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Fon	" 99	0	Return of Org	ganization	Exemp	t Fro	om In	icom	ie Ta	ЭX	OMB No. 1545-0	047
			Under section 501(c), 527, or								. 2018	3
			▶ Do not enter socia	al security numb	ers on this fo	orm as	it may l	pa waq	e publi	ic.		
	mai Revenu	the Treasury e Service	► Go to www.irs.g	gov/Form990 to	r instructions	and th	ne latesi	t inform	ation.		Open to Pul Inspectio	
A	For the	2018 cale:	ndar year, or tax year beginning	JANUAL			nd endi			ABER 31	,20 18	
B	Check if a	applicable:	C Name of organization THE FIRS	REGIMENT IN	ANTRY OF P	ENNS	YLVANI	Α			er identification num!	er
	Address o		23-6272333									
	Name cha	ange .	ne number									
	Initial retu	m į	215-394-8401									
		v'terminated										
	Amended		WARMINSTER, PA., 18974-334							G Gross re	celpts \$ 124,	01.33
Ц	Application	- 1	F Name and address of principal offic		'. ANGLIM, PR	RESIDE	ENT	H(a)	Is this a g	roup return for :	subordinates? 🔲 Yes 🔽	No
			1110 TINTERN LANE, AMBLER				- ^ l	HIP	-		s included? 🔲 Yes 🗀	No
<u> </u>		pt status:	☐ 501(c)(3) ☐ 501(c) ((4) ◀ (insert	no) 🔲 4947(a)	(1) or	<u> 527 </u>	41			list. (see Instructions)	
7	Website:		✓ Corporation ☐ Trust ☐ Associa	По		T				exemption		
K	arti		· · · · · · · · · · · · · · · · · · ·	ation	 	L Yea	r of forms	ation	1921	M State	of legal domicile	PA
		Summ:	scribe the organization's miss	von er meet ei	noificent esti		Comm	f al	102-	l Delegado	Castas - Samelia	
•												
2		PEDI (UA	Philadelphia, PA) of the 56th S	u yker brigade,	Zem manuy	DIVISI	on, Pen	nsylvar	na Nat	ional Gua	ra.	
Activities & Governance	2	Check thi	s box ▶☐ if the organization	discontinued i	te operations	or die	enoced	of mo	n than	25% of	ite net accete	
Š			of voting members of the gove				эрозец		O triai	3	lia noi dassia,	15
ಶ			of independent voting member				line 1b)		4		15
es			ber of individuals employed i	•	• .				• •	5		
7			ber of volunteers (estimate if	-						6		
ğ	1		elated business revenue from	• •	on (C) line 1	2				7a		
-			ated business taxable income				VEC	\int		7b		
		· · · · · · · · · · · · · · · · · · ·	•			-/ -	*	<u> </u>	Prior Ye		Current Year	
6	8	Contribut	lons and grants (Part VIII, line	1h)	§ JUL	4 7	2010			11,475.00	13,2	45.00
Revenue	9	Program :	service revenue (Part VIII, line	Part VIII, line 2g) JUL 7 2019						o		0
3	10	Investmer	nt income (Part VIII, column (A	N), lines 3, 4, a	id 1/d)			RS-	- 3	32,255.55	32,2	35.94
=	11 (Other reve	enue (Part VIII, column (A), lini	es 5, 6d, 8c, 9	;, 10c ,@⊕ [ŒΝ	, UT		4	16,547.94	79,2	20.39
	12	Total reve	nue-add lines 8 through 11 (r	nust equal Pal	VIII, column	(A), tin	le 12)			0,248.49	124,7	01.33
			id similar amounts paid (Part I							5,344.40	4,5	00.00
		•	oald to or for members (Part I)		•)			0		0
8	1		other compensation, employee	•.		lines 5	5–10)			3,200		0
Expenses	ı		nal fundraising fees (Part IX, c	• • • •	•			ייי בווייי ביי	(2.77-ma)	O		0
<u>.</u>	•		Iralsing expenses (Part IX, col		********		<u>.</u> 0		.05E.50			
ш		•	enses (Part IX, column (A), lin		•	• •]			7,613.99		<u>07.44</u>
		•	enses. Add lines 13-17 (must	•		ne 25)	, .			2,294,39		07.44
		revenue i	less expenses. Subtract line 1	8 from line 12		· ·		Poplani		2,045.90		06.11
sats or slances	00 .	Tatal ass	sto /Bost V. line 451					SeAmmill		rrent Year	End of Year	04.65
S S S S S S S S S S S S S S S S S S S	20		ets (Part X, line 16)			• •			1,42	2,956.53	1,215,5	
Net Ass Fund Bal	21		s or fund balances. Subtract I	ina 21 from line	20	• •	!		9.47	0 055 53	4 245 5	0
_	irt II		ure Block	116 2 1 11011 1111	5 20	<u></u>			1,42	2,956.53	1,215,5	04.15
	_		y. I declare that I have examined this	return lociudino ac	companying sci	hortulos	and state	ements of	and to th	na hest of m	ny knowledne and beli	ef it is
tru	e, correct.	and comple	te Declaration of preparer (other than	officer) is pased o	n all information	of whic	h brebare	er has an	y knowk	edge.	.,	.,
			Pober R M & Jus	e li					$\neg \vdash$	1 JL	LY 2019	
Sig	ın İ	Signa	iture of officer	1,741					Dat	le		
He) RC	BERT R. McOUE, SE	₹ '	TREASU	RER						
			or print name and title	<u></u>	A TOO LOO			•		· · · · · · · · · · · · · · · · · · ·		
P~		<u> </u>	e preparer's name	Preparer's signate	ne		D	ate		Check [אודק אן ך	
Pa		.]								self-emp	loyed	
	eparer e Oniv		ume ▶						Firm	's EIN ▶		
-	o Only	Firm's ad							Pho	ne no.		
Ma	y the IR		this return with the preparer	shown above?	(see instruct	ions)					🗌 Yes 🗌	
			tion Act Notice, see the separa				Cat. I	No. 1128	2Y		Form 990	(2018)

Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Support of the 103d Brigade Engineer Battalion (BEB) (HQ Philadelphia, PA) of the 56th Stryker Brigade, 28th Infantry Division,
	Pennsylvania National Guard.
2	Did the organization undertake any significant program services during the year which were not listed on the
	pnor Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
4	If "Yes," describe these changes on Schedule O.
~	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 \$ 51,260.25 including grants of \$ 39,335.25) (Revenue \$ 11,925.00)
	Finance the the annual anniversary banquet of the First Regiment Infantry of Pennsylvania, which is the ancestral unit of the
	current day 103d Brigade Engineer Battalion (BEB).
4b	(Code:) (Expenses \$ 41,287.87 including grants of \$ 41,287.87) (Revenue \$ 0)
	Finance the storage of the Museum of the First Regiment Infantry of Pennsylvania, while the Armory of the 103d BEB that houses the
	museum, is renovated.
	•••••••••••••••••••••••••••••••••••••••
4c	(Code:) (Expenses \$ 5,000.00 including grants of \$ 5,000.00) (Revenue \$ 0)
	Funds provided to the Commander of the 103d BEB for incidental items not covered by normal Military Budgets (\$2,000.00), plus
	funds provided to the Company Commanders of the 6 organic companies of the 103d BEB (6 X \$500.00 = \$3000.00). The funds
	provided to the Company Commanders are to provide suppliments to the issued rations, and comfort items to the troops for off-duty
	periods during the Annual Training period.
	·
	······································
	<u></u>
Act	Other program services (Describe in Schedule C.)
4d	Other program services (Describe in Schedule O.) (Expenses \$ 5,020,00 including grants of \$ 5,020,00) (Revenue \$ 520,00)
4e	(Expenses \$ 5,020.00 including grants of \$ 5,020.00) (Revenue \$ 520.00) Total program service expenses ▶ \$102,568.12
75	\$102,300.12



Doet IV	Chaaklist of	Doguisa d C	<u> </u>
Part IV	Checklist of	Required Se	chedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		√
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	 		_
	candidates for public office? If "Yes," complete Schedule C, Part I	3_		✓
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>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		√
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		√
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		√
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		√
Ь	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		✓
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		✓
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		✓
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
b	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year? If	12a		<u>✓</u>
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
Ь	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	14b		✓
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	15		✓
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.	16		✓
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)	17		✓
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	18		✓
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	19		✓
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		√
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	\sqcap	√

Part	V Checklist of Required Schedules (continued)			
			Yes	No
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		1
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		√
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		√
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		7
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?	24c		<u>√</u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		√
ь	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		1
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		√
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).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		✓
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		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
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		✓
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	\vdash	√
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		_
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		1
38 Dort	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	✓	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Officer if Schedule O contains a response of flote to any line in this part v		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b c	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	reportable gaming (gambling) winnings to prize winners?	1c		
		Forn	n 990	(2018)

'arτ	Statements Regarding Other IRS Filings and Tax Compliance (continued)								
	Establishment and Taylor Fam. M.O. Taylorikal of Warrand Taylor		Yes	No					
2a	Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 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? b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 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)? b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?								
b		2D		_					
_				<u> </u>					
				-					
	·	3D							
4a		4.		1					
_		48							
D		1]					
50		52							
_	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) b if it wes, "in stiff fed a Form 990-T for this year?" if "No" or line 3b, provide an explanation in Schedule O. 3 in the organization have unrelated business gross income of \$1,000 or more during the year? 5 if "I"ves," list filed a Form 990-T for this year? if "No" or line 3b, provide an explanation in Schedule O. 4 at any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a filmanical account in a foreign country (such as a bank account, securities account, or other financial account)? 5 if "Yes," enter the name of the foreign country: Import of Foreign Bank and Financial Accounts (FBAR). 5 is was the organization of the foreign country (such as a bank account, securities account, or other financial account)? 6 if "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial account)? 7 is a was the organization of the foreign country (such as a bank account, securities account, or other financial account)? 8 if "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial account)? 9 if "Yes," enter the name of the foreign country (such as a bank account, securities accounts of the system of the same and the security of the did any tax as a contribution of underties and the security or securities at a proper than \$100,000, and did the organization shart may receive deductible as chartable contributions? 9 if "Yes," did the organization notify the donor of the value of the goods or services provided? 10 if the organization receive any funds, directly or i								
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-		7a		7					
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С									
•		7c		1					
d	If "Yes," indicate the number of Forms 8282 filed during the year		_ ·						
е	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									
8			ــــــــــــــــــــــــــــــــــــــ						
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12a		12a							
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а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	As the organization a party to a prohibited tax shelter transaction at any time during the tax year? 50 do any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 61 "Yes" to line 5a or 5b, did the organization file Form 8886-T? 22 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 62 Organization solicit any contributions that were not tax deductible as charitable contributions or pifts were not tax deductible? 73 Organizations that may receive deductible contributions under section 170(c). 74 Organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 75 Yes," did the organization notify the donor of the value of the goods or services provided? 76 If "Yes," indicate the number of Forms 8282 filed during the year 77 Ord the organization sell, exchange, or otherwise dispose of tangible personal property for which it was equired to file Form 6282? 76 If "Yes," indicate the number of Forms 8282 filed during the year? 77 Ord the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 78 Ord the organization received a contribution of qualified intellectual property, did the organization file Form 898 required? 79 Ord the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 898 required? 79 Ord the sponsoring organization make any taxable distributions under section 4966? 79 Organization progenization make any taxable distributions under section 4966? 70 Organization fees and capital contributions included on Part VIII, line 12 71 Organization fees and capital contributions included on Part VIII, line 12 71 Organization fees and capital contributions uncluded on Part VIII, line 12 71 Organization fees or shareholders								
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	_		14					
C			٠,						
14a	· · · · · · · · · · · · · · · · · · ·	14a		✓					
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16	· · · · · · · · · · · · · · · · · · ·	16		√					
	It "Yes," complete Form 4720, Schedule O.	L							

Part		h 7b below,	and	for a	"No
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in S	chedule O. S	ee ins	structi	ons.
Sacti	Check if Schedule O contains a response or note to any line in this Part VI on A. Governing Body and Management	· · · · ·	<u>· ·</u>	<u> </u>	
Secti	on A. doverning body and Management			Yes	N-
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	15		res	No
	If there are material differences in voting rights among members of the governing body, or	15	,	,	
	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	15	. '		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation	onship with			
	any other officer, director, trustee, or key employee?		2		1
3	Did the organization delegate control over management duties customarily performed by or under				
	supervision of officers, directors, or trustees, or key employees to a management company or other per		3		<u> </u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 wa		4		✓
5 6	Did the organization become aware during the year of a significant diversion of the organization's a Did the organization have members or stockholders?	issets?.	5	√	
7a	•		6	✓	
ra	Did the organization have members, stockholders, or other persons who had the power to elect one or more members of the governing body?		7a		1
ь	Are any governance decisions of the organization reserved to (or subject to approval by)		10		
	stockholders, or persons other than the governing body?	members,	7b		/
8	Did the organization contemporaneously document the meetings held or written actions underta				
	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	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be				
<u>Cti</u>	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9_	<u> ✓ </u>	
Secu	on B. Policies (This Section B requests information about policies not required by the Inte	rnai Heveni	ue Co		
10a	Did the organization have local chapters, branches, or affiliates?	1	10a	Yes	No ✓
b	If "Yes," did the organization have written policies and procedures governing the activities of sucl		IVa		<u> </u>
•	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu		10ь		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing		11a	√	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				<u></u>
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		12b	1	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy	? If "Yes,"			
40	describe in Schedule O how this was done		12c	✓	
13 14	Did the organization have a written whistleblower policy?	• • • •	13		<u>✓</u>
15	Did the process for determining compensation of the following persons include a review and a	noroval by	14		<u> </u>
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and		- ,		٠,
а	The organization's CEO, Executive Director, or top management official		15a		$\overline{}$
b	Other officers or key employees of the organization		15b		1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	ľ		:	i
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar ar				
	with a taxable entity during the year?	- I	16a		✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to e		.*	4,3	3,
	participation in joint venture arrangements under applicable federal tax law, and take steps to saf	eguard the	400		
Socti	organization's exempt status with respect to such arrangements?	<u> </u>	16b		
17	List the states with which a copy of this Form 990 is required to be filed None				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 99	7 and 990-T			
.0	(3)s only) available for public inspection. Indicate how you made these available. Check all that app		1060		J 1 (U)
	☐ Own website ☐ Another's website ☐ Upon request ☑ Other (explain in Schedul	•			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, or	=	rest r	olicy	, 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 b	ooks and rec	ords	>	
	Robert R. McQue, Sr, Treasurer, 21301 Ann's Choice Way. Warminster, PA., 18974-3344 215-394-840	1			_

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Form **990** (2018)

Form 990 (2018)

Part VII	Compensation of Officers, Director	s, Trustees, Key Employees, Highes	t 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	anız			ompe	nsa	ited any curren	t officer, director	, or trustee.	_
(A) Name and Title	(B) Average hours per week (list any	box, office	unles er and	Pos neck ss pe d a d	(C) Position neck more than o ss person is both d a director/trust			(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	hours for related organizations below dotted line)	ndıvıdua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) Thomas P. Anglim, President	8	1						0	. 0		0
(2) Wesley E. Craig, Vice President	2	√						o	o		<u>o</u>
(3) Philip DeHennis, Vice President	2	1						0	0		0
(4) Chester T. Osinski, Secretary	4	/						0	0		0
(5) Robert R. McQue, Sr., Treasurer	8	1						0	0		0
(6) Mark A. Austin, Trustee	1	1						0			0
(7) Michael R. Benson, Trustee	11	1						0			0
(8) Harry V. Dutchyshyn, Trustee	1	1						0			0
(9) John L. Gronski, Trustee	1	1								-	0
(10) Franklin J. Heim, Jr., Trustee	11	1				-					0
(11) Michael Higgins, Trustee	11										0
(12) Jeffrey H. Hill, Trustee	1	1	ļ								0
(13) Joseph Stivala, Trustee	1	1						9			0
(14) Lawrence J. Volz	11	1									0

•	(A) Name and title		box, office	unles er and	Pos eck s pe d a d	rson	than on the than of the than of the than of the than of the the than of the	n an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F Estim amou oth	ated int of	
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compei from organi and re organiz	the zation elated	
(15)	ames P. Wong, Trustee	1	1						0	0			0
(16)													
(17)													
(18)													
(19)													
(20)										· · · · · · · · · · · · · · · · · · ·			
(21)													
(22)										· · · · · · · · · · · · · · · · · · ·			
(23)													-
(24)										<u> </u>		•	
(25)								_					
1b c	Sub-total				· ·	 	•	>	0	0		_	0
<u>d</u>	Total (add lines 1b and 1c)	not limited	· ·	· ose	· list	 ed :	above	<u>▶</u>	ho received mo	ore than \$100,00	00 of		0
	reportable compensation from the organi	zation >					<u>_</u>		0	·	1	Yes N	0
3	Did the organization list any former of employee on line 1a? If "Yes," complete 5							emp	oloyee, or high	est compensate	ed 3		
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep	portal	ole d	com	per	nsatio						
5	Did any person listed on line 1a receive of for services rendered to the organization'									ation or individu	al		لـــ
Section	n B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization. Repyear.											n's tax	
	(A) Name and business add	ress							(B) Description of se	ervices	(C) Compensat	tion	
None								Nor	ne				0
													_
2	Total number of independent contractor	rs (includin	na hu	ıt n	ot 1	imit	ed to	th	ose listed abo	ove) who			_ _
	received more than \$100,000 of compens	ation from t	he or	gan	ızati	ion l	<u> </u>		0		Form	990 (20	100

Part VIII		Statement of Revenue					
	-	Check if Schedule O contains a response or note			<u> </u>	🗸	
			(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	1a b c	Federated campaigns 1a Membership dues 1b Fundraising events 1c	U 0 U				
	d e f	Related organizations 1d 11,925. Government grants (contributions) All other contributions, gills, grants.	00 0			500 10 - 10 - 1	
	g h	and similar amounts not included above 1,320. Noncash contributions included in lines 1a–1f \$ Total. Add lines 1a–1f	00 0, 13,245.00	I mara di National di Amerika	,	tylen Norre	
ē		Business Code		1	,		
Ē	2a		0	0	0	0	
Æ	b		0	0	0	0	
<u>.</u> 8	C		0	0	0	0	
Ē	ď		0	0	0	0	
SH	e		1 0	0	0		
Frogram Service Revenue		All other program service revenue .	0		0		
ğ	g	Total. Add lines 2a–2f				<u> </u>	
	3	Investment income (including dividends, interest and other similar amounts)		0	0	0	
	4	Income from investment of tax-exempt bond proceeds ▶	497.79		0		
	5	Royalties	0		0		
		(i) Real (ii) Personal	 			ĭ	
	6-	Gross rents	_				
	6a						
l	b	Less: rental expenses					
	C	Rental income or (loss)	-			-	
	d	Net rental income or (loss)	0	0	0	0	
	7a	Gross amount from sales of (i) Securities (ii) Other assets other than inventory					
	b	Less. cost or other basis and sales expenses . Gain or (loss)					
_	d	Net gain or (loss)	0	0	0	0	
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18				, i	
ţ	ь	Less: direct expenses b	\dashv			·	
0		Net income or (loss) from fundraising events .	. 0		0	, , , , , , , , , , , , , , , , , , ,	
		Gross income from gaming activities. See Part IV, line 19			<u>_</u>		
	ь	Less: direct expenses b	7				
		Net income or (loss) from gaming activities	0	0	0	0	
		Gross sales of inventory, less returns and allowances a		,			
	ь	Less: cost of goods sold b					
		Net income or (loss) from sales of inventory	0	0	0	0	
		Miscellaneous Revenue Business Code					
	11a	Principle Wathdrawal	44,220.39	0	0	0	
			35,000.00		-		
	b	Bond Redemptions	30,000.00	ļ		-	
	C	All adhan mana	+				
	d	All other revenue		-	 	i	
	e	Total. Add lines 11a–11d	10,220.00				
	12	Total revenue. See instructions	124,701.33	0	0		
						Form 990 (2018)	

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 respon		e in this Part IX		
Do no	t include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	<u> </u>
8b, 9t	o, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising
1	Grants and other assistance to domestic organizations		- OXPOINGS	general expenses	expenses
	and domestic governments. See Part IV, line 21 .	4,500.00	4,500.00		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	1,000.00	4,300.00		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	0			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		0	0	0
7	Other salaries and wages	. 0	0	0	0
8	Pension plan accruals and contributions (include	0	0	0	0
	section 401(k) and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	0	0	0	0
11	Fees for services (non-employees)				
a	Management	0	. 0	0	0
Þ	Legal	0	0	0	0
S C	Accounting	0	0	0	0
d	Lobbying	0	0	0	0
e f	Investment management fees	0		47.050.04	0
g	Other. (If line 11g amount exceeds 10% of line 25, column	17,358.24	0	17,358.24	0
9	(A) amount, list line 11g expenses on Schedule O.)	59.93	6	59.93	0
12	Advertising and promotion	39.93		0	0
13	Office expenses	0	0	0	0
14	Information technology	0	0	0	0
15	Royalties	0	0	0	0
16	Occupancy	O	0	0	0
17	Travel [0	0	0	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	9,350.03	0	9,350.03	0
20	Interest	0	0		0
21	Payments to affiliates	5,000.00	5,000.00	0	0
22	Depreciation, depletion, and amortization .	0	0	0	0
23	Insurance	0	0	0	0
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.)				
а	Annual Anniversary Banquet	51,260.25	51,260.25	0	
b	Regimental Museum Storage	41,287.87	41,287.87		0
c	Veterans Day Luncheon	520.00	520.00	0	
d		0	0	0	
e	All other expenses	0	<u> </u>	0	
25	Total functional expenses. Add lines 1 through 24e	132,807.47	102,568.12	30,239.35	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)				

30

31

32 0

33

ol

1,215,504.18

1,215,504.18

1.215.504.18 Form 990 (2018)

0

0

1,422,956.53

1,422,956.53

1,422,956,53

Form 990 (2018) Page 11 **Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 139.846.71 126.252.89 Savings and temporary cash investments 2 2 0 3 0 3 0 4 ol 4 n Loans and other receivables from current and former officers, directors, 1.07 0.0 trustees, key employees, and highest compensated employees. 0 5 n 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 instructions). Complete Part II of Schedule L 6 0 0 7 0 0 Я Inventories for sale or use 8 0 0 9 Prepaid expenses and deferred charges . 9 ol 0 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10b 10c Less: accumulated depreciation 0 0 Investments—publicly traded securities 11 1,293,109.82 11 1,089,251.29 12 Investments - other securities. See Part IV, line 11 . . . 12 0 0 13 Investments—program-related, See Part IV, line 11 13 ol 0 14 14 0 0 15 Other assets. See Part IV, line 11 0 15 0 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 1,422,956.53 16 1,215,504.18 17 Accounts payable and accrued expenses 17 0 0 18 18 0 0 19 19 0 0 20 20 Tax-exempt bond liabilities 0 0 21 Escrow or custodial account liability, Complete Part IV of Schedule D. 21 0 0 Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 0 0 23 Secured mortgages and notes payable to unrelated third parties . . . 0 23 0 24 Unsecured notes and loans payable to unrelated third parties . . . 0 24 0 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 0 0 26 Total liabilities. Add lines 17 through 25 . 26 o 0 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and ۲, Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 n 0 28 0 28 0 29 0 29 0 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building, or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds.

Total liabilities and net assets/fund balances .

30

31

32

33

34

Par	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)			711.28
2	Total expenses (must equal Part IX, column (A), line 25)		132,	807.44
3	Revenue less expenses. Subtract line 2 from line 1		-8,0	096.16
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4		1,422,9	956.53
5	Net unrealized gains (losses) on investments		(190,0	34.18
6	Donated services and use of facilities			
7	Investment expenses		17,3	358.24
8	Prior period adjustments			C
9	Other changes in net assets or fund balances (explain in Schedule O)			59.93
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))		1,215,5	<u>504.18</u>
Part	XII Financial Statements and Reporting			_
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>		;⊔
, 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.		Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	T. AVIL	1
b	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 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	2b		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
c	separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			T
_	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		1
	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?	3a		1
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.	3b		
		Forr	n 990	(2018)

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

Open to Public Inspection

*Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

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

Name of the organization

THE FIRST REGIMENT INFANTRY OF PENNSYLVANIA

Employer identification number

23-6272333

Part III. Line 4d - Donations to organizations with similar interests with The First Regiment Infantry of Pennsylvania. 2nd PA. Regiment \$1000,
Gearity Post 315, American Legion \$1000, USO of Philadelphia \$2000, HQ BN 28th ID for deployment \$500, and Union League of Philadelphia
Veterans Day Luncheon \$520. Total \$5,020.
PART VI, SECTIONA, LINE 5 - The 103d Brigade Engineer Battalion hosts a museum of The First Regiment Infantry of Pennsylvania that
includes artifacts of ancestral and succeeding units. The armory where the battalion is headquartered is undergoin renovation. The museum
artfactsmust be removed, stored, and returned professionally. The Corporation of The First Regiment Infantry of Pennsylvania is funding this.
Part VI, SECTION A, LINE 6 - The Corporation has voting members (Trustees) and non-voting members who are authorized to enter into
discussions, and make recommendations, but have no part in making decisions.
PART VI, SECTION A, LINE 9
Thomas P. Anglim, 1110 Tintern Drive, Ambler, PA., 19002
Wesley E. Craig, 1615 Brent Road, Oreland, PA., 19075
Philip DeHennis, 157 Delmont Avenue, Warminster, PA., 18974
Chester T. Osınski, 892 Phillips Road, Warminster, PA., 18974-2765
Mark A. Austin, 3705 Woodridge Drive, Harrisburg, PA., 17110
Michael R. Benson, 105 Magnolia Place, North Wales, PA., 19454
Harry V. Dutchyshyn, 928 Luzerne Street, Johnstown, PA., 15905
John L. Gronski, 2400 Nowlen Street, Lebenon, PA., 17042
Franklin J. Heim, Jr., 772 Chickory Trail, Mullica Hill, NJ., 08062-2020
Michael Higgins, 9109 Greenfield Lane, Clinton, MD., 20735
Jeffrey H. Hill, 2508 Belmont Avenue, Ardmore, PA., 19003-2617
Joseph Stivala, 28 Harding Avenue, Mt. Ephriam, NJ., 08059
Lawrence J. Volz, 101 Beach Drive, Seaside Park, NJ., 08752
James P. Wong, 1134 Cumberland Road, Abington, PA., 19001
PART VI, SECTION B, Line 11a After completion of the Form 990, before the form is submitted, copies are distributed electronically to the
Board of Trustees for review.

Schedule	O (Form	990 00	990-F71	(2018)
SCHEUUIE	O IFOIL	1 220 01	330-62/	(2010)

Name of the organization	Employer identification number
FIRST REGIMENT INFANTRY OF PENNSYLVANIA	23-6272333
PART VI, SECTION B, LINES 12b & 12c - During the annual meeting of the corpostion, in March of each	year, the President reviews the
Conflict of Interest Policy, and each member of the corporation is given the opportunity to disclose an	y non-complience with the policy.
PART VI, SECTION C, LINES 18 & 19 - No Public Monies are involved on the operations of the corporat	ion, therefore the public has no interes
in the records of the corporation.	
PART VIII, LINE 1d - \$11,925.00 are the net funds received from the attendees of the Annual Dinner.	
PART VIII, LINE 1f - \$800.00 are the funds received from non-corporation member guests who attended	the Annual December, Holiday
Dinner Meeting; \$520.00 are the funds received from attendees at the Veterans Day Luncheon hosted by	by the Union League of Philadelphia.
PART VIII, LINE 3 - \$31,299.07 Investment Dividends, and \$12.05 Checking Account Interest.	
PART VIII, LINE 4 - \$337.50 US Bond Interest, and \$160.27 Checking Account Interest (Account that rec	raives Rand proceeds)
PART VIII, LINE 4-4337.30 05 Bond Interest, and 4 today onedwing Account Interest (Account that rec	terves bond proceeds/
PART IX, LINE 1 - \$1000.00 to the 2nd Pennsylvania Regiment (Reenactors), \$1000.00 to the Gearity An	nerican Legion Post No. 315, \$2000.00
to the USO of Philadelphia, and \$500.00 to HQ 28 DIV, to support mobilization activities.	
PART IX, LINE 13 - \$110.00 for Safety Deposit Box Rental, \$113.15 for postage for meeting notices, \$48	.00 to BB&T Bank for service charges,
and \$1,600.00 each to the Secretary and the Treasurer for estimated partial reimbursement for use of p	ersonally owned computers and
printers, and the consumption of toner, ink, paper, and envelopes, plus the provision of file space to re	etain records of the corporation, since
the corporation does not maintain a physical office, and all members are non-paid volunteers.	
PART X1, LINE 9 - Several investments held by Relience Trust Compant are in foreign stocks. The amo	unt shown is the taxes collected on
these stocks.	
PART XI, LINES 2a - 3a - No Federal Awards are involved in corporate funds. An internal Auditing Com-	mittee, with the Secretary as chair, one
Trustee, and one non-Trustee, audits the funds annually, and reports the results to the entire corporati	on.