

Return of Organization Exempt From Income Tax

2009

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2009 calendar year, or tax year beginning 10/01, 2009, and ending 09/30, 2010

Form 990 header section containing organization name (SONS OF THE REVOLUTION IN THE STATE OF NEW YORK, INC.), address (54 PEARL STREET, NEW YORK, NY 10004-2429), principal officer (DONALD WESTERVELT), and other identifying information.

Part I Summary

Summary table with columns for Activities & Governance, Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement, membership counts, revenue breakdown, and expenses.

Part II Signature Block

Signature block section with handwritten signatures of the officer and treasurer, and the preparer's signature and identifying number.

May the IRS discuss this return with the preparer shown above? (see instructions)

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.\*

SCANNED SEP 01 2010

56

4

**Part III Statement of Program Service Accomplishments**

**1** Briefly describe the organization's mission  
SEE SCHEDULE O

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No  
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  No  
If "Yes," describe these changes on Schedule O

**4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 285,240 including grants of \$ 0 ) (Revenue \$ 49,563 )

MUSEUM PROGRAMS AND ACTIVITIES:  
CURATORIAL & MUSEUM ADMINISTRATION.  
EXHIBITS (INTERPRETATION OF REVOLUTIONARY PERIOD ARTIFACTS).  
ART WORK, DISPLAYS & CONSERVATION MUSEUM INFORMATIONAL SERVICES.

**4b** (Code \_\_\_\_\_) (Expenses \$ 225,505 including grants of \$ 0 ) (Revenue \$ 18,063 )

COMMEMORATIVE AND FELLOWSHIP: PUBLIC PROGRAM LECTURES AND TOURS  
AND INFORMATIONAL SERVICES. EDUCATIONAL TOURS FOR SCHOOLS AND  
OTHER GROUPS.

**4c** (Code \_\_\_\_\_) (Expenses \$ 161,711 including grants of \$ 0 ) (Revenue \$ 60,154. )

MAGNA CARTA EXHIBIT: PREPERATION OF THE PHYSICAL PLANT OF THE  
FRAUNCES TAVERN MUSEUM COMPLEX, THE DISPLAY OF THE MAGNA CARTA AND  
FOUNDATION OF FREEDOM EXHIBIT. THE EXHIBIT INTERPRETED THE  
DOCUMENTS TO SHOW THE FOUNDATIONS UPON WHICH THE IDEAS OF THE  
AMERICAN REVOLUTION, AND THE AMERICAN GOVERNMENT ARE BASED.  
THROUGH VISITS, TOURS, LECTURES, SCHOOL & ADULT TOURS, THE PUBLIC  
IS TAUGHT ABOUT THE SIGNIFICANCE OF THE MAGNA CARTA ITSELF & THE  
FOUNDERS OF THE AMERICAN GOVERNMENT.

**4d** Other program services (Describe in Schedule O )  
(Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_ ) (Revenue \$ \_\_\_\_\_ )

**4e Total program service expenses** ▶ 672,456.

Part IV Checklist of Required Schedules

Table with 3 columns: Question, Yes, No. Rows 1-20 covering various organizational requirements and reporting obligations.

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i> . . . . .		X
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i> . . . . .		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i> . . . . .		X
<b>24 a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to question 25.</i> . . . . .		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		
<b>25 a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i> . . . . .		X
<b>b</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? <i>If "Yes," complete Schedule L, Part I.</i> . . . . .		X
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i> . . . . .		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III.</i> . . . . .		X
<b>28</b> 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)		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i> . . . . .		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i> . . . . .		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i> . . . . .		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i> . . . . .		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i> . . . . .		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i> . . . . .		X
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i> . . . . .		X
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i> . . . . .		X
<b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI.</i> . . . . .		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable. 1a 30
1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. 1b 0
1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (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 13
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a X
3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 3b
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a X
4b If "Yes," enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X
5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X
5c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6a X
6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b
7 Organizations that may receive deductible contributions under section 170(c).
7a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a X
7b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b X
7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c X
7d If "Yes," indicate the number of Forms 8282 filed during the year. 7d
7e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e X
7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f X
7g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g
7h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8
9 Sponsoring organizations maintaining donor advised funds.
9a Did the organization make any taxable distributions under section 4966? 9a
9b Did the organization make a distribution to a donor, donor advisor, or related person? 9b
10 Section 501(c)(7) organizations. Enter
10a Initiation fees and capital contributions included on Part VIII, line 12. 10a
10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. 10b
11 Section 501(c)(12) organizations. Enter
11a Gross income from members or shareholders. 11a
11b Gross income from other sources (Do not net amounts due or paid to other sources against 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
12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body (37), 1b Enter the number of voting members that are independent (37), 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (No), 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No), 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? (No), 5 Did the organization become aware during the year of a material diversion of the organization's assets? (No), 6 Does the organization have members or stockholders? (Yes), 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? (Yes), 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? (Yes), 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (Yes), b Each committee with authority to act on behalf of the governing body? (Yes), 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (No).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)

Table with 3 columns: Question, Yes, No. Rows include: 10a Does the organization have local chapters, branches, or affiliates? (No), 10b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? (No), 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? (Yes), 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990, 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 (Yes), 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes), 12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done (Yes), 13 Does the organization have a written whistleblower policy? (Yes), 14 Does the organization have a written document retention and destruction policy? (Yes), 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?: a The organization's CEO, Executive Director, or top management official (No), b Other officers or key employees of the organization (No), 15a 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 arrangement with a taxable entity during the year? (No), 16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? (No).

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed (NEW YORK), 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply: [X] Own website, [ ] Another's website, [X] Upon request, 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public, 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization (MARGARET O'SHAUGHNESSY, 54 PEARL STREET, NEW YORK, NY 10004-2429, 212-425-1776).

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

**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 Use Schedule J-2 if additional space is needed

- 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 See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did not compensate any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
CHARLES C. LUCAS, JR. PRESIDENT	5.00	X		X			0	0	0	
JAMES R. GRAYSHAW 1ST VICE PRESIDENT	5.00	X		X			0	0	0	
STEPHEN T. WHELAN 2ND VICE PRESIDENT	3.00	X		X			0	0	0	
MICHAEL P. CONEYS 3RD VICE PRESIDENT	1.00	X		X			0	0	0	
KENNETH H. CHASE SECRETARY	3.00	X		X			0	0	0	
DONALD WESTERVELT TREASURER	5.00	X		X			0	0	0	
JONATHAN WOLK RIDGEWAY REGISTRAR	1.00	X		X			0	0	0	
REV. CHRISTOPHER M. CULLEN CHAPLAIN	1.00	X		X			0	0	0	
FREDERICK L. BAKER, III BOARD MEMBER	1.00	X					0	0	0	
ALAN W. BORST, JR. BOARD MEMBER	1.00	X					0	0	0	
PHILIP COOMBE, III BOARD MEMBER	1.00	X					0	0	0	
STANLEY HEISLER BOARD MEMBER	1.00	X					0	0	0	
RAYMOND J. MANNING BOARD MEMBER	1.00	X					0	0	0	
CORNWELL C. MARTIN BOARD MEMBER	1.00	X					0	0	0	
STEPHEN M. NOONAN BOARD MEMBER	1.00	X					0	0	0	
CHRISTOPHER M. NORFLEET BOARD MEMBER	1.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DANIEL J. O'CONNELL BOARD MEMBER	1.00	X					0.	0.	0.	
GEORGE J. OWEN BOARD MEMBER	1.00	X					0.	0.	0.	
FREDERICK W. PATTISON BOARD MEMBER	1.00	X					0.	0.	0.	
CHARLES A. POEKEL, JR. BOARD MEMBER	1.00	X					0.	0.	0.	
AMBROSE RICHARDSON, III BOARD MEMBER	1.00	X					0.	0.	0.	
EDWIN DAVID ROBERTSON BOARD MEMBER	1.00	X					0.	0.	0.	
ANDREW W. RUSSELL BOARD MEMBER	1.00	X					0.	0.	0.	
P. LAYTON SANDERS, JR. BOARD MEMBER	1.00	X					0.	0.	0.	
DONALD L. TWISS BOARD MEMBER	1.00	X					0.	0.	0.	
F. DANIEL LEVERT COLEMAN PAST PRESIDENT	3.00	X		X			0.	0.	0.	
GEORGE E. DOTY PAST PRESIDENT	3.00	X		X			0.	0.	0.	
KEVIN F. HANSLEY PAST PRESIDENT	3.00	X		X			0.	0.	0.	
WILLIAM T. LIVINGSTON, III PAST PRESIDENT	3.00	X		X			0.	0.	0.	
<b>1b Total</b> CONTINUED AT SCHEDULE J-2							0.	0.	0.	

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

- 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 3		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **1**

**Part VIII Statement of Revenue**

13-5563011

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514			
<b>Contributions, gifts, grants and other similar amounts</b>	1a	Federated campaigns . . . . .	1a							
	b	Membership dues . . . . .	1b	5,600						
	c	Fundraising events . . . . .	1c	17,335						
	d	Related organizations . . . . .	1d							
	e	Government grants (contributions) . . . . .	1e	221,096						
	f	All other contributions, gifts, grants, and similar amounts not included above . . . . .	1f	89,653						
	g	Noncash contributions included in lines 1a-1f \$ . . . . .								
	h	<b>Total.</b> Add lines 1a-1f . . . . .		333,684						
<b>Program Service Revenue</b>				<b>Business Code</b>						
	2a	ADMISSIONS/SOCIETY . . . . .		83,106	83,106					
	b	MUSEUM FUND . . . . .		44,674	44,674					
	c	. . . . .								
	d	. . . . .								
	e	. . . . .								
	f	All other program service revenue . . . . .								
	g	<b>Total.</b> Add lines 2a-2f . . . . .		127,780						
<b>Other Revenue</b>	3	Investment income (including dividends, interest, and other similar amounts) . . . . .		91,224			91,224			
	4	Income from investment of tax-exempt bond proceeds . . . . .		0						
	5	Royalties . . . . .		0						
	6a	Gross Rents . . . . .	(i) Real	(ii) Personal						
			266,870							
			b	Less rental expenses . . . . .					118,272	
			c	Rental income or (loss) . . . . .					148,598	
	d	Net rental income or (loss) . . . . .			148,598					
	7a	Gross amount from sales of assets other than inventory . . . . .	(i) Securities	(ii) Other						
			856,424							
			b	Less cost or other basis and sales expenses . . . . .					953,110	
			c	Gain or (loss) . . . . .					-96,686	
	d	Net gain or (loss) . . . . .			-96,686					
	8a	Gross income from fundraising events (not including \$ 17,335 of contributions reported on line 1c) See Part IV, line 18 . . . . .	a	32,190						
			b	Less direct expenses . . . . .					41,994	
c			Net income or (loss) from fundraising events . . . . .	-9,804						
9a	Gross income from gaming activities See Part IV, line 19 . . . . .	a								
		b	Less direct expenses . . . . .							
		c	Net income or (loss) from gaming activities . . . . .					0		
10a	Gross sales of inventory, less returns and allowances . . . . .	a								
		b	Less cost of goods sold . . . . .							
		c	Net income or (loss) from sales of inventory . . . . .					0		
Miscellaneous Revenue				<b>Business Code</b>						
11a	OTHER INCOME . . . . .		95,355	95,355						
b	. . . . .									
c	. . . . .									
d	All other revenue . . . . .									
e	<b>Total.</b> Add lines 11a-11d . . . . .		95,355							
12	<b>Total Revenue.</b> See instructions . . . . .		690,151	223,135		133,332				

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . .	0.			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 . . . . .	0.			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . . . .	0.			
4 Benefits paid to or for members . . . . .	0.			
5 Compensation of current officers, directors, trustees, and key employees . . . . .	0.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . .	0.			
7 Other salaries and wages . . . . .	233,847.	157,794.	66,441.	9,612.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . .	13,961.	9,223.	4,045.	693.
9 Other employee benefits . . . . .	38,952.	25,734.	11,284.	1,934.
10 Payroll taxes . . . . .	22,734.	15,019.	6,586.	1,129.
11 Fees for services (non-employees)	0.			
a Management . . . . .				
b Legal . . . . .	36,371.		36,371.	
c Accounting . . . . .	29,966.		29,966.	
d Lobbying . . . . .	0.			
e Professional fundraising services See Part IV, line 17	23,430.			23,430.
f Investment management fees . . . . .	0.			
g Other . . . . .	456,664.	223,073.	233,591.	
12 Advertising and promotion . . . . .	3,775.	3,577.	198.	
13 Office expenses . . . . .	66,198.	30,346.	30,284.	5,568.
14 Information technology . . . . .	600.		600.	
15 Royalties . . . . .	0.			
16 Occupancy . . . . .	88,065.	49,910.	38,155.	
17 Travel . . . . .	4,335.	2,352.	1,983.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings . . . .	18,257.	18,257.		
20 Interest . . . . .	0.			
21 Payments to affiliates . . . . .	0.			
22 Depreciation, depletion, and amortization . . . .	0.			
23 Insurance . . . . .	74,891.	74,891.		
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a LOAN FEES FOR EXHIBITS	415.	415.		
b SECURITY	25,181.	19,121.	6,060.	
c MAINTENANCE & REPAIRS	23,793.	13,317.	10,476.	
d FLAG DAY	7,420.	7,420.		
e SHIPPING OF PAINTINGS	15,958.	15,958.		
f All other expenses	14,230.	6,049.	8,181.	
25 Total functional expenses. Add lines 1 through 24f	1,199,043.	672,456.	484,221.	42,366.
26 Joint Costs. Check here <input type="checkbox"/> If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation . . . . .				

**Part X Balance Sheet**

		(A)		(B)	
		Beginning of year		End of year	
<b>Assets</b>	1	Cash - non-interest-bearing	434.	1	499.
	2	Savings and temporary cash investments	1,127,629.	2	409,417.
	3	Pledges and grants receivable, net	179,276.	3	40,000.
	4	Accounts receivable, net	57,966.	4	0.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net	122,987.	7	122,987.
	8	Inventories for sale or use	3,262.	8	3,432.
	9	Prepaid expenses and deferred charges	18,786.	9	26,735.
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 2,639,844.		
	b	Less accumulated depreciation	10b 2,206,051.	10c	2,639,844.
	11	Investments - publicly traded securities	3,718,960.	11	3,966,963.
	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	62,340.	15	50,022.
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	7,497,691.	16	7,259,899.	
<b>Liabilities</b>	17	Accounts payable and accrued expenses	241,941.	17	67,640.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	62,340.	25	50,022.
	26	<b>Total liabilities.</b> Add lines 17 through 25	304,281.	26	117,662.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>				
	27	Unrestricted net assets	3,292,469.	27	3,545,375.
	28	Temporarily restricted net assets	92,019.	28	
	29	Permanently restricted net assets	3,808,922.	29	3,596,862.
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	<b>Total net assets or fund balances</b>	7,193,410.	33	7,142,237.	
34	<b>Total liabilities and net assets/fund balances</b>	7,497,691.	34	7,259,899.	

**Part XI Financial Statements and Reporting**

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

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>		X
<b>3b</b>		



Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I)

Section A. Public Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 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; 10 Other income Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10.

12 Gross receipts from related activities, etc (see instructions) 12 703,381
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 14: Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 28.63%
Row 15: Public support percentage from 2008 Schedule A, Part II, line 14 15 25.93%

- 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
17a 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization
b 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

Section A. Public Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6).

Section B. Total Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12); 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, Amount, Percentage. Row 15: Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)). Row 16: Public support percentage from 2008 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, Amount, Percentage. Row 17: Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)). Row 18: Investment income percentage from 2008 Schedule A, Part III, line 17.

- 19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.
b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

**Part IV** **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10, Part II, line 17a or 17b, or Part III, line 12. Provide any other additional information. See instructions.

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2005	2006	2007	2008	2009	TOTAL
MISCELLANEOUS	0	0	75,000	240	95,355	170,595
<b>TOTALS</b>	<u>0</u>	<u>0</u>	<u>75,000</u>	<u>240</u>	<u>95,355</u>	<u>170,595</u>

**SCHEDULE D  
(Form 990)**

**Supplemental Financial Statements**

OMB No 1545-0047

**2009**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

▶ **Attach to Form 990. ▶ See separate instructions.**

Name of the organization **SONS OF THE REVOLUTION IN THE STATE OF NEW YORK, INC.**

Employer identification number  
**13-5563011**

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input checked="" type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements . . . . .	2 a
b Total acreage restricted by conservation easements . . . . .	2 b
c Number of conservation easements on a certified historic structure included in (a) . . . . .	2 c
d Number of conservation easements included in (c) acquired after 8/17/06 . . . . .	2 d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . .  Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? . . . . .  Yes  No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 . . . . .	▶ \$ _____
(ii) Assets included in Form 990, Part X . . . . .	▶ \$ <u>277,746</u>

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 . . . . .	▶ \$ _____
b Assets included in Form 990, Part X . . . . .	▶ \$ _____

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

Schedule D (Form 990) 2009

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . . .  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . . .  Yes  No

b If "Yes," explain the arrangement in Part XIV and complete the following table

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

2a Did the organization include an amount on Form 990, Part X, line 21? . . . . .  Yes  No

b If "Yes," explain the arrangement in Part XIV

**Part V Endowment Funds.** Complete if organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current Year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance . . . . .	4,623,681	8,099,625			
b Contributions . . . . .	317,803	478,311			
c Net investment earnings, gains, and losses . . . . .	452,257	-377,232			
d Grants or scholarships . . . . .					
e Other expenditures for facilities and programs . . . . .	895,606	3,362,294			
f Administrative expenses . . . . .	261,795	214,729			
g End of year balance . . . . .	4,236,340	4,623,681			

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment ▶ 15.0950 %
- b Permanent endowment ▶ 84.9050 %
- c Term endowment ▶ \_\_\_\_\_ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations . . . . .
- (ii) related organizations . . . . .

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .

4 Describe in Part XIV the intended uses of the organization's endowment funds

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .				
b Buildings . . . . .		995,682		995,682
c Leasehold improvements . . . . .		1,126,501		1,126,501
d Equipment . . . . .				
e Other . . . . .		517,661		517,661
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . . . ▶				2,639,844



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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	690,151.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,199,043.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-508,892.
4	Net unrealized gains (losses) on investments	4	457,719.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	457,719.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	-51,173.

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

1	Total revenue, gains, and other support per audited financial statements	1	1,308,136.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	457,719.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	160,266.
e	Add lines 2a through 2d	2e	617,985.
3	Subtract line 2e from line 1	3	690,151.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	690,151.

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

1	Total expenses and losses per audited financial statements	1	1,359,309.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	160,266.
e	Add lines 2a through 2d	2e	160,266.
3	Subtract line 2e from line 1	3	1,199,043.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,199,043.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

SEE PAGE 5

**Part XIV Supplemental Information** (continued)

ORGANIZATIONS MAINTAINING COLLECTIONS OF ART, HISTORICAL TREASURER

## PART III - QUESTION 4

THE ORGANIZATION'S COLLECTION OF ART AND ARTIFACTS ARE PRESERVED AND INTERPRETED, FOR THE MEMBERS AND PUBLIC, AS AN EDUCATIONAL RESOURCE IN ORDER TO PROMOTE A GREATER UNDERSTANDING OF THE AMERICAN REVOLUTIONARY PERIOD AND THE EARLY HISTORY OF NEW YORK.

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

## ENDOWMENT FUNDS

## PART V - QUESTION 4

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

**Part XIV** Supplemental Information (continued)

COLLECTION AND/OR OTHER WORKS OF ART.

PERMANENTLY RESTRICTED FUND NET ASSETS IS A GIFT FROM SHELBY C. DAVIS  
FOUNDATION - PRINCIPLE PORTIONS CANNOT BE TOUCHED; REST CAN BE USED FOR  
PROGRAMS/ACTIVITIES OF SRNY AND MUSEUM.

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

## RECONCILIATION OF REVENUE

PART XII - LINE 2D

2D. DIRECT RENTAL EXPENSES: \$118,272.

2D. DIRECT SPECIAL EVENT EXPENSES: \$41,994.

## RECONCILIATION OF EXPENSE

PART XIII - LINE 2D

2D. DIRECT RENTAL EXPENSES: \$118,272.

2D. DIRECT SPECIAL EVENT EXPENSES: \$41,994.



**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total events
		BALL (event type)	(event type)	(total number)	(add col (a) through col (c))
Revenue	1	Gross receipts	49,525.		49,525.
	2	Less Charitable contributions	17,335.		17,335.
	3	Gross income (line 1 minus line 2)	32,190.		32,190.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	29,181.		29,181.
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	12,813.		12,813.
	10	Direct expense summary Add lines 4 through 9 in column (d)			
11	Net income summary Combine line 3, column (d), and line 10				-9,804.

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	Yes _____ % No	Yes _____ % No	Yes _____ % No
7	Direct expense summary Add lines 2 through 5 in column (d)				( )
8	Net gaming income summary Combine line 1, column d, and line 7				

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities _____ a Is the organization licensed to operate gaming activities in each of these states? b If "No," explain _____	9a	
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain _____	10a	
11 Does the organization operate gaming activities with nonmembers?	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

13 Indicate the percentage of gaming activity operated in

a	The organization's facility . . . . .	13a	%
b	An outside facility . . . . .	13b	%

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

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . .

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

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

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

Director/officer       Employee       Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . .

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

	Yes	No
13a		
13b		
14		
15a		
15b		
15c		
16		
17a		



**SCHEDULE O  
(Form 990)**

**Supplemental Information to Form 990**

OMB No 1545-0047

**2009**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization **SONS OF THE REVOLUTION IN THE STATE  
OF NEW YORK, INC.**

Employer identification number  
**13-5563011**

**ATTACHMENT 2**

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

PART III - LINE 1

TO PERPETUATE THE MEMORY OF THE MEN WHO, IN MILITARY, NAVAL OR CIVIL  
SERVICE, BY THEIR ACTS OR COUNSEL, ACHIEVED AMERICAN INDEPENDENCE.

TO PROMOTE AND ASSIST IN VARIOUS CELEBRATIONS OF THE ANNIVERSARIES  
RELATING TO OR CONNECTED WITH THE WAR OF THE AMERICAN REVOLUTION.

TO INSPIRE AMONG THE MEMBERS, THEIR DECENDANTS AND THE PUBLIC AT LARGE  
THE PARIOTIC SPIRIT OF THE FOREFATHERS OF THE MEMBERS.

TO ENCOURAGE AND MAINTAIN AN AWARENESS OF THE AMERICAN REVOLUTIONARY  
PERIOD THROUGH THE INTERPREATION OF ARTIFACTS FROM THE PERIOD AND THROUGH  
EDUCATIONAL SERVICES.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION A. - QUESTION 6

THE SONS OF THE REVOLUTION IN THE STATE OF NEW YORK, INC., WAS  
INCORPORATED AS A MEMBERSHIP ORGANIZATION.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION A. - QUESTION 7A

AT THE ANNUAL MEETING IN DECEMBER, THE MEMBERS PRESENT VOTE AND THE PROXY

Name of the organization SONS OF THE REVOLUTION IN THE STATE  
OF NEW YORK, INC.

Employer identification number  
13-5563011

ATTACHMENT 2 (CONT'D)

VOTES THAT WERE MAILED IN ARE ALSO COUNTED TO ELECT THE BOARD OF OFFICERS  
AND DIRECTORS.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION A. - QUESTION 7B

ANY CHANGES IN BY-LAWS MUST BE VOTED UPON BY THE MEMBERSHIP AT A SPECIAL  
MEETING.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION B. - QUESTION 11A

THE FORM 990 IS DISTRIBUTED TO THE PRESIDENT AND TREASURER FOR REVIEW  
PRIOR TO FILING.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION B. - QUESTION 12C

THE CONFLICT OF INTEREST FORMS ARE SIGNED ANNUALLY AND ARE REVIEWED FOR  
ANY CONFLICTS.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION C. - QUESTION 19

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

Name of the organization **SONS OF THE REVOLUTION IN THE STATE  
OF NEW YORK, INC.**

Employer identification number  
13-5563011

ATTACHMENT 2 (CONT'D)

SUPPORT SCHEDULE FOR ORGANIZATIONS

PART II, SECTION C - LINE 17A

FACTS-AND-CIRCUMSTANCES TEST:

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

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

THE COLLECTIONS OF THE SONS OF THE REVOLUTION AND FRAUNCES TAVERN MUSEUM INCLUDE MORE THAN 200 REPLICAS OF REVOLUTIONARY WAR FLAGS, MORE THAN 50 VALUED PAINTINGS OF THE ERA, AN EXTENSIVE SELECTION OF WEAPONS AND EQUIPMENT OF THE PERIOD, A SUBSTANTIAL COLLECTION OF 18TH CENTURY FURNITURE AND FURNISHINGS, AND PERSONAL EFFECTS OF GEORGE WASHINGTON AND HIS COMPATRIOTS. THE LIBRARY HOLDS MANY SIGNIFICANT DOCUMENTS, INCLUDING ORDERS SIGNED BY WASHINGTON, LETTERS WRITTEN BY HALE AND THE ORDERLY BOOK OF WASHINGTON'S SPYMASTER BENJAMIN TALLMADGE.

Name of the organization	SONS OF THE REVOLUTION IN THE STATE OF NEW YORK, INC.	Employer identification number	13-5563011
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ATTACHMENT 3

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
SIRINA PROTECTION SYSTEMS CORP 151 HERRICKS ROAD GARDEN CITY, NY 11040	FIRE SYSTEM	221,495.
TOTAL COMPENSATION		<u>221,495.</u>

# Application for Extension of Time To File an Exempt Organization Return

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box  **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

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

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

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

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

<b>Type or print</b>	Name of exempt organization <b>SONS OF THE REVOLUTION IN THE STATE OF NEW YORK, INC.</b>	<b>Employer identification number</b> 13-5563011
	Number, street, and room or suite no. If a P O box, see instructions. 54 PEARL STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10004-2429	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► SONS OF THE REVOLUTION IN NYS

Telephone No ► 212 425-1776 FAX No ► \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box  If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 05/15, 2012, to file the exempt organization return for the organization named above. The extension is for the organization's return for

►  calendar year 20\_\_\_\_ or

►  tax year beginning 10/01, 2010, and ending 09/30, 2011

2 If the tax year entered in line 1 is for less than 12 months, check reason  Initial return  Final return  Change in accounting period

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

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

For Paperwork Reduction Act Notice, see Instructions.

# Application for Extension of Time To File an Exempt Organization Return

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A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

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	Number, street, and room or suite no. If a P O box, see instructions	54 PEARL STREET		
	City, town or post office, state, and ZIP code For a foreign address, see instructions	NEW YORK, NY 10004-2429		

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