · · · · · · · ·		and related
	organizations	al trus	nal tr		loyee	dwoo				organizations
	below	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			
	line)	рц С	lns	θθ	Ke) 토	ē			
(27) JIM L W FAULKINBURY VICE PRESIDENT GENERAL 16-17	2.00	x		x				0.	0.	0.
(28) JOHN R BERG	2.00								••	0.
VICE PRESIDENT GENERAL 16-17	2.00	x		х				0.	0.	0.
(29) PATRICK M MESNARD	2.00									
VICE PRESIDENT GENERAL 16-18		x		х				0.	0.	0.
(30) ROGER W COURSEY	2.00									Ç ¢
VICE PRESIDENT GENERAL 16-17		x		х				0.	0.	0.
(31) KENNETH DUANE ROACH	2.00									
VICE PRESIDENT GENERAL 17-18		x		х				0.	0.	0.
(32) WARREN CHARLES FRISTENSKY	2.00									
VICE PRESIDENT GENERAL 17-18		X		Х				0.	0.	0.
(33) C LOUIS RABORG JR	2.00									
VICE PRESIDENT GENERAL 17-18		Х		Х				0.	0.	0.
(34) JAMES HENRY WOOD	2.00									
VICE PRESIDENT GENERAL 17-18		Х		Х				0.	0.	0.
(35) TONY LEE VETS	2.00									
VICE PRESIDENT GENERAL 17-18		х		Х				0.	0.	0.
(36) ROBERT BENHAM FISH JR	2.00									0
VICE PRESIDENT GENERAL 17-18		X		Х				0.	0.	0.
(37) ROGER STEPHEN BOEKER	2.00	v		77				0	0	0
VICE PRESIDENT GENERAL 17-18	2.00	X		Х				0.	0.	0.
(38) COL DAVID K KENTSMITH MD VICE PRESIDENT GENERAL 17-18	2.00	x		x				0.	0.	0.
(39) ROGER NEIL CAPPS JR	2.00	^		Δ				0.	0.	0.
VICE PRESIDENT GENERAL 17-18	2.00	x		х				0.	0.	0.
(40) DAVID WAYNE SNODGRASS	2.00								Ŭ.	
VICE PRESIDENT GENERAL 17-18		x		х				0.	0.	0.
(41) PHILIP GARY PETTETT	2.00									
VICE PRESIDENT GENERAL 17-18		x		х				0.	0.	0.
(42) MARSHALL KENT GREGORY	2.00									
VICE PRESIDENT GENERAL 17-18		x		х				0.	0.	0.
(43) GREGORY DEAN LUCAS	2.00									
VICE PRESIDENT GENERAL 17-18		X		Х				0.	0.	0.
(44) T BROOKS LYLES JR	2.00									
VICE PRESIDENT GENERAL 17-18		х		Х				0.	0.	0.
(45) J MICHEAL TOMME SR	10.00							-		-
PRESIDENT GENERAL 2016-2017	1.00	X		Х				0.	0.	0.
(46) JUDGE THOMAS EUGENE LAWRENCE	1.00							_		_
PRESIDENT GENERAL 2015-2016		Х		Х				0.	0.	0.
Total to Part VII, Section A, line 1c	·····									

Form 990

NATIONAL SOCIETY OF THE SONS OF THE AMERICAN REVOLUTION

Part VII Section A. Officers, Directors, Tru		nplo	byee			ligh	est			
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(cł	heck	all	that	app	ly)	compensation	compensation	amount of
	per					e		from the	from related organizations	other
	week (list any	tor				plo ye		organization	(W-2/1099-MISC)	compensation from the
	hours for	direc				d em		(W-2/1099-MISC)	(W 2/1000 MICO)	organization
	related	ee or	Istee			en sate		(and related
	organizations	l trust	nal tru		oyee	ompe				organizations
	below	Individual trustee or director	nstitutional trustee	cer	ƙey employee	Highest compensated employee	Former			
	line)	Indi	Inst	Officer	Key	Higl	Forr			
(47) LINDSEY COOK BROCK	1.00									
PRESIDENT GENERAL 2014-2015		Х		Х				0.	0.	0.
(48) JOSEPH W DOOLEY	15.00									
PRESIDENT GENERAL 2013-2014	25.00	Х		Х				0.	0.	0.
(49) STEPHEN ARTHUR LEISHMAN	2.00									
PRESIDENT GENERAL 2012-2013	2.00	Х		Х				0.	0.	0.
(50) LARRY JOHN MAGERKURTH	1.00									
PRESIDENT GENERAL 2011-2012		х		Х				0.	0.	0.
(51) JAMES DAVID SYMPSON	5.00								0	•
PRESIDENT GENERAL 2010-2011	1	X		Х				0.	0.	0.
(52) HON EDWARD FRANKLYN BUTLER SR	1.00								0	•
PRESIDENT GENERAL 2009-2010	1	X		Х				0.	0.	0.
(53) COL DAVID NELS APPLEBY	1.00								0	•
PRESIDENT GENERAL 2008-2009	1	X		Х				0.	0.	0.
(54) GEN BRUCE A. WILCOX	1.00								0	•
PRESIDENT GENERAL 2007-2008	1	X		Х				0.	0.	0.
(55) NATHAN EMMETT WHITE JR	1.00								0	0
PRESIDENT GENERAL 2006-2007	1 00	X		Х				0.	0.	0.
(56) ROLAND GRANVILLE DOWNING PH.D.	1.00								0	0
PRESIDENT GENERAL 2005-2006	1 00	X		Х				0.	0.	0.
(57) HENRY N MCCARL PHD	1.00								0	0
PRESIDENT GENERAL 2004-2005	1 00	X		Х				0.	0.	0.
(58) RAYMOND GERALD MUSGRAVE	1.00	37		37				0	0	0
PRESIDENT GENERAL 2003-2004	1 00	Х		Х				0.	0.	0.
(59) LARRY DUNCAN MCCLANAHAN	1.00	37		37				0	0	0
PRESIDENT GENERAL 2001-2002	1.00	Х		Х				0.	0.	0.
(60) HOWARD FRANKLYN HORNE JR	1.00	x		x				0.	0.	0
PRESIDENT GENERAL 1999-2000	1.00	^		Λ				0.	0.	0.
(61) PROF CARL K HOFFMANN	1.00	x		x				0.	0.	0
PRESIDENT GENERAL 1997-1998	1.00	^		Δ				0.	0.	0.
(62) WILLIAM C GIST JR	1.00	x		x				0.	0.	0.
PRESIDENT GENERAL 1995-1996	5.00	^		Δ				0.	0.	0.
(63) DOUGLAS T COLLINS	5.00	x		x				0.	0.	0.
EXECUTIVE COMMITTEE 16-17	5.00	^		Δ				0.	0.	0.
(64) PAUL R CALLANAN EXECUTIVE COMMITTEE 16-18	5.00	x		x				0.	0.	0.
(65) MICHAEL J ELSTON	5.00	~	-	-				0.	0.	0.
EXECUTIVE COMMITTEE 16-17	5.00	x		х				0.	0.	0.
(66) JAMES MORRIS LINDLEY	3.00	~	-	-				0.	0.	0.
EXECUTIVE COMMITTEE 17-18	5.00	x		x				0.	0.	0.
EXECUTIVE COMMITTEE 1/-10		1		1				0.	0.	0.
Total to Part VII, Section A, line 1c										

Form 990 AMERICAN	REVOLUT)N						53-011	6355
Part VII Section A. Officers, Directors, Tru	istees, Key Er	nplo	oyee	es, a	nd H	ligh	est	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average hours	(cł		Pos		app	ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(67) MICHAEL PERRY SCHENCK EXECUTIVE COMMITTEE 17-18	5.00	x		x				0.	0.	0.
(68) RICK DWAYNE HOLLIS	8.00									
EXECUTIVE COMMITTEE 17-18	28.00	х		x				0.	0.	0.
(69) JOHN F OLIVE III	1.00									
TRUSTEE 17-18		Х						0.	0.	0.
(70) TIMOTHY W DOUGHTY	1.00									
TRUSTEE 17-18		Х						0.	0.	0.
(71) STEPHEN J MILLER TRUSTEE 17-18	1.00	x						0.	0.	0.
(72) COREY D BURNS	1.00	Δ							•	0.
TRUSTEE 17-18	1.00	x						0.	0.	0.
(73) RONALD J BARKER	1.00								Ŭ.	
TRUSTEE 17-18		x						0.	0.	0.
(74) WILLIAM W TANNER	1.00									
TRUSTEE 17-18		x						0.	0.	0.
(75) LORRAINE E CHENEY	1.00									
TRUSTEE 17-18		х						0.	0.	0.
(76) DAVID J PERKINS	1.00									
TRUSTEE 17-18		х						0.	0.	0.
(77) JAMES R CLEMENT	1.00									
TRUSTEE 17-18		Х						0.	0.	0.
(78) TROY L FOXWELL	1.00									
TRUSTEE 17-18		Х						0.	0.	0.
(79) RICHARD E PATTEN	1.00									
TRUSTEE 17-18		Х						0.	0.	0.
(80) PETER K GOEBEL	1.00									_
TRUSTEE 17-18		х						0.	0.	0.
(81) WALTER R YOUNG SR	1.00									0
TRUSTEE 17-18	1 00	X						0.	0.	0.
(82) LANNY R PATTEN	1.00	37						0		0
TRUSTEE 17-18	1 00	Х						0.	0.	0.
(83) W ALLEN GREENLY	1.00	x						0.	0.	0
TRUSTEE 17-18	1.00	^						0.	0.	0.
(84) JAMES C TAYLOR TRUSTEE 17-18	<u> </u>	x						0.	0.	0.
(85) ELWIN L SPRAY	1.00								••	0.
TRUSTEE 17-18		x						0.	0.	0.
(86) PHILLIP GARY PETTETT	1.00				-				J .	.
TRUSTEE 17-18		x						0.	0.	0.
	1								3.0	
Total to Part VII, Section A, line 1c										

	N REVOLU	ΓIC							53-011	6355
Part VII Section A. Officers, Directors,	Trustees, Key Er	nplo	oyee	es, a	nd H	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average			Pos	ition	I		Reportable	Reportable	Estimated
	hours	(cl	hecł	k all i	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week (list any	j.				ploye		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direct				d em		(W-2/1099-MISC)	(00-2/1033-10100)	organization
	related	tee or	istee			en sate		(and related
	organizations	Individual trustee or director	Institutional trustee		oyee	Highest compensated employee				organizations
	below	ividua	titutio	Officer	Key employee	hest c	Former			
	line)	hd	Inst	0ff	Key	Hig	For			
(87) THOMAS D ASHBY	1.00								0	0
TRUSTEE 17-18	7.00	X						0.	0.	0.
(88) WAYNE C EELLS	7.00	x						0.	0.	0
TRUSTEE 17-18	1.00	<u> </u>						0.	0.	0.
(89) WILLIAM H LEES	1.00	x						0.	0.	0.
TRUSTEE 17-18	1.00	^						0.	0.	0.
(90) T BROOKS LYLES JR	1.00	x						0.	0.	0
TRUSTEE 17-18	1.00	^						0.	0.	0.
(91) DR LARRY M LESLIE	1.00	x						0.	0.	0.
TRUSTEE 17-18 (92) TONY L VETS II	1.00	^						0.	0.	0.
TRUSTEE 17-18	1.00	x						0.	0.	0.
(93) WAYNE H MALLAR	1.00							0.	•	0.
TRUSTEE 17-18	1.00	x						0.	0.	0.
(94) WILLIAM P SMITHSON	1.00								Ŭ.	
TRUSTEE 17-18	1100	x						0.	0.	0.
(95) WILLIAM E BATTLES IV	1.00									
TRUSTEE 17-18		x						0.	0.	0.
(96) JOSEPH C CONGER	1.00									
TRUSTEE 17-18		x						0.	0.	0.
(97) PETER A DIXON	1.00									
TRUSTEE 17-18		x						0.	0.	0.
(98) JOSEPH E WINSTON	1.00									
TRUSTEE 17-18		x						0.	0.	0.
(99) DALE A SCHMIDT	1.00									
TRUSTEE 17-18		X						0.	0.	0.
(100) JAMES MORRIS LINDLEY	1.00									
TRUSTEE 17-18		Х						0.	0.	0.
(101) COL DAVID K KENTSMITH MD	1.00									
TRUSTEE 17-18		Х						0.	0.	0.
(102) CHARLES SMITH	1.00									
TRUSTEE 17-18		Х						0.	0.	0.
(103) DOUGLAS M WOOD	1.00									_
TRUSTEE 17-18		X						0.	0.	0.
(104) DAVID G CHRISTOFFERSEN	1.00							_		_
TRUSTEE 17-18	1 00	X	<u> </u>		<u> </u>			0.	0.	0.
(105) ANDREW S LUNGAR JR	1.00							_	<u> </u>	
TRUSTEE 17-18	1 00	X	<u> </u>		<u> </u>			0.	0.	0.
(106) GARY O GREEN	1.00							_	_	<u>^</u>
TRUSTEE 17-18		Х						0.	0.	0.
Total to Part VII, Section A, line 1c										

	N REVOLU								53-011	6355
Part VII Section A. Officers, Directors,	Trustees, Key Er	nplo	byee	es, a	nd H	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos	ition	I I		Reportable	Reportable	Estimated
	hours	(cl	hecł	k all i	that	app	ly)	compensation	compensation	amount of
	per					0		from	from related	other
	week (list any	j.				ploye		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direct				d em		(W-2/1099-MISC)	(00-2/1033-10100)	organization
	related	tee or	istee			en sate		(and related
	organizations	Individual trustee or director	Institutional trustee		oyee	Highest compensated employee				organizations
	below	ividua	titutio	Officer	Key employee	hest o	Former			
	line)	h	lns	θŧ	Key	Hig	For			
(107) JAMES D SCHAFFER	1.00							0.	0	0
TRUSTEE 17-18	1.00	X						0.	0.	0.
(108) MARTIN A REYNOLDS	1.00	x						0.	0.	0.
TRUSTEE 17-18	1.00	^						0.	0.	0.
(109) JOHN R BERG TRUSTEE 17-18	1.00	x						0.	0.	0.
(110) DONALD E MENGLE	1.00	^						0.	0.	0.
TRUSTEE 17-18	1.00	x						0.	0.	0.
(111) DANIEL S HARROP III	1.00							0.	••	0.
TRUSTEE 17-18	1.00	x						0.	0.	0.
(112) REDDING I CORBETT III	1.00									
TRUSTEE 17-18		x						0.	0.	0.
(113) STEPHEN R RENOUF	1.00									
TRUSTEE 17-18		x						0.	0.	0.
(114) PATRICK M MESNARD	1.00									
TRUSTEE 17-18		X						0.	0.	0.
(115) DAVID L EAGAN	1.00									
TRUSTEE 17-18		Х						0.	0.	0.
(116) MICHAEL J RADCLIFF	1.00									_
TRUSTEE 17-18		х						0.	0.	0.
(117) REGAN G GRANDY	1.00									
TRUSTEE 17-18		Х						0.	0.	0.
(118) DOUGLAS MABEE	1.00									0
TRUSTEE 17-18	1 0 0	X						0.	0.	0.
(119) MICHAEL J ELSTON	1.00								0	0
TRUSTEE 17-18	1.00	X						0.	0.	0.
(120) ROBERT F DOUGHTY	1.00	x						0.	0.	0.
TRUSTEE 17-18 (121) STEVEN D HART	1.00	^						0.	0.	0.
TRUSTEE 17-18	1.00	x						0.	0.	0.
(122) CHARLES A MCGEE	1.00								••	0.
TRUSTEE 17-18	1000	x						0.	0.	0.
(123) DAVID E THOMPSON	1.00									
TRUSTEE 17-18		x						0.	0.	0.
(124) WILLIAM O STONE	1.00									
TRUSTEE 16-17		x						0.	0.	0.
(125) TIMOTHY W DOUGHTY	1.00			1						
TRUSTEE 16-17		x						0.	0.	0.
(126) ABRAHAM R BYRD III	1.00			1						
TRUSTEE 16-17		х						0.	0.	0.
Total to Part VII, Section A, line 1c										

Form 990 AMERICAN	REVOLU)N						53-011	6355
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	mplo	byee	es, a	nd H	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos				Reportable	Reportable	Estimated
	hours	(cl	heck	k all i	that	app	ly)	compensation	compensation	amount of
	per					0		from	from related	other
	week (list any	for				ploye		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direct				d em		(W-2/1099-MISC)	(00-2/1033-10100)	organization
	related	tee or	istee			en sate		(and related
	organizations	Individual trustee or director	nstitutional trustee		oyee	Highest compensated employee				organizations
	below	ividua	titutio	Officer	Key employee	hest c	Former			
	line)	Indi	Inst	0ff	Key	Hig	Боп			
(127) EUGENE C SMITH JR	1.00								0	0
TRUSTEE 16-17	1 00	X						0.	0.	0.
(128) MARSHALL KENT GREGORY	1.00	x						0.	0.	0.
TRUSTEE 16-17 (129) WILLIAM W TANNER	1.00	^						0.	0.	0.
TRUSTEE 16-17	1.00	x						0.	0.	0.
(130) DAVID WAYNE SNODGRASS	1.00							0.	••	0.
TRUSTEE 16-17	1.00	x						0.	0.	0.
(131) KENNETH DUANE ROACH	1.00	11							Ŭ.	••
TRUSTEE 16-17		x						0.	0.	0.
(132) JAMES R CLEMENT	1.00									
TRUSTEE 16-17		x						0.	0.	0.
(133) PETER K MOLLER	1.00									
TRUSTEE 16-17		X						0.	0.	0.
(134) PAUL M HAYS	1.00									
TRUSTEE 16-17		Х						0.	0.	0.
(135) PETER K GOEBEL	1.00									
TRUSTEE 16-17		Х						0.	0.	0.
(136) RAYMOND F WESS	1.00									0
TRUSTEE 16-17	1 00	X						0.	0.	0.
(137) LANNY R PATTEN	1.00							0	0	0
TRUSTEE 16-17	1.00	X						0.	0.	0.
(138) THOMAS M OWEN	1.00	x						0.	0.	0.
TRUSTEE 16-17 (139) WALTER B STEVENSON	1.00	^						0.	0.	0.
TRUSTEE 16-17	1.00	x						0.	0.	0.
(140) ELWIN L SPRAY	1.00	11							Ŭ.	
TRUSTEE 16-17		x						0.	0.	0.
(141) PHILIP G PETTET	1.00									
TRUSTEE 16-17		x						0.	0.	0.
(142) THOMAS D ASHBY	1.00									
TRUSTEE 16-17		x						0.	0.	0.
(143) WILLIAM E SHARP III	1.00									
TRUSTEE 16-17		х						0.	0.	0.
(144) HAROLD E GOODRICH	1.00									
TRUSTEE 16-17		Х						0.	0.	0.
(145) ROBERT NEIL CAPPS JR	1.00							-		-
TRUSTEE 16-17		х						0.	0.	0.
(146) CHARLES R SCOTT	1.00							_		^
TRUSTEE 16-17		X						0.	0.	0.
Total to Part VII, Section A, line 1c	<u></u>									

Form 990 AMERICA	N REVOLU)N						53-011	6355
Part VII Section A. Officers, Directors,	Trustees, Key Er	nplo	oyee	es, a	nd H	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average			Pos				Reportable	Reportable	Estimated
	hours	(cl	heck	c all t	that	app	ly)	compensation	compensation	amount of
	per					a		from the	from related	other
	week (list any	to				ploye		organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direc				ed em		(W-2/1099-MISC)	(11 2) 1000 11100)	organization
	related	tee or	ustee			ensate				and related
	organizations	Individual trustee or director	nstitutional trustee		Key employee	Highest compensated employee				organizations
	below	ividu	titutio	Officer	/ emp	hest (Former			
	line)	pr	lns	Off	Ke	Ξĵ	<u>6</u>			
(147) TONY LEE VETS	1.00	x						0.	0.	0
TRUSTEE 16-17	1.00	<u>^</u>						0.	0.	0.
(148) DAVID L MANCHESTER TRUSTEE 16-17	1.00	x						0.	0.	0.
(149) JAMES F ENGLER, SR	1.00							0.	0.	0.
TRUSTEE 16-17	1.00	x						0.	0.	0.
(150) DAVID E SHRADER	1.00									
TRUSTEE 16-17		x						0.	0.	0.
(151) ROBERT D EBERT	1.00									
TRUSTEE 16-17		x						0.	0.	0.
(152) PAUL R CALLANAN	1.00									
TRUSTEE 16-17		X						0.	0.	0.
(153) PETER A DIXON	1.00									
TRUSTEE 16-17		Х						0.	0.	0.
(154) JOSEPH E WINSTON	1.00									_
TRUSTEE 16-17		х						0.	0.	0.
(155) ROBERT J CORUM	1.00									•
TRUSTEE 16-17	1 00	X						0.	0.	0.
(156) JAMES MORRIS LINDLEY	1.00	x						0.	0.	0.
TRUSTEE 16-17 (157) FREDERICK ARTHUR WALDEN	1.00	^						0.	0.	0.
TRUSTEE 16-17	1.00	x						0.	0.	0.
(158) BRIAN IRWIN WORCESTER	1.00							0.	••	0.
TRUSTEE 16-17	1.00	x						0.	0.	0.
(159) JOHN T MANNING	1.00									
TRUSTEE 16-17		x						0.	0.	0.
(160) JOHN A MOLLER	1.00									
TRUSTEE 16-17		x						0.	0.	0.
(161) JIM P THORNTON	1.00									
TRUSTEE 16-17		X						0.	0.	0.
(162) TIMOTHY W BERLY	1.00									
TRUSTEE 16-17		Х						0.	0.	0.
(163) JAMES D SCHAFFER	1.00									
TRUSTEE 16-17		х						0.	0.	0.
(164) DARRELL BRENT HEFLEY	1.00							_		<u> </u>
TRUSTEE 16-17	1 0 0	X						0.	0.	0.
(165) JOHN R BERG	1.00									_
TRUSTEE 16-17	1 00	X						0.	0.	0.
(166) JOSEPH B MCMULLEN	1.00	x						0.	0.	<u>م</u>
TRUSTEE 16-17		<u> </u>						U •	0.	0.
Total to Part VII, Section A, line 1c										

Form 990 AMERICAN	REVOLU)N						53-011	6355
Part VII Section A. Officers, Directors, T	rustees, Key Ei	mplo	byee	es, a	nd H	ligh	est	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average hours	(cl		(C Pos (all 1			ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pensated em ployee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(167) SIDNEY CLIFFORD JR TRUSTEE 16-17	1.00	x						0.	0.	0.
(168) DANIEL K WOODRUFF TRUSTEE 16-17	1.00	x						0.	0.	0.
(169) STEPHEN R RENOUF	1.00								0.	
TRUSTEE 16-17 (170) COMTE JACQUES DE TRENTINIAN	1.00	X						0.		0.
TRUSTEE 16-17 (171) DARRYL S ADDINGTON	1.00	X						0.	0.	0.
TRUSTEE 16-17 (172) LARRY G STEVENS	1.00	X						0.	0.	0.
TRUSTEE 16-17	1.00	x						0.	0.	0.
(173) JEFFREY EUGENE BRUMMETTE TRUSTEE 16-17		x						0.	0.	0.
(174) PAUL L CHILD SR TRUSTEE 16-17	1.00	x						0.	0.	0.
(175) ZACHARIAH S FIKE TRUSTEE 16-17	1.00	x						0.	0.	0.
(176) REVERDY E WRIGHT	1.00	x						0.	0.	0.
TRUSTEE 16-17 (177) ROBERT F DOUGHTY	1.00									
TRUSTEE 16-17 (178) RICHARD D BROCKWAY	1.00	X						0.	0.	0.
TRUSTEE 16-17 (179) CHARLES A MCGEE	1.00	X		-				0.	0.	0.
TRUSTEE 16-17 (180) DAVID E THOMPSON	1.00	x						0.	0.	0.
TRUSTEE 16-17		x						0.	0.	0.
(181) MARY BUTTS DIRECTOR OF FINANCE	35.00			x				50,121.	0.	9,629.
(182) DONALD SHAW EXECUTIVE DIRECTOR	35.00 5.00			x				98,257.	0.	10,693.
								140.070		
Total to Part VII, Section A, line 1c								148,378.		20,322.

Form 990 (2017) AMERICA

NATIONAL SOCIETY OF THE SONS OF THE AMERICAN REVOLUTION

Par	t VIII	Statement of Rever	nue					
		Check if Schedule O cont	tains a response	or note to any lir				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts		Federated campaigns		102 076				
52		Membership dues		103,276.				
Å, ts		Fundraising events		4 6 0 1 0 1				
la la		Related organizations		460,121.				
Sin's		Government grants (contribut						
ier utio	f	All other contributions, gifts, gran		222 624				
탕		similar amounts not included abo		233,634.				
n pu	-	Noncash contributions included in lines			1,797,031.			
ם כ	h	Total. Add lines 1a-1f		1				
	-	ADMISSION FEES		Business Code 900099	282,000.	282,000.		
	_	SUPPLEMENTAL FE	700	900099	69,970.	69,970.		
Program Service Revenue		COPYING FEES	269	900099	10,567.	10,567.		
Ĩ ě		EDUCATION FEES		900099	2,252.	2,252.		
Bae	a	LIBRARY FEES		900099	2,232.	2,022.		
	e				1,268.	1,268.		
-		All other program service reve			368,079.	1,200.		
\rightarrow	<u> </u>	Total. Add lines 2a-2f			500,075.			
	3				48,254.			48,254
	4	other similar amounts)			40,2340			40,234
	4 5		• •		113.			113
	5	Royalties	(i) Real	(ii) Personal	113.			113
	6 2	Gross rents						
		Gross rents Less: rental expenses						
		Rental income or (loss)						
				L				
		Gross amount from sales of	(i) Securities	(ii) Other				
	<i>,</i> u	assets other than inventory	662,653.					
	h	Less: cost or other basis						
	-	and sales expenses	651,905.					
	с	Gain or (loss)	10,748.					
		Net gain or (loss)			10,748.			10,748
en		Gross income from fundraisin	ig events (not					
Ven		including \$						
Other Revenue		contributions reported on line						
Jer		Part IV, line 18						
₹		Less: direct expenses		L				
		Net income or (loss) from fund	•	····· ►				
	9 a	Gross income from gaming ad						
	h	Part IV, line 19						
		Less: direct expenses						
		Gross sales of inventory, less	•					
	10 a	and allowances		528 261.				
	h	Less: cost of goods sold	a b	424 572				
		Net income or (loss) from sale			103,689.	103,689.		
ŀ	<u> </u>	Miscellaneous Revenu		Business Code				
┝	11 a	1/1 / 1 / T T T		541800	29,472.		29,472.	
	b				,_,_,		,_,	
	c							1
		All other revenue						
	d	All other revenue		└ ▶	29,472.			

732009 11-28-17

	990 (2017) AMERICAN RET T IX Statement of Functional Expense	VOLUTION	SONS OF THE	53-01	16355 Page 10
	on 501(c)(3) and 501(c)(4) organizations must com		ner organizations must co	omolete column (A)	
0000	Check if Schedule O contains a respon		-		
Dor	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		·		·
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	168,700.	141,286.	27,414.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	634,785.	498,780.	136,005.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	17,981.	15,059.	2,922.	
9	Other employee benefits	65,408.	48,330.	17,078.	
10	Payroll taxes	60,833.	50,148.	10,685.	
11	Fees for services (non-employees):	,			
 а	Management				
	Legal	56,525.	42,394.	14,131.	
	Accounting	31,449.	23,587.	7,862.	
	Lobbying			.,	
	Professional fundraising services. See Part IV, line 17				
	Investment management fees	9,984.	9,984.		
ı g	Other. (If line 11g amount exceeds 10% of line 25,	5,5010	5,5010		
y	column (A) amount, list line 11g expenses on Sch 0.)	169,400.	168,150.	1,250.	
12	Advertising and promotion	993.	745.	248.	
12	Office expenses	85,521.	76,996.	8,525.	
13 14	Information technology	31,859.	25,859.	6,000.	
14 15	Povalties	51,005.	2370351	0,000	
	F F	89,578.	66,990.	22,588.	
16 17		1,425.	1,323.	102.	
17 10	Travel	1,425.	1,525.	102.	
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials Conferences, conventions, and meetings	8,012.	7,766.	246.	
19 20		14,989.	7,700•	14,989.	
20	Interest	±=,,00,•			
21	Payments to affiliates	317,233.	317,233.		
22	Depreciation, depletion, and amortization	32,357.	24,268.	8,089.	
23	Insurance	54,557.	44,200.	0,009.	
24	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 0.)				
а	COLLECTION DEACCESSIONS	300,000.	300,000.		
b	PROGRAM EXPENDITURE	148,314.	148,314.		
c	MAGAZINE EXPENSES	5,512.	5,512.		
d	AWARDS	4,685.	4,685.		
	All other expenses	1,774.	1,730.	44.	
25	Total functional expenses. Add lines 1 through 24e	2,257,317.	1,979,139.	278,178.	0
25 26	Joint costs. Complete this line only if the organization	_,,,,	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_, 0, 1, 0.	0
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Earm 990 (2017

34

NATIONAL SOCIETY OF THE SONS OF THE AMERICAN REVOLUTION

	<u>1990 (</u> rt X			53-	0116355 Page 11
	• • •	Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	509,046
	2	Savings and temporary cash investments			340,441
	3	Pledges and grants receivable, net			42,483
	4	Accounts receivable, net			28,755
	5	Loans and other receivables from current and former officers, directors,		-	
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing	g		
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ţs		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
◄	8	Inventories for sale or use	231,165.		218,851
	9	Prepaid expenses and deferred charges	1 100 702	9	83,063
		Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D10a10,663,714Less: accumulated depreciation10b1,456,630	•		
	b	Less: accumulated depreciation 10b 1,456,630			
	11	Investments - publicly traded securities			1,980,927
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	2,519,200 14,929,850
	16	Total assets. Add lines 1 through 15 (must equal line 34)			76,016
	17	Accounts payable and accrued expenses	·	17 18	70,010
	18	Grants payable			61,713
	19 20	Deferred revenue		20	01,715
	20	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D		20	
s	22	Loans and other payables to current and former officers, directors, trustees,		21	
Liabilities		key employees, highest compensated employees, and disqualified persons.			
lide		Complete Part II of Schedule L		22	
Ľ	23	Secured mortgages and notes payable to unrelated third parties	690,733.		373,568
	24	Unsecured notes and loans payable to unrelated third parties	·	24	-
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	859,417.	26	511,297
		Organizations that follow SFAS 117 (ASC 958), check here ► ⊥X and			
ses		complete lines 27 through 29, and lines 33 and 34.	10 000 070		10 110 150
anc	27	Unrestricted net assets		_	12,148,478
Bal	28	Temporarily restricted net assets	814,295.		1,105,561
pu	29	Permanently restricted net assets	1,104,350.	29	1,164,514
л Ц		Organizations that do not follow SFAS 117 (ASC 958), check here			
s o		and complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds		30	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or equipment fund		31 32	
Net	32 33	Retained earnings, endowment, accumulated income, or other funds	14,157,615.		14,418,553
	100	I ULAI HEL ASSELS UI IUI IU DAIAHLES		1 33	

12,238,970. 814,295. 12,148,478. Unrestricted net assets 27 1,105,561. Temporarily restricted net assets 28 1,104,350. 1,164,514. 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 14,418,553. 14,157,615. 33 Total net assets or fund balances 14,929,850. 15,017,032. 34 Total liabilities and net assets/fund balances

NATIONAL	SOCIETY	OF	THE	SONS	OF	THE
AMERICAN	REVOLUTI	ION				

Form	990 (2017) AMERICAN REVOLUTION	53-0	1163	55	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI			<u></u>		
			-			
1	Total revenue (must equal Part VIII, column (A), line 12)	1				86.
2	Total expenses (must equal Part IX, column (A), line 25)	2				17.
3	Revenue less expenses. Subtract line 2 from line 1	3				69.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	14,			
5	Net unrealized gains (losses) on investments	5		160),8	69.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	14,	418	3,5	53.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the					
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit	:			
	Act and OMB Circular A-133?		·····	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

SCHEDULE A		Dubli	o Cho	rity Status an					OMB No. 1545-0047
(Form 990 or 990-	Z)			rity Status an					2017
		Complete l		nization is a section 50 47(a)(1) nonexempt cha			or a section		2017
Department of the Treasury				Attach to Form 990 or I					Open to Public
Internal Revenue Service		Go to w	ww.irs.gov	v/Form990 for instructi	ons and tl	ne latest i	nformation.		Inspection
Name of the organ	zation NAT	IONAL	SOCIE	TY OF THE SO	NS OF	\mathbf{THE}			identification number
		RICAN							3-0116355
Part I Reas	on for Public	c Charity	Status (/	All organizations must co	omplete th	is part.) S	ee instruction	S.	
The organization is r	ot a private fou	ndation bec	ause it is: ((For lines 1 through 12, o	check only	one box.)			
1 A church	convention of	churches, o	r associatio	on of churches describe	d in sectio	n 170(b)(1)(A)(i).		
2 A school	described in se	ction 170(b	9)(1)(A)(ii). (Attach Schedule E (Forr	n 990 or 9	90-EZ).)			
3 A hospita	l or a cooperativ	ve hospital s	service orga	anization described in s e	ection 170)(b)(1)(A)(i	ii).		
4 A medica	research organ	nization ope	rated in co	njunction with a hospita	l described	d in sectio	on 170(b)(1)(A	.)(iii). Enter	the hospital's name,
	city, and state:								
-	5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in								ped in
	section 170(b)(1)(A)(iv). (Complete Part II.)								
		-	-	mental unit described in					
•		•		antial part of its support	rom a gov	ernmenta	l unit or from t	the general	public described in
	70(b)(1)(A)(vi).								
	-			(1)(A)(vi). (Complete Par	-	ad in aaniu	upotion with a	land grant	
		-		l in section 170(b)(1)(A)(-		-	-
university		u-grant colle	ege of agric	culture (see instructions)	Enter the	name, cit	y, and state o	i the colleg	
·		mally receive	es: (1) more	e than 33 1/3% of its sup	port from	contributi	ons member	shin fees a	and gross receipts from
5				ect to certain exceptions,					
				e (less section 511 tax) fr					
	on 509(a)(2). (C								
		•	,	sively to test for public sa	afety. See	section 5	09(a)(4).		
12 An organ	zation organize	d and opera	ated exclus	sively for the benefit of, t	o perform	the function	ons of, or to c	arry out the	e purposes of one or
more put	licly supported	organizatio	ns describe	ed in section 509(a)(1) d	r section	509(a)(2).	See section	509(a)(3).	Check the box in
lines 12a	through 12d that	at describes	s the type c	of supporting organizatio	n and con	nplete line	s 12e, 12f, an	d 12g.	
a 🛄 Type I.	A supporting or	rganization o	operated, s	supervised, or controlled	by its sup	ported or	ganization(s),	typically by	/ giving
the sup	ported organiza	ation(s) the p	power to re	egularly appoint or elect	a majority	of the dire	ctors or trust	ees of the s	supporting
organiz	ation. You mus	t complete	Part IV, Se	ections A and B.					
		-	-	d or controlled in connec			-		-
				anization vested in the s	ame perso	ons that co	ontrol or mana	age the sup	oported
		-		Sections A and C.					
	-	-		g organization operated				Illy integrat	ed with,
·	•	. , .		s). You must complete			-		· · · · · ·
				porting organization oper				°.	
				zation generally must sa				d an attent	iveness
				mplete Part IV, Sections					
				written determination fro onally integrated support			а турет, туре	п, туре ш	
				shany integrated support					
				ed organization(s).					· []
(i) Name of s			EIN	(iii) Type of organization	(iv) Is the orga	nization listed ng document?	(v) Amount o	f monetary	(vi) Amount of other
organiz	ation			(described on lines 1-10 above (see instructions))	Yes	No	support (see ii	nstructions)	support (see instructions)
		_							
		_							ļ
									<u> </u>
Total									

NATIONAL SOCIETY OF THE SONS OF THE Schedule A (Form 990 or 990 EZ) 2017 AMERICAN REVOLUTION

53-0116355 Page 2

Part II	Support Sched	ule for Organizations	s Described in	Sections 17	70(b)(1)(A)(iv) an	d 170(b)(1)(A)(vi)	
	(Complete only if yo	ou checked the box on line 5	5, 7, or 8 of Part I o	r if the organiza	tion failed to qualify	under Part III. If the or	ganization

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 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	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
	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						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc. (see instruction	ons)		•	12	
13	First five years. If the Form 990 is for	the organization's				n 501(c)(3)	
	organization, check this box and stop	here			-		
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2017 (I	ine 6, column (f) d	ivided by line 11, o	column (f))		14	%
	Public support percentage from 2016					15	%
16a	33 1/3% support test - 2017. If the c	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	ox and
	$\operatorname{{\boldsymbol{stop}}}$ here. The organization qualifies						▶∟
b	33 1/3% support test - 2016. If the c	organization did no	ot check a box on	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes	t - 2017. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check t	nis box and stop h	iere. Explain in Pa	rt VI how the orgar	nization
	meets the "facts-and-circumstances"	test. The organiza	ation qualifies as a	publicly supported	d organization		
b	10% -facts-and-circumstances tes	t - 2016. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or ⁻	17a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circu	imstances" test, c	heck this box and	stop here. Explair	in Part VI how the	
	organization meets the "facts-and-circ	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	anization	▶∐]
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16	a, 16b, 17a, or 17l	o, check this box a	and see instruction	s ►

NATIONAL SOCIETY OF THE SONS OF THE

Schedule A (Form 990 or 990-EZ) 2017 AMERICAN REVOLUTION

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support		,				
Cale	endar 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.")	3,352,889.	1,568,011.	1,554,658.	2,092,441.	1,797,031.	10,365,030.
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	816,524.	844,492.	1,124,183.	807,407.	896,340.	4,488,946.
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						
5	The value of services or facilities						
5	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	4,169,413.	2,412,503.	2,678,841.	2,899,848.	2,693,371.	14,853,976.
7a	a Amounts included on lines 1, 2, and						
	3 received from disqualified persons	45,009.	41,548.	22,100.	60,833.	43,944.	213,434.
ł	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
	Add lines 7a and 7b	45,009.	41,548.	22,100.	60,833.	43,944.	213,434.
	Public support. (Subtract line 7c from line 6.)	10,0000	12,0101	2272000		10,9111	14,640,542.
	ction B. Total Support						11,010,011.
	endar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6	4,169,413.	2,412,503.	2,678,841.	2,899,848.	2,693,371.	14,853,976.
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	35,210.	36,392.	36,960.			203,496.
ł	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975			·			<u> </u>
(Add lines 10a and 10b	35,210.	36,392.	36,960.	46,567.	48,367.	203,496.
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	35.	3,291.				3,326.
13	Total support. (Add lines 9, 10c, 11, and 12.)	4,204,658.	2,452,186.	2,715,801.	2,946,415.	2,741,738.	15,060,798.
	First five years. If the Form 990 is for	0	, ,	, ,	,		
80	check this box and stop here ction C. Computation of Publ		rcentage			<u></u>	🕨 📖
	-			- L		45	97.21 %
	Public support percentage for 2017 (I					15 16	<u>97.21</u> % 97.29%
<u>16</u>	Public support percentage from 2016 ction D. Computation of Inves			<u></u>		10	JT•2J %
	•		`	a 10. a a luman (f))		17	1.35 %
17							$\frac{1.35}{1.30}$ %
18	Investment income percentage from 2					18	,
198	a 33 1/3% support tests - 2017. If the						N V
	more than 33 1/3%, check this box a						
t	33 1/3% support tests - 2016. If the	-					
00	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organizatio	n did not check a	box on line 14, 19a	i, or 190, check tr		edule A (Form 990	

732023 10-06-17

53-0116355 Page 4

Yes

No

Part IV Supporting Organizations

(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?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 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.)

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

10b

NATIONAL SOCIETY OF THE SONS OF THE

53-0116355 Page 5

Sche	dule A (Form 990 or 990-EZ) 2017 AMERICAN REVOLUTION	53-011635	5 Pa	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? <i>If</i> "Yes" to a, b, or c, provide detail in Part VI .	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	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			
0	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
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.	2		
Sec	tion C. Type II Supporting Organizations	2		
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
-	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations	I		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	K		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described 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			
<u></u>	supported organizations played in this regard.	3		
	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see in:	structions).		
a L	The organization satisfied the Activities Test. <i>Complete</i> line 2 <i>below.</i> The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below.</i>			
b	The organization supported a governmental entity. Describe in Part VI how you supported a government en	tity (coo instruction	c)	
с 2	Activities Test. Answer (a) and (b) below.		Yes	No
2 a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		165	
a	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.	2a		
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			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
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NATIONAL SOCIETY OF THE SONS OF THE Schedule A (Form 990 or 990-EZ) 2017 AMERICAN REVOLUTION

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 2 Other gross income (see instructions) 3 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or 6 collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 7 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, 4 4 see instructions) 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 6 6 Recoveries of prior-year distributions 7 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 1 2 Enter 85% of line 1 2 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 4 Enter greater of line 2 or line 3 4 5 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to 6 emergency temporary reduction (see instructions) 6

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

NATIONAL SOCIETY OF THE SONS OF THE

Scho	UNATIONAL SOCI dule A (Form 990 or 990-EZ) 2017 AMERICAN REVO			3-0116355 Page 7
	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations (continued)	o orrosso Pager
	on D - Distributions			Current Year
1	ourrent real			
2	Amounts paid to supported organizations to accomplish exe 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 organization	IS	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	9	
	(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			
	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	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			
С	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	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			
b	Applied to 2017 distributable amount			
c	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.			
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.			
8	Breakdown of line 7:			
	Excess from 2013			
	Excess from 2014			
-	Excess from 2015			
	Excess from 2016			
-	Excess from 2017			
			Sebedule A (Form 990 or 990-EZ) 2017

		NATIONAL			SONS	OF THE	
Schedule A	(Form 990 or 990-EZ) 2017	AMERICAN	REVOLUTI	ON			53-0116355 Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1,	nation. Provide 2, 3b, 3c, 4b, 4c, 5 nes 2 and 3; Part	the explanations 5a, 6, 9a, 9b, 9c, IV, Section E, line	required by I 11a, 11b, an s 1c, 2a, 2b,	d 11c; Part 3a, and 3b	t IV, Section B, lines ; Part V, line 1; Par	or 17b; Part III, line 12; s 1 and 2; Part IV, Section C, t V, Section B, line 1e; Part V,

Schedule B (Form 990, 990-EZ,

or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2017

Employer identification number

Name of the organization NATIONAL SOCIETY OF THE SONS OF THE

	DOOLLII OI	
AMERICAN	REVOLUTION	

53-0116355

Organization type (check one)	Organization	type (check one)	:
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Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

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

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

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

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

SC	HEDULE D	Su	pplementa	al Financia	al Statement	S		OMB No. 1	545-0047
	(Form 990) ► 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.).	201/		
	ment of the Treasury			Attach to Form 9	90.			Open to Inspect	o Public
	al Revenue Service e of the organizati		ww.irs.gov/Form9 SOCIETY O	90 for instruction	s and the latest inforr S OF THE	nation.	Emple	oyer identification	
Nam	e of the organizati		REVOLUTIO				Emplo	53-0116	
Pa	rt I Organiza	ations Maintaining	g Donor Advise	ed Funds or O	ther Similar Fund	s or A	ccoun	Its.Complete if t	he
	organizatio	n answered "Yes" on Fo	orm 990, Part IV, lir						
				(a) Donor	advised funds	(b) Funds	s and other acco	unts
1		nd of year							
2		f contributions to (durin							
3 4		f grants from (during ye t end of year							
5		on inform all donors and			sets held in donor advi	sed fund	ls		
•	-	on's property, subject to		-				Yes	🗌 No
6		on inform all grantees, d							
	for charitable purp	ooses and not for the be	enefit of the donor o	or donor advisor, c	or for any other purpose	e conferr	ing		
	impermissible priv							Yes	No
Pa		ation Easements.				Part IV,	line 7.		
1		servation easements he							
		n of land for public use (If natural habitat	e.g., recreation or e		☐ Preservation of a his ☐ Preservation of a cer		•		
		n of open space		L		tineu nis	SIONC SI	ructure	
2		through 2d if the organ	ization held a quali	fied conservation	contribution in the form	n of a co	nservati	ion easement on	the last
	day of the tax year	v v				٦ ٦		leld at the End of t	
а	Total number of co	onservation easements					2a		
b		ricted by conservation e					2b		
с	Number of conser	vation easements on a	certified historic str	ructure included in	(a)		2c		
d		vation easements inclue							
		nal Register				_	2d		
3		vation easements modi	fied, transferred, re	leased, extinguish	ed, or terminated by th	ne organi	zation o	during the tax	
4	year	where property subject	to conconvotion on	comont is located	•				
4 5		tion have a written polic							
Ŭ	-	orcement of the conser		-				Yes	No
6		er hours devoted to mor							
				0	ý C			0	
7	Amount of expens	ses incurred in monitorin	ng, inspecting, hand	dling of violations,	and enforcing conserv	ation eas	sement	s during the year	
	▶\$								
8		vation easement report		•					
-)(4)(B)(ii)?						└── Yes	└── No
9		be how the organization	-		-				
	conservation ease	ole, the text of the footn	ote to the organiza	luon s inanciai sta	tements that describes	s the org	anizatio	on's accounting in	Jr
Pa		ations Maintaining	g Collections o	f Art, Historic	al Treasures, or C	Other S	Simila	r Assets.	
	Complete if	f the organization answe	ered "Yes" on Form	n 990, Part IV, line	8.				
1a	If the organization	elected, as permitted u	inder SFAS 116 (AS	SC 958), not to rep	oort in its revenue state	ment an	d balan	ice sheet works o	of art,
	historical treasures	s, or other similar assets	s held for public ex	hibition, educatior	, or research in further	ance of p	oublic s	ervice, provide, i	n Part XIII,
	the text of the foot	tnote to its financial stat	tements that descr	ibes these items.					
b	-	elected, as permitted u	-						
		r similar assets held for	public exhibition, e	ducation, or resea	rch in furtherance of p	ublic ser	vice, pro	ovide the followir	ng amounts
	relating to these it		VIII line 1				•		٥
		ded on Form 990, Part ed in Form 990, Part X						2,42	2.856
2	.,	received or held works						-,	_,
-		unts required to be repo				- guin, þ			
а		on Form 990, Part VIII,					▶ \$		
		i Form 990, Part X					▶ \$		
		eduction Act Notice, s					S	chedule D (Forn	n 990) 2017

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		L SOCIETY		NS OF THE				
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Par	t III Organizations Maintaining C	ollections of A	rt, Historical T	reasures, or (Other	Similar A	ssets(continu	ied)
3	Using the organization's acquisition, accessi	on, and other record	ls, check any of the	e following that ar	e a sign	ificant use o	f its collection	items
	(check all that apply):							
а	X Public exhibition	d	X Loan or exc	change programs				
b	X Scholarly research	e	X Other EI	D PROGRAM	, GE	NEALOG	Y RESEA	RCH
с	X Preservation for future generations							
4	Provide a description of the organization's co	ollections and explai	n how they further	the organization's	s exemp	t purpose in	Part XIII.	
5	During the year, did the organization solicit o	r receive donations	of art, historical trea	asures, or other s	imilar as	sets		
	to be sold to raise funds rather than to be ma						Yes	X No
Par	t IV Escrow and Custodial Arran							
	reported an amount on Form 990, Par		John and englandad				,	
1a	Is the organization an agent, trustee, custod		liary for contributio	ns or other assets	s not inc	cluded		
iu	on Form 990, Part X?		•				Yes	
h	If "Yes," explain the arrangement in Part XIII							
b		and complete the lo	nowing table.				Amount	
_	Deginging belonce					10	Amount	
	Beginning balance							
	Additions during the year					1d		
	Distributions during the year					1e		
f	Ending balance					1f		
	Did the organization include an amount on Fe					?	. └── Yes	
	If "Yes," explain the arrangement in Part XIII.							
Par	t V Endowment Funds. Complete i							
		(a) Current year	(b) Prior year	(c) Two years ba	` <i>`</i> /		oack (e) Four y	
	Beginning of year balance	1,731,771.	1,666,422			1,561,3		365,935.
b	Contributions	53,915.	29,313	. 35,0	45.	91,7	78.	73,312.
с	Net investment earnings, gains, and losses	207,693.	56,639	-22,7	83.	37,8	46. 1	L39,876.
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs	28,742.	20,603	. 16,1	03.	20,7	22.	17,762.
f	Administrative expenses							
g	End of year balance	1,964,637.	1,731,771	. 1,666,4	22.	1,670,2	63. 1,5	561,361.
2	Provide the estimated percentage of the cur						<i>`</i>	
	Board designated or quasi-endowment	69.58	%					
b	Permanent endowment ► 17.43	%						
		2.99 %						
Ŭ	The percentages on lines 2a, 2b, and 2c sho							
20	Are there endowment funds not in the posse		ation that are hold (and administered	for the	orgonization		
38		ssion of the organiza	ation that are new a	and administered	for the	organization		
	by:							/es No X
	(i) unrelated organizations						3a(i)	
	(ii) related organizations							^
b	If "Yes" on line 3a(ii), are the related organization			?			3b	
4	Describe in Part XIII the intended uses of the		wment funds.					
Par	, , ,							
	Complete if the organization answere				art X, lin	e 10.		
	Description of property	(a) Cost or o	• • •		• •	umulated	(d) Book	value
		basis (investr	,	(other)	depre	ciation		
1a	Land			L9,480.				,480.
	Buildings		8,92	22,016.	99	3,690.	7,928	,326.
	Leasehold improvements							
	Equipment		38	36,103.	31	5,656.	70	,447.
	Other		53	36,115.	14	7,284.		,831.
	Add lines 1a through 1e. (Column (d) must e					•	9,207	-
		,	,	- /		····· F	dula D (Carro	

Schedule D (Form 990) 2017

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	CIETY OF THE		
Schedule D (Form 990) 2017 AMERICAN RE	VOLUTION		53-0116355 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	on Form 990, Part IV, line (b) Book value	(c) Method of valuation: Cost or	and of year market value
(d) Einen siet sterkensteren	(b) BOOK value	(c) Method of Valuation. Cost of	end-or-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) (D)			
(B) (C)			
(D)			
(E)			
(F)			
(G)			
(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"	on Form 990 Part IV line	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"	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
.,	Description		(b) Book value
(1) LIBRARY AND MUSEUM COLLEC	TIONS		2,422,856.
(2) DUE TO/FROM AFFILIATES			96,344.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		▶ 2,519,200.
Part X Other Liabilities.			

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	►
• • • •		a factoria ta tina avancienticula fi

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2017

NATIONAL	SOCIETY	OF	THE	SONS	OF	THE
AMERICAN	REVOLUT					

Sche	edule D (Form 990) 2017	AMERICAN REVOLUTION		53-01163	355 Page 4
		of Revenue per Audited Financial Sta	atements With Reve		
	Complete if the orgar	nization answered "Yes" on Form 990, Part IV, li	ne 12a.		
1	Total revenue, gains, and ot	her support per audited financial statements			
2	Amounts included on line 1	but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b		f facilities			
с	Recoveries of prior year gran	nts	2c		
d					
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form	990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not in	cluded on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)		4b		
с	c Add lines 4a and 4b				
5		nd 4c. (This must equal Form 990, Part I, line 12			
Pa	rt XII Reconciliation of	of Expenses per Audited Financial St	atements With Expe	enses per Return.	
	· · · · ·	nization answered "Yes" on Form 990, Part IV, li			
1	Total expenses and losses p	per audited financial statements		1	
2	Amounts included on line 1	but not on Form 990, Part IX, line 25:	1 1		
а		f facilities			
b	Prior year adjustments		2b		
С	Other losses		2c		
d	Other (Describe in Part XIII.)		2d		
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1				
4	Amounts included on Form	990, Part IX, line 25, but not on line 1:			
а	Investment expenses not in	cluded on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)		4b		
с	Add lines 4a and 4b			4c	
5		and 4c. (This must equal Form 990, Part I, line 1	8.)		
Pa	rt XIII Supplemental Ir	nformation.			

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

PART III, LINE 4:

THE ORGANIZATION HAS A MUSEUM THAT HOLDS COLLECTIONS OF ARTIFACTS AND

WORKS OF ART FROM THE TIME PERIOD CIRCA 1763 TO 1801. THE ORGANIZATION

ALSO HAS A COLLECTION OF BOOKS FROM THIS TIME PERIOD AND ABOUT THIS TIME

PERIOD.

PART V, LINE 4:

TO PROVIDE FUNDS TO SUPPORT UNFUNDED AND UNDERFUNDED COMMITTEES AND

SPECIAL PROJECTS OF THE NSSAR. MUCH OF THE FUNDING IS PROVIDED TO HELP

COMMEMORATE REVOLUTIONARY WAR SITES AND/OR ACTIVITIES AROUND THE COUNTRY.

		NATIONAL	SOCIETY OF	THE	SONS	OF	THE		
Schedule D	(Form 990) 2017	AMERICAN	REVOLUTION					53-0116355	Page 5
Schedule D (Form 990) 2017 AMERICAN REVOLUTION 53-0116355 Page 5 Part XIII Supplemental Information (continued) 53-0116355 Page 5									
									<u> </u>

OMB No 1545-0047 SCHEDULE O Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on (Form 990 or 990-EZ) Form 990 or 990-EZ or to provide any additional information. **Open to Public** Attach to Form 990 or 990-EZ. Department of the Treasury Go to www.irs.gov/Form990 for the latest information. Inspection Internal Revenue Service NATIONAL SOCIETY OF THE SONS OF THE Name of the organization Employer identification number 53-0116355 AMERICAN REVOLUTION FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: ORATIONS, ESSAY, AND OTHER AWARDS SPONSORED TO PROMOTE THE DEVELOPMENT OF PATRIOTISM IN THE ADULTS AND YOUTH OF THE COUNTRY. EXPENSES \$ 197,418. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. GENEALOGICAL LIBRARY AND MUSEUM - DISPLAY WORKS OF ART, MEMORABILIA, BOOKS, PERIODICALS, AND OTHER DOCUMENTS AND COLLECTIONS TO EDUCATE THE MEMBERSHIP AND GENERAL PUBLIC. INCLUDING GRANTS OF \$ 0. EXPENSES \$ 395,012. REVENUE \$ 2,456. FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS MEMBERS IN THE NATIONAL SOCIETY THROUGH A STATE SOCIETY, WHICH IS A SUBORDINATE OF THE NATIONAL SOCIETY. FORM 990, PART VI, SECTION A, LINE 7A: NATIONAL GENERAL OFFICERS ARE ELECTED BY MEMBERS AT THE ANNUAL MEETING. THE ELECTION OF MEMBERS OF THE BOARD OF TRUSTEES SHALL BE CONDUCTED AFTER THE ELECTION OF GENERAL OFFICERS HAS BEEN COMPLETED UNLESS THE DELEGATES PRESENT, BY A TWO-THIRDS VOTE, PROVIDE FOR SOME OTHER ORDER OF BUSINESS.

FORM 990, PART VI, SECTION A, LINE 7B:

VOTING MEMBERS AT THE ANNUAL MEETING VOTE BY BALLOT. THE CONSTITUTION MAY BE AMENDED BY A TWO-THIRDS AFFIRMATIVE VOTE OF THE DELEGATES PRESENT AND VOTING AT AN ANNUAL MEETING. THE BOARD OF TRUSTEES SHALL NOT HAVE THE POWER TO SELL, CONVEY, OR ENCUMBER ANY REAL ESTATE WHICH BELONGS TO THE NATIONAL SOCIETY, NOR SHALL IT INCUR ANY LIABILITY OTHER THAN FOR ORDINARY LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2017) 732211 09-07-17

chedule O (Form 990 or 990-EZ) (2017) Page 2											
Name of the organization NATIONAL SOCIETY OF THE SONS OF THE AMERICAN REVOLUTION	Employer identification number 53-0116355										
CURRENT EXPENSES OF THE SOCIETY, UNLESS SO ORDERED BY AN	ANNUAL CONGRESS OR										
BY AN AFFIRMATIVE VOTE OF THREE-FOURTHS OF THE MEMBERS OF	THE BOARD OF										
TRUSTEES PRESENT AND VOTING.											

FORM 990, PART VI, SECTION B, LINE 11B:

BECAUSE THE ORGANIZATION CAN HAVE WELL OVER 100 VOTING MEMBERS OF THE GOVERNING BODY IN ANY GIVEN YEAR, THE FORM 990 IS PRELIMINARY PROVIDED TO A GROUP OF INDIVIDUALS WHO ARE QUALIFIED TO CLOSELY REVIEW AND COMMENT ON THE RETURN. A DRAFT OF THE RETURN IS REVIEWED FIRST BY INTERNAL MANAGEMENT. AFTER INTERNAL MANAGEMENT HAS REVIEWED THE RETURN AND ANY CHANGES ARE MADE, A DRAFT IS PROVIDED TO THE FINANCE COMMITTEE CHAIRMAN, THE INDEPENDENT AUDIT COMMITTEE AND THE EXECUTIVE COMMITTEE FOR REVIEW. ONCE THE COMMENTS FROM THESE INDIVIDUALS ARE REVIEWED, THE FINAL DRAFT OF THE RETURN IS PREPARED AND SIGNED BY THE EXECUTIVE DIRECTOR.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST POLICY SHALL BE DEVELOPED AND CONTINUALLY REVIEWED FOR COMPLIANCE WITH APPLICABLE FEDERAL AND STATE LAWS AND "BEST PRACTICES" BY THE LEGAL ADVISORY COMMITTEE WITH INPUT FROM THE CHANCELLOR GENERAL AND THE EXECUTIVE DIRECTOR.

SIGNATORIES ACKNOWLEDGING RECEIPT OF, AND COMPLIANCE WITH, SAID CONFLICT OF INTEREST POLICY SHALL INCLUDE, WITHOUT LIMITATION, ALL GENERAL OFFICERS, EXECUTIVE COMMITTEE MEMBERS, MEMBERS OF THE BOARD OF TRUSTEES, COMMITTEE MEMBERS AND FULL OR PART-TIME EMPLOYEES OF NSSAR. EXECUTION OF SAID CONFLICT OF INTEREST POLICY SHALL BE REQUIRED ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 15A:

Schedule O (Form 990 or 990-EZ) (2017)									
Name of the organization NATIONAL SOCIETY OF THE SONS OF THE	Employer identification number								
AMERICAN REVOLUTION	53-0116355								
THE BOARD COMPARES THE SALARY OF THE EXECUTIVE DIRECTOR T	O OTHERS IN THE								
COMMUNITY AND DOCUMENTS THE PROCESS IN THE BOARD MINUTES.	THERE ARE NO								
OTHER KEY EMPLOYEES OR OFFICERS WHO ARE COMPENSATED BY TH	E ORGANIZATION.								

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. THE ORGANIZATION'S WEBSITEALSO MAKES AVAILABLE THE GOVERNING DOCUMENTS (VOLUME I OF THE HANDBOOK) AND THE CONFLICT OF INTEREST POLICY (VOLUME III OF THE HANDBOOK).

FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

THE ORGANIZATION HAS AN INDEPENDENT AUDIT COMMITTEE THAT CONTINUES TO OVERSEE THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT AUDITOR.

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service	► Com	Related Organizations plete if the organization answered " Atta Go to www.irs.gov/Form990 fr	2 Ope	No. 1545 201 en to Pu ispectio	7 ıblic				
Name of the organizatio	on NATIONAL SOCI AMERICAN REVO	ETY OF THE SONS OF	THE				ridentifica 011635		Imber
Part I Identification	on of Disregarded Entities. Comp	lete if the organization answered "Yes'	" on Form 990, Part IV, line 3	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary activity	(c) Legal domicile (state c foreign country)	(d) Total incol	(e) End-of-year a	assets	Direct cor	(f) t controlling entity	
		_							
	on of Related Tax-Exempt Organi s during the tax year.	izations. Complete if the organization	answered "Yes" on Form 990	0, Part IV, line 34, t	because it had one o	or more relate	ed tax-exem	ıpt	
	(a) e, address, and EIN elated organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity		ng (g) Section 512(controlle entity?	
THE SAR FOUNDATION 809 WEST MAIN STRU LOUISVILLE, KY 4		TO RECEIVE AND ADMINISTER	KENTUCKY	501(C)(3)		/A		Yes X	No
		_			,				

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

Schedule R (Form 990) 2017

OMB No. 1545-0047

Schedule R (Form 990) 2017 AMERICAN REVOLUTION

53-0116355 Page 2

Part III 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.

-	1	-							r	-	
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling entity	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI	Genera	l or ^{ing} ownership r?
of related organization		(state or	entity	(related, unrelated, excluded from tax under	income	end-of-year	alloca	ations?	amount in box	partn	^{ng} r? ownership
		`foreign country)		(related, unrelated, excluded from tax under sections 512-514)		assets	Yes	No	amount in box 20 of Schedule K-1 (Form 1065) Yes No		10
	1										
	-										
										+	
	4										
	4										
	1										
	1										
										+	
	4										
	4										
	4										

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i Sec 512(t contr ent	(i) ction (b)(13) trolled tity?
		country)		or trust)		233613			No
									\square
									\square
									\square
	1								
]								

Schedule R (Form 990) 2017 AMERICAN REVOLUTION

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.										
 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? 		Yes	No							
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		x							
 b Gift, grant, or capital contribution to related organization(s) 		_	x							
c Gift, grant, or capital contribution from related organization(s)			<u> </u>							
		-	x							
d Loans or loan guarantees to or for related organization(s)			<u> </u>							
e Loans or loan guarantees by related organization(s)										
f Dividends from related organization(s)	1f		x							
g Sale of assets to related organization(s)			X							
h Purchase of assets from related organization(s)			X							
i Exchange of assets with related organization(s)			X							
j Lease of facilities, equipment, or other assets to related organization(s)										
k Lease of facilities, equipment, or other assets from related organization(s)	1k		Х							
I Performance of services or membership or fundraising solicitations for related organization(s)			X							
m Performance of services or membership or fundraising solicitations by related organization(s)			X							
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X								
o Sharing of paid employees with related organization(s)		X								
p Reimbursement paid to related organization(s) for expenses	1p		X							
q Reimbursement paid by related organization(s) for expenses		X								
	·····									
r Other transfer of cash or property to related organization(s)	1r	X								
s Other transfer of cash or property from related organization(s)		-	X							
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.	I	•								

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) THE SAR FOUNDATION, INC.	с	460,121.	
_(2)			
_(3)			
_(4)			
(5)			
_(6)			
	ΔΔ		Sahadula D (Carro 000) 2017

Schedule R (Form 990) 2017 AMERICAN REVOLUTION

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d)		~	(f)	(g)	()	1)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income	Are Are partne 501 (i org	all	Share of			opor-	Code V-UBI	General	Percentage
of entity		(state or foreign	Predominant income (related, unrelated, excluded from tax under sections 512-514)	501(c)(3)	total	end-of-year	tior alloca	opor- nate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managir partner	ownership
-		country)	sections 512-514)	Yes	No	income		Yes	No	(Form 1065)	Yes N	

Schedule R (Form 990) 2017

l	Part VII	Supplemental Information.	p	۱.
			~ 1	

Provide additional information for responses to questions on Schedule R. See instructions.

Form	990-T	Exempt Organization Bu	sine	ss Income Ta	x Return	L	OMB No. 1545-0687	
		(and proxy tax un	der se	ction 6033(e))			2017	
				, and ending		_ ·	2017	
	tment of the Treasury al Revenue Service	► Go to www.irs.gov/Form990T for ► Do not enter SSN numbers on this form as it ma				-C 5	pen to Public Inspectior 01(c)(3) Organizations O	ו for nly
A	Check box if address changed	Name of organization (Check box if name					/er identification number yees' trust, see tions.)	
ΒE	xempt under section	Print AMERICAN REVOLUTION				53	8-0116355	
X	501(c)(3)	or Number, street, and room or suite no. If a P.O. b	ox, see in	structions.	E		ed business activity coc structions.)	Jes
	_408(e)220(e)	Type 809 WEST MAIN STREET				,	,	
	408A 530(a) 529(a)	City or town, state or province, country, and ZIP LOUISVILLE, KY 40202	or foreigr	postal code	C.	5418	300	
C Bo	ok value of all assets	F Group exemption number (See instructions.)						
	14,929,8	50. G Check organization type ► X 501(c) co	rporation	501(c) trust	401(a) t	rust	Other trus	t
пре	Scribe the organization		1000	JIAIEMENI I				
		he corporation a subsidiary in an affiliated group or a par	ent-subsi	diary controlled group?	► L	Yes	X No	
		nd identifying number of the parent corporation.		.		<u></u>		
_		DON SHAW I Trade or Business Income		(A) Income	number 5 ((B) Expenses	JZ-:	(C) Net	
							(0) Net	_
I a	Gross receipts or sale Less returns and allow							
2		rances c Balance ►	1c					
2		line 2 from line 1c						_
		e (attach Schedule D)						
b.		4797, Part II, line 17) (attach Form 4797)						
c		for trusts						
5		rtnerships and S corporations (attach statement)						
6		e C)						
7		ed income (Schedule E)						
8	Interest, annuities, roy	alties, and rents from controlled organizations (Sch. F)	8					
9		a section 501(c)(7), (9), or (17) organization (Schedule G						
10		ity income (Schedule I)						
11		chedule J)		29,472.	5,51	12.	23,960).
12		tructions; attach schedule)						_
13		3 through 12		29,472.	5,51	LZ.	23,960).
Pa		ns Not Taken Elsewhere (See instructions ontributions, deductions must be directly connect			come.)			
14		cers, directors, and trustees (Schedule K)				14		
15						15		
16		ance				16		
17						17		
18		dule)				18		
19 20	Taxes and licenses	na (Cap instructions for limitation rules)				19 20		
20 21		ns (See instructions for limitation rules) Form 4562)				20		
21		imed on Schedule A and elsewhere on return				22b		
23						23		
24		rred compensation plans				24		
25	Employee benefit pro					25		
26		ises (Schedule I)				26		
27	Excess readership co	sts (Schedule J)			 	27	23,960).
28	Other deductions (at	ach schedule)				28		
29	Total deductions. Ac	ld lines 14 through 28				29	23,960	
30	Unrelated business ta	exable income before net operating loss deduction. Subtra	act line 29	from line 13		30	(0.
31	Net operating loss de	duction (limited to the amount on line 30)				31		
32		exable income before specific deduction. Subtract line 31				32		<u>).</u>
33		enerally \$1,000, but see line 33 instructions for exception				33	1,000	J .
34	line 00	taxable income. Subtract line 33 from line 32. If line 33 is	•			34	(Ο.

Form 990-	(2017) AMERICAN REVOLUTION		53-01	L16355		Page 2
Part I	II Tax Computation					
35	Organizations Taxable as Corporations. See instructions for tax computation.					
	Controlled group members (sections 1561 and 1563) check here 🕨 🔲 See instructions and	d:				
a	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order	r):				
	(1) \$ (2) \$ (3) \$					
b	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$					
	(2) Additional 3% tax (not more than \$100,000) [\$					
C	Income tax on the amount on line 34		Þ	► 35c		Ο.
36	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount of					
	Tax rate schedule or Schedule D (Form 1041)		🕨	▶ 36		
37	Proxy tax. See instructions			▶ 37		
38	Alternative minimum tax					
39	Tax on Non-Compliant Facility Income. See instructions					
40	Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies					0.
	V Tax and Payments					
41a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	41a				
b	Other credits (see instructions)	41b				
C	General business credit. Attach Form 3800					
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	41d				
e	Total credits. Add lines 41a through 41d			41e		
42	Subtract line 41e from line 40			42		0.
43	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 880	66	Other (attach schedule	e) 43		
44	Total tax. Add lines 42 and 43			44		0.
	Payments: A 2016 overpayment credited to 2017					
	2017 estimated tax payments	45b				
	Tax deposited with Form 8868	45c				
	Foreign organizations: Tax paid or withheld at source (see instructions)	45d				
	Backup withholding (see instructions)	45e				
	Credit for small employer health insurance premiums (Attach Form 8941)	45f				
g	Other credits and payments: Form 2439					
	□ Form 4136 Other Total ►	45g				
46	Total payments. Add lines 45a through 45g					
47						
48	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed			▶ 48		0.
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid			▶ 49		0.
50	Enter the amount of line 49 you want: Credited to 2018 estimated tax		Refunded	► 50		
Part V						
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					
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the f	foreign (country			37
	here					X
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or tra	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 penalties of perjury, I declare that I have examined this return, including accompanying schedules and s	ototomont	a and to the best of my l	(nowledge and balief	it in true	
Sign	correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which prepare	rer has an	y knowledge.	chowledge and beller	, it is true,	
Here		- 17 57 - 1		May the IRS discus		with
	Signature of officer Date EXECUTI	.vr.	DIRECTOR	the preparer shown instructions)?		No
		4.0	Cheal		165	
	Print/Type preparer's name Preparer's signature Dat	le		if PTIN		
Paid	AMELIA SEBASTIAN		self- employe		51828	
Prepa			Eirmin EIN		85825	
Use C	500 W. JEFFERSON ST., STE 1400)	Firm's EIN	► 21-30	55025	2
	Firm's address LOUISVILLE, KY 40202	,	Phone no.	(502) 5	89_60	50
				(102) 1		50

Form 990-T (2017)

NATIONAL SOCIETY OF THE SONS OF THE Form 990-T (2017) AMERICAN REVOLUTION

AMERICAN REVOLUTION 53-01163										5
- Cost of Goods S	old. E	Enter method of invent	ory valu	ation 🕨	N/A					_
beginning of year	6 In	ventory at e	nd of yea	r			6			
	2 7 Cost of goods sold Subt									

2	Purchases	2	7 Cost of goods sold. Subtract line 6				
3	Cost of labor	3		from line 5. Enter here and in Part I,			
4 a	Additional section 263A costs			line 2	7		
	(attach schedule)	4a	8	Do the rules of section 263A (with respect to		Yes	No
b	Other costs (attach schedule)	4b		property produced or acquired for resale) apply to			
5	Total. Add lines 1 through 4b	5		the organization?			

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1. Description of property

Schedule A 1 Inventory at

(1)								
(2)								
(3)								
(4)								
	2. Rent receiv	ed or accrued			0(-)			
(a) From personal property (if the per rent for personal property is mor 10% but not more than 50%	e than	of rent for p	al and personal property (if the percentage or personal property exceeds 50% or if rent is based on profit or income) 3(a) Deductions directly connected with the income columns 2(a) and 2(b) (attach schedule)					
(1)								
(2)								
(3)								
(4)								
Total	0.	Total		0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	2(a) and 2(b). En n (A)	iter		0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	0.		
Schedule E - Unrelated Del	bt-Financed	I Income (see	instructions)					
			2. Gross income from		3. Deductions directly connected with or allocable to debt-financed property			
1. Description of debt-financed property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)		
(1)								
(2)								
(3)								
(4)								
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	of or a debt-fina	e adjusted basis allocable to inced property h schedule)	6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))		
(1)			%					
(2)			%					
(3)			%					
(4)			%					
					nter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).		
Totals			▶		0.	0.		
Total dividends-received deductions in						0.		

Form 990-T (2017)

Page 3

	NATIONAL	SOCIETY	OF	\mathbf{THE}	SONS	OF	THE
017)	AMERICAN	REVOLUTI	ION				

Form 990-T (2017) AMERIC								53-01			
Schedule F - Interest,	Annuitie	es, Royalti				-	atior	1S (see ins	struction	s)	
Exempt Controlled Organizations										-	
1. Name of controlled organization		2. Employ identificati number	on (loss) (see	related income e instructions)		l of specified ents made	5. Part of column 4 that is included in the controlling organization's gross income		rolling	6. Deductions directly connected with income in column 5	
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organi	zations										
7. Taxable Income		nrelated income (I see instructions)	oss) 9. Total	of specified pay made	made in the controlli					eductions directly connected th income in column 10	
(1)											
(2)											
(3)											
(4)											
			•			Add colum	ns 5 and	d 10.	Ac	ld columns 6 and 11.	
						Enter here and				ere and on page 1, Part I,	
						line 8, c	olumn (A	A).		line 8, column (B).	
Totals					►			0.		0.	
Schedule G - Investme (see inst		me of a Se	ection 501(c)((7), (9), or	(17) Org	ganization	Ì				
1 Door	ription of inco			2 Amount of	incomo	3. Deductions 4. Set-asides			5. Total deductions		
I. Desc		inte		2. Amount of income directly connected (attach schedule) 4. Set-as (attach schedule)			e) and set-asides (col. 3 plus col. 4)				
(1)											
(2)											
(3)											
(4)											
				Enter here and Part I, line 9, co						Enter here and on page 1, Part I, line 9, column (B).	
Totals					ο.					0.	
Schedule I - Exploited	Exempt			r Than Ac		ng Income)				
(see instru	uctions)	i		1.	r						
1. Description of exploited activity			3. Expenses directly connected with production of unrelated business income	4. Net incom from unrelated business (co minus colum gain, comput through	d trade or olumn 2 n 3). If a e cols. 5	5. Gross inco from activity t is not unrelat business inco	hat ed	attribut	6. Expenses attributable to column 5 7. Excess ex expenses (co 6 minus colum but not more column 4		
(1)										+	
(2)											
(3)											
(4)											
	page 1	re and on , Part I,	Enter here and on page 1, Part I,							Enter here and on page 1,	
Tatala	line 10,	col. (A).	line 10, col. (B).							Part II, line 26.	
Totals Schedule J - Advertisi	na Inco									0.	
Part I Income From				solidated	Basis						
					Dusis						
1. Name of periodical		2. Gross advertising income	3. Direct advertising costs	or (loss) (c col. 3). If a g	tising gain ol. 2 minus ain, compute nrough 7.	5. Circulat income	ion	6. Read cost		 Excess readership costs (column 6 minus column 5, but not more than column 4). 	
(1)		29,472.	5,512	2.		4,1	24.	28,	084.		
(2) (3)											
(3)											
(4)											

28,084.	23,960.
	Form 990-T (2017)

Totals (carry to Part II, line (5))

23,960.

4,124.

5,512.

29,472.

►

53-0116355

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in

columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6.	Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)							
(2)							
(3)							
(4)							
Totals from Part I		5,512.					23,960.
Enter here and on Enter h page 1, Part I, page line 11, col. (A). line 1							Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5) 🕨	29,472.	5,512.					23,960.
Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)							
1. Name						ensation attributable related business	

	business	
(1)	%	
(2)	%	
(3)	%	
(4)	%	
Total, Enter here and on page 1, Part II, line 14	•	0.

Form 990-T (2017)

Page 5

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1 BUSINESS ACTIVITY

ADVERTISING INCOME DERIVED FROM DISTRIBUTION OF A PERIODICAL DISTRIBUTED WITHIN THE COMMUNITY.

TO FORM 990-T, PAGE 1