(Rev. January 2020)

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Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2019

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

<u> </u>	For the	2019 calend	dar year, or tax year beginning	JANUARY1	, 2019, and end	ling DECEM	BER 31	, 20 19
В	Check If	applicable.	C Name of organization THE FIR	ST REGIMENT INFANTE	RY OF PENNSYLV			loyer identification number
	Address	change	Doing business as	23-6272333				
	Name ch	nange	Number and street (or P.O. box	E Telephone number				
	Initial ret	um	21301 ANN'S CHOICE WAY	215-394-8401				
	Final retu	m/terminated	City or town, state or province, o	country, and ZIP or foreign p	ostal code			
\equiv	Amended	d return	WARMINSTER, PENNSYLVA				G Gros	s receipts \$ 68,405.65
$\bar{\Box}$	Application	on pending	F Name and address of principal of		M. PRESIDENT	H(a) is this a o		for subordinates? Yes No
_			1110 TINTERN LANE, AMBLE		,	1		ites included? Yes No
	Tax-exen	not status:			1947(a)(1) or 527			list. (see instructions)
j	Website	· •				H(c) Group e		•
.		organization: 🗸	Corporation Trust Associ	ation ☐ Other ▶	L Year of for			of legal domicile PA
P	art I	Summar		anon Doner-	12.102.011011	1321	I W Glate	or legal dofficite PA
_			cribe the organization's miss	sion or most significan	t activities: Supp	ort of the 103d B	rigado S	Engineer Rattation
•			Philadelphia, PA) of the 56th S		•••••			
Accivities & Governance	ł :	Throf fud.	imadespina, FA) of the soth s	in yker brigade, zoni ini	and y Division, Pe	iiiis yivailia ivalic	nai Gua	<u> </u>
Ĕ	2	Check this	box ► ☐ if the organization	discontinued its open	ations or dispose	d of more than	25%	fite not preste
Š	1		voting members of the gove	•	=	d of more than	3	1
9			independent voting member	• • • • • •	•	ь	4	15
88	1		er of individuals employed	•	• •	υ,	5	15
Ę	1		er of volunteers (estimate if	•	rait v, iiie zaj		6	0
<u>6</u>			ated business revenue from		no 12		7a	0
•			ed business taxable income			7	7b	0
	<u> </u>	iver uniterati	ed business taxable income	TOTT TOTT SO		Prior Yea		Current Year
		Contributio	ns and grants (Part VIII, line	1h) (C)	, C) 		
evenue				. 1001 1111	1 6 2020 : C	<u> </u>	,245.00 0	
Ven			rvice revenue (Part VIII, line	-a, I.C.,				
ě			income (Part VIII, column (A		· . · . · . · . · . · . · . · . · · ·		,235.94	
			nue (Part VIII, column (A), line				,220.39	
			ue-add lines 8 through 11 (n				,701.33	···
			similar amounts paid (Part I		3)	ļ <u>-</u>	,500.00	1,250.00
		-	id to or for members (Part I)				0	<u> </u>
8	ı		ner compensation, employee	•		ļ	0	0
Ë			I fundraising fees (Part IX, c			MESSAGE SERVICE TO	0	0
Expenses	i .		aising expenses (Part IX, col	• • • • • • • • • • • • • • • • • • • •	0		Production of the second	
	1	•	nses (Part IX, column (A), lin		(A) !! - OC)		,307.44	110,166.61
		-	ises, Add lines 13-17 (must				,807.44	
_	19	Hevenue les	ss expenses. Subtract line 1	8 from line 12			,106.11	9,271.49
d Balances		.				Beginning of Curr		End of Year
Sele			s (Part X, line 16)			1,215	,504.15	1,356,370.17
			ies (Part X, line 26)				0	0
			or fund balances. Subtract li	ine 21 from line 20	· · · · · · · · · · · · · · · · · · ·	1,215	,504.15	1,356,370.17
	rt II	Signatur						
Una	der penalti	ies of perjury, i	declare that I have examined this repeated that I have examined this repeated that I have examined this repeated that I have examined the repeated that I have examined this repeated the repeated that I have examined the repeated the repeated that I have examined the repeated	eturn, including accompany officer) is based on all inform	ing schedules and sta nation of which prepa	itements, and to the irer has any knowled	best of n lae.	ny knowledge and belief, it is
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le	re		BERT R. McQUE, SF	R. TREAS	UKEK			
	1	Type or	print name and title					Parisi
a	id	Print/Type (preparer's name	Preparer's signature		Date	Check [
	eparer	. <u>L</u>					self-emp	illyeu
_		Firm's name	9 ▶	 _		Firm's	EIN ▶	<u> </u>
	e Only	Firm's addr		·		Phone	no.	
lay	the IRS	discuss th	is return with the preparer s	shown above? (see ins	tructions)	<u> </u>	<u>· · ·</u>	. Yes No
				te instructions		No. 11282Y		Form 990 (2019)



<u>P</u> art	Statement of Program Service Accomplishments
	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.
	Pennsylvania National Guard.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported
4a	(Code:) (Expenses \$ 42.308.90 including grants of \$ 32,420.61) (Revenue \$ 9,888.29)
	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 \$ 39,772.56 including grants of \$ 39,772.56) (Revenue \$)
	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.
	<u></u>
40	(Code:) (Expenses \$ 5,000.00 including grants of \$ 5,000 00) (Revenue \$)
70	unds provided to the Commander of the 103d BEB for incidental items not covered by normal Military Budgets (\$2,000.00), plus
	unds 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.
	perious during the Annual Training periou.
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4d	Other program services (Describe on Schedule O.)
70	(Expenses \$ 2,171.00 including grants of \$ 2,171.00) (Revenue \$ 0)
4e	Total program service expenses ► \$76,364.17

_	90 (2019)		ı	Page 3
Part	IV Checklist of Required Schedules		,	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	'	1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		7
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		1
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? If "Yes," complete Schedule C, Part II	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		1
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? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	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		1
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 donor-restricted endowments or in 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, VII, 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		-
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	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		1
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? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a		✓_
	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	12b		√
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		√
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	140		
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		✓_
	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		1
20a	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?

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II .

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

20b

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		1
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		1
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
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		1
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		1
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	√	
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		1
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? 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		1
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		1
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		1
33 34	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		1
35a	or IV, and Part V, line 1	34 35a		1
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		V
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	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	1	
Part				
			Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
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			ļ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		-
-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	$\overline{}$		
		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)?			١,
h		4a		✓
b	If "Yes," enter the name of the foreign country ►	1 1		
Ea	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	<u>-</u>		ا
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	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		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		1	
	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		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	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		1
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		
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			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1		
11	Section 501(c)(12) organizations. Enter:			ĺ
а	Gross income from members or shareholders	ì	<i>'</i>	
b	Gross income from other sources (Do not net amounts due or paid to other sources	į	1	ļ
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	—- ·	
b	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.	1	l	1
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note: See the instructions for additional information the organization must report on Schedule O.		\neg	
b	Enter the amount of reserves the organization is required to maintain by the states in which	4		- (
	the organization is licensed to issue qualified health plans			Į
С	Enter the amount of reserves on hand	1		ł
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	\dashv	<u> </u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	``	\dashv	
15	excess parachute payment(s) during the year?	15		/
	If "Yes," see instructions and file Form 4720, Schedule N.			-
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
10	If "Ves " complete Form 4720. Schedule O			-

Part VI

	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.			tions
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O	,		
b	Enter the number of voting members included on 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?	2		
3	Did the organization delegate control over management duties customarily performed by or under the direct	-		V
J	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		./
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	7	_
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	<u> </u>		
_	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		✓
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	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
Soot:	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9	✓	
Secu	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		NI-
10a	Did the organization have local chapters, branches, or affiliates?	100	Yes	No
_	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10a		
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		_	1
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	<u></u>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	7	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13	_	
14	Did the organization have a written document retention and destruction policy?	14		<u> </u>
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		$\overline{}$
b	Other officers or key employees of the organization	15b		√
	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?			_
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		
Secti	on C. Disclosure			
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), 990, and 990-(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☐ Upon request ☑ Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	finter	est p	olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and re-	cords	>	
	Robert R. McQue, Sr, Treasurer, 21301 Ann's Choice Way. Warminster, PA., 18974-3344 215-394-8401			

Form	990	(2019)	

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aue	

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. See instructions for the order in which to list the persons above.

Check this box if neither the organization no	r any relate	d org	anız	zatio	on c	ompe	nsa	ted any current	officer, director,	or trustee
(A) Name and title	(B) Average			Pos neck		e than o		(D) Reportable	(E) Reportable	(F) Estimated amount
	hours per week (list any hours for related lorganizations below dotted line)	office				Highest compensated employee		reportable compensation from the organization (W-2/1099-MISC)	reportable compensation from related organizations (W-2/1099-MISC)	of other compensation from the organization and related organizations
(1) Thomas P. Anglim, President	8	1	1					О	o	0
(2) Wesley E. Craig, Vice President	2	1					.	0	0	0
(3) Philip DeHennis, Vice President	2	1						0	0	0
(4) Chester T. Osinski, Secretary	4	1						o	0	0
(5) Robert R. McQue, Sr., Treasurer	8	1						o	0	0
(6) Mark A. Austin, Trustee	1	1						0	0	0
(7) Michael R. Benson, Trustee	1	√						o	0	0
(8) Harry V. Dutchyshyn, Trustee	1	1						0	0	0
(9) Franklin J. Heim, Jr., Trustee	1	√						0	0	0
(10) Michael Higgins, Trustee	1	√						0	0	0
(11) Jeffrey H. Hill, Trustee	1	√						0	0	0
(12) Joseph Stivala, Trustee	1	1						0	0	0
(13) James P. Wong, Trustee	1	1						0	0	0
(14)										

Part	VI Section A. Officers, Directors,	rustees,	Keyl	2m	pto	yee	s, an	rd t	lighest Compe	ensated-Emplo	oyees-(continued)
						C)			<u> </u>	<u> </u>	
	(A)	(B)	,	-4 -4		ition			(D)	(E)	(F)
	Name and title	Average					e than o		Reportable	Reportable	Estimated amount
		hours	office	er and		lirect	or/trus	tee)	compensation	compensation	of other
		per week (list any	우콩	J.	₽	6	en H	Fo	from the organization	from related organizations	compensation from the
		hours for	dire	1	Officer	Key employee	ploy	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	
		related organizations	다 교	OS.	Ĭ .	팋	e c	7			related organizations
		below	land	Ti,		yee	履				
		dotted line)	Individual trustee or director	Institutional trustee			Highest compensate employee				
							卺				
(15)											
						L.	<u> </u>				
(16)	•										
(17)		ļ									
(40)			ļ		_			_			
(18)		ļ									
(40)											<u> </u>
(19)											
(20)	· · · · · · · · · · · · · · · · · · ·			_	<u> </u>	-				<u> </u>	
(20)	•••••••	.	 								
(21)				_	_			-			
12.17			ł		}						
(22)					_	\vdash	-	\vdash			
<u> </u>											
(23)				-			 	_			
39/		ļ					l ,				
(24)	-			-			-				
3=.:/											
(25)								H		-	
3											
1b	Subtotal		<u> </u>		•	Ь.			0		0
С	Total from continuation sheets to Part	VII, Sectio	n A					▶	0		
	Total (add lines 1b and 1c)							▶	0	(0
2	Total number of individuals (including but				list	ed a	above	e) wi	ho received more	e than \$100,000	
	reportable compensation from the organi	zation 🕨							0		
										· -	Yes No
3	Did the organization list any former of	officer, dire	ctor,	tru	ste	e, k	ey ei	mple	oyee, or highes	t compensated	
	employee on line 1a? If "Yes," complete \$	Schedule J	for su	ıch .	ındı	vidu	ıal	٠.			3 🗸
4	For any individual listed on line 1a, is the	sum of rep	oortab	ole d	com	per	nsatio	n ar	nd other comper	nsation from the	•
	organization and related organizations	greater that	an \$1	50,	000	? //	f "Yes	s," (complete Sched	dule J for such	,
	ındıvıdual										4 🗸
	Did any person listed on line 1a receive o										
	for services rendered to the organization?	? If "Yes," c	omple	ete .	Sch	edu	ıle J f	or s	uch person .		5 🗸
	on B. Independent Contractors										
1	Complete this table for your five high	est compe	ensate	ed i	ınde	per	ndent	CO	ntractors that r	eceived more	than \$100,000 of
	compensation from the organization. Repo	ort compen	sation	tor	the	ca	enda	yea	ar ending with or	within the orgai	nization's tax year
	(A) Name and business add	race							(B)	1000	(C)
B1 c	rame and business addi						-		Description of serv	1000	Compensation
None								Non	ne		0
		_									
-											
									- .		
2	Total number of independent contracts	re (moludin	o bu	t n:	ot !	ımı*	od to	+h-	oso listed share	o) who	i
	Total number of independent contractor received more than \$100,000 of compensations.							(110		e) WIIO	Ţ
	received more than wroo, ood or compensi	unon nom t		التعو	ده۱	VIII			0	. 1	

Part VIII Statement of Revenue

Total revenue Related or or evenue Plantate or evenue Plantat		VIII	Check if Schedule O contains a resp	onse or note to an	y line in this Pa	art VIII,,,,		🗹
B			·		(A)	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
Section Sect	इ इ	1a	Federated campaigns 1	a 0				
Section Sect	ra in	b	Membership dues 1	0				
Section Sect	ع ق	C	Fundraising events 1	0				
Section Sect	ifts	d	Related organizations 1	9,888.29			•	4
Section Sect	î, E	е		9 0				
Section Sect	Sis	f		_	•		,	
Section Sect	it i			<u>f</u> o				
Section Sect	草豆	g						
Section Sect	an So	h	<u> </u>	3 19 0				
20 10 10 10 10 10 10 10		 	Total. Add lines 1a-11	Business Code	9,888.29			
9 Total. Add lines 2a-2f	e	2a						
3 Investment income (including dividends, interest, and other similar amounts) 35,507.18 0 0 0 0 0 0 0 0 0	ه ڲٙ	l _		-		-		
3 Investment income (including dividends, interest, and other similar amounts) 35,507.18 0 0 0 0 0 0 0 0 0	S	С						
3 Investment income (including dividends, interest, and other similar amounts) 35,507.18 0 0 0 0 0 0 0 0 0	am eve	d						
3 Investment income (including dividends, interest, and other similar amounts) 35,507.18 0 0 0 0 0 0 0 0 0	ρğ	е						
3 Investment income (including dividends, interest, and other similar amounts)	Ĕ	f	All other program service revenue					
Other similar amounts		g			0			
4 Income from investment of tax-exempt bond proceeds ► 14.17 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		3	The state of the s	i i				
Second S		١	· · · · · · · · · · · · · · · · · · ·					0
Ba		l	DU	_				
Ba Cross rental expenses Ba Ba Ba Ba Ba Ba Ba B		3			0	0	0	0
Description		- Ra	 	(ii) r ersonar	İ			
C Rental income or (loss) EC								į
Page								
Tall Gross amount from sales of assets other than inventory Tall Securities (ii) Other Sales of assets other than inventory Tall Securities (iii) Other Sales of assets other than inventory Tall Securities Tall T		l .		•	0	0	0	0
Sales of assets other than inventory 7a		7a	Gross amount from (i) Securities	(II) Other				
b Less cost or other basis and sales expenses . 7b c Gain or (loss) . 7c d Net gain or (loss)								
and sales expenses		l	other than inventory 7a					•
8a Gross income from fundraising events (not including \$	ne	b			i			
8a Gross income from fundraising events (not including \$	/en							
8a Gross income from fundraising events (not including \$	Re	C		1 1				
events (not including \$ of contributions reported on line 1c). See Part IV, line 18	e	_	_		0	0	0	0
1c). See Part IV, line 18	Oth	8a	events (not including \$					
b Less: direct expenses .								
C Net income or (loss) from fundraising events ▶ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			· · · · · · · · · · · · · · · · · · ·					
9a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses	l	-	· · · · · · · · · · · · · · · · · · ·					
activities. See Part IV, line 19 9a				vents . ▶	0		0	0
b Less: direct expenses		9a		.				
C Net income or (loss) from gaming activities . ▶ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Ì	h				ľ		}
10a Gross sales of inventory, less returns and allowances 10a b Less cost of goods sold 10b c Net income or (loss) from sales of inventory . ▶ 0 0 0 0 0 Business Code Principle Wathdrawal 40,278.46 0 0 0 0 Bond Redemptions 35,000.00 0 0 0 All other revenue			· ——					
returns and allowances 10a				1		<u>_</u>	<u>_</u>	-
b Less cost of goods sold		100		a]
C Net income or (loss) from sales of inventory . Business Code 11a Principle Wathdrawal		b		0				}
11a Principle Wathdrawal 40,278.46 0 0 0 0 0 0 0 0 0	ļ		-	tory	0	0	0	0
12 Total revenue. See instructions	2			Business Code				
12 Total revenue. See instructions	ie e	11a	Principle Wathdrawal		40,278 .46	0	0	0
12 Total revenue. See instructions	aŭ eur	b	Bond Redemptions			0	0	0
12 Total revenue. See instructions	<u>`</u> § §	С		.				
12 Total revenue. See instructions	SE E							
				▶				
- Ann		12	i otal revenue. See instructions .	<u> </u>	120,688.10	0	0	0 Form 990 (2019)

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must complete the second				
	Check if Schedule O contains a response			· · · · · · · · · · · · · · · · · · ·	
	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 .	1000.00	1000.00		' ,
2	Grants and other assistance to domestic individuals. See Part IV, line 22	250.00	250.00		
3	Grants and other assistance to foreign	Ì	Ì		
	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	0	0	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	o	0
7	Other salaries and wages	0	0	0	
8	Pension plan accruals and contributions (include		`	<u>-</u>	<u>~</u>
	section 401(k) and 403(b) employer contributions)	0	o	o	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	0	0	0	0
11	Fees for services (nonemployees):				
а	Management	o	o	o	0
b	Legal	0	0	0	0
С	Accounting	О	0	0	0
d	Lobbying	0	0	0	0
е	Professional fundraising services See Part IV, line 17	0			0
f	Investment management fees	8,457.66	0	8,457.66	0
g	Other (If line 11g amount exceeds 10% of line 25, column		l		
	(A) amount, list line 11g expenses on Schedule O)	0	0	0	0
12	Advertising and promotion	0	0	0	0
13	Office expenses	3,255.00	0	3,255.00	0
14	Information technology		0	0	0
15	Royalties	0	0	0	0
16	Occupancy	0	0	0	0
17 18	Travel	0	0	0	0
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	9,451.49	0	9,451 49	0
20	Interest	0	0 5 400 00	0	0
21	Payments to affiliates	5,400.00	5,400.00	. 0	0
22 23	Depreciation, depletion, and amortization Insurance	500.00	0	0	0
		500.00		500.00	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses on 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	43,079. 90	43,079.90	0	0
b	REGIMENTAL MUSEUM STORAGE	39,772 56	39,772 56	0	0
c	MEMORIAL FOR A DECEASED MEMBER	250.00	0	250.00	
d		0	0	0	0
e	All other expenses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24e	111,416.61	89,502.46	21,914.15	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)				

E	art X	Balance Sheet Check if Schedule O contains a response or note to any line in this Par	t X		П
		2.1000 to control of control of the	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	0	1	(
	2	Savings and temporary cash investments	99,289.13	2	67,913.46
Assets	3	Pledges and grants receivable, net	0	3	(
	4	Accounts receivable, net	0	4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .			0
	7	Notes and loans receivable, net	0		
	8	Inventories for sale or use			
As	9	Prepaid expenses and deferred charges	0		
-	10a	Land, buildings, and equipment: cost or other		- 	<u> </u>
	IVA	basis Complete Part VI of Schedule D 10a	;	1	
	ь	Less: accumulated depreciation 10b 0		10c	0
	11	Investments—publicly traded securities	1,116,215.05		1,288,856.71
	12	Investments—other securities. See Part IV, line 11	1,110,213.03		1,288,830.71
	13	Investments—program-related. See Part IV, line 11			
	14	Intangible assets			
	15	Other assets See Part IV, line 11	0		
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,215,504.18		1,356,370.17
	17	Accounts payable and accrued expenses	0		0
	18	Grants payable	0	18	
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	22	
Ŀia	23	Secured mortgages and notes payable to unrelated third parties			0
	24	Unsecured notes and loans payable to unrelated third parties	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			
	26	Total liabilities. Add lines 17 through 25	0	25	0
Net Assets or Fund Balances		Organizations that follow FASB ASC 958, check here ▶ □ and complete lines 27, 28, 32, and 33.		20	
	27	Net assets without donor restrictions	0	27	0
	28	Net assets with donor restrictions	0	28	0
		Organizations that do not follow FASB ASC 958, check here ► ✓ and complete lines 29 through 33.			
	29	Capital stock or trust principal, or current funds	1,215,504.18	29	1,356,370.17
iğ.	30	Paid-in or capital surplus, or land, building, or equipment fund	0	30	0
455	31	Retained earnings, endowment, accumulated income, or other funds	0	31	0
et.	32	Total net assets or fund balances	1,215,504.18		1,356,370.17
Z	33	Total liabilities and net assets/fund balances	1,215,504.18	33	1,356,370.17
					Form 990 (2019)

Pari						
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1			120,6	88.10
2	Total expenses (must equal Part IX, column (A), line 25)			111,416.61		
3	Revenue less expenses. Subtract line 2 from line 1	3		9,271.49		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		1,215,504.18		
5	Net unrealized gains (losses) on investments	5		133,748.91		
6	Donated services and use of facilities	6		0		
7	Investment expenses	7			1,893.55	
8	Prior period adjustments	_8_				0
9	Other changes in net assets or fund balances (explain on Schedule O)	9			2	260.86
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10		1	,356,3	70.17
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII	<u>.</u>		<u>.</u> ,		\overline{V}
			_	_	Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 📗 Other		<u> </u>			l
	If the organization changed its method of accounting from a prior year or checked "Other," ex	kplaın	ın	- 1		
_	Schedule O.		<u> </u> _	_		لب
2a	· · · · · · · · · · · · · · · · · · ·			2a		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			1		
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis				لبِد	
b	·				✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			. •]	÷, •	, • '
	separate basis, consolidated basis, or both:				,	' 1
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		نہ ۔			ائسا
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of					
	the audit, review, or compilation of its financial statements and selection of an independent accounta			2c		
	If the organization changed either its oversight process or selection process during the tax year, ex- Schedule O.	plain	on	ŀ	í	- 1
0-			. -			
За	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?			,		
L			·	a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a			ь		
	required addit or addits, explain why on schedule of and describe any steps taken to undergo such a	uuits	3	<u>니</u>	000	

Form **990** (2019)

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.

2019

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

THE FIRST REGIMENT INFANTRY OF PENNSYLVANIA

Employer identification number 23-6272333

Part III. Line 4d - Donations to a organization with similar interests with The First Regiment Infantry of Pennsylvania. 2nd PA. Regiment \$1000.
Purchase of Rings, and a master mold for soldiers of the year of the 103BEB.
PART VI, SECTION A, 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
artfacts must 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. Osinski, 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
Franklın 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
James P. Wong, 1134 Cumberland Road, Abington, PA., 19001
PART VI, SECTION B, Line 11b After completion of the Form 990, before the form is submitted, copies are distributed electronically to the
Board of Trustees for review.
PART VI, SECTION B, LINES 12b & 12c - During the annual meeting of the corporation, 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 any non-complience with the policy
PART VI, SECTION C, LINES 18 & 19 - No Public Monies are involved on the operations of the corporation, therefore the public has no interest
in the records of the corporation.

Name of the organization	Employer identification number		
FIRST REGIMENT INFANTRY OF PENNSYLVANIA	23-6272999		
PART VIII, LINE 1d - \$9,888.29 are the net funds received from the attendees of the Annual Dinner.			
PART IX, LINE 1 - \$1000.00 Donated to the 2nd Pennsylvania Regiment (Reenactors), who perform the hist	ory of the First Regiment Infantry		
of Pennsylvania, at the Annual Dinner.			
Part IX, LINE 13 - \$55.00 for postage, \$48.00 to BB&T Bank for service charges, and \$1,600.00 each to the S	Secretary and Treasurer for		
estimated partial reimbursement for use of personally owned computers and printers, and the consumption	n of toner, ink, paper, and		
envelopes, plus the provision of file space to retain records of the corporation, since the corporation does	not maintain a physical office,		
and all members are non-paid volunteers.			
Part XI, LINE 9 - \$250.00 charged by Relience Trust (Now ALDEN Trust) to prepare Tax Forms, and \$10.86	paid in Tax for a foreign stock held		
by ALDEN Trust.			
Part XI1, LINES 2b, and 3a - No Federal Awards are involved in corporate funds. An internal Auditing Comm	nittee, with the Secretary as chair,		
one Trustee, and one non-Trustee, audits the funds annually, and reports the results to the entire corporat	ion.		