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Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

	Inte	nai Rever	nue Service	► Information about Form 990 and its instructions is at www.irs.gov/for	m990.	Inspection
	<u>A</u>	For the	e 2014 cale	ndar year, or tax year beginning 03/01 , 2014, and ending	02/28	, 20 15
	В	Check if	f applicable	C Name of organization Old Guard of the City of New York	D Emplo	yer identification number
		Address	change	Doing business as		13-1673348
		Name c	hange	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Teleph	one number
		Initial re	turn	307 West 91st Street	1	212-724-9268
			ım/terminated			
	$\overline{\Box}$		ed return	New York, NY, 10024	G Gross	receipts \$ 47,328
	$\overline{\Box}$					or subordinates? Yes V No
					es included? Yes No	
	<u> </u>	Тах-ехе	mpt status:		(see instructions)	
	亍	Website		roup exemption	n number 🕨	
	K					e of legal domicile NY
		art I	Summ		520 111 0141	
		1		escribe the organization's mission or most significant activities: TO DECORATE	THE CDAY	ES OF OUR
	ø	•		ED MILITARY PERSONNEL. TO PARTICIPATE IN PATRIOTIC EVENTS AND SUPPOR		
	anc.	Í	ACTIVE N	I TIL WOR	ALL OI THE	
	Ě	2		is box ► if the organization discontinued its operations or disposed of more t	than 25% o	f its not assets
	Activities & Governance	3		of voting members of the governing body (Part VI, line 1a)	1 _	13
	ص ح	4		of independent voting members of the governing body (Part VI, line 1b)	-	13
	es	5		nber of individuals employed in calendar year 2014 (Part V, line 2a)	. 5	0
	Ϋ́	6		nber of individuals employed in calendar year 2014 (Fart V, line 2a)	. 6	9
	Ę	_		· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	•	7a		elated business revenue from Part VIII, column (C), line 12	<u>7a</u> 7b	0
		b	ivet unrei	ated business taxable income from Form 990-T, line 34	or Year	Current Year
		١ ۾	C4b4			<u> </u>
<u>دع</u>	Revenue	8		nons and grants (Part VIII, line 1h)	2,880	
2015		9	_	service revenue (Part VIII, line 2g)	17,649	
~	Re	10		nt income (Part VIII, column (A), lines 3, 4, and 7d)	19,013	
44		11		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	
0		12	Total reve	enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	39,542	
NOV		13	Grants ar	nd similar amounts paid (Part IX, column A) (mgs 13) FD.	0	
\bar{z}		14	Benefits	paid to or for members (Part IX, dolumn (At, me 4) V C U	0	
\bigcirc	es	15	Salaries, o	other compensation, employee benefits (Part IX, column (A), line (5) 10)	0	
Ш	Expenses	16a		nal fundraising fees (Part IX, column (A), Une 13 e) 2015 . O	0	0
\boldsymbol{Z}	X			draising expenses (Part IX, column (2), line 25) ▶ 0 0		
7	ш	17		penses (Part IX, column (A), lines 11a-0 GDZ40, UT	70,992	52,384
SCANNED	. 1	18	-	enses. Add lines 13-17 (must equal Part-IX, column (A), line 25)	70,992	52,444
$\widetilde{\Omega}$	1	19	Revenue	less expenses. Subtract line 18 from line 12	-31,450	
	Assets or Balances		-		of Current Year	
	sset Bala	20		ets (Part X, line 16)	536,492	605,662
	a t	21		lities (Part X, line 26)	0	
	22	22		s or fund balances. Subtract line 21 from line 20	536,492	605,662
		rt li		ure Block		
				y, I declare that I have examined this return, including accompanying schedules and statements, and etc. Declaration of preparer (other than officer) is based on all information of which preparer has any kr		my knowledge and belief, it is
			1 N	7/12	- Towneage.	131
	Sig	n	Signa	fure of officer	1 /0	19115
	Siy Hei				Date	
	ııcı	•		io Franco, Treasurer or print name and title		
			 ', 	pe preparer's name Preparer's signature Date		- IPTIN
	Pai		1	Date Date	Check	[_] ff
		pare	4		self-em	pioyea
-	Us	e Onl			Firm's EIN ►	
-	11	. +b = 10	Firm's ac		Phone no.	
	ivia	rine iH	io discuss	this return with the preparer shown above? (see instructions)		🔲 Yes 🗌 No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2014)

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Part	Statement of Program Service Accom Check if Schedule O contains a response		, —
1	Briefly describe the organization's mission:	e of flote to any line in this Fait in	<u> </u>
'	TO DECORATE THE GRAVES OF OUR DECEASED	MAIL ITADY DEDSONNEL TO DARTICIDA	ATE IN PATRIOTIC EVENTS AND
	SUPPORT THE MORALE OF THE ACTIVE MILITAR		
	MEMBERS AND WITH SIMILAR ORGANIZATIONS	ALTUG AND OTHER STATES	
	MEMBERS AND WITH SIMILAR ORGANIZATIONS	THIS AND OTHER OTHER.	
2	Did the organization undertake any significant p	rogram services during the year which	h were not listed on the
	prior Form 990 or 990-EZ?		· · · · · · □Yes ☑No
	If "Yes," describe these new services on Schedu	ile O.	
3	Did the organization cease conducting, or m		conducts, any program
	services?		· · · · · · · · □Yes ☑No
	If "Yes," describe these changes on Schedule O	•	
4	Describe the organization's program service ac		
	expenses. Section 501(c)(3) and 501(c)(4) organ		nount of grants and allocations to others,
	the total expenses, and revenue, if any, for each	program service reported.	
_		<u> </u>	· <u> </u>
4a	(Code:) (Expenses \$ 19,513	including grants of \$	0) (Revenue \$19,020)
	FY 2014 Old Guard Ball.		
		·	***************************************

4b	(Code:) (Expenses \$144	including grants of \$	0) (Revenue \$ 164)
	OLD GUARD ANNIVERSARY DAY. Income revenue	s from event used to defray expenses a	nd promote patriotism and support of
	the Armed Corner		

4c	(Code:) (Expenses \$ 2,949	including grants of \$	\ (Revenue \$ 2.421.)
40	Christmas/Memorial Day/Social events and similar		
	revenues from said activities are used to defray ex		nd support the Armed Forces, income
	revenues from said activities are used to defray ex	penses incurred.	
			······································
4d	Other program services (Describe in Schedule O		
	(Expenses \$ 5,519 including grants of	\$ o)(Revenue\$	1,104)
4e	Total program service expenses ▶	28,125	

The street organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A. Is the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule (P. Part I). Section 501(c)(3) organizations. Dot the organization engage in lobbying activities, or have a section 501(c)(4). 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part II. Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. 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 regolation services? If "Yes," complete Schedule D, Part V. If the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, permanent endowments, or quise-indownents in "Yes," complete Schedule D, Part V. If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V. Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part V. Did the organization report an	Part	IV · Checklist of Required Schedules			
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(n)(4). 5 Is the organization assection 501(c)(4). 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part II. 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. 7 Did the organization device or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III. 8 Did the organization in grantian collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III. 9 Did the organization in grantian collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III. 10 Did the organization in part X, line 12 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 dath regolation services If "Yes," complete Schedule D, Part VI. 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted and the organization report an amount for investments—other securities in Part X, line 12 flat is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 11 Did the organization export an amount for investments—other securitie				Yes	No
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4 Section 501(c)) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year? If "Yes," complete Schedule C, Part II . 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 88-19? If "Yes," complete Schedule C, Part III . 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II . 7 Did the organization receive or hold a conservation easement, including easements to preserve pen space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . 8 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 counselling, debt management, credit repair, or debt negatization, cliently or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VI . 10 Did the organization report an amount for investments—other securities in Part X, line 10 If "Yes," complete Schedule D, Part VI . 11 If the organization report an amount for investments—other securities in Part X, line 10 If "Yes," complete Schedule D, Part VI . 12 Did the organization report an amount for investments—other securities in Part X, line 10 If "Yes," complete Schedule D, Part X . 13 Did the organization report an amount for investments—other securities in Part X, line 15 If "Yes," complete Schedule D, Part X . 14 Did the organization report an amount for investments—other securities in Part X, line 15 If "Yes," complete Schedule D, Part X . 15 Did the organization report an amount for investments—other securitie			2		1
election in effect during the tax year? If "Yes," complete Schedule C, Part II. Is the organization a section 501(c)(4), 501(c)(5) or 501(c)(6) or	3		3		~
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Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V VIV, IVII, IVII, X, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V VIVI, VIVI, IVII, X, or X as applicable. Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 16 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII Did the organization amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part XIII Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part XIII Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and III Did the organization maximal an office, employees, or agents outside of the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts II and IV. Did the organiza	6	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	6		v
Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part VI Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VI. If the organization answer to any of the following questions is "Yes," then complete Schedule D, Part VI, VII, IVI, IV, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part VII. 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 167 If "Yes," complete Schedule D, Part VIII. 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 167 If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other assets in Part X, line 157 If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other assets in Part X, line 157 If "Yes," complete Schedule D, Part X and XII. Was the organization included in consolidated financial statements for the tax year? If "Yes," and If the organization included in consolidated financial statements for the tax year? If "Yes," and If the organization as chool described in Section 170(b)(1)(A)(iii)? If "Yes," complete Schedule D, Part X III and IV. Was the organization as chool described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E, Parts X III and IV. Did the organization report and the proper in the prop	7		7		v
Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part VI. 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," complete Schedule D, Part V IVI, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X VIII. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X VIII. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's lability for uncertain tax positions under FIN 48 (%CC 740)? If "Yes," complete Schedule D, Part X VIII. Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XIII soptonal. Is the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XIII soptonal. Is the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule	8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8		,
endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, X, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 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? If "Yes," complete Schedule D, Part VII d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X If Did the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X If Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X If Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and If the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and If the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and If the organization nation and office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$1,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Ye	9	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			~
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b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 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? If "Yes," complete Schedule D, Part VIII. d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. e Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 112a Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 12a Did the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 12b Uthe organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 12a Did the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 12b Uthe organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 12b Uthe organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts III and IV. 12b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II		If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 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? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 110	а		11a		,
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? if "Yes," complete Schedule D, Part VIII	b		11b		~
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	С				v
Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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)? If "Yes," complete Schedule D, Part X . 12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII . b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	d				,
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. 12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	e				1
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			,
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			~
14a Did the organization maintain an office, employees, or agents outside of the United States? 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? If "Yes," complete Schedule F, Parts I and IV. 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? If "Yes," complete Schedule F, Parts II and IV. 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? If "Yes," complete Schedule F, Parts III and IV. 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? If "Yes," complete Schedule G, Part I (see instructions) 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H. 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.	13	· -			V
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? If "Yes," complete Schedule F, Parts I and IV			-		
fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV					
for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		fundraising, business, investment, and program service activities outside the United States, or aggregate	14b		~
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	15		15		٧
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? If "Yes," complete Schedule G, Part I (see instructions)	16		16		٧
Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a 🗸	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			_
<u> </u>	20 =		\rightarrow		
					

Part	Checklist of Required Schedules (Continued)		·	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Yes	No
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		-
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		v
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		~
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		v
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		v
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		v
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		,
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<i>y</i>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		v
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29		v
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		v
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		v
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b	-	V
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		,
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	~	ļ <u>*</u>

Part	V Statements Degarding Other IDS Filings and Tay Compliance			3-
Part				
	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	No
4.	Elilia de la companya de la la companya de la la companya de la co		res	NO
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			}
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		}	}
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	١.,		١.
2-		1c		1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
3a	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			,
_	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		-
b 4a	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4.		~
	,	4a		ļ
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5-	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
5a b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
Va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Ua		<u> </u>
-	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	00		
'a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
_	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			-
	sponsoring organization have excess business holdings at any time during the year?	8	į	
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	ļ		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	Ì	1	
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	- 1		
	against amounts due or received from them.)	į	1	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u></u> _		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
L	Note. See the instructions for additional information the organization must report on Schedule O.		ļ	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_	100			
	Enter the amount of reserves on hand	44-		•
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>
		44.1		

	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			ions.					
	Check if Schedule O contains a response or note to any line in this Part VI			<u>, v</u>					
Secti	on A. Governing Body and Management								
_	man and a second se		Yes	No					
1a	a Enter the number of voting members of the governing body at the end of the tax year 13 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 13								
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?								
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		v					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1					
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1					
6	Did the organization have members or stockholders?	6		1					
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?	7a		,					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		V					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	~	}					
b	Each committee with authority to act on behalf of the governing body?	8b	~						
9									
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9								
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C							
			Yes	No					
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		<u> </u>					
11a									
b									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		,					
. <u>-</u> с	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		 					
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c							
13	Did the organization have a written whistleblower policy?	13		~					
14	Did the organization have a written document retention and destruction policy?	14		V					
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?								
а	The organization's CEO, Executive Director, or top management official	15a		~					
b	Other officers or key employees of the organization	15b		V					
	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?	16a		,					
b	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?	16b							
	on C. Disclosure								
17 18	List the states with which a copy of this Form 990 is required to be filed ► NY Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(c)(3)s	only)					
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interinancial statements available to the public during the tax year.	erest _l	oolicy	, and					
20	State the name, address, and telephone number of the person who possesses the organization's books and rec MARIO E FRANCO - TREASURER, (212)724-9268	cords:	>						

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

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rade	

C	000	1004	41
Form	990	1201	4

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- 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 no	r any relate	d org	aniz	atio	n c	ompe	ensa	ited any currer	nt officer, directo	r, or trustee.
					C)			1		
(A)	(B)	///	-+		ition			(D)	(E)	(F)
Name and Title	Average	box,	do not check more than one lox, unless person is both an					Reportable	Reportable	Estimated
	hours per week (list any					or/trus	_	compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	eng F	Former	the	organizations	compensation
	related organizations	egi	દ	ĕ	3	est	Tet	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	or tr	na		ğ	9 6	l	,		and related
	line)	ste	trus	ļ	8	Peg		ļ		organizations
		"	6		1	Highest compensated employee	i			
				-			┢			
Robert S Sıkorski Esq	0					ĺ				
Trustee	ļ	~	_	~	<u> </u>		_	0	0	0
Julius Stein	0				į					
Trustee		~	ļ	_	ļ		<u> </u>	0	0	0
Esteban Taracido	0				ŀ		ļ	ļ		
Trustee		~			_		_	0	0	0
Howard C Haider	0							ļ		
President				~	_		_	0	0	0
Daniel L Hooker	0						Ì			
Vice President				~			_	0	0	0
Mario E Franco	0									
Treasurer	-			~			-	0	0	0
Robert T Peterson	0			,		,		0	o	0
Asst Treasurer				_				<u> </u>		<u> </u>
				-			\vdash			
	 						1			

										<u> </u>

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mplo	yees	s, aı	nd F	lighe	st C	ompensated E	mpioyees (contin	uea)	<u></u>	
	(A) Name and title		box,	unles	Pos neck ss pe	rson	e than o is both or/trust	an	(D) Reportable compensation	(E) Reportable compensation from	n from	Es an		
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatic (W-2/1099-N	ons	com fr org and	other pensation om the anization irelated inization	n I
				}						· · · · · · · · · · · · · · · · · · ·		· · · - · · · ·		
					i									
1b c	Sub-total						•	>	0		0			0
d 2	Total (add lines 1b and 1c)	not limited	to th) w	ho received me	ore than \$1	00,00	0 of		0
	reportable compensation from the organi												Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete \$	Schedule J	for su	ıch	indi	ividu	ıal					3		~
4	For any individual listed on line 1a, is the organization and related organizations	greater that	an \$1	50,	000	? //	"Ye	s, "	complete Sch			h		
5	Individual	r accrue co	mpei	nsat	ion	fror	n any	un un	related organiz	ation or inc		al 4	-	•
Section	on B. Independent Contractors	11 703, 0			-	-	-		den person	· · · ·	<u> </u>	3		<u> </u>
1	Complete this table for your five highest of compensation from the organization. Rep year.													ax
	(A) Name and business add	ress					-		(B) Description of s	ervices		(C) Compen		
None								_						
							-							
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who				

	90 (201	4) Statement of Reve	00110					Page 9
Far	. VIII	Check if Schedule C		nonce or note to	any line in this	Part VIII		П
-	•	Check ii Scheddie C	o contains a res	ponse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts its	1a	Federated campaigns	s 1a	0				
ar our	ь	Membership dues .	1b	2,740				
S, C	С	Fundraising events .		0				
ig ig	d	Related organizations		0				
in,	е	Government grants (cor		0		İ		
ıtio er S	f	All other contributions, g						
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts not inc	<u> </u>	425				
ng u	g	Noncash contributions include	···································	0	24/5			
	h	Total. Add lines 1a-1	<u> </u>	Business Code	3,165			
Program Service Revenue	2a	FY 2014 Old Guard Ba	AII	900099	19,020	19,020	o	0
ě	b	Anniversary Day	111	900099	164	164	0	0
9	0	Christmas/Memorial D	av/Social Days	900099	2,621	2,621	0	0
ē	ď	Uniforms & Accoutrer		900099	1,104	1,104	0	0
E	е							
gra	f	All other program ser	vice revenue .		0	0	0	0
<u> </u>	g	Total. Add lines 2a-2			22,909			
	3	Investment income		ends, interest,				
		and other similar amo	•		21,254	21,254	0	0
	4	Income from investmen	•	ond proceeds	0	0	0	
	5	Royalties	(i) Real	▶	0	0	0	0
		0						
	6a	Gross rents Less: rental expenses	0	0			ł	
	b	Rental income or (loss)	0	0	Į		-	
	d	Net rental income or		▶	o	o	o	0
	7a	Gross amount from sales of	(i) Securities	(ii) Other				_
		assets other than inventory	0	0				
	b	Less: cost or other basis						
		and sales expenses .	0	o				
	С	Gain or (loss)	0	0				
	d	Net gain or (loss) .		▶	0	0	0	0
ē	82	Gross income from fu	ındraising					
en	04	events (not including \$	n -					
ev.		of contributions reporte	ed on line 1c).			ļ		
P.			· · · · a					
Other Revenue	ь	Less: direct expenses	s b			ĺ	i	
0		Net income or (loss) f		events . >				
	9a	Gross income from ga See Part IV, line 19 .						
	ь	Less: direct expenses	-					
		Net income or (loss) f						
		Gross sales of in	ventory, less					
		returns and allowance	es a		İ		ļ	
		Less: cost of goods s					į	
	С	Net income or (loss) f						
		Miscellaneous R	Revenue	Business Code	İ	ļ		
	11a							
	b							
	0 4	All other revenue					0	0
	d e	All other revenue . Total. Add lines 11a-		•	0	0		U
	12	Total revenue See in			47 220	AA 162		

Part IX Statement of Functional Expenses

Section	501(c)(3) and 501	(c)(4) organ	izations must co	mplete all colum	ons All other or	nanizations must d	complete column (A).	
300001	וו פס וועט שווע שוועט און	Chy Organ	izanono masi et	mpicio un colum	11101 7 III OU 101 OI S	gaineacono inace	ompiete eelami py.	

Check if Schedule O contains a response or note to any line in this Part IX					
	t include amounts reported on lines 6b, 7b, , 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				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	60		60	
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 8	Other salaries and wages	0			
9 10 11	Other employee benefits				
a b	Fees for services (non-employees): Management				
c d e	Accounting				
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	396		396	
12	Advertising and promotion			-	
13	Office expenses	2,021		2,021	
14 15	Information technology			<u> </u>	
16	Royalties				
17	Travel			<u></u>	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	616	0	616	0
20	Interest				
21 22	Payments to affiliates				
23	Insurance	7,875	0	7,875	0
24	Other expenses. Itemize expenses not covered	7,075	<u>~</u>		
-	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.)				
а	FUEL OIL	7,964	0	7,964	0
b	UTILITIES	3,570	0	3,570	0
c	UNIFORMS & ACCOUTREMENTS	5,519	5,519	0	0
d	FY 2014 OLD GUARD BALL	19,513	19,513	0	0
е	All other expenses	4,910	3,093	1,817	0
25	Total functional expenses. Add lines 1 through 24e	52,444	28,125	24,319	0
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

_	a. c A	Check if Schedule O contains a response or note to any line in this Par	tX		
	• • • • • • • • • • • • • • • • • • • •	,	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	9,910	1	15,874
	2	Savings and temporary cash investments	8,216	2	14,377
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	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			
	i	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			
ş		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation [10b]	0	10c	
	11	Investments—publicly traded securities	518,366		575,411
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	· · · · · · · · · · · · · · · · · · ·
_	16	Total assets. Add lines 1 through 15 (must equal line 34)	536,492	16	605,662
	17	Accounts payable and accrued expenses	· · · · · · · · · · · · · · · · · · ·	17	
	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	
Liabilities	22	Loans and other payables to current and former officers, directors,		[
Ħ		trustees, key employees, highest compensated employees, and			
iab		disqualified persons. Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	···
	25	Other liabilities (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	0	26	0
	20	Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and		20	
es		complete lines 27 through 29, and lines 33 and 34.			
Net Assets or Fund Balances	27	Unrestricted net assets		27	
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
5		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and			
ts or F		complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds	536,492	30	605,662
se	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
As	32	Retained earnings, endowment, accumulated income, or other funds .	0	32	0
ا ق ا	33	Total net assets or fund balances	536,492	33	605,662
	34	Total liabilities and net assets/fund balances	536,492	34	605,662
					Form 990 (2014)

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Page	-1	4

Par	XI Reconciliation of Net Assets			٠.			
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>	<u></u>		. 🗆		
1	Total revenue (must equal Part VIII, column (A), line 12)				47,328		
2	Total expenses (must equal Part IX, column (A), line 25)						
3	Revenue less expenses. Subtract line 2 from line 1	3		-5,116			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		536,492			
5	Net unrealized gains (losses) on investments	5		74,286			
6	Donated services and use of facilities	6			0		
7	Investment expenses	7			0		
8	Prior period adjustments	8			0		
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		60	5,662		
Part	XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash Accrual Other		<u></u>				
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olain	in	İ			
	Schedule O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		~		
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	iled o	or				
	reviewed on a separate basis, consolidated basis, or both:						
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		1	1	1		
b	Were the organization's financial statements audited by an independent accountant?		. 2b		1		
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d 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 ov	ersigl	nt	1			
	of the audit, review, or compilation of its financial statements and selection of an independent account	ntant'	2c		ĺ		
	If the organization changed either its oversight process or selection process during the tax year, ex	olain i	in	 			
	Schedule O.			ł	}		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	orth i	in				
	the Single Audit Act and OMB Circular A-133?	•	. За	1	/		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	go th		 			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such at		3b				
			Fo	m 990	(2014)		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization	Employer identification number				
Old Guard of the City of New York	13-1673348				
Form 990, Part VI, Section B, Line 11b - No review was or will be conducted					
TOTAL TOTAL TO SCRIPT DE LINE TIDE TO TEVIEW WAS OF WILL DE COMMUNICA					
Form 990, Part VI, Section C, Line 19 - Documents are available to the public upon request.					
Form 990, Part IX, Line 5 - NY STATE INSURANCE FUND Disability payment of \$60.00, up to June 2014	•				
Form 990, Part IX, Line 11g - Janitorial services fee for 4 monthly meetings @ \$99 00 X 4 = \$396.00 total					
	ID-4400 D-40				
Form 990, Part IX, Line 24e - Armory (Building Maintenance) \$1,229; Dues & Subscriptions \$25; Funera	Reer \$200; Past Commandant's				
portrait \$363; Anniversary Day \$144, Christmas/Memorial Day/Social events \$2,949.					
	,				