

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2017
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ 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.

A For the 2017 calendar year, or tax year beginning and ending

B Check if applicable:	C Name of organization THE ARMY HISTORICAL FOUNDATION INC	D Employer identification number 52-1367225
Address change	Doing business as	E Telephone number (703) 522-7901
Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2425 WILSON BLVD	
Initial return	City or town, state or province, country, and ZIP or foreign postal code ARLINGTON, VA 22201	G Gross receipts \$ 89,121,326.
Final return/terminated	F Name and address of principal officer: CREIGHTON ABRAMS SAME AS C ABOVE	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Amended return		H(b) Are all subordinates included? Yes No
Application pending	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	If "No," attach a list. (see instructions)
	J Website: WWW.ARMYHISTORY.ORG	H(c) Group exemption number ▶
	K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other ▶	L Year of formation: 1983
		M State of legal domicile: VA

Part I Summary

1	Briefly describe the organization's mission or most significant activities: <u>SEE SCHEDULE O.</u>			
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	12	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12	
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	29	
	6 Total number of volunteers (estimate if necessary)	6	495	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.	
	7b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
	Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9 Program service revenue (Part VIII, line 2g)		10,870,912.	25,633,809.	
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		212,261.	174,540.	
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-396,449.	129,769.	
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		15,392.	-14,722.	
		10,702,116.	25,923,396.	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	8,484.	9,438.	
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,218,644.	2,449,605.	
	16a Professional fundraising fees (Part IX, column (A), line 11e)	250,460.	253,483.	
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 3,334,315.			
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,601,023.	3,077,164.	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,078,611.	5,789,690.		
19 Revenue less expenses. Subtract line 18 from line 12	4,623,505.	20,133,706.		
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year	
	21 Total liabilities (Part X, line 26)	50,593,731.	77,666,354.	
	22 Net assets or fund balances. Subtract line 21 from line 20	2,440,503.	9,379,420.	
		48,153,228.	68,286,934.	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer CREIGHTON ABRAMS, EXECUTIVE DIRECTOR	Date	
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name YONG ZHANG, CPA	Preparer's signature <i>Yong Zhang</i>	Date 06/11/2018
	Firm's name ▶ RSM US LLP	Check if self-employed <input type="checkbox"/>	PTIN P01249785
	Firm's address ▶ 1861 INTERNATIONAL DRIVE, SUITE 400 MCLEAN, VA 22102	Firm's EIN ▶ 42-0714325	Phone no. 703-336-6400

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE FOUNDATION'S MOTTO IS "PRESERVE THE PAST AND EDUCATE THE FUTURE", FROM WHICH HAVE COME THREE SIGNIFICANT ACTIVITIES: 1) RAISING FUNDS, AS DIRECTED BY CONGRESS IN SECTION 4722 OF TITLE X OF THE U.S. CODE, TO BUILD THE NATIONAL MUSEUM OF THE UNITED STATES ARMY (NMUSA); 2)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [X] 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 [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 \$ 1,415,446. including grants of \$) (Revenue \$ 26,530.) 2017 NATIONAL MUSEUM PROGRAM

THE US ARMY GAVE THE ARMY HISTORICAL FOUNDATION (FOUNDATION) AND CLARK CONSTRUCTION (CLARK) FORMAL "NOTICE TO PROCEED" WITH CONSTRUCTION OF THE NATIONAL MUSEUM OF THE UNITED STATES ARMY ON MARCH 16, 2017. BY AUGUST THE CONCRETE HAD BEEN POURED, AND THE ARMY INSTALLED FOUR MACRO ARTIFACTS-A RENAULT 1917 TANK FROM WORLD WAR I, A SHERMAN TANK (LEAD TANK INTO BASTOGNE TO RELIEVE THE 101ST AIRBORNE DIVISION IN THE DECEMBER 1944 BATTLE OF THE BULGE), A HIGGINS BOAT USED IN THE D-DAY LANDINGS, JUNE 6, 1944, AND THE LEAD BRADLEY FIGHTING VEHICLE INTO BAGHDAD IN APRIL 2003-WHICH WERE THEN "HOUSED" TO PROTECT THEM DURING MUSEUM CONSTRUCTION. IN NOVEMBER 2017 THERE WAS A "TOPPING OUT"

4b (Code:) (Expenses \$ 399,414. including grants of \$ 9,438.) (Revenue \$) 2017 HISTORICAL EDUCATION PROGRAM

FOUNDED IN 1983, THE ARMY HISTORICAL FOUNDATION (AHF) IS MEMBER-BASED NONPROFIT ORGANIZATION DEDICATED TO PRESERVING THE LEGACY OF THE UNITED STATES ARMY AND EDUCATING THE PUBLIC ON THE ARMY'S STORIED 242 YEAR HISTORY. IN ADDITION TO SERVING AS THE FUNDRAISER FOR THE NATIONAL MUSEUM OF THE UNITED STATES ARMY, THE FOUNDATION IS ENGAGED IN A NUMBER OF HISTORICAL ACTIVITIES.

AHF CONDUCTS BATTLE RIDES (FORMERLY CALLED STAFF RIDES) FOR ITS MEMBERS AND GUESTS. THE RIDES ARE ESPECIALLY POPULAR WITH VARIOUS AGE GROUPS AND PROVIDE DETAILED EXAMINATIONS OF REVOLUTIONARY WAR AND CIVIL WAR

4c (Code:) (Expenses \$ 263,550. including grants of \$) (Revenue \$ 158,825.) 2017 MEMBERSHIP PROGRAM

THE MEMBERSHIP PROGRAM PRODUCED THE AWARD WINNING QUARTERLY MAGAZINE ON POINT: THE JOURNAL OF ARMY HISTORY. IN 2017, ON POINT GAVE MEMBERS A SPECIAL LOOK AT THE BATTLE OF CHANTILLY/OX HILL, EXPLORED THE HISTORY OF THE 95TH INFANTRY DIVISION, AND VISITED CAMP KOHLER IN CALIFORNIA. THE MAGAZINE REVIEWED 48 BOOKS ON MILITARY HISTORY, AND UPDATED MEMBERS ON FOUNDATION NEWS AND PROGRESS ON THE NATIONAL MUSEUM OF THE UNITED STATES ARMY.

THE MEMBERSHIP PROGRAM PROVIDES MEMBERS THE OPPORTUNITY TO EXPERIENCE ARMY HISTORY BY ATTENDING EVENTS. THROUGH OUR BATTLE RIDES (FORMERLY

4d Other program services (Describe in Schedule O.) (Expenses \$ 43,969. including grants of \$) (Revenue \$ 95,859.)

4e Total program service expenses 2,122,379.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part II</i>		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? <i>If "Yes," complete Schedule L, Part III</i>		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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
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
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 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
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 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
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. 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
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part 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

Table with columns for question number, description, and Yes/No checkboxes. Includes sections for backup withholding, employee reporting, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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.

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

Section 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 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.		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
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		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
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?		
15a	The organization's CEO, Executive Director, or top management official		X
15b	Other officers or key employees of the organization		X
	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?		X
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **SEE SCHEDULE O**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **RICK GARZA - (703) 654-1481**
11710 PLAZA AMERICA DRIVE, SUITE 350, RESTON, VA 20190

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) GEN GORDON R. SULLIVAN, USA-RET BOARD CHAIRMAN	1.00	X					0.	0.	0.	
(2) GEN WILLIAM W. HARTZOG, USA-RET BOARD VICE CHAIRMAN	1.00	X					0.	0.	0.	
(3) GEN ERIC K. SHINSEKI, USA-RET. BOARD DIRECTOR	1.00	X					0.	0.	0.	
(4) GEN GEORGE W. CASEY, JR., USA-R BOARD DIRECTOR	1.00	X					0.	0.	0.	
(5) GEN ANN E. DUNWOODY, USA-RET. BOARD DIRECTOR	1.00	X					0.	0.	0.	
(6) HON THOMAS E. WHITE, JR. BOARD DIRECTOR	1.00	X					0.	0.	0.	
(7) HON SANDRA L. PACK BOARD DIRECTOR	1.00	X					0.	0.	0.	
(8) LTG DAVID K. HEEBNER, USA-RET. BOARD DIRECTOR	1.00	X					0.	0.	0.	
(9) LTG WILLIAM H. CAMPBELL, USA-RE BOARD DIRECTOR	1.00	X					0.	0.	0.	
(10) LTG LARRY JORDAN, USA-RET. BOARD DIRECTOR	1.00	X					0.	0.	0.	
(11) MG RUSSELL L. FUHRMAN, USA-RET. BOARD DIRECTOR	1.00	X					0.	0.	0.	
(12) SMA KENNETH O. PRESTON, USA-RET BOARD DIRECTOR	1.00	X					0.	0.	0.	
(13) CDR TALMADGE SEAMAN, USCG RET. TREASURER	1.00			X			0.	0.	0.	
(14) LTG ROGER SCHULTZ, USA-RET. PRESIDENT	40.00			X			200,000.	0.	6,000.	
(15) BG CREIGHTON W. ABRAMS, USA-RET EXECUTIVE DIR., ASST. SECR	40.00			X			100,000.	0.	3,594.	
(16) RICHARD A. COUTURE CHIEF MARKETING OFFICER	40.00				X		124,992.	0.	26,309.	
(17) MELISSA G. THOMPSON CHIEF DEVELOPMENT OFFICER	40.00				X		122,038.	0.	9,302.	

Part VIII Statement of Revenue

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

		(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	1 a Federated campaigns	1a 225.				
	b Membership dues	1b 4,702.				
	c Fundraising events	1c 26,260.				
	d Related organizations	1d				
	e Government grants (contributions)	1e 150,000.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 25,452,622.				
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f		25,633,809.			
	Program Service Revenue	2 a MEMBERSHIP DUES	Business Code 900099	158,825.	158,825.	
b PROGRAM FEES		900099	15,715.	15,715.		
c						
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f			174,540.			
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)		337,001.		337,001.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties		10,815.		10,815.	
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)		-207,232.		-207,232.	
	8 a Gross income from fundraising events (not including \$ 26,260. of contributions reported on line 1c). See Part IV, line 18	a	9,120.			
		b Less: direct expenses	b 6,934.			
c Net income or (loss) from fundraising events			2,186.		2,186.	
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a	95,859.				
	b Less: cost of goods sold	b 123,582.				
	c Net income or (loss) from sales of inventory		-27,723.	-27,723.		
Miscellaneous Revenue		Business Code				
11	a					
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d					
12 Total revenue. See instructions.		25,923,396.	146,817.	0.	142,770.	

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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,688.	3,688.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	5,750.	5,750.		
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	309,593.	98,010.	29,892.	181,691.
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	1,707,646.	540,602.	164,878.	1,002,166.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	41,993.	13,294.	4,055.	24,644.
9 Other employee benefits	390,373.	123,583.	37,692.	229,098.
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal	8,000.	2,000.		6,000.
c Accounting	41,351.	10,338.		31,013.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	253,483.			253,483.
f Investment management fees	33,925.		33,925.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	34,613.	16,724.	643.	17,246.
12 Advertising and promotion	258,195.	101,848.	11.	156,336.
13 Office expenses	383,412.	200,149.	14,711.	168,552.
14 Information technology				
15 Royalties				
16 Occupancy	293,533.	100,663.	26,787.	166,083.
17 Travel	105,460.	41,600.	4.	63,856.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	64,068.	25,272.	3.	38,793.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	13,505.		13,505.	
23 Insurance	6,333.	190.	5,572.	571.
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 O.)				
a MATERIALS	1,236,461.	590,461.	63.	645,937.
b DIRECT POSTAGE	467,825.	184,539.	20.	283,266.
c CREDIT CARD FEES	77,807.	18,000.	1,075.	58,732.
d OTHER PROGRAM EXPENSE	41,485.	41,485.		
e All other expenses	11,191.	4,183.	160.	6,848.
25 Total functional expenses. Add lines 1 through 24e	5,789,690.	2,122,379.	332,996.	3,334,315.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	200.	1	198.
	2 Savings and temporary cash investments	3,960,062.	2	4,568,809.
	3 Pledges and grants receivable, net	10,383,609.	3	10,900,560.
	4 Accounts receivable, net	117,867.	4	12,257.
	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 employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net	256,910.	7	219,151.
	8 Inventories for sale or use	95,852.	8	92,326.
	9 Prepaid expenses and deferred charges	492,407.	9	62,183.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 163,215.		
	b Less: accumulated depreciation	10b 113,196.	10c	50,019.
	11 Investments - publicly traded securities	22,116,963.	11	0.
	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	13,136,833.	15	61,760,851.
16 Total assets. Add lines 1 through 15 (must equal line 34)	50,593,731.	16	77,666,354.	
Liabilities	17 Accounts payable and accrued expenses	2,140,503.	17	9,079,420.
	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 Loans and other 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	300,000.	23	300,000.
	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	2,440,503.	26	9,379,420.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	12,656,046.	27	1,419,642.
	28 Temporarily restricted net assets	35,497,182.	28	66,867,292.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	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 Total net assets or fund balances	48,153,228.	33	68,286,934.	
34 Total liabilities and net assets/fund balances	50,593,731.	34	77,666,354.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	25,923,396.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,789,690.
3	Revenue less expenses. Subtract line 2 from line 1	3	20,133,706.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	48,153,228.
5	Net unrealized gains (losses) on investments	5	
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	68,286,934.

Part XII Financial Statements and Reporting

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

- 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?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed 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?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- 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.
- 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
2a		X
2b	X	
2c	X	
3a		X
3b		

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	9,779,356.	11,946,277.	6,634,648.	10,870,912.	25,633,809.	64,865,002.
2 Tax revenues levied for the organization'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	9,779,356.	11,946,277.	6,634,648.	10,870,912.	25,633,809.	64,865,002.
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)						2,674,638.
6 Public support. Subtract line 5 from line 4.						62,190,364.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	9,779,356.	11,946,277.	6,634,648.	10,870,912.	25,633,809.	64,865,002.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	176,948.	125,281.	264,369.	404,608.	377,001.	1,348,207.
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.)			7,670.	38,120.	9,120.	54,910.
11 Total support. Add lines 7 through 10						66,268,119.
12 Gross receipts from related activities, etc. (see instructions)					12	1,615,516.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	93.85 %
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	88.45 %
16a 33 1/3% support test - 2017. 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		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2016. 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		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2017. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2016. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
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		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
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

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2017. 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 - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section 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? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>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.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>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).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section 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 year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>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.</i>		
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? <i>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.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
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	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	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	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
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 organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section 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 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e 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:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

INCOME FROM FUNDRAISING EVENTS

2015 AMOUNT: \$ 7,670.

2016 AMOUNT: \$ 38,120.

2017 AMOUNT: \$ 9,120.

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

Name of the organization

THE ARMY HISTORICAL FOUNDATION INC

Employer identification number

52-1367225

Organization type (check one):

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

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

[X] 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)

Name of organization THE ARMY HISTORICAL FOUNDATION INC	Employer identification number 52-1367225
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 14,860,024.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 1,100,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization THE ARMY HISTORICAL FOUNDATION INC	Employer identification number 52-1367225
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization THE ARMY HISTORICAL FOUNDATION INC	Employer identification number 52-1367225
--	--

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2017
Open to Public Inspection

Name of the organization THE ARMY HISTORICAL FOUNDATION INC	Employer identification number 52-1367225
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in 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" on 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 education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input 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 Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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 section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, 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" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), 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) Revenue included on Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

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 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 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" on 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 XIII 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, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on 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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Temporarily restricted endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		73,855.	58,972.	14,883.
e Other		89,360.	54,224.	35,136.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				50,019.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
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 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) NATIONAL ARMY MUSEUM DEVELOPMENT COSTS	61,760,851.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	61,760,851.

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.) ▶	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	26,205,477.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	185,490.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	130,516.
e	Add lines 2a through 2d	2e	316,006.
3	Subtract line 2e from line 1	3	25,889,471.
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	33,925.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	33,925.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	25,923,396.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	6,071,771.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	185,490.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	130,516.
e	Add lines 2a through 2d	2e	316,006.
3	Subtract line 2e from line 1	3	5,755,765.
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	33,925.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	33,925.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	5,789,690.

Part XIII Supplemental Information.

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 X, LINE 2:

THE FOUNDATION IS EXEMPT FROM INCOME TAXES ON INCOME DERIVED FROM ANY

SOURCE RELATED TO ITS TAX-EXEMPT PURPOSE UNDER SECTION 501(C)(3). INCOME

WHICH IS NOT RELATED TO EXEMPT PURPOSES, LESS APPLICABLE DEDUCTIONS, IS

SUBJECT TO FEDERAL AND STATE CORPORATE INCOME TAXES. THE FOUNDATION DID

NOT HAVE ANY NET UNRELATED BUSINESS INCOME FOR THE YEAR ENDED DECEMBER 31,

2017.

THE FOUNDATION'S MANAGEMENT EVALUATED ITS TAX POSITIONS AND CONCLUDED

THERE WERE NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE ADJUSTMENT TO THE

FINANCIAL STATEMENTS.

Part XIII Supplemental Information *(continued)*

PART XI, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD ON LINE 10B 123,582.

FUNDRAISING EXPENSES 6,934.

TOTAL TO SCHEDULE D, PART XI, LINE 2D 130,516.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD ON LINE 10B 123,582.

FUNDRAISING EXPENSES 6,934.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 130,516.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest instructions.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization **THE ARMY HISTORICAL FOUNDATION INC** Employer identification number **52-1367225**

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

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
STEPHEN WINCHELL & ASSOCIATES - 1593 SPRING HILL RD, STE	DONOR MARKETING		X	4,863,473.	253,483.	4,609,990.
Total				4,863,473.	253,483.	4,609,990.

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
- AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO
MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY
DC, VI, PR

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

		(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
		GOLF TOURNAMENT (event type)	(event type)	(total number)	
Revenue	1 Gross receipts	35,380.			35,380.
	2 Less: Contributions	26,260.			26,260.
	3 Gross income (line 1 minus line 2)	9,120.			9,120.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	6,504.			6,504.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	430.			430.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				6,934.
11 Net income summary. Subtract line 10 from line 3, column (d)				2,186.	

Part III Gaming. Complete if the organization answered "Yes" on 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))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

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

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

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

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

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

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

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

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

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: STEPHEN WINCHELL & ASSOCIATES

(I) ADDRESS OF FUNDRAISER: 1593 SPRING HILL RD, STE 450, MCLEAN, VA 22182

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Name of the organization **THE ARMY HISTORICAL FOUNDATION INC** Employer identification number **52-1367225**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ _____
- 3** Enter total number of other organizations listed in the line 1 table ▶ _____

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

Schedule I (Form 990) (2017)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
GRANTS AND AWARDS	9	5,750.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE INFORMATION AS WHAT THE MONEY WILL BE USED FOR IS CONTAINED IN THE
 GRANT REQUEST PROPOSAL SENT TO AHF. THE GRANTS ARE FOR SPECIFIC PURPOSES,
 NOT JUST FOR GENERAL NEEDS. THERE WERE NINE WRITING AWARDS DURING 2017.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2017

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization: **THE ARMY HISTORICAL FOUNDATION INC**
 Employer identification number: **52-1367225**

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain **1b**

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? **2**

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract
<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c**
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5a**
- b** Any related organization? **5b**
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6a**
- b** Any related organization? **6b**
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III **7**

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III **8**

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2017

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) LTG ROGER SCHULTZ, USA-RET. PRESIDENT	(i)	200,000.	0.	0.	6,000.	0.	206,000.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) RICHARD A. COUTURE CHIEF MARKETING OFFICER	(i)	124,992.	0.	0.	3,750.	22,559.	151,301.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public
Inspection

Name of the organization

THE ARMY HISTORICAL FOUNDATION INC

Employer identification number

52-1367225

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE FOUNDATION'S MOTTO IS "PRESERVE THE PAST AND EDUCATE THE FUTURE",

FROM WHICH HAVE COME THREE SIGNIFICANT ACTIVITIES: 1) RAISING FUNDS, AS

DIRECTED BY CONGRESS IN SECTION 4722 OF TITLE X OF THE U.S. CODE, TO

BUILD THE NATIONAL MUSEUM OF THE UNITED STATES ARMY (NMUSA); 2)

CONTINUING OTHER ARMY HISTORY INITIATIVES (PUBLISH THE AWARD-WINNING

QUARTERLY JOURNAL OF ARMY HISTORY-ON POINT, ANSWER 400+ HISTORICAL

ENQUIRIES ANNUALLY, CONDUCT STAFF RIDES TO CIVIL WAR AND OTHER

BATTLEFIELDS, PRESENT ANNUAL BOOK AND ARTICLE AWARDS FOR THE WRITING OF

U.S. ARMY HISTORY, AND PRESENT THE "SOLDIER EXPERIENCE SERIES" WHICH

SHOWCASES THE CONTRIBUTIONS OF INDIVIDUAL U.S. ARMY SOLDIERS OF

DIFFERENT RACES, ETHNICITIES AND GENDERS); AND 3) PUBLICLY RECOGNIZE

MAJOR INDIVIDUAL, CORPORATE, AND FOUNDATION CONTRIBUTIONS TO THE NMUSA,

PUBLICIZE THE FOUNDATION'S LEAD ROLE IN SUPERVISING THE NMUSA'S

CONSTRUCTION PROGRESS, AND DEVELOP BUSINESS PLANS TO SUCCESSFULLY

CONDUCT ALL REVENUE-GENERATING ACTIVITIES FOR THE NMUSA.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CONTINUING OTHER ARMY HISTORY INITIATIVES (PUBLISH THE AWARD-WINNING

QUARTERLY JOURNAL OF ARMY HISTORY-ON POINT, ANSWER 400+ HISTORICAL

ENQUIRIES ANNUALLY, CONDUCT STAFF RIDES TO CIVIL WAR AND OTHER

BATTLEFIELDS, PRESENT ANNUAL BOOK AND ARTICLE AWARDS FOR THE WRITING OF

U.S. ARMY HISTORY, & PRESENT THE "SOLDIER EXPERIENCE SERIES" WHICH

SHOWCASES THE CONTRIBUTIONS OF INDIVIDUAL U.S. ARMY SOLDIERS OF

DIFFERENT RACES, ETHNICITIES & GENDERS); AND 3) PUBLICLY RECOGNIZE

MAJOR INDIVIDUAL, CORPORATE, & FOUNDATION CONTRIBUTIONS TO THE NMUSA,

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

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

Name of the organization THE ARMY HISTORICAL FOUNDATION INC	Employer identification number 52-1367225
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PUBLICIZE THE FOUNDATION'S LEAD ROLE IN SUPERVISING THE NMUSA'S
CONSTRUCTION PROGRESS, & DEVELOP BUSINESS PLANS TO SUCCESSFULLY CONDUCT
ALL REVENUE-GENERATING ACTIVITIES FOR THE NMUSA.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

NEW INITIATIVES IN 2017 INCLUDED: 1) CONDUCTING SITE VISITS WITH
DONORS, MEMBERS AND OTHER INTERESTED PARTIES DURING THE ONGOING
CONSTRUCTION PHASE OF THE NATIONAL MUSEUM OF THE UNITED STATES ARMY; 2)
COLLABORATION WITH THE NATIONAL MUSEUM OF THE UNITED STATES ARMY STAFF
TO DEVELOP OPERATIONAL PROCEDURES AND PRACTICES; AND 3) PLANNING FOR
REVENUE GENERATION AND THE FINANCIAL SUSTAINABILITY OF THE NATIONAL
MUSEUM OF THE UNITED STATES ARMY.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

CEREMONY TO CELEBRATE THE INSTALLATION OF THE HIGHEST BEAM, SIGNED BY
CONSTRUCTION WORKERS AND DONORS, IN THE MUSEUM.

BY THE END OF 2017, CONSTRUCTION WAS AHEAD OF SCHEDULE AND SLIGHTLY
BELOW THE ESTIMATED COST. PAYMENTS TO CLARK AND OTHER CONTRACTORS
INCLUDED \$37M FROM THE FOUNDATION AND \$15M FROM THE ASSOCIATION OF THE
UNITED STATES ARMY (AUSA). A VOLUNTEER OVERFLEW THE SITE MONTHLY AND
TOOK AERIAL PHOTOS OF THE PROGRESS OF CONSTRUCTION.

THE FOUNDATION BEGAN A SERIES OF MEETINGS WITH THE ARMY'S NATIONAL
MUSEUM PROJECT OFFICE TO FACILITATE JOINT OPERATIONS ONCE THE MUSEUM
OPENED. BOTH ORGANIZATIONS' OFFICES WILL BE IN THE MUSEUM, AND THE
ARMY WILL OWN, OPERATE, AND MAINTAIN THE MUSEUM WHILE THE FOUNDATION
WILL BE IN CHARGE OF REVENUE GENERATION, WHICH WILL INCLUDE EVENTS, THE

Name of the organization THE ARMY HISTORICAL FOUNDATION INC	Employer identification number 52-1367225
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MUSEUM STORE, THE CAFE, SIMULATORS, PHOTOGRAPHS, POSSIBLE RENTALS OF VIRTUAL REALITY HEADSETS, AND MORE. BY THE END OF 2017 THE FOUNDATION HAD SERVICE AGREEMENTS WITH THE COMPANIES WHO WOULD RUN THE MUSEUM STORE, THE CAFE AND CATERING.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

BATTLES. OUR CHIEF HISTORIAN AND TWO FOUNDATION VOLUNTEERS CONDUCTED TWO BATTLE RIDES DURING 2017, ONE OF WHICH WAS A TWO-DAY TRIP. THE FIRST WAS IN APRIL COVERING THE BATTLE OF FIRST BULL RUN/MANASSAS AND INCLUDED 38 PARTICIPANTS. THE SECOND ONE IN OCTOBER, AGAIN WITH 38 PARTICIPANTS, TRAVELED TO THE VIRGINIA PENINSULA AND EXAMINED THE KEY BATTLES FOUGHT THERE DURING THE SPRING AND EARLY SUMMER OF 1862.

SINCE 1995 AHF HAS PROVIDED HISTORICAL RESEARCH FOR ITS MEMBERSHIP, TEACHERS, STUDENTS, VETERANS AND THEIR FAMILIES, AND MEMBERS OF THE MEDIA BECAUSE THE DEPARTMENT OF THE ARMY DOES NOT PROVIDE SUCH SERVICE TO THE PUBLIC. THE SUBJECT OF MANY OF THESE QUERIES OFTEN RELATES TO FAMILY HISTORIES-DETAILS OF A RELATIVE'S ARMY SERVICE, FOR EXAMPLE-BUT THEY CAN ALSO COVER A WIDE RANGE OF OTHER SUBJECT. THIS IS A FREE SERVICE PROVIDED BY FOUNDATION STAFF HISTORIANS WHO CONDUCT THE RESEARCH IN THE FOUNDATION'S OWN MILITARY HISTORY LIBRARY, AT THE U.S. ARMY CENTER OF MILITARY HISTORY, THE NATIONAL ARCHIVES, AND VIA ONLINE RESOURCES. IN 2017, THE AHF STAFF RESPONDED TO 381 INQUIRIES FROM PATRONS IN 42 STATES AND FIVE COUNTRIES.

FOUR ISSUES OF ON POINT WERE PUBLISHED IN 2017, WITH APPROXIMATELY 6,000 COPIES PER ISSUE MAILED OUT, MOST GOING TO MEMBERS AND DONORS. THE FOUNDATION HAS PUBLISHED ON POINT, WHICH STARTED AS QUARTERLY

Name of the organization THE ARMY HISTORICAL FOUNDATION INC	Employer identification number 52-1367225
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EIGHT-PAGE NEWSLETTER AND IS NOW A FULL-COLOR, AWARD-WINNING, 68-PAGE

MAGAZINE. ON POINT FEATURES ARTICLES ON A WIDE RANGE OF ARMY HISTORY

AND ARTWORK, ALONG WITH MILITARY BOOK REVIEWS AND NEWS ABOUT THE

CAPITAL CAMPAIGN FOR THE NATIONAL MUSEUM OF THE UNITED STATES ARMY.

THE PUBLICATION INCLUDES ARTICLES BY NOTABLE MILITARY HISTORIANS AND

ALSO PROVIDES OPPORTUNITIES FOR EMERGING HISTORIANS AND NOVICE AUTHORS

TO GET PUBLISHED IN A HISTORY MAGAZINE.

SINCE AHF HAS PRESENTED DISTINGUISHED WRITING AWARDS FOR BOOKS AND

ARTICLES ON U.S ARMY HISTORY. THE AWARDS GO TO AUTHORS WHOSE WORK HAS

MADE A SIGNIFICANT CONTRIBUTION TO THE HISTORICAL LITERATURE OF THE

U.S. ARMY. IN 2017, AHF PRESENTED \$5,750 IN AWARD MONEY TO AUTHORS OF

SIX BOOKS AND THREE ARTICLES. AWARD-WINNING BOOKS IN THEIR RESPECTIVE

CATEGORIES INCLUDE BIOGRAPHY-GENERAL FOX CONNER: PERSHING'S CHIEF OF

OPERATIONS AND EISENHOWER'S MENTOR, BY STEVEN RABALAIS (HAVERTOWN, PA:

CASEMATE); JOURNALS, MEMOIRS, AND LETTERS-THROUGH THE VALLEY: MY

CAPTIVITY IN VIETNAM, BY WILLIAM REEDER JR. (ANNAPOLIS: NAVAL

INSTITUTE PRESS); OPERATIONAL/BATTLE HISTORY-FATAL SUNDAY: GEORGE

WASHINGTON, THE MONMOUTH CAMPAIGN, AND THE POLITICS OF BATTLE, BY MARK

EDWARD LENDER AND GARRY WHEELER STONE (NORMAN: UNIVERSITY OF OKLAHOMA

PRESS); INSTITUTIONAL/FUNCTIONAL HISTORY-ELVIS'S ARMY: COLD WAR GIS AND

THE ATOMIC BATTLEFIELD, BY BRIAN MCALLISTER LINN (CAMBRIDGE: HARVARD

UNIVERSITY PRESS); REFERENCE-THE WEST POINT HISTORY OF WORLD WAR II,

VOLUME 2, EDITED BY CLIFFORD J. ROGERS, TY SEIDULE, AND STEVE WADDELL

(NEW YORK: SIMON AND SCHUSTER); AND UNIT HISTORY-ROUGH RIDERS: THEODORE

ROOSEVELT, HIS COWBOY REGIMENT, AND THE IMMORTAL CHARGE UP SAN JUAN

HILL, BY MARK LEE GARDNER (NEW YORK: WILLIAM MORROW). AWARD-WINNING

ARTICLES IN THEIR RESPECTIVE CATEGORIES INCLUDE ARMY PROFESSIONAL

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JOURNALS--"ARMOR GOES TO WAR: THE 11TH ARMORED CAVALRY REGIMENT AND THE

VIETNAM WAR, DECEMBER 1965 TO DECEMBER 1966," BY JOHN M. CARLAND (ARMY

HISTORY, SPRING 2016); ACADEMIC JOURNALS AND MAGAZINES--"IT WOULD BE

VERY WELL IF WE COULD AVOID IT': GENERAL PERSHING AND CHEMICAL

WARFARE," BY THOMAS FAITH (THE HISTORIAN, FALL 2016); AND JOURNALS AND

MAGAZINES--"NATHANAEL GREENE'S GAME OF POSTS," BY NOAH ANDRE TRUDEAU

(MHQ: SPRING 2016)

THE ARMY HISTORICAL FOUNDATION'S INTERN PROGRAM PROVIDES OPPORTUNITIES

FOR HIGH SCHOOL, UNDERGRADUATE, AND GRADUATE STUDENTS WHO HAVE AN

INTEREST IN U.S. ARMY HISTORY TO GAIN PRACTICAL WORK EXPERIENCE UNDER

THE SUPERVISION OF THE FOUNDATION'S STAFF HISTORIANS. USING THE AHF

LIBRARY AND VARIOUS ONLINE AND ARCHIVAL RESOURCES, AHF INTERNS

(ASSISTANT HISTORIANS) PERFORM MANY OF THE SAME TASKS AS THE

FOUNDATION'S REGULAR STAFF, INCLUDING WRITING AND EDITING ARTICLES FOR

ON POINT, RESEARCHING AND ANSWERING HISTORICAL INQUIRIES, AND

CONDUCTING IMAGE RESEARCH. AHF INTERNS HAVE GONE ON TO VARIOUS CAREERS

AND OTHER ENDEAVORS AFTER COMPLETING INTERNSHIPS, INCLUDING EMPLOYMENT

AS HISTORIANS, CURATORS, AND TEACHERS, AS WELL AS ACCEPTANCE TO

GRADUATE PROGRAMS IN HISTORY AND LIBRARY SCIENCE.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

CALLED STAFF RIDES), MEMBERS VISITED FIRST BULL RUN BATTLEFIELD NEAR

MANASSAS, VIRGINIA, AND FOLLOWED THE PENINSULA CAMPAIGN OF 1862. THE

ANNUAL MEMBERS' MEETING AND AWARDS RECEPTION IN JUNE COMMEMORATED THE

BIRTHDAY OF THE ARMY AND ITS 242 YEAR HISTORY. ANNUAL MEETING ATTENDEES

ALSO HAD THE OPPORTUNITY TO TOUR AN EXHIBIT ON WORLD WAR I AT THE

LIBRARY OF CONGRESS IN WASHINGTON, D.C.

Name of the organization THE ARMY HISTORICAL FOUNDATION INC	Employer identification number 52-1367225
--	--

IN 2017, MEMBERSHIP STOOD AT 3,749, INCLUDING 703 LIFE MEMBERS. 227 NEW

MEMBERS JOINED THE ORGANIZATION LAST YEAR.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER COMMERCIAL PROGRAMS

EXPENSES \$ 43,969. INCLUDING GRANTS OF \$ 0. REVENUE \$ 95,859.

FORM 990, PART VI, SECTION A, LINE 6:

THERE ARE 4 CLASSES OF MEMBERS: LIFE (\$1,500), CHARTER (\$100), SUSTAINING (\$50) AND BASIC (\$25).

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

EACH MEMBER IN GOOD STANDING OF THE FOUNDATION SHALL HAVE ONE VOTE.

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

A COPY OF THE 990 IS PROVIDED TO THE GOVERNING BODY PRIOR TO FILING.

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

CONFLICT OF INTEREST (AHF POLICY #1-97)

ANY STAFF MEMBER WHO MAY BE INVOLVED IN AN AHF BUSINESS TRANSACTION IN

WHICH THERE IS A POSSIBLE CONFLICT OF INTEREST SHALL PROMPTLY REPORT THE

POSSIBLE CONFLICT TO THE BOARD CHAIR/PRESIDENT AND THE EXECUTIVE DIRECTOR.

IF THE POSSIBLE CONFLICT INVOLVES THE EXECUTIVE DIRECTOR, THE POSSIBLE

CONFLICT SHALL THEN BE REPORTED TO THE BOARD CHAIR/PRESIDENT.

THE BOARD CHAIR/PRESIDENT OR THE EXECUTIVE DIRECTOR, AFTER RECEIVING

Name of the organization THE ARMY HISTORICAL FOUNDATION INC	Employer identification number 52-1367225
--	--

INFORMATION ABOUT A POSSIBLE CONFLICT OF INTEREST, SHALL TAKE SUCH ACTION AS IS NECESSARY TO ASSURE THAT THE TRANSACTION IS COMPLETED IN THE BEST INTEREST OF THE AHF WITHOUT THE SUBSTANTIVE INVOLVEMENT OF THE PERSON WHO HAS THE POSSIBLE CONFLICT OF INTEREST. (THIS DOES NOT MEAN THAT THE PURCHASE OR OTHER TRANSACTION MUST NECESSARILY BE DIVERTED, BUT SIMPLY THOSE PERSONS OTHER THAN THE ONE WITH THE POSSIBLE CONFLICT SHALL MAKE THE JUDGMENTS INVOLVED AND SHALL CONTROL THE TRANSACTION.)

DEFINITIONS.

A. "INVOLVED IN AN AHF BUSINESS TRANSACTION" MEANS INITIATING, MAKING THE PRINCIPAL RECOMMENDATION FOR, OR APPROVING A PURCHASE OR CONTRACT; RECOMMENDING OR SELECTING A VENDOR OR CONTRACTOR; DRAFTING OR NEGOTIATING THE TERMS OF SUCH A TRANSACTION; OR AUTHORIZING OR MAKING PAYMENT FROM AHF ACCOUNTS. THIS INCLUDES NOT ONLY TRANSACTIONS FOR AHF'S PROCUREMENT OF GOODS AND SERVICES, BUT ALSO FOR THE DISPOSITION OF AHF PROPERTY, AND THE PROVISION OF SERVICES OR SPACE BY THE AHF.

B. A "POSSIBLE CONFLICT OF INTEREST" IS DEEMED TO EXIST WHEN AN AHF EMPLOYEE OR A CLOSE RELATIVE, OR A MEMBER OF THAT PERSON'S HOUSEHOLD, IS AN OFFICER, DIRECTOR, EMPLOYEE, PROPRIETARY, PARTNER, OR TRUSTEE OF, OR, WHEN AGGREGATED WITH CLOSE RELATIVES AND MEMBERS OF THAT PERSON'S HOUSEHOLD, HOLDS 1% OR MORE OF THE ISSUED STOCK IN THE ORGANIZATION SEEKING TO DO BUSINESS WITH THE AHF. A POSSIBLE CONFLICT IS ALSO CONSIDERED TO EXIST WHERE SUCH A PERSON IS (OR EXPECTS TO BE) RETAINED AS A PAID CONSULTANT OR CONTRACTOR BY AN ORGANIZATION WHICH SEEKS TO DO BUSINESS WITH AHF, AND WHENEVER A TRANSACTION WILL ENTAIL A PAYMENT OF MONEY OF THAT PERSON'S HOUSEHOLD.

Name of the organization THE ARMY HISTORICAL FOUNDATION INC	Employer identification number 52-1367225
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C. A "POSSIBLE CONFLICT OF INTEREST" EXISTS WHEN AN EMPLOYEE OF AHF HAS AN INTEREST IN AN ORGANIZATION WHICH IS IN COMPETITION WITH A FIRM SEEKING TO DO BUSINESS WITH THE AHF IF THE INDIVIDUAL'S POSITION GIVES HIM OR HER ACCESS TO PROPRIETARY OR OTHER PRIVILEGED INFORMATION WHICH COULD BENEFIT THE FIRM IN WHICH HE OR SHE HAS AN INTEREST.

D. A "POSSIBLE CONFLICT OF INTEREST" EXISTS WHEN AN AHF EMPLOYEE IS A TRUSTEE, DIRECTOR, OFFICER, OR EMPLOYEE OF A NOT-FOR-PROFIT ORGANIZATION WHICH IS SEEKING TO DO BUSINESS WITH OR HAVE A SIGNIFICANT CONNECTION WITH THE AHF OR IS ENGAGED IN ACTIVITIES WHICH COULD BE SAID IN A BUSINESS CONTEST TO BE "IN COMPETITION WITH" THE PROGRAMS OF THE AHF.

A COPY OF AHF POLICY #1-97 SHALL BE REVIEWED ANNUALLY BY EACH AHF EMPLOYEE WHO REGULARLY INITIATES, REVIEWS OR APPROVES AHF CONTRACTS OR OTHER COMMITMENTS. SUCH EMPLOYEES SHALL THEN COMPLETE THE ACKNOWLEDGEMENT AT ENCLOSURE 1 AND RETURN IT TO THE FOUNDATION SECRETARY FOR INCLUSION IN AHF OFFICIAL FILES. A WRITTEN RECORD OF ANY CONFLICTS OF INTEREST SHALL ALSO BE KEPT BY THE SECRETARY AS A PART OF AHF OFFICIAL FILES.

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

ALL SALARIES, COMPENSATION AND BENEFITS ARE REVIEWED BY COMPENSATION AND BENEFITS REVIEW COMMITTEE, AND THE DECISION PROCESS IS DOCUMENTED AS WELL. AS IS LISTED IN THE BY-LAWS, ARTICLE VI, SECTION 10.

A. THE COMPENSATION AND BENEFITS REVIEW COMMITTEE SHALL BE CHAIRED BY A DIRECTOR AND INCLUDE OTHER FOUNDATION MEMBERS IN GOOD STANDING AS ARE SELECTED BY THE COMMITTEE CHAIR. THE COMMITTEE SHALL INCLUDE AT LEAST ONE

Name of the organization THE ARMY HISTORICAL FOUNDATION INC	Employer identification number 52-1367225
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MEMBER OF THE FINANCE COMMITTEE.

B. THE COMMITTEE IS RESPONSIBLE FOR REVIEWING AND RECOMMENDING AS PART OF EACH FISCAL YEAR BUDGET DEVELOPMENT PROCESS THE PROPOSED COMPENSATION TO AHF STAFF MEMBERS, OFFICERS, OR OTHER ENTITIES FOR WHOM COMPENSATION BY AHF IS PROPOSED.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AK,AL,AR,AZ,CA,CO,CT,FL,HI,IL,KS,KY,MA,MD,ME,MI,MS,MN,NC,ND,NJ,NH,NM,NY,OH
OK,PA,RI,SC,TN,UT,VA,WA,WI,WV,OR,GA

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 FOR THE SAME PERIOD OF DISCLOSURE AS SET FORTH IN SECTION 6104(D).

FORM 990, PART XII, LINE 2C:
THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THAT AUDITED THE FINANCIAL STATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEARS.

FORM 990, PART VI, SECTION B, QUESTION 13:
EMPLOYEES ARE ENCOURAGED TO REPORT TO SENIOR MANAGEMENT (THE SENIOR CAMPAIGN DIRECTOR OR THE EXECUTIVE DIRECTOR) OR TO ANY MEMEBER OF THE BOARD OF DIRECTORS ANY KNOWN OR SUSPECTED ILLEGAL ACTIVITIES THAT THEY BELIEVE HAVE BEEN CONDUCTED BY AN EMPLOYEE IN CONNECTION WITH FINANCES OR ANY OTHER OPERATIONAL ASPECT OF THE FOUNDATION. THIS WHISTLE BLOWER

Name of the organization THE ARMY HISTORICAL FOUNDATION INC	Employer identification number 52-1367225
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POLICY PREVENTS BY LAW, ANYONE IN THE FOUNDATION FROM RETALIATING
 AGAINST OR PUNISHING AN EMPLOYEE FOR REPORTING CONDUCT THAT THE
 EMPLOYEE REASONABLY BELIEVES TO BE ILLEGAL.

FORM 990, PART VI, SECTION B, QUESTION 14:

THIS POLICY INFORMS FOUNDATION EMPLOYEES THAT IT IS AN OBSTRUCTION OF
 JUSTICE OFFENSE TO DESTROY, FALSIFY, OR ALTER ANY RECORDS OR DOCUMENTS
 IN ORDER TO IMPEDE A FEDERAL INVESTIGATION. IF ANY EMPLOYEE IS ASKED TO
 FALSIFY, DESTROY, OR ALTER ANY RECORDS, HE SHOULD IMMEDIATELY INFORM
 SENIOR MANAGEMENT OR THE BOARD OF DIRECTORS (IF SENIOR MANAGEMENT IS
 INVOLVED IN THE OFFENSE).