

Form **990**  
Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047  
**2018**  
Open to Public Inspection

**A For the 2019 calendar year, or tax year beginning 01-01-2018, and ending 12-31-2018**

- B** Check if applicable
- Address change
  - Name change
  - Initial return
  - Final return/terminated
  - Amended return
  - Application pending

**C** Name of organization  
INTREPID MUSEUM FOUNDATION INC

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite  
WEST 46TH ST 12TH AVE

City or town, state or province, country, and ZIP or foreign postal code  
NEW YORK, NY 10036

**D** Employer identification number  
13-3062419

**E** Telephone number  
(212) 245-0072

**G** Gross receipts \$ 52,113,821

**F** Name and address of principal officer  
SUSAN MARENOFF-ZAUSNER  
WEST 46TH ST 12TH AVE  
NEW YORK, NY 10036

**H(a)** Is this a group return for subordinates?  Yes  No

**H(b)** Are all subordinates included?  Yes  No  
If "No," attach a list (see instructions)

**H(c)** Group exemption number ▶

**I** Tax-exempt status  501(c)(3)  501(c) ( ) ◀ (insert no )  4947(a)(1) or  527

**J** Website: ▶ WWW INTREPIDMUSEUM ORG

**K** Form of organization  Corporation  Trust  Association  Other ▶

**L** Year of formation 1982

**M** State of legal domicile NY

**Part I Summary**

**1** Briefly describe the organization's mission or most significant activities  
SEE SCHEDULE O

**2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets

<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	22
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	22
<b>5</b> Total number of individuals employed in calendar year 2018 (Part V, line 2a)	506
<b>6</b> Total number of volunteers (estimate if necessary)	173
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	154,151
<b>7b</b> Net unrelated business taxable income from Form 990-T, line 34	214,833

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h)	5,046,255	5,362,948
<b>9</b> Program service revenue (Part VIII, line 2g)	15,038,942	19,564,207
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,196,728	2,537,687
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5,520,272	7,003,935
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	26,802,197	34,468,777
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	79,602
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0	0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	13,543,804	20,834,987
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0	0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,566,431		
<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	10,126,325	14,035,818
<b>18</b> Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	23,670,129	34,950,407
<b>19</b> Revenue less expenses Subtract line 18 from line 12	3,132,068	-481,630
	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16)	99,739,001	94,644,581
<b>21</b> Total liabilities (Part X, line 26)	22,010,727	21,706,020
<b>22</b> Net assets or fund balances Subtract line 21 from line 20	77,728,274	72,938,561

**Part II Signature Block**

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

**Sign Here**

Signature of officer: \*\*\*\*\* Date: 2019-11-13

SUSAN MARENOFF-ZAUSNER PRESIDENT  
Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name: PKF O'CONNOR DAVIES LLP  
Preparer's signature: [Signature]  
Date: 2019-11-13  
Check  if self-employed  
PTIN: P00543209  
Firm's name: PKF O'CONNOR DAVIES LLP  
Firm's EIN: 27-1728945  
Firm's address: 665 FIFTH AVENUE  
Phone no: (212) 286-2600  
NEW YORK, NY 10022

**Part III 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

AS AN EDUCATIONAL AND CULTURAL NONPROFIT INSTITUTION, THE INTREPID MUSEUM PROMOTES THE AWARENESS AND UNDERSTANDING OF HISTORY, SCIENCE AND SERVICE THROUGH ITS COLLECTIONS, EXHIBITIONS AND PROGRAMMING IN ORDER TO HONOR OUR HEROES, EDUCATE THE PUBLIC AND INSPIRE OUR YOUTH THE MUSEUM'S MISSION IS REALIZED IN THREE WAYS 1) DISPLAYING COLLECTIONS AND EXHIBITIONS THAT OFFER INTERPRETATIONS OF AMERICAN AND GLOBAL HISTORY, 2) PROVIDING INNOVATIVE SCIENCE, HISTORY AND LEADERSHIP PROGRAMS FOR STUDENTS, AND 3) PLAYING AN INTEGRAL ROLE IN THE LOCAL AND NATIONAL COMMUNITY BY HOSTING A WIDE RANGE OF PUBLIC EVENTS FOR YOUTH, FAMILIES, SENIOR CITIZENS, VETERANS, AND THE MEN AND WOMEN IN SERVICE TO OUR NATION THE MUSEUM'S MISSION IS AT THE CORE OF ITS STRATEGIC PLAN AND GUIDES ALL DECISION-MAKING, WHETHER PROGRAMMATIC, CURATORIAL, OPERATIONAL OR FINANCIAL

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O

**4** Describe the 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 \$ 20,886,850 including grants of \$ ) (Revenue \$ 18,873,039 )

See Additional Data

**4b** (Code ) (Expenses \$ 6,410,905 including grants of \$ 79,602 ) (Revenue \$ 691,168 )

See Additional Data

**4c** (Code ) (Expenses \$ 2,361,440 including grants of \$ ) (Revenue \$ )

See Additional Data

(Code ) (Expenses \$ 113,269 including grants of \$ ) (Revenue \$ )

INTREPID FALLEN HEROES FUND AND INTREPID RELIEF FUND THE MUSEUM PROVIDES PROGRAM SUPPORT AND ADMINISTRATIVE SERVICES TO TWO 501(C)3 ORGANIZATIONS WITH RELATED MISSIONS THE INTREPID FALLEN HEROES FUND (IFHF) AND THE INTREPID RELIEF FUND (IRF), BOTH OF WHICH WERE ORIGINALLY FOUNDED BY THE INTREPID MUSEUM FOUNDATION THE MUSEUM'S SUPPORT INCLUDES BUT IS NOT LIMITED TO PERSONNEL, OFFICE SPACE AND FACILITY SERVICES, AS WELL AS TECHNOLOGY, DATA AND COMMUNICATIONS SYSTEMS SUPPORT, ALL AT NO COST

**4d** Other program services (Describe in Schedule O )  
(Expenses \$ 113,269 including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses ▶ 29,772,464

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 22 regarding organizational requirements, lobbying, political activities, and financial reporting.

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

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

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . .	1a	126
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .	1b	0
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	

<p><b>2a</b> 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 . . . . .</p>	<b>2a</b>	506			
<p><b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b>If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</p>			<b>2b</b>	Yes	
<p><b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .</p>			<b>3a</b>	Yes	
<p><b>b</b> If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O . . . . .</i></p>			<b>3b</b>	Yes	
<p><b>4a</b> 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)? . . . . .</p>			<b>4a</b>		No
<p><b>b</b> If "Yes," enter the name of the foreign country <b>▶</b> _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)</p>					
<p><b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .</p>			<b>5a</b>		No
<p><b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>			<b>5b</b>		No
<p><b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .</p>			<b>5c</b>		
<p><b>6a</b> 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? . . . . .</p>			<b>6a</b>		No
<p><b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .</p>			<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>					
<p><b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .</p>			<b>7a</b>	Yes	
<p><b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .</p>			<b>7b</b>	Yes	
<p><b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .</p>			<b>7c</b>		No
<p><b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year . . . . .</p>	<b>7d</b>				
<p><b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>			<b>7e</b>		No
<p><b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .</p>			<b>7f</b>		No
<p><b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .</p>			<b>7g</b>		
<p><b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .</p>			<b>7h</b>		
<b>8 Sponsoring organizations maintaining donor advised funds.</b>					
Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .					
			<b>8</b>		
<p><b>9a</b> Did the sponsoring organization make any taxable distributions under section 4966? . . . . .</p>			<b>9a</b>		
<p><b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . .</p>			<b>9b</b>		
<b>10 Section 501(c)(7) organizations.</b> Enter					
<p><b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 . . . . .</p>	<b>10a</b>				
<p><b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	<b>10b</b>				
<b>11 Section 501(c)(12) organizations.</b> Enter					
<p><b>a</b> Gross income from members or shareholders . . . . .</p>	<b>11a</b>				
<p><b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) . . . . .</p>	<b>11b</b>				
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?					
<p><b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year</p>	<b>12b</b>				
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>					
<p><b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O</p>			<b>13a</b>		
<p><b>b</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 . . . . .</p>	<b>13b</b>				
<p><b>c</b> Enter the amount of reserves on hand . . . . .</p>	<b>13c</b>				
<p><b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? . . . . .</p>			<b>14a</b>		No
<p><b>b</b> If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O . . . . .</i></p>			<b>14b</b>		
<p><b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . .</p>			<b>15</b>		No
<p><b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O . . . . .</p>			<b>16</b>		No

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



Section A. Governing Body and Management

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

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

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

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed NY, AL, AR, CA, CO, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NC, OH, OR, PA, RI, SC, TN, UT, VA, WV, WI, NM

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply [X] Own website [X] Another's website [X] Upon request [ ] Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records PATRICIA BEENE CHIEF FINANCIALADMIN OFFICER WEST 46TH ST 12TH AVE NEW YORK, NY 10036 (646) 381-5250

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

Table with 6 main columns: (A) Name and Title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation.

Summary rows for Section A: 1b Sub-Total, 1c Total from continuation sheets to Part VII, Section A, 1d Total (add lines 1b and 1c).

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 19

Table with 3 columns: Question, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Lists contractors like CH2M HILL and PKF O'CONNOR DAVIES LLP.

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



**Part VIII Statement of Revenue**

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b>			
	<b>b</b> Membership dues . . . . .	<b>1b</b>			
	<b>c</b> Fundraising events . . . . .	<b>1c</b>	1,657,551		
	<b>d</b> Related organizations . . . . .	<b>1d</b>			
	<b>e</b> Government grants (contributions)	<b>1e</b>	1,026,558		
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	2,678,839		
	<b>g</b> Noncash contributions included in lines 1a - 1f \$ _____ 27,802				
	<b>h Total.</b> Add lines 1a-1f . . . . .		5,362,948		

<b>Program Service Revenue</b>			Business Code				
	<b>2a</b> ADMISSIONS		900099	18,262,085	18,262,085		
<b>b</b> MEMBERSHIPS		900099	610,954	610,954			
<b>c</b> MUSEUM TOURS & EXHIBITS		900099	510,006	510,006			
<b>d</b> EDU PGMS & WORKSHOPS		900099	181,162	181,162			
<b>e</b> _____							
<b>f</b> All other program service revenue							
<b>g Total.</b> Add lines 2a-2f . . . . .			19,564,207				

<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .			730,077			730,077
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . .						
	<b>5</b> Royalties . . . . .						
	<b>6a</b> Gross rents	(i) Real	(ii) Personal				
		5,331,011	49,935				
	<b>b</b> Less rental expenses	0	10,784				
	<b>c</b> Rental income or (loss)	5,331,011	39,151				
	<b>d</b> Net rental income or (loss) . . . . .			5,370,162		39,151	5,331,011
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		19,102,120	152,500				
	<b>b</b> Less cost or other basis and sales expenses	17,447,010	0				
	<b>c</b> Gain or (loss)	1,655,110	152,500				
	<b>d</b> Net gain or (loss) . . . . .			1,807,610			1,807,610
	<b>8a</b> Gross income from fundraising events (not including \$ 1,657,551 of contributions reported on line 1c) See Part IV, line 18 . . . . .	<b>a</b>	156,000				
	<b>b</b> Less direct expenses . . . . .	<b>b</b>	187,250				
<b>c</b> Net income or (loss) from fundraising events . . . . .			-31,250			-31,250	
<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . .	<b>a</b>						
<b>b</b> Less direct expenses . . . . .	<b>b</b>						
<b>c</b> Net income or (loss) from gaming activities . . . . .							
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>						
<b>b</b> Less cost of goods sold . . . . .	<b>b</b>						
<b>c</b> Net income or (loss) from sales of inventory . . . . .							
Miscellaneous Revenue	Business Code						
<b>11a</b> CONCESSIONS	900099	1,397,592				1,397,592	
<b>b</b> INSURANCE SETTLEMENT	900099	134,536				134,536	
<b>c</b> SPONSORSHIP REVENUE	900099	115,000		115,000			
<b>d</b> All other revenue . . . . .		17,895				17,895	
<b>e Total.</b> Add lines 11a-11d . . . . .			1,665,023				
<b>12 Total revenue.</b> See Instructions . . . . .			34,468,777	19,564,207	154,151	9,387,471	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>				
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	27,102	27,102		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	52,500	52,500		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	3,314,762	2,832,563	306,091	176,108
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	13,646,059	11,660,964	1,260,100	724,995
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	129,126	117,328	7,908	3,890
<b>9</b> Other employee benefits	2,182,292	1,970,716	140,654	70,922
<b>10</b> Payroll taxes	1,562,748	1,405,114	104,243	53,391
<b>11</b> Fees for services (non-employees)				
<b>a</b> Management				
<b>b</b> Legal	199,880	164,542	34,459	879
<b>c</b> Accounting	87,670		87,670	
<b>d</b> Lobbying	114,894		114,894	
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	138,552		138,552	
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	629,152	513,501	17,999	97,652
<b>12</b> Advertising and promotion	1,471,484	1,384,707	17,881	68,896
<b>13</b> Office expenses	769,931	662,991	78,836	28,104
<b>14</b> Information technology	386,851	281,930	77,646	27,275
<b>15</b> Royalties				
<b>16</b> Occupancy	1,734,392	1,537,246	179,826	17,320
<b>17</b> Travel	120,917	106,157	10,904	3,856
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	97,671	85,749	8,808	3,114
<b>20</b> Interest	325,326	268,275	55,631	1,420
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	5,020,948	4,136,290	862,641	22,017
<b>23</b> Insurance				
<b>24</b> 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.)				
<b>a</b> UBI TAX PAYMENT	50,354	44,207	4,541	1,606
<b>b</b> EVENT & PROGRAM EXPENSE	1,448,405	1,180,982	24,251	243,172
<b>c</b> REPAIRS AND MAINTENANCE	692,592	667,133	22,738	2,721
<b>d</b> CONTRACT SVC/ RENTAL EQ	336,553	312,297	18,245	6,011
<b>e</b> All other expenses	410,246	360,170	36,994	13,082
<b>25</b> Total functional expenses. Add lines 1 through 24e	34,950,407	29,772,464	3,611,512	1,566,431
<b>26</b> 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	6,695,505	<b>1</b>	6,777,432
	<b>2</b> Savings and temporary cash investments . . . . .	6,205,185	<b>2</b>	6,321,947
	<b>3</b> Pledges and grants receivable, net . . . . .	2,506,091	<b>3</b>	1,785,949
	<b>4</b> Accounts receivable, net . . . . .	2,358,198	<b>4</b>	1,983,648
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> 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 . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	204,837	<b>9</b>	189,294
	<b>10a</b> Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	<b>10a</b> 119,216,995		
	<b>b</b> Less accumulated depreciation	<b>10b</b> 68,340,626	52,903,460	<b>10c</b> 50,876,369
	<b>11</b> Investments—publicly traded securities . . . . .	28,865,725	<b>11</b>	26,709,942
	<b>12</b> Investments—other securities See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments—program-related See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets See Part IV, line 11 . . . . .		<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .		99,739,001	<b>16</b>	94,644,581
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	3,051,035	<b>17</b>	3,344,281
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	3,368,069	<b>19</b>	3,035,986
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	10,037,500	<b>23</b>	9,865,000
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> 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 . . . . .	5,554,123	<b>25</b>	5,460,753
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .		22,010,727	<b>26</b>
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets	46,639,831	<b>27</b>	43,773,349
	<b>28</b> Temporarily restricted net assets . . . . .	8,691,482	<b>28</b>	6,751,692
	<b>29</b> Permanently restricted net assets	22,396,961	<b>29</b>	22,413,520
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
<b>33</b> Total net assets or fund balances . . . . .		77,728,274	<b>33</b>	72,938,561
<b>34</b> Total liabilities and net assets/fund balances . . . . .		99,739,001	<b>34</b>	94,644,581

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	34,468,777
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	34,950,407
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	-481,630
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	77,728,274
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-4,308,083
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	72,938,561

**Part XII Financial Statements and Reporting**

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

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

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

**Software ID:****Software Version:****EIN:** 13-3062419**Name:** INTREPID MUSEUM FOUNDATION INC

Form 990 (2018)

**Form 990, Part III, Line 4a:**

EXHIBITS AND MUSEUM SERVICES IN FY 2018, THE MUSEUM CONTINUED ITS STRONG ATTENDANCE, ONCE AGAIN HOSTING MORE THAN 1 MILLION VISITORS. THE MUSEUM SERVICES DEPARTMENT CONTINUED ITS SUPPORT OF THE OVERALL VISITOR EXPERIENCE IN THE BOX OFFICE AND THROUGHOUT THE COMPLEX. THE SUBMARINE GROWLER EXPERIENCE WAS EXPANDED IN MAY WITH THE ADDITION OF "A VIEW FROM THE DEEP: THE SUBMARINE GROWLER & THE COLD WAR" THIS NEW EXHIBITION LOCATED ON THE PUBLIC PIER WAS INTEGRATED INTO THE QUEUING FOR VISITORS PRIOR TO EXPERIENCING THE SUBMARINE. [SEE SCHEDULE O FOR CONTINUATION] MUSEUM SERVICES STAFF FACILITATED THIS PROCESS WHICH WAS FREE TO THE PUBLIC AND PROVIDED ACCESS TO THOSE WHO WERE PREVIOUSLY UNABLE TO EXPERIENCE GROWLER'S HISTORY. OVER 350,000 VISITORS EXPERIENCED THIS NEW ADDITION THROUGHOUT FY2018. THE MUSEUM SERVICES DEPARTMENT ALSO EXPANDED THE TRAINING CURRICULUM TO INCLUDE BEHIND THE SCENES TALKS WITH KEY MUSEUM STAKEHOLDERS TO EXPAND THE LEVEL OF ENGAGEMENT FOR FRONT LINE STAFF AND IMPROVE THE VISITOR EXPERIENCE. VOLUNTEERSTHE EXPANSION AND ENHANCEMENT OF OUR MUSEUM VOLUNTEER PROGRAM CONTINUED IN FY 2018. VISITOR FEEDBACK REPORTED INTERACTION WITH OUR VOLUNTEERS AS A FAVORITE ASPECTS OF THE MUSEUM EXPERIENCE. OUR ACTIVE AND GROWING TEAM OF VOLUNTEERS, MANY OF WHOM ARE VETERANS AND SOME OF WHOM ARE INTREPID FORMER CREW MEMBERS, OFFERED THE PUBLIC A UNIQUE PERSPECTIVE ON OUR EXHIBITS AND ARTIFACTS, WITH STORIES AND ANECDOTES FROM THEIR OWN SERVICE TO OUR COUNTRY. IN FY 2018, 155 VOLUNTEERS GAVE MORE THAN 21,118 HOURS OF THEIR TIME TO THE MUSEUM. IN ADDITION TO WORKING WITH THE PUBLIC, VOLUNTEERS ALSO ASSISTED IN THE INFORMATION TECHNOLOGY, INSTITUTIONAL ADVANCEMENT, MEMBERSHIP AND EXHIBITS DEPARTMENTS, AND APPROXIMATELY 13 DEDICATED VOLUNTEERS HELPED OUR AIRCRAFT RESTORATION STAFF SAND, PAINT, WASH AND DUST THE HISTORICAL AIRCRAFT. VOLUNTEERS ASSISTED WITH AN INCREASING NUMBER OF EDUCATION PROGRAMS, SUCH AS INTREPID AFTER HOURS, TEACHER PROFESSIONAL DEVELOPMENT WORKSHOPS, AND PROGRAMS FOR CHILDREN WITH AUTISM. A DEDICATED TEAM OF VOLUNTEERS CONTINUED THE WORK OF TRANSCRIBING THE MUSEUM'S INTERVIEWS OF FORMER CREW MEMBERS OF INTREPID AND GROWLER FOR ITS ORAL HISTORY PROJECT. TO DATE, VOLUNTEERS HAVE ASSISTED IN TRANSCRIBING MORE THAN 155 OF THE 6090-MINUTE INTERVIEWS, EACH OF WHICH TAKES APPROXIMATELY EIGHT TO TWELVE HOURS OF WORK. VOLUNTEER STAFF ALSO CONTINUED TO PARTNER WITH AMAC (ASSOCIATION FOR METRO-AREA AUTISTIC CHILDREN) AS WELL AS THE COOKE SCHOOL, TO PROVIDE OPPORTUNITIES FOR SOME OF THEIR STUDENTS TO GAIN WORK EXPERIENCE AND DEVELOP SOCIAL AND SPEAKING SKILLS. IN ADDITION, THE VOLUNTEER STAFF WORKED WITH THE BRONX INTERNATIONAL HIGH SCHOOL TO PROVIDE VOLUNTEER OPPORTUNITIES FOR A SMALL NUMBER OF THEIR STUDENTS, MANY OF WHOM HAVE ONLY BEEN IN THE UNITED STATES FOR A FEW YEARS, IN ORDER TO IMPROVE THEIR PUBLIC SPEAKING AND ENGLISH LANGUAGE SKILLS AS WELL AS PREPARE THEM FOR COLLEGE OR A WORK ENVIRONMENT. GROUPS IN FY 2018 THE INTREPID MUSEUM'S GROUP SALES OFFERINGS INCLUDED A VARIETY OF PROGRAMS FOR MANY DIFFERENT GROUP TYPES. THESE PROGRAMS WERE ALIGNED WITH OUR MISSION AND OFFERED OUR GUESTS THE OPPORTUNITY TO EXPLORE AND LEARN IN AN INFORMAL SETTING. DURING FY 2018, THE MUSEUM OFFERED SPECIALIZED CHILDREN'S BIRTHDAY PARTIES WITH THEMES OF SEA, AIR AND SPACE, CONSISTENT WITH OUR EXHIBITIONS. WE HOSTED 275 BIRTHDAY PARTIES ATTENDED BY OVER 5,060 GUESTS ABOARD INTREPID. OUR OVERNIGHT PROGRAM, OPERATION SLUMBER, SUCCESSFULLY COMPLETED 26 OVERNIGHTS INVOLVING OVER 4,380 CHILDREN AND THEIR PARENTS AND CHAPERONES. DURING FY 2018, WE HOSTED DAY CAMP GROUPS DURING THE SUMMER MONTHS WELCOMING OVER 8,700 CHILDREN AND ADULTS. WE HOSTED OVER 73,000 GUESTS THIS YEAR THROUGH OUR RECEPTIVE OPERATORS AND OVER 4,300 GUESTS VIA OUR TOUR OPERATOR PARTNERS. WE CONTINUED TO HOST YOUTH ORCHESTRAS, BANDS, CHOIRS AND DANCE GROUPS FOR PERFORMANCES ONBOARD, GIVING THEM THE OPPORTUNITY TO HONOR AND INSPIRE BY SHARING THEIR PERFORMANCES WITH MUSEUM GUESTS. THE MUSEUM ALSO HOSTED COMMISSIONING CEREMONIES ON BOARD, WHICH INCLUDED COMPLIMENTARY ADMISSION TO VETERANS AND ACTIVE MEMBERS OF THE MILITARY AND THEIR FAMILIES PRESENT TO CELEBRATE A MILITARY ENLISTMENT OR PROMOTION, AS WELL AS RETIREMENT CEREMONIES. IN FY 2018, WE HOSTED FIVE COMMISSIONING CEREMONIES WITH OVER 200 GUESTS ATTENDING. GROUPS VISITING THE MUSEUM ARE VARIED AND HAVE INCLUDED VISUALLY IMPAIRED GROUPS, HEARING IMPAIRED GROUPS AND GROUPS WITH LEARNING DISABILITIES AND PHYSICAL DISABILITIES, AS WELL AS FAMILIES AFFECTED BY AUTISM. EXHIBITIONSTHE FOLLOWING EXHIBITIONS INCREASED THE VISIBILITY OF MUSEUM ARTIFACTS AND EXPANDED OPPORTUNITIES FOR MUSEUM TOUR GUIDES AND EDUCATORS TO ENHANCE THE VISITOR EXPERIENCE. A VIEW FROM THE DEEP: THE SUBMARINE GROWLER AND THE COLD WAR LONG-TERM EXHIBITION OPENED MAY 11, 2018. 1,900 SQUARE-FOOT EXHIBITION SPACE ON THE PIER ATTENDANCE APPROXIMATELY 350,000 (BETWEEN MAY 11, 2018 AND DECEMBER 31, 2018) THE LONG-TERM EXHIBITION A VIEW FROM THE DEEP EXPLORES THE HISTORY AND DESIGN OF USS GROWLER, ONE OF AMERICA'S FIRST NUCLEAR-MISSILE SUBMARINES. HISTORICAL ARTIFACTS, ORAL HISTORIES AND IMMERSIVE EXPERIENCES OFFER A BEHIND-THE-SCENES LOOK AT LIFE ON BOARD. OPENED IN CONJUNCTION WITH GROWLER'S 60TH COMMISSIONING ANNIVERSARY, A VIEW FROM THE DEEP IS PRESENTED IN A NEWLY-BUILT STRUCTURE ON THE MUSEUM'S PIER. UNLIKE THE SUBMARINE ITSELF, THE EXHIBITION SPACE IS ACCESSIBLE, ALLOWING ALL VISITORS TO IMMERSE THEMSELVES IN THE HISTORY OF GROWLER. THE MUSEUM COLLABORATED WITH NUMBER OF OUTSIDE PARTNERS TO REALIZE A VIEW FROM THE DEEP. CO-CURATOR ALEX WELLERSTEIN, A PROFESSOR AT THE STEVENS INSTITUTE OF TECHNOLOGY, WORKED WITH INTREPID MUSEUM STAFF IN DEVELOPING THE EXHIBITION. THE MUSEUM ALSO PARTNERED WITH SCENE LAB AT THE STEVENS INSTITUTE OF TECHNOLOGY TO CREATE ACCESSIBLE, IMMERSIVE INTERACTIVE ELEMENTS. FUNDING FROM THE INSTITUTE FOR MUSEUM AND LIBRARY SERVICES SUPPORTED THE DEVELOPMENT OF THESE INTERACTIVE EXPERIENCES, AS WELL AS EFFORTS TO COLLECT ORAL HISTORIES THAT FORMED THE BASIS OF THE CONTENT. INTREPID A TO ZAUGUST 14, 2018. JANUARY 13, 2019. 500 SQUARE-FOOT SPACE IN HANGAR 1. ESTIMATED ATTENDANCE 425,000 VISITORS (BETWEEN AUGUST 14, 2018 AND DECEMBER 31, 2018) THE TEMPORARY EXHIBITION INTREPID A TO Z PRESENTED AN ALPHABETIZED COLLECTION OF OBJECTS THAT REVEALED THE EXPERIENCES OF DAILY LIFE ON BOARD THE AIRCRAFT CARRIER INTREPID, WHICH SERVED IN THE U.S. NAVY FROM 1943 UNTIL 1974. THE EXHIBITION OPENED IN CONJUNCTION WITH THE MUSEUM'S CELEBRATION OF THE 75TH COMMISSIONING OF INTREPID. MOST OF THE OBJECTS IN THE EXHIBITION HAD NEVER BEFORE BEEN DISPLAYED. EACH ITEM WAS ACCOMPANIED BY COMMENTARY FROM FORMER CREW MEMBERS, VETERANS OR THE MUSEUM'S CURATORIAL STAFF. THE EXHIBITION INCLUDED DIGITIZED VERSIONS OF INTREPID'S CRUISE BOOKS, WHICH ARE SIMILAR TO YEARBOOKS AND WERE CREATED BY CREW MEMBERS TO REMEMBER THEIR ADVENTURES ON BOARD. THE MUSEUM ALSO ENGAGED AN ILLUSTRATOR TO CREATE THREE TWO-MINUTE ANIMATED FILMS THAT TELL THE STORIES OF INTREPID'S FORMER CREW MEMBERS AND THEIR FAMILIES BASED ON A SELECTION OF ORAL HISTORIES FROM OUR COLLECTION. THE RESULTS OF THIS COLLABORATION TITLED INTREPID ANIMATED WERE ON DISPLAY WITHIN INTREPID A TO Z PERSONAL SPACE. SEPTEMBER 20, 2018. SEPTEMBER 2019. 500 SQUARE-FOOT CASE IN THE PAVILION. ESTIMATED ATTENDANCE >150,000 (BETWEEN SEPTEMBER 20, 2018 AND DECEMBER 31, 2018) WHAT DO A GUITAR PICK, A COPY OF PRIDE AND PREJUDICE AND A STUFFED SNOOPY DOLL HAVE IN COMMON? THEY'VE ALL BEEN TO SPACE AND ARE NOW ON VIEW IN THE MUSEUM'S SPACE SHUTTLE PAVILION. THIS NEW EXHIBITION OFFERS A GLIMPSE INTO THE LIVES OF 11 ASTRONAUTS THROUGH SPECIAL OBJECTS THEY BROUGHT WITH THEM ON MISSIONS. YOU CAN LISTEN TO FORMER ASTRONAUT AND NASA ADMINISTRATOR CHARLES BOLDEN'S FAVORITE TUNES, SEE NICOLE STOTT'S WATERCOLOR WAVES AND GET SENTIMENTAL OVER ELLEN BAKER'S FAMILY KEEPSAKES, TO NAME A FEW. ALL TEXT PANELS WERE CREATED IN BOTH ENGLISH AND SPANISH, THE FIRST TIME BILINGUAL TEXT PANELS HAVE BEEN USED AT THE MUSEUM. ISS VR EXPERIENCE INTERNATIONAL SPACE STATION (ISS) VR EXPERIENCE OPENING NOVEMBER 21, 2018. MID-2019 TAKE A VIRTUAL REALITY TRIP OUT OF THIS WORLD AND VISIT THE INTERNATIONAL SPACE STATION! EVER WANTED TO EXPERIENCE WHAT IT IS LIKE TO WORK, LEARN AND LIVE IN THE MICROGRAVITY ENVIRONMENT OF THE INTERNATIONAL SPACE STATION (ISS)? THIS EXHIBIT ENGAGED AUDIENCES WITH NEW VIRTUAL REALITY TECHNOLOGY THAT BROUGHT THAT EXPERIENCE TO LIFE.

## Form 990, Part III, Line 4b:

EDUCATION THE MUSEUM'S EDUCATION DEPARTMENT SERVED MORE THAN 30,000 INDIVIDUALS THROUGH VARIOUS TYPES OF FORMAL PROGRAMMING IN THE FISCAL YEAR SPANNING JANUARY 1, 2018 DECEMBER 31, 2018 AND TENS OF THOUSANDS MORE THROUGH PUBLIC EDUCATION PROGRAMS SUCH AS TOURS, TALKS AND DEMONSTRATIONS THE MUSEUM OFFERS MULTIDISCIPLINARY, DYNAMIC PROGRAMS FOR SCHOOLS AND FAMILIES, AUDIENCES WITH SPECIAL NEEDS, VULNERABLE GROUPS, VETERANS AND COMMUNITY GROUPS AS WELL AS THE GENERAL VISITING PUBLIC [SEE SCHEDULE O FOR CONTINUATION]PROGRAMS HAPPEN AT THE MUSEUM, IN THE COMMUNITIES OF NEW YORK CITY AND THROUGH DISTANCE LEARNING NATIONALLY AND INTERNATIONALLY THE MUSEUM PRIORITIZES SECURING FUNDING THAT ALLOWS IT TO OFFER MANY EDUCATION PROGRAMS AT NO COST TO STUDENTS AND FAMILIES FROM HIGH-NEED SCHOOLS AND COMMUNITIES A LARGE PERCENTAGE OF THOSE SERVED ARE SPECIAL NEEDS GROUPS, INCLUDING ENGLISH LANGUAGE LEARNERS SCHOOL AND TEACHER PROGRAMS OVER 20,000 PARTICIPANTS FROM K12 SCHOOLS TOOK PART IN EDUCATIONAL EXPERIENCES AT THE MUSEUM PROGRAMS FOCUSED ON CULTURE, SCIENCE AND HISTORY AND WERE ALIGNED WITH THE STATE STANDARDS, THE NEW YORK CITY SCOPE & SEQUENCE AND THE NEXT GENERATION SCIENCE STANDARDS THESE PROGRAMS INCLUDED EXPLORATION OF THE SHIP'S RESTORED HISTORIC SPACES, INQUIRY-BASED DISCUSSIONS, PRIMARY SOURCE ANALYSIS AND DESIGN CHALLENGES STUDENTS VIEWED THE MUSEUM'S HISTORIC AIRCRAFT COLLECTION, DISCUSSED AIRCRAFT DESIGN AND USE, AND ENGAGED IN PHYSICS DEMONSTRATIONS AND EXPERIMENTS TO DISCOVER HOW FLIGHT IS POSSIBLE THEY PARTICIPATED IN SPACE SCIENCE PROGRAMS FOCUSING ON THE SPACE SHUTTLE ENTERPRISE, THE HISTORY OF THE SPACE RACE AND SPACE EXPLORATION IN RELATION TO INTREPID'S OWN HISTORY, CREATED ROBOTIC ARMS, EXPERIENCED SIMULATED MICROGRAVITY, DISCOVERED HOW ASTRONAUTS WORK IN SPACE AND COMPETED IN THEIR OWN RACE TO THE MOON, DISCUSSED WATERWAYS, THE NEED FOR WATER ON A U S NAVY SHIP AND PRESERVATION CHALLENGES FOR A SHIP DOCKED ON THE HUDSON RIVER AND CONDUCTED EXPERIMENTS UTILIZING HYDROMETERS TO TEST SALINITY AND DISCOVER ITS RELATION TO CORROSION A SCHOOL RESIDENCY WAS BEGUN WITH A PUBLIC SCHOOL IN BROOKLYN, BRINGING IN-SCHOOL PROGRAMMING TO THE ENTIRE 4TH AND 5TH GRADES AN ADDITIONAL 5,345 STUDENTS FROM ALL OVER THE UNITED STATES AND FROM MULTIPLE COUNTRIES HAVE EXPERIENCED VIRTUAL TOURS OF MUSEUM SPACES AND COLLECTIONS, LED BY AN EDUCATOR WHOM THEY INTERACT WITH IN REAL TIME THE MUSEUM'S EDUCATION TEAM ALSO ENGAGED MORE THAN 947 STUDENTS WITH PHYSICAL, COGNITIVE OR EMOTIONAL CHALLENGES THROUGH TAILORED PROGRAMS THAT INVOLVED MOVEMENT, SOUND, STORYTELLING, USE OF TOUCH-COLLECTION OBJECTS, PICTURES AND CLOSE EXAMINATION OF ARTIFACTS SUCH AS THE T-34A MENTOR AIRPLANE AND HH-52A SEA GUARDIAN HELICOPTER MANY OF THESE PROGRAMS, PARTICULARLY THOSE FOR STUDENTS WITH AUTISM, INCLUDED A PRE-VISIT EXPERIENCE FOR TEACHERS, MUSEUM EDUCATORS LED FREE AND LOW-COST PROFESSIONAL DEVELOPMENT PROGRAMS FOR OVER 250 TEACHERS OF GRADES PRE-K12 PROGRAMS FOCUSED ON HISTORY AND STEM (SCIENCE, TECHNOLOGY, ENGINEERING AND MATH) THE FORMAT OF THESE OFFERINGS RANGED FROM FULL-DAY EXPERIENCES TO 36 HOUR COURSES APPROVED BY BOTH THE NEW YORK CITY DEPARTMENT OF EDUCATION AND BY THE NEW YORK STATE DEPARTMENT OF EDUCATION FOR PROFESSIONAL DEVELOPMENT CREDIT, THE NECESSARY AMOUNT TO MAINTAIN CREDENTIALING THESE PROGRAMS, IN TURN, BENEFITED 12,500 STUDENTS IN THE CLASSROOM, A FIGURE ESTIMATED USING A MODEL OF 1 TEACHER TO 50 STUDENTS CONSIDERING THAT MANY TEACHERS HAVE MORE THAN TWO CLASSES OF STUDENTS DURING THE DAY, THE NUMBER COULD CONCEIVABLY BE MUCH LARGER IN ADDITION, THE MUSEUM RECEIVED FUNDING FROM THE NATIONAL ENDOWMENT OF THE HUMANITIES (NEH) TO BRING 25 HISTORY AND SCIENCE TEACHERS FROM ACROSS THE NATION TO STUDY THE COLD WAR THROUGH THE COLLECTIONS OF THE MUSEUM FOR A TWO-WEEK NEH SUMMER INSTITUTE IN JULY/AUGUST OF 2018 THE MUSEUM IS ALSO A HUB FOR A NUMBER OF FREE NYC DEPARTMENT OF EDUCATION EVENTS, DURING WHICH STUDENT PROJECTS ARE FEATURED AND TEACHERS, FRIENDS AND FAMILY ARE INVITED TO CELEBRATE THEIR ACHIEVEMENTS THE MUSEUM HOSTED THE DISTRICT 75 STEM FAIR FOR THE SECOND YEAR IN A ROW FOR 800 SPECIAL NEEDS SCIENCE STUDENTS DURING THE STEM RESEARCH SYMPOSIUM MIDDLE AND HIGH SCHOOL STUDENTS PRESENTED TED STYLE TALKS TO THEIR PEERS AND IMMERSED THEMSELVES IN SCHOLARLY CONTENT THE INTREPID MUSEUM IS COMMITTED PARTNERING WITH THE DOE TO CREATE AN EDUCATIONAL AND INSPIRATIONAL SPACE FOR STUDENTS WHERE THEY CAN SHOWCASE THEIR CREATIVE WORK THROUGHOUT THE YEAR IN ORDER TO PROVIDE TIMELY AND RELEVANT SUPPORT TO NEW YORK CITY TEACHERS, MUSEUM EDUCATORS CONTINUED TO ACTIVELY PARTICIPATE IN PROFESSIONAL WORKSHOPS AND TAKE PART IN NEW YORK CITY DEPARTMENT OF EDUCATION TRAINING, PARTNER MEETINGS AND EVENTS THEY ALSO ATTEND PROFESSIONAL NETWORKING GROUPS SUCH AS 100K IN 10, THE NEW YORK CITY MUSEUM EDUCATION ROUNDTABLE AND THE STEM EDUCATION NETWORK YOUTH LEADERSHIP INITIATIVE & CAREER PATHWAY UPPER ELEMENTARY, MIDDLE AND HIGH SCHOOL STUDENTS PARTICIPATED IN THE MUSEUM'S PROPRIETARY YOUTH LEADERSHIP PROGRAMS, CULMINATING IN A FIRST-TIME WORK EXPERIENCE FOR INTERESTED STUDENTS THESE PROGRAMS INCLUDE THE YOUTH LEADERSHIP INSTITUTE @INTREPID (YLI) A YEARLONG PROGRAM SERVING 30 STUDENTS, AND GOALS (GREATER OPPORTUNITIES ADVANCING LEADERSHIP AND SCIENCE) FOR GIRLS, CONSISTING OF AN INTENSIVE, SIX-WEEK SUMMER SCIENCE PROGRAM FOR 50 GIRLS AS WELL AS SCIENCE AND COLLEGE-READINESS FORUMS THROUGHOUT THE YEAR SERVING HUNDREDS OF GOALS ALUMNAE TWO SEPARATE STRANDS OF PAID INTERNSHIPS FOR ALUMNI OF GOALS AND YLI FEED INTO A JUNIOR EDUCATOR POSITION ALLOWING THESE YOUNG ADULTS TO CONTINUE GAINING WORK EXPERIENCE AS THEY MOVE THROUGH THE END OF HIGH SCHOOL AND INTO COLLEGE FOUR OF OUR ALUMNI HAVE NOW MOVED FROM BEING A PAID INTERN INTO A "FIRST RUNG" JOB IN THE EDUCATION DEPARTMENT ON AN HOURLY BASIS WHILE THEY ARE IN COLLEGE ACCESS, VETERAN AND MILITARY FAMILY PROGRAMS PROGRAMS WERE PROVIDED FOR 2,775 PEOPLE WITH COGNITIVE, SENSORY, PHYSICAL OR EMOTIONAL NEEDS, ALONG WITH THEIR FAMILIES OR SUPPORT STAFF PROGRAMS WERE OFFERED REGULARLY DURING WEEKDAYS AND WEEKENDS OFFERINGS INCLUDED AMERICAN SIGN LANGUAGE (ASL)LED PUBLIC TOURS FOR ADULTS, ASL-INTERPRETED SCHOOL PROGRAMS FOR STUDENTS IN GRADES K12, VERBAL DESCRIPTION AND TOUCH TOURS FOR ADULTS WHO ARE BLIND OR HAVE LOW VISION, VERBAL DESCRIPTION AND TOUCH TOURS FOR STUDENT GROUPS, MODIFIED SCHOOL PROGRAMS FOR K12 STUDENTS, PROGRAMS FOR VISITORS WITH DEMENTIA AND THEIR CAREGIVERS, FAMILY PROGRAMS FOR CHILDREN WITH DEVELOPMENTAL OR LEARNING DISABILITIES AND THEIR FAMILIES, AND EARLY MORNING OPENINGS FOR FAMILIES AFFECTED BY AUTISM THE MUSEUM'S ACCESS PROGRAMS ARE DESIGNED TO HONE SOCIAL AND COMMUNICATION SKILLS, AND THEY INCORPORATE ACTIVITIES, TACTILE SUPPORTS, TOUCH-COLLECTION OBJECTS, MUSIC AND PHOTOGRAPHS THE ACCESS TEAM ALSO FACILITATED 32 5 DIRECT SERVICE HOURS FOR 56 CAMPERS DURING THE WEEK-LONG ALL ACCESS MAKER CAMPS WHERE CHILDREN WERE CHALLENGED TO TINKER AND CREATE MILITARY FAMILY PROGRAMS FOR RETURNING VETERANS AND THEIR FAMILIES SERVED 209 PARTICIPANTS ELEVEN VET VIDEO CHATS FOR HOSPITAL BOUND VETERANS WERE HELD FOR 228 PARTICIPANTS, AND 162 VETERANS PARTICIPATED IN INTREPID AFTER HOURS EVENTS DESIGNED JUST FOR THEM IN ADDITION, WE ADDED VETERANS PLUS EVENTS FOR VETERANS AND THEIR ADULT CIVILIAN GUESTS, WHICH SERVED 275 PARTICIPANTS THE TWO PART TIME, PAID POSITIONS CREATED AND STAFFED IN COLLABORATION WITH BIRCH FAMILY SERVICES CONTINUED THROUGH 2018 BUILDING OUR TEAM CAPACITIES AND PROVIDING WORK EXPERIENCE FOR PEOPLE WITH AUTISM, THE HOURS FOR ONE OF THE STAFF MEMBERS WERE INCREASED DUE TO HIS INTEREST AND CAPACITIES COMMUNITY & FAMILY ENGAGEMENT PROGRAMS OVER 4,000 PEOPLE PARTICIPATED IN COMMUNITY PROGRAMS LED BY MUSEUM EDUCATORS AT LIBRARIES, COMMUNITY CENTERS, HOSPITAL SCHOOLS AND COMMUNITY EVENTS PROGRAMS ENGAGED PEOPLE OF ALL AGES AND PROMOTED FAMILY LEARNING THROUGH DEMONSTRATIONS, EXPERIMENTS, DISCUSSIONS AND GUIDED ARTIFACT-BASED LEARNING, WITH A FOCUS ON INTREPID'S HISTORY, AVIATION, WATER AND SPACE SCIENCE IN ADDITION, THE MUSEUM CONTINUED TO WORK WITH NYC DOE HOSPITAL SCHOOLS, AND OFFERED SEVERAL SEVEN TO 10-PART PROGRAMS DELIVERED TO HOMEBOUND SENIOR CITIZENS OVER THE PHONE THROUGH A PARTNERSHIP WITH DOROT WEEKEND FAMILY PROGRAMS SERVED 1,423 PEOPLE THROUGH THE DELIVERY OF 86 PROGRAMS THE 60-MINUTE PROGRAMS INCLUDE A GUIDED, THEMED EXPLORATION OF THE MUSEUM'S HISTORIC SPACES AND EXHIBITIONS AND A CURATED ACTIVITY DESIGNED TO ENGAGE THE ENTIRE FAMILY BY FOSTERING PARTICIPATION AND TEAMWORK PROGRAMS WERE OFFERED ON SATURDAY AND SUNDAY EVERY WEEK IN JULY AND AUGUST AND BIWEEKLY FROM SEPTEMBER TO JUNE, AND WE HAVE MADE AN EXTRA EFFORT TO WORK WITH PARTNERS AT MANY CITY AGENCIES TO REACH DIVERSE AUDIENCES IN EVERY SENSE OF THE WORD

## Form 990, Part III, Line 4c:

TOTAL DAYS OF PROGRAMMING IN FY 2018 44THE MUSEUM PRODUCES POPULAR FESTIVALS THAT ATTRACT FAMILY AUDIENCES FROM NEW YORK CITY AND BEYOND AND BUILD A SENSE OF COMMUNITY ON THE FAR WEST SIDE OF MANHATTAN ADDITIONALLY, THE PROGRAMMING TEAM COLLABORATES WITH HIGH-PROFILE ARTS ORGANIZATIONS TO STAGE MISSION-SPECIFIC PERFORMANCES THAT APPEAL TO NEW AUDIENCES KIDS WEEKFEBRUARY 18, 2018 FEBRUARY 24, 2018TOTAL ATTENDANCE 26,000 [SEE SCHEDULE O FOR CONTINUATION]KIDS WEEK AT THE INTREPID MUSEUM IS AN EXCITING, INDOOR, FAMILY-FRIENDLY FESTIVAL OFFERING A VARIETY OF HANDS-ON ACTIVITIES EXPLORING STEM AND THE ARTS IN UNIQUE WAYS THE FESTIVAL FEATURES COOL SCIENCE DEMOS, LIVE ANIMAL PRESENTATIONS, MUSICAL PERFORMANCES, ARTS AND CRAFTS, SPORTS FUN AND MORE OUR ANNUAL EVENT ALIGNS WITH THE NEW YORK CITY PUBLIC SCHOOLS FEBRUARY WINTER BREAK ALL KIDS WEEK ACTIVITIES ARE FREE WITH MUSEUM ADMISSION KIDS WEEK IS A SEVEN-DAY EVENT FULL OF FUN, FAMILY-FRIENDLY EDUCATION PROGRAMMING DURING KIDS WEEK, VISITORS HAVE THE OPPORTUNITY TO PARTICIPATE IN DOZENS OF FUN-FILLED ACTIVITIES, DEMONSTRATIONS AND HANDS-ON WORKSHOPS, MEET SPECIAL GUESTS, AND WATCH LIVE PERFORMANCES THAT THE WHOLE FAMILY WILL ENJOY THIS YEAR, KIDS WEEK HIGHLIGHTED THAT SCIENCE IS EVERYWHERE! THROUGH THEMED PERFORMANCES AND HANDS-ON ACTIVITIES, KIDS LEARNED ABOUT THE SCIENCE BEHIND THEIR FAVORITE SPORTS AND GAMES, ART, THEATER AND MUSIC, NATURE, ANIMALS AND EVEN OUTER SPACE INTREPID MUSEUM STAFF LED LIVE DEMONSTRATIONS, PLANETARIUM PRESENTATIONS AND THEMED TOUR GUIDE TALKS A LINEUP OF SCIENTISTS CONDUCTED DEMOS AND INTERACTED WITH KIDS TO TALK ABOUT THEIR WORK AND WHAT INSPIRED THEM TO PURSUE THEIR CAREERS OVER 50 PARTNERS PARTICIPATED, INCLUDING STATEN ISLAND YANKEES, CHelsea PIERS, THE NEW YORK JETS, NEW YORK ROAD RUNNERS, BROOKLYN CYCLONES, LEGOLAND DISCOVERY CENTER, KIDVILLE, DAZZLING DISCOVERIES, COCA-COLA, KERBAL SPACE ACADEMY, THE NFL EXPERIENCE, THE AMERICAN BALLET THEATRE, THE NEW VICTORY THEATER, THE GIGGLING PIG ART STUDIO, SYMPHONY SPACE, CORNELL UNIVERSITY 4-H YOUTH DEVELOPMENT ZOOLOGIST JAROD MILLER, FIRST ROBOTICS, STAMFORD MUSEUM & NATURE CENTER, RUBE GOLDBERG, SPACE RACERS, CUNY MEDGAR EVERS COLLEGE AND MORE AN EXCITING LINEUP OF BROADWAY PERFORMANCES WERE LED BY THE CASTS OF ONCE ON THIS ISLAND, SPONGEBOB SQUARE PANTS THE MUSICAL, ANASTASIA AND SCHOOL OF ROCK FAMILIES ALSO ENJOYED LIVE PERFORMANCES BY GAZILLION BUBBLE SHOW, THE VERY HUNGRY CATERPILLAR SHOW, SONIA DE LOS SANTOS, A LATIN CHILDREN'S MUSIC ARTISTS AND SPECIAL APPEARANCES BY POPULAR NICKELODEON CHARACTERS SHIMMER AND SHINE NASA ASTRONAUT PEGGY WHITSON, WHO HAS SPENT MORE TIME IN SPACE THAN ANY OTHER NASA ASTRONAUT AND ANY FEMALE ASTRONAUT WORLDWIDE, TOOK TO THE STAGE TO DISCUSS LIFE ON BOARD THE INTERNATIONAL SPACE STATION AND THE FUTURE OF LONG-TERM SPACE TRAVEL AS HUMANKIND VENTURES TO MARS AND BEYOND NASA SPACEWALK FLIGHT CONTROLLER AND LEAD TRAINER ALLISON BOLLINGER WAS ON HAND WITH REAL SPACESUIT PARTS AND SPACEWALKING TOOLS, AND OFFERED WORKSHOPS ON HOW TO BUILD A SPACE STATION SPACE TELESCOPE SCIENCE INSTITUTE ASTRONOMER JASON KALIRAI TALKED ABOUT THE HUNT FOR EARTH-LIKE PLANETS AND SHARED A GLIMPSE AT OUR NEXT BOLD ADVENTURE WITH THE JAMES WEBB SPACE TELESCOPE FLEET WEEK MAY 23-28, 2018ATTENDANCE 39,000SALUTING OUR MEN AND WOMEN IN UNIFORM, FLEET WEEK IS A WEEKLONG CELEBRATION WITH A VARIETY OF FUN, FAMILY-FRIENDLY ACTIVITIES ON PIER 86 FLEET WEEK FEATURES THE ARRIVAL OF THE SHIPS, THE KICKOFF OF THE MUSEUM'S FREE SUMMER MOVIE SERIES, INTERACTIVE DISPLAYS, TOUR GUIDE TALKS AND OTHER EXCITING EVENTS FLEET WEEK 2018 FEATURED A VARIETY OF DISPLAYS AND HANDS-ON ACTIVITIES FROM THE U S MARINE CORPS, U S COAST GUARD, AIR FORCE AUXILIARY, NEW YORK INSTITUTE OF TECHNOLOGY, CRADLE OF AVIATION, AMERICAN RED CROSS, U S ARMY CORPS OF ENGINEERS, RESTORED AND ANTIQUE MILITARY VEHICLE CLUBS, AND MANY MORE PIER 86 TRANSFORMED INTO A STAGE FOR AN ARRAY OF COOL PERFORMANCES INCLUDING A BROADWAY SHOWCASE WITH FEATURED PERFORMANCES BY THE CASTS OF BEAUTIFUL - THE CAROLE KING MUSICAL, ESCAPE TO MARGARITAVILLE AND SCHOOL OF ROCK, ALONG WITH A SPECIAL PERFORMANCE BY THE LATIN GIANTS OF JAZZ, LED BY INTREPID FORMER CREWMEMBER STEW JACKSON FESTIVITIES ALSO INCLUDED THE FOURTH ANNUAL BATTLE OF THE BIG BANDS, DEMONSTRATIONS BY THE UNITED STATES COAST GUARD SEARCH & RESCUE AND SILENT DRILL TEAMS INTREPID FORMER CREWMEMBERS SHARED STORIES THROUGHOUT THE MUSEUM OTHER ACTIVITIES INCLUDED DEMONSTRATIONS LED BY MUSEUM EDUCATORS AND SPECIAL THEMED TOUR GUIDE TALKS SUMMER MOVIE SERIES MAYAUGUST 2018ATTENDANCE 3,600SPANNING SEVERAL WEEKS EACH SUMMER, THE SUMMER MOVIE SERIES IS A FREE EVENING EVENT IN WHICH FILMS ARE SCREENED ON THE MUSEUM'S FLIGHT DECK SEATING APPROXIMATELY 850 VISITORS, THE FLIGHT DECK SERVES AS THE PERFECT SETTING FOR THE CLASSIC AND POPULAR MOVIES SHOWN DURING THIS PROGRAM THE MOVIE SERIES OPENED WITH THE ANNUAL SCREENING OF TOP GUNTO KICK OFF MEMORIAL DAY WEEKEND THE MOVIE NIGHTS CONTINUED ON A NEW NIGHT FOR THE MUSEUM, HELD ON FRIDAYS THIS YEAR THE FIRST FRIDAY MOVIE WAS ON JUNE 29 AND FEATURED WONDER WOMEN THE SERIES ALSO INCLUDED, FRIDAY THE 13TH SHOWN ON JULY 13, GHOSTBUSTERS ON AUGUST 10, AND FOR THE SECOND YEAR, THE FINAL FILM ON AUGUST 24TH WAS DECIDED BY PUBLIC VOTE THROUGH THE MUSEUM'S SOCIAL MEDIA A SELECTION OF FILMS WERE OFFERED UP FOR VOTE AND THE WINNING FILM WAS DISNEY'S PLANES WESTSIDEATS COMMUNITY FOOD FESTIVAL JUNE 910, 2018ATTENDANCE 9,700 (MUSEUM) 2,500 (PIER ONLY)THE MUSEUM HOSTED THE FIRST ANNUAL WESTSIDEATS, A TWO-DAY OUTDOOR COMMUNITY FOOD FESTIVAL IN PARTNERSHIP WITH W 42ST MAGAZINE AND WELLS FARGO, THE MUSEUM FEATURED 25 LOCAL EATERIES IN HELL'S KITCHEN AND THE WEST SIDE AS THEY SET UP SHOP ON OUR PIER 86 AND OFFERED A SAMPLING OF THEIR LOCAL FARE GUESTS ALSO ENJOYED LIVE MUSIC FROM A VARIETY OF COOL LOCAL BANDS PLAYING THROUGHOUT THE DAY SPACE & SCIENCE FESTIVAL SEPTEMBER 20, 2018 SEPTEMBER 23, 2018ATTENDANCE 23,500SPACE & SCIENCE FESTIVAL WAS A FOUR-DAY, FAMILY-FRIENDLY EVENT THAT IN 2018 CELEBRATED NASA HISTORY AND ITS 60TH ANNIVERSARY, BY LOOKING BACK, AS WELL AS FORWARD TO OUR RETURN TO THE MOON AND BEYOND THEMES FOCUSED ON THE HUMAN SPIRIT OF ADVENTURE, EXPLORATION AND THE HUNT FOR NEW FRONTIERS THE FESTIVAL OFFERED GUESTS A VARIETY OF INTERACTIVE ACTIVITIES, EXHIBITIONS AND SPECIAL GUESTS, INCLUDING LIVE PERFORMANCES FROM PUBLIC SERVICE BROADCASTING, A BRITISH ROCK GROUP WHO PERFORMED BENEATH THE SPACE SHUTTLE, AND MUSIC REIMAGINING THE VOYAGER MISSIONS GUESTS ALSO ENJOYED PRESENTATIONS FROM NASA ASTRONAUT SUNITA WILLIAMS, FORMER NASA ASTRONAUT RICHARD GARRIOTT, ALONG WITH OTHER EXPERT THE WEEK ALSO INCLUDED A FREE FAMILY ASTRONOMY NIGHT, A FREE SCREENING OF STAR WARS THE LAST JEDI ON THE SHIP'S FLIGHT DECK, AND MORE THE MUSEUM COLLABORATED WITH SMITHSONIAN MAGAZINE AND MICROSOFT TO CREATE DEFYING GRAVITY WOMEN IN SPACE, A MIXED REALITY EXPERIENCE FEATURING ASTRONAUT DR MAE JEMISON THAT OPENED DURING SPACE & SCIENCE FESTIVAL THE MUSEUM ALSO WELCOMED A WIDE RANGE OF PARTNERS ALL WEEK LONG, FROM THE U S SPACE & ROCKET CENTER, BROOKLYN ROBOT FOUNDRY, SPACE TELESCOPE SCIENCE INSTITUTE, SPACE GAMES FEDERATION, NASA FLIGHT DIRECTOR ALLISON BOLINGER, NASA MARSHALL SPACE FLIGHT CENTER, SPACE COM, THE NEW YORK INSTITUTE OF TECHNOLOGY, NATIONAL SCIENCE FOUNDATION, AMERICAN SOCIETY OF CIVIL ENGINEERS, CURIOUS-ON-HUDSON, COLUMBIA SPACE INITIATIVE AND SCI-TECH KIDS, 3DUX DESIGN, MEDGAR EVERS COLLEGE CUBESAT NANOSATELLITE LAB, JUPITER JOE'S SIDEWALK ASTRONOMY, THE U S COAST GUARD AUXILIARY, NASA JET PROPULSION LABORATORY, CHANDRA X-RAY OBSERVATORY, KERBAL SPACE ACADEMY AND MORE EACH DAY, INTREPID MUSEUM EDUCATORS AND TOUR GUIDES PROVIDED FREE SPACE-THEMED TOUR GUIDE TALKS AND EDUCATION DEMONSTRATIONS, AS WELL AS HANDS-ON SCIENCE ACTIVITIES FOR KIDS HIGHLIGHTS 1 SHARED STUDIOS PORTAL OUTREACH ACTIVATION WITH NASA FROM A GOLD POP-UP "PORTAL" INSIDE INTREPID'S HANGAR DECK, VISITORS WERE ABLE TO MEET AND INFORMALLY CHAT WITH SPECIAL GUESTS FROM NASA STEVEN LEVIN JOINED FROM ANOTHER "PORTAL" IN LOS ANGELES, NICHOLAS SCOTT FROM NASA AMES USED A PORTAL IN SAN JOSE, AND FROM JOHNSON SPACE CENTER IN HOUSTON, AND NUJOUJ MERANCY, JAMES HUTT, AND MOLLY WHITE, JOINED FROM INSIDE THE NEW MOCK-UP ORION CAPSULE 2 BRITISH BAND PUBLIC SERVICE BROADCASTING KICKED OFF THE FESTIVAL WITH A SOLD-OUT CONCERT WITH 300 ATTENDEES, IN THE SPACE SHUTTLE PAVILION THE PERFORMANCE FEATURED THEIR AWARD-WINNING ALBUM, RACE FOR SPACE, WHICH SAMPLES ORIGINAL NASA RADIO BROADCASTS AND TV FOOTAGE TO CELEBRATE THE ACHIEVEMENTS OF THE 1960'S SPACE RACE

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
KENNETH FISHER ..... CO-CHAIRMAN	5 00 .....	X		X				0	0	0
BRUCE MOSLER ..... CO-CHAIRMAN	5 00 .....	X		X				0	0	0
DENIS A BOVIN ..... VICE-CHAIRMAN	3 00 .....	X		X				0	0	0
CHARLES DE GUNZBURG ..... VICE-CHAIRMAN	3 00 .....	X		X				0	0	0
MARTIN L EDELMAN ..... VICE-CHAIRMAN	3 00 .....	X		X				0	0	0
MEL IMMERGUT ..... VICE-CHAIRMAN	3 00 .....	X		X				0	0	0
RICHARD SANTULLI ..... VICE-CHAIRMAN	1 00 .....	X		X				0	0	0
CHARLES BOLDEN ..... TRUSTEE	1 00 .....	X						0	0	0
GERRY BYRNE ..... TRUSTEE	1 00 .....	X						0	0	0
STEVEN FISHER ..... TRUSTEE	1 00 .....	X						0	0	0



**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
WINSTON FISHER ..... TRUSTEE	1 00 .....	X						0	0	0
THOMAS HIGGINS ..... TRUSTEE	1 00 .....	X						0	0	0
STANLEY S HUBBARD ..... TRUSTEE	1 00 .....	X						0	0	0
KENT L KAROSEN ..... TRUSTEE UNTIL DEC 6 2018	1 00 .....	X						0	0	0
MARK LAPIDUS ..... TRUSTEE	1 00 .....	X						0	0	0
PAMELA LIEBMAN ..... TRUSTEE	1 00 .....	X						0	0	0
JOHN MCAVOY ..... TRUSTEE	1 00 .....	X						0	0	0
LAURA MCDONNELL ..... TRUSTEE	1 00 .....	X						0	0	0
JAMES L NEDERLANDER JR ..... TRUSTEE	1 00 ..... 0 10	X						0	0	0
CHARLES PHILLIPS ..... TRUSTEE	1 00 .....	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
THOMAS F SECUNDA ..... TRUSTEE	1 00 .....	X						0	0	0
FRANCES F TOWNSEND ..... TRUSTEE	1 00 .....	X						0	0	0
DAVID H W TURNER ..... TRUSTEE	1 00 .....	X						0	0	0
SUSAN MARENOFF-ZAUSNER ..... PRESIDENT	50 00 .....			X				585,141	0	23,958
DAVID A WINTERS ..... EXECUTIVE VICE PRESIDENT/SECRETARY	45 00 .....			X				292,614	0	25,982
PATRICIA BEENE-COLASANTI ..... CFO/CAO	3 00 ..... 50 00 .....			X				333,621	0	26,482
MATTHEW WOODS ..... SVP ENGINEERING/FACILITIES	50 00 .....				X			321,980	0	31,783
ELAINE CHARNOV ..... SVP EXHIBITS/EDUCATION	45 00 .....				X			290,261	0	24,482
MARC LOWITZ ..... SVP BUSINESS DEVELOPMENT	45 00 .....				X			264,618	0	32,433
VINCENT FORINO ..... VP, INFORMATION TECHNOLOGY	50 00 .....				X			199,125	0	32,378

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LYNDA KENNEDY ..... VP, EDUCATION & EVALUATION	45 00 .....				X			196,701	0	32,371
MICHAEL ONYSKO ..... VP, MARKETING	45 00 .....				X			179,969	0	33,693
ALEXIS MARION ..... VP, INSTITUTIONAL ADVANCEMENT	45 00 .....				X			192,807	0	13,311
THOMAS COUMBE ..... VP, HUMAN RESOURCES	45 00 .....				X			165,228	0	15,824
LISA YACONIELLO ..... VP, VENUE SALES & EVENTS	40 00 .....					X		157,360	0	9,775
ERICA MAGANTI ..... CREATIVE DIRECTOR	40 00 .....					X		129,331	0	9,422
IRENA TSITKO ..... AVP, GRANTS MGMT & ADMIN	40 00 .....					X		118,885	0	29,363
LAURIE SCOFIELD ..... DIR OF INTERNAL AUDIT	30 00 .....					X		117,607	0	2,563
SHERI LEVINSKY-RASKIN ..... AVP, EDUCATION & EVALUATION	40 00 .....					X		109,397	0	11,091

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
 Attach to Form 990 or Form 990-EZ.  
 Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**2018**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization

INTREPID MUSEUM FOUNDATION INC

Employer identification number

13-3062419

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box )

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ) )
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II )
- 8  A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9  An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university \_\_\_\_\_
- 10  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 11  An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
  - f Enter the number of supported organizations \_\_\_\_\_
  - g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

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

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b>	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")						
<b>2</b>	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b>	The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4</b>	<b>Total.</b> Add lines 1 through 3						
<b>5</b>	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
<b>6</b>	<b>Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>7</b>	Amounts from line 4						
<b>8</b>	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b>	Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b>	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>11</b>	<b>Total support.</b> Add lines 7 through 10						
<b>12</b>	Gross receipts from related activities, etc. (see instructions)					<b>12</b>	

**13 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . .

**Section C. Computation of Public Support Percentage**

<b>14</b>	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	
<b>15</b>	Public support percentage for 2017 Schedule A, Part II, line 14	<b>15</b>	

- 16a 33 1/3% support test—2018.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% support test—2017.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a 10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization
- b 10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	9,192,075	7,921,602	5,331,533	5,046,255	5,362,948	32,854,413
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	18,631,983	18,934,469	21,669,058	15,038,942	19,564,207	93,838,659
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge	447,000	462,000	462,000	308,000	462,000	2,141,000
<b>6 Total.</b> Add lines 1 through 5	28,271,058	27,318,071	27,462,591	20,393,197	25,389,155	128,834,072
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons	505,831	560,056	973,961	618,417	1,081,583	3,739,848
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
<b>c</b> Add lines 7a and 7b	505,831	560,056	973,961	618,417	1,081,583	3,739,848
<b>8 Public support.</b> (Subtract line 7c from line 6 )						125,094,224

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>9</b> Amounts from line 6	28,271,058	27,318,071	27,462,591	20,393,197	25,389,155	128,834,072
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,395,303	4,665,727	5,463,588	4,763,488	6,061,088	25,349,194
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	13,157	10,353	8,913			32,423
<b>c</b> Add lines 10a and 10b	4,408,460	4,676,080	5,472,501	4,763,488	6,061,088	25,381,617
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI )	2,085,126	1,171,615	1,265,329	1,097,014	1,550,023	7,169,107
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12 )	34,764,644	33,165,766	34,200,421	26,253,699	33,000,266	161,384,796
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	77.510 %
<b>16</b> Public support percentage from 2017 Schedule A, Part III, line 15	<b>16</b>	77.190 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2018</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	15.730 %
<b>18</b> Investment income percentage from <b>2017</b> Schedule A, Part III, line 17	<b>18</b>	16.950 %

- 19a 33 1/3% support tests—2018.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶
- b 33 1/3% support tests—2017.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

		Yes	No
<b>1</b>	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
	<b>1</b>		
<b>2</b>	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
	<b>2</b>		
<b>3a</b>	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
	<b>3a</b>		
<b>b</b>	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.		
	<b>3b</b>		
<b>c</b>	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
	<b>3c</b>		
<b>4a</b>	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
	<b>4a</b>		
<b>b</b>	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
	<b>4b</b>		
<b>c</b>	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
	<b>4c</b>		
<b>5a</b>	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
	<b>5a</b>		
<b>b</b>	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	<b>5b</b>		
<b>c</b>	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
	<b>5c</b>		
<b>6</b>	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .		
	<b>6</b>		
<b>7</b>	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	<b>7</b>		
<b>8</b>	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	<b>8</b>		
<b>9a</b>	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .		
	<b>9a</b>		
<b>b</b>	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .		
	<b>9b</b>		
<b>c</b>	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .		
	<b>9c</b>		
<b>10a</b>	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
	<b>10a</b>		
<b>b</b>	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
	<b>10b</b>		

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

		Yes	No
<b>1</b>	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>2</b>	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

**Section C. Type II Supporting Organizations**

		Yes	No
<b>1</b>	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

**Section D. All Type III Supporting Organizations**

		Yes	No
<b>1</b>	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>2</b>	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b>	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b>	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year ( <b>see instructions</b> )		
<b>a</b>	<input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b>	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b>	<input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).		
<b>2</b>	Activities Test <b>Answer (a) and (b) below.</b>		
<b>a</b>	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
<b>b</b>	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>3</b>	Parent of Supported Organizations <b>Answer (a) and (b) below.</b>		
<b>a</b>	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
<b>b</b>	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		



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

- Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Net short-term capital gain	<b>1</b>	
<b>2</b>	Recoveries of prior-year distributions	<b>2</b>	
<b>3</b>	Other gross income (see instructions)	<b>3</b>	
<b>4</b>	Add lines 1 through 3	<b>4</b>	
<b>5</b>	Depreciation and depletion	<b>5</b>	
<b>6</b>	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	<b>6</b>	
<b>7</b>	Other expenses (see instructions)	<b>7</b>	
<b>8</b>	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b>	
<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	<b>1</b>	
<b>a</b>	Average monthly value of securities	<b>1a</b>	
<b>b</b>	Average monthly cash balances	<b>1b</b>	
<b>c</b>	Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e</b>	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)		
<b>2</b>	Acquisition indebtedness applicable to non-exempt use assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	
<b>4</b>	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	
<b>5</b>	Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b>	Multiply line 5 by .035	<b>6</b>	
<b>7</b>	Recoveries of prior-year distributions	<b>7</b>	
<b>8</b>	<b>Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	
<b>Section C - Distributable Amount</b>			Current Year
<b>1</b>	Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>	
<b>2</b>	Enter 85% of line 1	<b>2</b>	
<b>3</b>	Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>	
<b>4</b>	Enter greater of line 2 or line 3	<b>4</b>	
<b>5</b>	Income tax imposed in prior year	<b>5</b>	
<b>6</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>	
<b>7</b>	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

<b>Section D - Distributions</b>	<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ) See instructions	
<b>7 Total annual distributions.</b> Add lines 1 through 6	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ) See instructions	
<b>9</b> Distributable amount for 2018 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

<b>Section E - Distribution Allocations (see instructions)</b>	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2018</b>	<b>(iii) Distributable Amount for 2018</b>
<b>1</b> Distributable amount for 2018 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
<b>3</b> Excess distributions carryover, if any, to 2018			
<b>a</b> From 2013. . . . .			
<b>b</b> From 2014. . . . .			
<b>c</b> From 2015. . . . .			
<b>d</b> From 2016. . . . .			
<b>e</b> From 2017. . . . .			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2018 distributable amount			
<b>i</b> Carryover from 2013 not applied (see instructions)			
<b>j</b> Remainder Subtract lines 3g, 3h, and 3i from 3f			
<b>4</b> Distributions for 2018 from Section D, line 7			
\$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2018 distributable amount			
<b>c</b> Remainder Subtract lines 4a and 4b from 4			
<b>5</b> Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
<b>6</b> Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
<b>7 Excess distributions carryover to 2019.</b> Add lines 3j and 4c			
<b>8</b> Breakdown of line 7			
<b>a</b> Excess from 2014. . . . .			
<b>b</b> Excess from 2015. . . . .			
<b>c</b> Excess from 2016. . . . .			
<b>d</b> Excess from 2017. . . . .			
<b>e</b> Excess from 2018. . . . .			

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

<b>Facts And Circumstances Test</b>

**990 Schedule A, Supplemental Information**

Return Reference	Explanation
SCHEDULE A, PART III, LINE 12, EXPLANATION OF OTHER INCOME	CONCESSIONS - 2014 AMOUNT \$ 719,048 2015 AMOUNT \$ 1,171,615 2016 AMOUNT \$ 1,265,329 2017 AMOUNT \$ 1,097,014 2018 AMOUNT \$ 1,397,592 MISCELLANEOUS INCOME - 2014 AMOUNT \$ 28,208 2018 AMOUNT \$ 969 INSURANCE PROCEEDS - 2014 AMOUNT \$ 1,337,870 2018 AMOUNT \$ 134,536 REIMBURSEMENT - 2018 AMOUNT \$ 16,926

# 990 Schedule A, Supplemental Information

Return Reference	Explanation
PART III, SHORT YEAR EXPLANATION	2017 WAS A SHORT YEAR RETURN FROM 5/1/17 - 12/31/17

**SCHEDULE C**  
(Form 990 or 990-EZ)  
  
Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**  
For Organizations Exempt From Income Tax Under section 501(c) and section 527  
  
▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.  
▶Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

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**2018**  
  
**Open to Public Inspection**

**If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

**If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

**If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then**

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization INTREPID MUSEUM FOUNDATION INC	Employer identification number 13-3062419
--	--

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities (see instructions) \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Yes  No
- 4a Was a correction made?  Yes  No
- b If "Yes," describe in Part IV

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year?  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

**A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

**B** Check  if the filing organization checked box A and "limited control" provisions apply

**Limits on Lobbying Expenditures**  
(The term "expenditures" means amounts paid or incurred.)

(a) Filing organization's totals

(b) Affiliated group totals

**1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)**b** Total lobbying expenditures to influence a legislative body (direct lobbying)**c** Total lobbying expenditures (add lines 1a and 1b)**d** Other exempt purpose expenditures**e** Total exempt purpose expenditures (add lines 1c and 1d)**f** Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

**g** Grassroots nontaxable amount (enter 25% of line 1f)**h** Subtract line 1g from line 1a If zero or less, enter -0-**i** Subtract line 1f from line 1c If zero or less, enter -0-**j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes  No**4-Year Averaging Period Under section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
<b>a</b> Volunteers?		No	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
<b>c</b> Media advertisements?		No	
<b>d</b> Mailings to members, legislators, or the public?		No	
<b>e</b> Publications, or published or broadcast statements?		No	
<b>f</b> Grants to other organizations for lobbying purposes?		No	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?		No	
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
<b>i</b> Other activities?	Yes		114,894
<b>j</b> Total. Add lines 1c through 1i			114,894
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<b>2</b>	
<b>3</b> Did the organization agree to carry over lobbying and political expenditures from the prior year?	<b>3</b>	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members	<b>1</b>	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	<b>2a</b>	
<b>a</b> Current year	<b>2b</b>	
<b>b</b> Carryover from last year	<b>2c</b>	
<b>c</b> Total	<b>3</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>4</b>	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	<b>5</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)		

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
PART II-B, LINE 1	THE FOUNDATION USED LOBBYING SERVICES TO FACILITATE MEETINGS AND SUCH TO SECURE GOVERNMENT GRANTS FOR CAPITAL NEEDS AND PROGRAM SUPPORT

**SCHEDULE D**  
(Form 990)  
  
Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**  
**► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**  
**► Attach to Form 990.**  
**► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No 1545-0047  
**2018**  
**Open to Public Inspection**

**Name of the organization**  
INTREPID MUSEUM FOUNDATION INC

**Employer identification number**  
13-3062419

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

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

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

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

Preservation of land for public use (e g , recreation or education)       Preservation of an historically important land area

Protection of natural habitat       Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Year	
<b>a</b> Total number of conservation easements	<b>2a</b>	
<b>b</b> Total acreage restricted by conservation easements	<b>2b</b>	
<b>c</b> Number of conservation easements on a certified historic structure included in (a)	<b>2c</b>	
<b>d</b> Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	<b>2d</b>	

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

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

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

**6** Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \_\_\_\_\_

**7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$ \_\_\_\_\_

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

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

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

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

**b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

**(i)** Revenue included on Form 990, Part VIII, line 1 ► \$ \_\_\_\_\_

**(ii)** Assets included in Form 990, Part X ► \$ \_\_\_\_\_ 23,862,441

**2** If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

**a** Revenue included on Form 990, Part VIII, line 1 ► \$ \_\_\_\_\_

**b** Assets included in Form 990, Part X ► \$ \_\_\_\_\_



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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- |  | Amount |
|--|--------|
| <b>c</b> Beginning balance             |        |
| <b>d</b> Additions during the year     |        |
| <b>e</b> Distributions during the year |        |
| <b>f</b> Ending balance                |        |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .  Yes  No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . .

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance . . . . .	28,928,387	26,494,747	23,990,233	24,381,065	22,805,039
<b>b</b> Contributions . . . . .	600,000	600,000	600,000	600,000	600,000
<b>c</b> Net investment earnings, gains, and losses	-1,958,014	2,316,275	2,591,024	-359,832	1,546,026
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .	763,734	482,635	686,510	631,000	570,000
<b>f</b> Administrative expenses . . . . .	138,453				
<b>g</b> End of year balance . . . . .	26,668,186	28,928,387	26,494,747	23,990,233	24,381,065

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶ 0 %
  - b** Permanent endowment ▶ 79 370 %
  - c** Temporarily restricted endowment ▶ 20 630 %
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- |  | Yes           | No |
|--|---------------|----|
| <b>(i)</b> unrelated organizations . . . . .   | <b>3a(i)</b>  | No |
| <b>(ii)</b> related organizations . . . . .  | <b>3a(ii)</b> | No |
| <b>b</b> If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . . | <b>3b</b>     |    |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .				
<b>b</b> Buildings . . . . .				
<b>c</b> Leasehold improvements		22,328,737	6,432,392	15,896,345
<b>d</b> Equipment . . . . .		7,797,069	7,086,937	710,132
<b>e</b> Other . . . . .		89,091,189	54,821,297	34,269,892
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) ) . . . ▶				50,876,369

**Part VII Investments—Other Securities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 12 )		

**Part VIII Investments—Program Related.** Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 13 )		

**Part IX Other Assets.** Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15 )	

**Part X Other Liabilities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	11,029
CAPITALIZED LEASE OBLIGATION	514,727
DUE TO FEDERAL AGENCY	4,934,997
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25 )	5,460,753

**2. Liability for uncertain tax positions** In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	31,156,335
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	-4,308,083
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	1,123,409
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	10,784
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	-3,173,890
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	34,330,225
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	138,552
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	138,552
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	34,468,777

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

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

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	35,946,048
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	1,123,409
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	10,784
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	1,134,193
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	34,811,855
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	138,552
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	138,552
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	34,950,407

**Part XIII Supplemental Information**

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

Return Reference	Explanation
See Additional Data Table	

**Part XIII** Supplemental Information *(continued)*

Return Reference	Explanation

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 13-3062419

**Name:** INTREPID MUSEUM FOUNDATION INC

## Supplemental Information

Return Reference	Explanation
PART III, LINE 1A	<p>THE INTREPID AND CERTAIN EXHIBITS WERE PLACED ON LOAN TO THE FOUNDATION BY THE UNITED STATES DEPARTMENT OF THE NAVY ("NAVY") AND BRITISH AIRWAYS, AND THE VALUE THEREOF IS NOT READILY DETERMINABLE ACCORDINGLY, THE MUSEUM HAS FOLLOWED THE ACCOUNTING POLICY OF MOST MUSEUMS WITH RESPECT TO COLLECTIONS AND EXHIBITS ON LOAN AND HAS NOT INCLUDED THOSE ASSETS IN THE FINANCIAL STATEMENTS MAJOR REPAIRS AND IMPROVEMENTS WHICH PRESERVE THESE COLLECTIONS AND EXHIBITS AND/OR INCREASE THE FUTURE ECONOMIC USEFULNESS OF THE ASSETS ARE CAPITALIZED THE SUBMARINE, GROWLER, WAS SIMILARLY LOANED BY THE NAVY TO THE FOUNDATION, AND WAS OPENED TO THE PUBLIC IN MAY 1989 THE CONCORDE G-BOAD WAS LOANED TO THE MUSEUM BY BRITISH AIRWAYS ON NOVEMBER 24, 2003 FOR AN UNSPECIFIED PERIOD OF TIME THE LOAN AGREEMENT CANNOT BE CANCELLED BY THE MUSEUM BEFORE NOVEMBER 2013 ON NOVEMBER 22, 2011, THE MUSEUM ENTERED INTO A CONTRACT FOR THE CONDITIONAL TRANSFER OF TITLE TO NASA HISTORIC ARTIFACT(S) WITH THE NATIONAL AERONAUTICS AND SPACE ADMINISTRATION (NASA) TO ACQUIRE THE SPACE SHUTTLE ORBITER ENTERPRISE NASA TRANSFERRED THE TITLE TO THE MUSEUM SUBJECT TO CERTAIN CONDITIONS AND RESTRICTIONS FOR A 20-YEAR PERIOD NASA PHYSICALLY DELIVERED THE ENTERPRISE TO THE MUSEUM AT JFK AIRPORT ON APRIL 27, 2012 THE ENTERPRISE EXHIBIT WAS OFFICIALLY OPENED TO THE PUBLIC ON JULY 19, 2012</p>

**Supplemental Information**

Return Reference	Explanation
PART III, LINE 4	<p>THE INTREPID SEA, AIR &amp; SPACE MUSEUM COLLECTS A WIDE RANGE OF ARTIFACTS TO DOCUMENT ITS RICH HISTORY AS A U S NAVAL VESSEL FROM 1943 TO 1974. MANY OF THESE ARTIFACTS INCLUDE THE PERSONAL MEMORABILIA OF BOTH FORMER CREW MEMBERS AND OFFICERS ALIKE. PHOTOGRAPHS, LETTERS, MANUSCRIPTS, CERTIFICATES, MEDALS, SOUVENIRS, AND OTHER EPHEMERA HELP US TO INTERPRET THE LIVES OF THE MEN WHO WORKED AND SLEPT ON THE AIRCRAFT CARRIER. FURTHERMORE, THE "SAILOR ART" DESIGNED AND CREATED BY THE SERVICEMEN ON BOARD ALLOWS US A UNIQUE GLIMPSE INTO THE PERSONAL SIDE OF LIFE ON THE SHIP. EXAMPLES OF SUCH ART INCLUDE SKETCHES ON THE BACKS OF HANDKERCHIEFS, AN ASHTRAY CONSTRUCTED FROM A SHELL FIRED BY THE INTREPID, AS WELL AS DETAILED WALL PAINTINGS SCATTERED THROUGHOUT THE INTERIOR OF THE VESSEL. OUR VAST COLLECTION OF UNIFORMS, FROM FLIGHT SUITS TO OFFICERS' DRESS "BLUES," PROVIDES US WITH AN UNDERSTANDING OF THE DIFFERENT DUTIES AND JOBS FOR WHICH THE SERVICEMEN WOULD HAVE BEEN RESPONSIBLE. SIMILARLY, OUR COLLECTIONS INCLUDE AN ARRAY OF GEAR AND EQUIPMENT ASSOCIATED WITH THE SHIP AND THE AIRCRAFT THAT FLEW FROM HER. THESE OBJECTS INCLUDE LANDING SIGNAL PADDLES AND AIRCRAFT TIE-DOWNS, AS WELL AS FLIGHT HELMETS AND PLOTTING BOARDS. OUR COLLECTION OF LARGER SCALE ARTIFACTS, SUCH AS AIRCRAFT, SPECIFICALLY RELATE TO THE INTREPID'S YEARS OF SERVICE FROM WORLD WAR II THROUGH THE COLD WAR. FINALLY, ROUNDING OUT THE COLLECTIONS ARE ACCURATE MODELS OF OTHER AIRCRAFT AND SHIPS ASSOCIATED WITH THE PERIOD OF THE INTREPID'S NAVY SERVICE, PROVIDING US WITH YET ANOTHER MEANS OF VISUALIZING PAST TECHNOLOGIES.</p>

## Supplemental Information

Return Reference	Explanation
PART V, LINE 4	UNDER THE MUSEUM'S SPENDING POLICY, UP TO 5% OF THE AVERAGE FAIR AND UNRESTRICTED VALUE OF THE INVESTMENTS AT THE END OF THE PRIOR THREE CALENDAR YEARS IS AVAILABLE FOR OPERATIONS THE AMOUNT APPROVED FOR OPERATIONS DURING THE YEAR ENDED DECEMBER 31, 2018 WAS \$763,734 ( 3%) THE INTENDED USE OF THE ENDOWMENT FUNDS IS TO SUPPORT THE ORGANIZATION'S OPERATIONS

## Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE MUSEUM RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED MANAGEMENT HAS DETERMINED THAT THE MUSEUM HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION OR DISCLOSURE THE MUSEUM IS NO LONGER SUBJECT TO EXAMINATIONS BY THE APPLICABLE TAXING JURISDICTIONS FOR TAX YEARS PRIOR TO FISCAL 2015



# Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	PERSONAL PROPERTY RENTAL EXPENSE 10,784

# Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	PERSONAL PROPERTY RENTAL EXPENSE 10,784

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2018

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury Internal Revenue Service

Name of the organization INTREPID MUSEUM FOUNDATION INC

Employer identification number

13-3062419

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

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations, b Internet and email solicitations, c Phone solicitations, d In-person solicitations, e Solicitation of non-government grants, f Solicitation of government grants, g Special fundraising events. 2a Did the organization have a written or oral agreement with any individual... 2b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 6 columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col (i), (vi) Amount paid to (or retained by) organization. Includes a Total row at the bottom.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

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

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d)
		<b>SALUTE TO FREEDOM DINNER</b> (event type)	(event type)	(total number)	Total events (add col (a) through col (c))
<b>1</b>	Gross receipts . . . . .	1,813,551			1,813,551
<b>2</b>	Less Contributions . . . . .	1,657,551			1,657,551
<b>3</b>	Gross income (line 1 minus line 2) . . . . .	156,000			156,000
Direct Expenses	<b>4</b> Cash prizes . . . . .				
	<b>5</b> Noncash prizes . . . . .				
	<b>6</b> Rent/facility costs . . . . .				
	<b>7</b> Food and beverages . . . . .	187,250			187,250
	<b>8</b> Entertainment . . . . .				
	<b>9</b> Other direct expenses . . . . .				
<b>10</b>	Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶				187,250
<b>11</b>	Net income summary Subtract line 10 from line 3, column (d) . . . . . ▶				-31,250

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

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		<b>1</b>	Gross revenue . . . . .		
Direct Expenses	<b>2</b> Cash prizes . . . . .				
	<b>3</b> Noncash prizes . . . . .				
	<b>4</b> Rent/facility costs . . . . .				
	<b>5</b> Other direct expenses . . . . .				
	<b>6</b> Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
<b>7</b>	Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶				
<b>8</b>	Net gaming income summary Subtract line 7 from line 1, column (d) . . . . . ▶				

**9** Enter the state(s) in which the organization conducts gaming activities \_\_\_\_\_

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

**b** If "No," explain \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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

**b** If "Yes," explain \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- 11** Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13** Indicate the percentage of gaming activity conducted in
- |          |                             |   |
|----------|-----------------------------|---|
| <b>a</b> | The organization's facility | % |
| <b>b</b> | An outside facility         | % |

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

Name ▶ .....  
 Address ▶ .....

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

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

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

Name ▶ .....  
 Address ▶ .....

**16** Gaming manager information

Name ▶ .....  
 Gaming manager compensation ▶ \$ .....

Description of services provided ▶ .....

Director/officer                       Employee                       Independent contractor

**17** Mandatory distributions

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

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

Return Reference	Explanation
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Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**Schedule I (Form 990)**

**Grants and Other Assistance to Organizations, Governments and Individuals in the United States**  
 Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.  
 Attach to Form 990.  
 Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

**2018**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
INTREPID MUSEUM FOUNDATION INC

Employer identification number  
13-3062419

**Part I General Information on Grants and Assistance**

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) EDUCATION DEVELOPMENT CENTER INC 43 FOUNDRY AVENUE WALTHAM, MA 02453	04-2241718	501(C)(3)	20,421				SUBAWARD
(2) NATIONAL GIRLS COLLABORATIVE 4616 25TH AVENUE NE 248 SEATTLE, WA 98105	47-1608990	501(C)(3)	6,681				SUBAWARD

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 2
- 3** Enter total number of other organizations listed in the line 1 table 0

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) TRAVEL STIPEND	25	52,500			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2	<p>THE MUSEUM OFTEN PARTNERS WITH OUTSIDE ORGANIZATIONS TO APPLY FOR GRANTS. IF THE GRANT IS AWARDED, THE INTREPID MUSEUM EXECUTES A SUBAWARD AGREEMENT WITH THIS ORGANIZATION, WHICH BECOMES A SUBRECIPIENT FOR THE GRANT. THE THIRD PARTY SUBRECIPIENT IS DISTINCT FROM A VENDOR OR INDEPENDENT CONTRACTOR IN THAT THE SUBRECIPIENT IS LISTED IN THE PROPOSAL, HAS ALREADY BEEN APPROVED BY THE FUNDING AGENCY/FUNDER AND PROVIDES SUBSTANTIVE WORK DIRECTLY RELATED TO THE SCOPE OF THE AWARD. TO FORMALIZE A THIRD PARTY RELATIONSHIP WITH ANOTHER ORGANIZATION (SUBRECIPIENT), THE INTREPID MUSEUM EXECUTES A SUBAWARD AGREEMENT. SUBAWARD AGREEMENT OFTEN INCLUDES ADDITIONAL EXHIBITS DETAILING SCOPE OF WORK AND THE BUDGET. SUBRECIPIENTS ARE REIMBURSED BASED ON THE INVOICES THAT THEY SUBMIT TO THE MUSEUM. PRINCIPLE INVESTIGATOR (PROJECT DIRECTOR) AND GRANTS-FINANCE REVIEW THE INVOICES TO ENSURE THAT THE COSTS ARE ALLOWABLE, WITHIN THE BUDGET, AND IN LINE WITH THE DELIVERABLES AND THE SCOPE OF WORK BEFORE THE INVOICES ARE PAID. IN AUGUST 2018, IMF'S EDUCATION DEPARTMENT FACILITATED NEH SUMMER INSTITUTE FOR K12 EDUCATORS, THE COLD WAR THROUGH THE COLLECTIONS OF THE INTREPID MUSEUM. TWENTY-FIVE TEACHERS FROM 12 STATES WERE SELECTED TO PARTICIPATE IN THE INSTITUTE. EACH TEACHER RECEIVED A STIPEND OF \$2,100 TO OFFSET THEIR RESPECTIVE TRAVEL COSTS.</p>

**Schedule J**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

## Compensation Information

**For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**  
▶ **Attach to Form 990.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No 1545-0047

# 2018

**Open to Public Inspection**

Name of the organization  
INTREPID MUSEUM FOUNDATION INC

Employer identification number  
13-3062419

**Part I Questions Regarding Compensation**

	Yes	No		
<p><b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> First-class or charter travel  <input type="checkbox"/> Travel for companions  <input type="checkbox"/> Tax indemnification and gross-up payments  <input type="checkbox"/> Discretionary spending account                 </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Housing allowance or residence for personal use  <input type="checkbox"/> Payments for business use of personal residence  <input type="checkbox"/> Health or social club dues or initiation fees  <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)                 </td> </tr> </table>	<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)			
<p><b>b</b> If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	<b>1b</b>			
<p><b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	<b>2</b>			
<p><b>3</b> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> Compensation committee  <input checked="" type="checkbox"/> Independent compensation consultant  <input checked="" type="checkbox"/> Form 990 of other organizations                 </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Written employment contract  <input checked="" type="checkbox"/> Compensation survey or study  <input checked="" type="checkbox"/> Approval by the board or compensation committee                 </td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
<input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee			
<p><b>4</b> During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization</p>				
<p><b>a</b> Receive a severance payment or change-of-control payment?</p>	<b>4a</b>	No		
<p><b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>	<b>4b</b>	No		
<p><b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</p>	<b>4c</b>	No		
<p><b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b></p>				
<p><b>5</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</p>				
<p><b>a</b> The organization?</p>	<b>5a</b>	No		
<p><b>b</b> Any related organization? If "Yes," on line 5a or 5b, describe in Part III</p>	<b>5b</b>	No		
<p><b>6</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of</p>				
<p><b>a</b> The organization?</p>	<b>6a</b>	No		
<p><b>b</b> Any related organization? If "Yes," on line 6a or 6b, describe in Part III</p>	<b>6b</b>	No		
<p><b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	<b>7</b>	Yes		
<p><b>8</b> Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	<b>8</b>	No		
<p><b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	<b>9</b>			



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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

**Part III Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 7	<p>AT THE END OF THE FISCAL YEAR, ALL STAFF, INCLUDING SENIOR STAFF, UNDERGO PERFORMANCE REVIEWS. SENIOR MANAGEMENT PERFORMANCE IS EVALUATED BASED ON GOALS SET FOR THE MUSEUM, EACH DEPARTMENT, MANAGEMENT OF RESPECTIVE TEAMS, AND SUCCESS OF OVERALL VENUE (SUCCESS IS MEASURED THROUGH REVENUE, BRAND AWARENESS, CUSTOMER SATISFACTION, GROWTH OF PROGRAMMING AND CONTENT, GROWTH IN ATTENDANCE, INTEGRITY AND UPKEEP OF SAFE INFRASTRUCTURE). BASED ON THOSE ASSESSMENTS, THE PRESIDENT RECOMMENDS SALARY INCREASES AND BONUSES FOR EACH MEMBER OF SENIOR MANAGEMENT TO THE COMPENSATION COMMITTEE BASED ON ACHIEVEMENTS AND BUDGET AVAILABILITY. THE COMPENSATION COMMITTEE ENGAGES A COMPENSATION CONSULTANT TO PERFORM MARKET STUDIES OF COMPARABLE ORGANIZATIONS AND SENIOR MANAGEMENT POSITIONS. IT MEETS WITH THE CONSULTING FIRM AND THE PRESIDENT OF THE MUSEUM. IF THE COMPENSATION COMMITTEE HAS ANY QUESTIONS OR RECOMMENDATIONS, THE PRESIDENT ADDRESSES THEM AND MAKES REVISIONS. THE COMMITTEE THEN CONSIDERS THE PRESIDENT'S RECOMMENDATIONS AND APPROVES THEM OR DIRECTS THE PRESIDENT TO MODIFY HER RECOMMENDATIONS BASED ON OTHER FACTORS. THE PRESIDENT ALSO PRESENTS HER ACCOMPLISHMENTS TO THE CO-CHAIRMEN OF BOARD FOR REVIEW. THE CO-CHAIRMEN CONSULT WITH THE COMPENSATION COMMITTEE AND COMPENSATION CONSULTANT TO APPROVE SALARY INCREASES AND BONUSES FOR THE PRESIDENT. AFTER BONUS AND SALARY INCREASES ARE APPROVED BY THE COMPENSATION COMMITTEE, THE CHAIRMAN OF THE COMPENSATION COMMITTEE ADVISES THE PRESIDENT WHO PREPARES THE PROPER DOCUMENTATION. IT IS THEN SUBMITTED TO FINANCE AND HUMAN RESOURCES FOR PROCESSING AND PAYMENT.</p>



**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 13-3062419  
**Name:** INTREPID MUSEUM FOUNDATION INC

**Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
SUSAN MARENOFF-ZAUSNER PRESIDENT	(i)	531,575	52,876	690	2,500	21,458	609,099	0
	(ii)	0	0	0	0	0	0	0
DAVID A WINTERS EXECUTIVE VICE PRESIDENT/SECRETARY	(i)	280,651	11,273	690	2,500	23,482	318,596	0
	(ii)	0	0	0	0	0	0	0
PATRICIA BEENE-COLASANTI CFO/CAO	(i)	301,376	30,265	1,980	2,500	23,982	360,103	0
	(ii)	0	0	0	0	0	0	0
MATTHEW WOODS SVP ENGINEERING/FACILITIES	(i)	291,656	29,634	690	2,500	29,283	353,763	0
	(ii)	0	0	0	0	0	0	0
ELAINE CHARNOV SVP EXHIBITS/EDUCATION	(i)	262,685	26,286	1,290	2,500	21,982	314,743	0
	(ii)	0	0	0	0	0	0	0
MARC LOWITZ SVP BUSINESS DEVELOPMENT	(i)	253,660	10,268	690	2,500	29,933	297,051	0
	(ii)	0	0	0	0	0	0	0
VINCENT FORINO VP, INFORMATION TECHNOLOGY	(i)	178,586	18,559	1,980	2,500	29,878	231,503	0
	(ii)	0	0	0	0	0	0	0
LYNDA KENNEDY VP, EDUCATION & EVALUATION	(i)	177,573	18,438	690	2,500	29,871	229,072	0
	(ii)	0	0	0	0	0	0	0
MICHAEL ONYSKO VP, MARKETING	(i)	165,912	13,757	300	2,500	31,193	213,662	0
	(ii)	0	0	0	0	0	0	0
ALEXIS MARION VP, INSTITUTIONAL ADVANCEMENT	(i)	175,027	17,510	270	2,500	10,811	206,118	0
	(ii)	0	0	0	0	0	0	0
THOMAS COUMBE VP, HUMAN RESOURCES	(i)	148,248	15,000	1,980	2,500	13,324	181,052	0
	(ii)	0	0	0	0	0	0	0
LISA YACONIELLO VP, VENUE SALES & EVENTS	(i)	154,590	2,500	270	0	9,775	167,135	0
	(ii)	0	0	0	0	0	0	0

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No 1545-0047

**2018**

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**  
 ▶ **Attach to Form 990.**  
 ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
INTREPID MUSEUM FOUNDATION INC

Employer identification number  
13-3062419

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
<b>1</b> Art—Works of art . . . . .				
<b>2</b> Art—Historical treasures . . . . .	X	96	0	
<b>3</b> Art—Fractional interests . . . . .				
<b>4</b> Books and publications . . . . .				
<b>5</b> Clothing and household goods . . . . .				
<b>6</b> Cars and other vehicles . . . . .				
<b>7</b> Boats and planes . . . . .				
<b>8</b> Intellectual property . . . . .				
<b>9</b> Securities—Publicly traded . . . . .	X	2	27,802	AVG SELLING PRICE
<b>10</b> Securities—Closely held stock . . . . .				
<b>11</b> Securities—Partnership, LLC, or trust interests . . . . .				
<b>12</b> Securities—Miscellaneous . . . . .				
<b>13</b> Qualified conservation contribution—Historic structures . . . . .				
<b>14</b> Qualified conservation contribution—Other . . . . .				
<b>15</b> Real estate—Residential . . . . .				
<b>16</b> Real estate—Commercial . . . . .				
<b>17</b> Real estate—Other . . . . .				
<b>18</b> Collectibles . . . . .				
<b>19</b> Food inventory . . . . .				
<b>20</b> Drugs and medical supplies . . . . .				
<b>21</b> Taxidermy . . . . .				
<b>22</b> Historical artifacts . . . . .				
<b>23</b> Scientific specimens . . . . .				
<b>24</b> Archeological artifacts . . . . .				
<b>25</b> Other ▶ ( _____ )				
<b>26</b> Other ▶ ( _____ )				
<b>27</b> Other ▶ ( _____ )				
<b>28</b> Other ▶ ( _____ )				

**29** Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

	Yes	No
<b>30a</b> During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .		No
<b>b</b> If "Yes," describe the arrangement in Part II		
<b>31</b> Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		No
<b>32a</b> Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .		No
<b>b</b> If "Yes," describe in Part II		
<b>33</b> If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

**Part II Supplemental Information.**

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B)	THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS IN PART 1, COLUMN (B) OF SCHEDULE M
PART I, LINE 33	REVENUE NOT REPORTED IN PART I, LINE 2, COLUMN C CONTRIBUTED ARTWORK COLLECTION ITEMS ARE NOT REFLECTED IN THE FINANCIAL STATEMENTS BECAUSE THE MUSEUM DOES NOT HOLD COLLECTION ITEMS FOR RESALE COMPONENTS OF THE MUSEUM'S COLLECTION, WHICH HAVE BEEN ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS, ARE NOT RECOGNIZED AS ASSETS ON THE STATEMENT OF FINANCIAL POSITION

**SCHEDULE O**  
(Form 990 or 990-EZ)

**Supplemental Information to Form 990 or 990-EZ**

OMB No 1545-0047

**2018**

**Open to Public Inspection**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Department of the Treasury

Name of the organization

INTREPID MUSEUM FOUNDATION INC

Employer identification number

13-3062419

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART III, LINE 4A	<p>COLLECTIONS OVER THE PAST FISCAL YEAR THE MUSEUM'S COLLECTIONS TEAM RECEIVED AND PROCESSED 96 DONATIONS THIS YEAR'S INCREASE IS DUE TO THE FOCUSED OUTREACH SURROUNDING GROWLER'S 60TH AND INTREPID'S 75TH COMMISSIONING ANNIVERSARIES -102 ACQUISITIONS 4 PURCHASES, 2 TRANSFERS, 96 DONATIONS -1,066 NEW ARTIFACTS, CONSISTING OF 121 OBJECTS, 874 IMAGES, 71 ARCHIVES -20 REPEAT DONORS -9 OF THE 2018 ORAL HISTORY PARTICIPANTS DONATED ARTIFACTS (26% OF NARRATORS THIS YEAR) DONATION HIGHLIGHTS INCLUDE THE FOLLOWING -LETTERS AND DOCUMENTS FROM THREE DIFFERENT FAMILIES WHOSE LOVED ONES WERE KILLED IN KAMIKAZE ATTACKS ON THE SHIP IN WORLD WAR II TOGETHER THE LETTERS SHARE THE OPTIMISM OF A SAILOR WRITING HOME FROM HIS NEW STATION, THE SUPPORT OF A COMMUNITY TO A FAMILY IN TIMES OF GRIEF, AND TWO LETTERS WERE RETURNED UNDELIVERABLE TO A NEWLY WIDOWED YOUNG WOMAN -BEAUTIFULLY DECORATED CANVAS ART CELEBRATING THE VAW-33 SQUADRON FROM 1963 (ARTIST UNKNOWN) -A PIECE OF SHRAPNEL FROM REGULUS MISSILE TESTSTHE FIRST PHYSICAL ARTIFACT RELATED TO THE REGULUS MISSILE ORAL HISTORY PROJECT OVER THE PAST FISCAL YEAR, THE TEAM RECORDED 34 ORAL HISTORIES WE HOSTED TWO CREW REUNIONS THIS PAST YEAR, WHICH ENABLED US TO CAPTURE A LARGE NUMBER OF INTERVIEWS ON SITE WE RECORDED EIGHT INTERVIEWS AT THE GROWLER CREW REUNION IN MAY AND 11 INTERVIEWS AT THE INTREPID 75TH ANNIVERSARY CELEBRATION IN AUGUST, THREE OF WHOM SERVED ON BOARD THE SHIP DURING WORLD WAR II IN JANUARY, THE MUSEUM'S TWO CURATORS TRAVELED TO JACKSONVILLE, FLORIDA, WHERE THEY CAPTURED FOUR INTERVIEWS AT THE REUNION OF A VIETNAM WAR-ERA INTREPID SQUADRON AIRCRAFT RESTORATION TWO AIRCRAFT, THE ISRAELI KFIR FIGHTER JET AND THE GRUMMAN F11F BLUE ANGELS AIRPLANE, WERE REPAINTED AND REFURBISHED BOTH AIRCRAFT SUFFERED CORROSION DAMAGE NECESSITATING REPAIRS AND TREATMENT WITH INTERNAL CORROSION INHIBITORS THE AIRCRAFT RESTORATION TEAM ALSO CONTINUED WORK ON THE MULTIYEAR RESTORATION OF THE DOUGLAS A-1 SKYRAIDER A SIMULATED ORDNANCE LOAD WAS INSTALLED REQUIRING THE PRECISION FABRICATION OF MOUNTING HARDWARE THIS SKYRAIDER PROJECT WAS COMPLETED IN THE FIRST QUARTER OF 2019 THE AIRCRAFT RESTORATION TEAM ALSO CREATED MANY SOCIAL MEDIA VIDEOS, INCLUDING STEP-BY-STEP REPAIRS ON THE SKYRAIDER AND SIX OTHER AIRCRAFT IN THE COLLECTION AIRCRAFT ACCESSION - NO ACCESSIONS IN FY 2018 AIRCRAFT DEACCESSION THE FRENCH ETENDARD JET WAS TRANSFERRED TO THE PIMA AIR &amp; SPACE MUSEUM IN TUCSON, ARIZONA</p>

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART III, LINE 4B	<p>- 583 CHILDREN AND ADULTS ATTENDING A FAMILY PROGRAM WERE NEW YORKERS LIVING IN NEW YORK CITY HOUSING AUTHORITY (NYCHA) FACILITIES AND/OR RECEIVING SERVICES FROM THE SETTLEMENT OR COMMUNITY HOUSES - 220 CHILDREN AND ADULTS ATTENDED THROUGH OUR PARTNERSHIPS WITH THE NEW YORK CITY DEPARTMENT OF EDUCATION, AND NOT-FOR PROFIT COMMUNITY GROUPS THAT ARE NOT EMBEDDED IN NYCHA FACILITIES - 162 CHILDREN AND ADULTS ATTENDING WERE NEW FOSTER FAMILIES, REACHED THROUGH A PARTNERSHIP WITH THE ADMINISTRATION FOR CHILDREN'S SERVICES - 165 CHILDREN AND ADULTS ATTENDED THROUGH A NEW RELATIONSHIP WITH PARENTS IN THE HYPERLOCAL AREA - THE REMAINING 293 WERE INDIVIDUAL FAMILIES WHO SIGNED UP FOR THE PROGRAMS ON OUR WEBSITE, THROUGH EMAIL CORRESPONDENCE OR DID NOT REGISTER, BUT DECIDED TO JOIN UP WITH THE GROUP ON THE DAY OF PROGRAMMING PROGRAMS EXPLORED A VARIETY OF THEMES THAT INVOLVED - PLAY-ACTING THE ROLES OF THE FLIGHT DECK CREW OF AN AIRCRAFT CARRIER, - CREATING CONSTELLATIONS AND MYTHOLOGY TO GO ALONG WITH THEM, - AND LEARNING ABOUT SQUADRON ART ON AIRPLANES AND THEN CREATING THEIR OWN FAMILY INSIGNIA WHICH THEY THEN TURNED INTO WEARABLE BUTTONS PROGRAMS WERE FREE WITH ADMISSION FOR ALL FAMILIES AND ADMISSION WAS WAIVED FOR LOW-INCOME NEW YORKERS AND FOSTER FAMILIES THROUGH PARTNERSHIPS WITH COOL CULTURE, COMMUNITY PARTNERS AND OUR NEW EBT INITIATIVE, MUSEUM FOR ALL, WHICH PROVIDES FREE ADMISSION TO THE MUSEUM FOR A FOOD STAMPS OR CASH ASSISTANCE RECIPIENT AND UP TO THREE HOUSEHOLD MEMBERS THE MUSEUM DISTRIBUTED MARKETING MATERIALS TO EVERY MAJOR NYCHA FACILITY IN MANHATTAN AS WELL AS THE LARGEST COMPLEXES IN ALL FOUR OTHER BOROUGH, OFFERING FREE ADMISSION TO THE MUSEUM WHEN REGISTERING FOR A FAMILY PROGRAM AND ADVERTISED THE REDUCED AND FREE ENTRY OPTIONS ON OUR WEBSITE AND SOCIAL MEDIA OUT-OF-SCHOOL TIME PROGRAMS OUT-OF-SCHOOL TIME AND ENRICHMENT PROGRAMS, SUCH AS CAMP INTREPID, WERE OFFERED IN THE SUMMER AND DURING SCHOOL BREAKS THROUGHOUT THE YEAR PROGRAMS HIGHLIGHTED A RANGE OF TOPICS THROUGH ACTIVITIES, TOURS, DEMONSTRATIONS AND EXPERIMENTS CAMP INTREPID INCLUDED OPPORTUNITIES FOR CAMPERS TO VISIT THE MUSEUM'S HISTORIC SPACES, RECEIVE GUIDED ACCESS TO SELECT AIRPLANES, AND EXPLORE THE MUSEUM'S EXHIBITS INCLUDING THE SPACE SHUTTLE ENTERPRISE AND THE SUBMARINE GROWLER ALL WHILE LEARNING ABOUT INTREPID'S PORTS OF CALL, SPACE SCIENCE, MARINE SCIENCE, ANCIENT NAVIES AND AVIATION THROUGH THE CONTINUED SUPPORT OF THE NYC DEPARTMENT OF EDUCATION (DOE) INITIATIVE STEM MATTERS, THE MUSEUM PROVIDED TWO WEEKS OF STEM STARS, A FREE FOR STUDENTS ONE-WEEK FULL-DAY PROGRAM HELD DURING THE SPRING AND SUMMER BREAKS FOR 25 STUDENTS EACH THE MUSEUM ALSO SERVED AS SITE FOR SUMMER IN THE CITY PROGRAM VISITS, ANOTHER NYC DOE INITIATIVE WITH SUPPORT FROM THE NEW YORK CITY COUNCIL AND THE DEPARTMENT OF CULTURAL AFFAIRS, THE MUSEUM CONTINUED PARTNERSHIPS WITH NEW YORK CITY SCHOOLS THROUGH THE CULTURAL AFTER SCHOOL ADVENTURES (CASA) PROGRAM SINCE 2006, THE MUSEUM'S E</p>



## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4B	<p>EDUCATION DEPARTMENT HAS PARTNERED WITH 35 SCHOOLS THROUGHOUT THE FIVE BOROUGH, AND IN FALL OF 2018 WERE PAIRED WITH 17 SCHOOLS WITH WHOM WE BEGAN PLANNING FOR SPRING PROGRAMMING THIS WAS A RECORD NUMBER FOR US PROGRAMS FOCUS ON INTREPID AND ITS HISTORIC SPACES, THE MUSEUM'S ARCHIVES, COLLECTIONS AND AIRCRAFT, AND THE SPACE SHUTTLE ENTERPRISE, WHICH SERVE AS CATALYSTS TO PIQUE STUDENT INTEREST IN SOCIAL STUDIES, MATH AND SCIENCE STUDENTS ANALYZE ARTIFACTS, READ TEXT, WRITE IN JOURNALS, EXPERIMENT WITH SCIENTIFIC MATERIALS AND EXPLORE THE MUSEUM'S EXHIBITIONS STUDENTS ALSO COMPLETE A NEWSLETTER AT THE CONCLUSION OF THE PROGRAM NEWSLETTERS HIGHLIGHT THEIR EXPERIENCES, WHAT THEY LEARNED AND MEMORABLE MOMENTS WE ONCE AGAIN OFFERED A TEEN NIGHT AND A COLLEGE NIGHT, BOTH WITH A SIMILAR FORMAT AND GEARED TOWARD YOUTH AND YOUNG ADULTS ORGANIZED BY OUR TEEN ADVISORY, THESE NIGHTS FEATURED MUSEUM LEARNING, MUSIC, SNACKS AND A CHANCE TO SOCIALIZE IN A SAFE ATMOSPHERE PUBLIC EDUCATION MUSEUM EDUCATORS PROVIDED REGULARLY SCHEDULED DEMONSTRATIONS AND HISTORY/SCIENCE-BASED PERFORMANCES IN THE MUSEUM AND IN THE SPACE SHUTTLE PAVILION FOR THE GENERAL PUBLIC THESE INQUIRY-BASED PROGRAMS INVOLVE THE AUDIENCE IN MAKING HYPOTHESES AND PREDICTIONS, DESCRIBING WHAT THEY SEE AND OBSERVE, AND ASSISTING WITH THE DEMONSTRATION OR EXPERIMENT AUDIENCE DEMOGRAPHICS VARY THE MAJORITY OF THE PARTICIPANTS ARE ADULTS, SENIORS, AND MULTIGENERATIONAL FAMILIES WITH GRANDPARENTS, PARENTS AND CHILDREN MUSEUM EDUCATORS PRESENT THE DEMONSTRATIONS TO ENGAGE ALL AUDIENCE MEMBERS, OVER 7,000 VISITORS EXPERIENCED THESE PUBLIC DEMONSTRATIONS AND PERFORMANCES THE PUBLIC ENGAGEMENT &amp; INTERPRETATION TEAM SERVED 26,829 MEMBERS OF THE PUBLIC THROUGH IN-DEPTH TOURS 353 COLLEGE STUDENTS WENT ON TOURS FOCUSED ON COURSE THEMES 874 SPECIAL GUESTS OF THE MUSEUM RECEIVED COMPLEMENTARY VIP TOURS AN ADDITIONAL 515 GUESTS EXPERIENCE PAID, PRIVATE VIP TOURS WE HAVE CONTINUED TO GROW OUR FACILITY AND COLLEGE OFFERINGS TOPICS COVERED THE HISTORY OF INTREPID, THE PACIFIC WAR, THE VIETNAM CONFLICT, AND THE PAST AND FUTURE OF SPACE EXPLORATION A FAMILY-FRIENDLY TOUR CONTINUES TO BE POPULAR ON WEEKENDS, HOLIDAYS AND DURING THE WEEK IN THE SUMMER THOUSANDS OF VISITORS EXPERIENCED FREE-WITH-ADMISSION EDUCATOR TALKS THIS YEAR EVALUATION THE RESEARCH AND EVALUATION TEAM ENSURED THAT THE MYRIAD OF PROGRAMS OFFERED THROUGH THE EDUCATION DEPARTMENT REMAINED OF THE HIGHEST QUALITY THROUGH OBSERVATION PROTOCOLS, PARTICIPANT SURVEYS AND OTHER DATA COLLECTION METHODS IN ADDITION TO THE REGULAR WORK OF PROGRAM AND EXHIBIT FORMATIVE AND POST EVALUATION, THE MUSEUM RECEIVED A GRANT FROM THE NATIONAL SCIENCE FOUNDATION TO WORK WITH PARTNERS EDC AND THE NATIONAL GIRLS COLLABORATIVE PROJECT TO DEVELOP A ND ACTION RESEARCH AGENDA FOR EXAMINING THE MID AND LONG-TERM OUTCOMES OF GIRL-FOCUSED STE M PROGRAMS AT CULTURAL ORGANIZATIONS, AND WE CONTINUED AN EVALUATION PROJECT UNDER GRANT FROM THE FUND FOR SHARED INSIGHT</p>

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART III, LINE 4B	T AND THE OVERDECK FOUNDATION TO SUPPORT THE IMPLEMENTATION OF THE NET PROMOTER TOOL AT TH E MUSEUM AND IN TWO OTHER YOUTH-SERVING PARTNERS CONTRIBUTIONS TO THE FIELD IN ADDITION T O SERVING IN LEADERSHIP POSITIONS FOR PROFESSIONAL ORGANIZATIONS SUCH AS THE NEW YORK CITY MUSEUM EDUCATOR'S ROUNDTABLE, THE NEW YORK CITY STEM EDUCATION NETWORK, THE MUSEUM ACCESS CONSORTIUM AND THE EDUCATION COMMITTEE OF THE AMERICAN ALLIANCE OF MUSEUMS, MUSEUM EDUCAT ION & EVALUATION STAFF PRESENTED AT SEVERAL LOCAL AND NATIONAL CONFERENCES TOPICS RANGED FROM SERVING AUDIENCES WITH DISABILITIES TO USING DIGITAL TECHNOLOGIES TO INTERPRETING HIS TORIC SPACES NATIONAL CONFERENCES INCLUDED THE AMERICAN ALLIANCE OF MUSEUMS, THE ASSOCIAT ION FOR SCIENCE & TECHNOLOGY CENTERS, THE AMERICAN EVALUATION ASSOCIATION, THE HISTORIC NA VAL SHIP ASSOCIATION AND THE LEADERSHIP EXCHANGE IN ARTS AND DISABILITY

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
<p>FORM 990, PART III, LINE 4C</p>	<p>3 TWO MODERATED DISCUSSIONS HUMAN SPIRIT OF ADVENTURE/EXPLORATION TIM JARVIS, AN EXPLORE R WHO RECREATED SHACKLETON'S JOURNEY JOINED PRIVATE ASTRONAUT AND GAME DESIGNER, RICHARD G ARRIOTT FOR A CONVERSATION EXAMINING THE DRIVE THAT SENDS EXPLORERS INTO THE UNKNOWN RICHARD WIESE, THE NEW PRESIDENT OF THE EXPLORERS CLUB, MODERATED THIS DISCUSSION VOYAGER MOD ERATED BY JEFFRY KLUGER, SCIENCE EDITOR TIME MAGAZINE, EXAMINED THE HISTORIC VOYAGER MISSI ON WITH ITS ORIGINAL PROJECT LEAD AND PROJECT MANAGER FOR GALILEO AND CASSINI MISSIONS, JO HN CASANI, JPL THEY WERE JOINED BY TODD BARBER, VOYAGER PROPULSION ENGINEER, AND THOMAS D WEEKS, VOYAGER G&amp;C HARDWARE ENGINEER 4 ASTRONAUT PRESENTATION SUNITA WILLIAMS ASTRONA UT SUNITA WILLIAMS WAS THE SECOND WOMAN TO COMMAND THE ISS AND HAS HELD THE RECORDS FOR SP ACEWALKS BY A WOMAN (7) AND MOST TIME IN SPACE 321 DAYS SHE DESCRIBED LIFE ABOARD ISS, HO W ASTRONAUTS ADJUST TO A GRAVITY FREE ENVIRONMENT AND THE EVERYDAY CHORES THAT ARE NECESSA RY TO KEEP THEIR HOME IN SPACE HEALTHY AND FUNCTIONAL SHE ALSO TALKED ABOUT HER TIME IN T HE NAVY AND WHAT IT TOOK TO BECOME AN ASTRONAUT PROGRAM SERIES FAMILY ASTRONOMY NIGHTS MAY 11, JUNE 8, JULY 20, AUGUST 3, SEPTEMBER 20 TOTAL ANNUAL ATTENDANCE 1,503 ASTRONOMY NIG HTS ARE FREE AND OPEN TO THE PUBLIC EACH SESSION TAKES PLACE INSIDE THE SPACE SHUTTLE PAV ILION UNDERNEATH THE ORIGINAL ORBITER, ENTERPRISE DURING THE WARMER MONTHS, PROGRAMS ALSO UTILIZE INTREPID'S FLIGHT DECK FOR SKY VIEWING WITH MEMBERS OF A LOCAL AMATEUR ASTRONOMER S CLUBS HIGH-PROFILE SPEAKERS INTRODUCE GUESTS TO ENGAGING THEMES, SUCH AS THE MYSTERIES OF THE UNIVERSE OR BREAKTHROUGH DISCOVERIES IN SPACE EXPLORATION AN EXAMPLE PROGRAM FROM FY2018 AUGUST 3 SEARCHING FOR LIFE ON MARS IS THERE LIFE ELSEWHERE IN THE SOLAR SYSTEM? IF SO, HOW CAN WE FIND IT? EXPLORING OTHER PLANETS IS A COMPLEX EFFORT REQUIRING MANY PEOP LE, INCLUDING ASTROBIOLOGISTS ASTROBIOLOGISTS WORK TO DEFINE WHAT LIFE IS AND FIGURE OUT HOW TO RECOGNIZE IT ON ANOTHER WORLD HEAR FROM NASA ASTROBIOLOGIST LAURIE BARGE ABOUT ORB ITAL OBSERVATIONS OF MARS LEARN HOW THEY ARE HELPING US SEARCH FOR SIGNS OF LIFE PAST OR P RESENTAND DETERMINE WHETHER MARS WAS ONCE INHABITED ASTROCAF 2018 APRIL 20, MAY 18, JUNE 15, SEPTEMBER 28, OCTOBER 19, NOVEMBER 16 TOTAL ANNUAL ATTENDANCE 641 THIS PAST YEAR, THE INTREPID SEA, AIR &amp; SPACE MUSEUM PARTNERED WITH THE NEW YORK SPACE ALLIANCE (NYSA) TO OFF ER AN EXCITING SERIES OF PRESENTATIONS BY INDUSTRY LEADERS AT ASTROCAF AS WELL AS SOCIAL E NGAGEMENT OPPORTUNITIES THAT WILL HELP THE SPACE SCIENCE ECOSYSTEM IN NEW YORK GROW AND TH RIVE AN EXAMPLE PROGRAM FROM FY2018 SEPTEMBER 28 TOM WILSON, PRESIDENT SPACE LOGISTICS L LC, NORTHROP GRUMMAN IN-ORBIT SATELLITE SERVICING INNOVATION IN ACTION 22,236 MILES INTO SPACE REPAIRING, REFUELING AND MAINTAINING SATELLITES WHILE THEY ARE IN ORBIT WILL EXTEND THEIR LIFE AND THEIR MISSIONS, ALLOWING US TO DISCOVER AND DO MORE IN SPACE GROUNDBREAKIN G TECHNOLOGY PIONEERED BY NORT</p>

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART III, LINE 4C	<p>HROP GRUMMAN WILL DO JUST THATAND ITS INSPIRING ENGINEERS TO REIMAGINE WHAT IS POSSIBLE IN SPACE NEXT YEAR, NORTHROP GRUMMAN WILL LAUNCH THE MISSION EXTENSION VEHICLE THE FIRST COMMERCIAL IN-ORBIT SATELLITE SERVICING VEHICLE GUEST LEARNED ABOUT THIS REVOLUTIONARY SPACE CRAFT AND NORTHROP GRUMMAN'S OTHER IN-ORBIT INNOVATIONS, INCLUDING NEXT-GENERATION ROBOTIC S DESIGNED TO BUILD LUNAR OUTPOSTS EXHIBITION-BASED PROGRAMMING GROWLER PROGRAMMING JUNE 7 DR STRANGELOVE SCREENING/DISCUSSION ATTENDANCE 51 THE MUSEUM HOSTED A SCREENING OF DR STRANGELOVE, STANLEY KUBRICK'S CLASSIC SATIRE ON WARFARE, POWER AND COLD WAR MINDSETS VIEWED AS A WACKY BLACK COMEDY ON ITS RELEASE IN 1964, IT REVEALED SECRETS OF NUCLEAR WEAPON POLICY UNKNOWN TO AUDIENCES AT THE TIME, SOME OF WHICH ARE STILL OPERATIONAL TODAY AFTER THE SCREENING, DAVID DENBY, STAFF WRITER AND FORMER FILM CRITIC FOR THE NEW YORKER, AND J AMES M LINDSAY OF THE COUNCIL ON FOREIGN RELATIONS, DISCUSSED THE FILM'S IMPORTANCE AND CONTINUED RELEVANCE 75TH ANNIVERSARY YEAR OF INTREPID AUGUST 9 JEROME ROBBINS FROM STREET TO STAGE ATTENDANCE SOLD OUT 212 ON AUGUST 9, 2018, THE INTREPID SEA, AIR &amp; SPACE MUSEUM CELEBRATED THE CENTENNIAL OF JEROME ROBBINS' BIRTHDAY IN CONJUNCTION WITH THE 75TH ANNIVERSARY YEAR OF INTREPID WITH A SITE SPECIFIC PROGRAM HIGHLIGHTING THE BROADWAY LEGACY OF THE REMARKABLE, JEROME ROBBINS AS THE SUN WAS STARTING ITS DESCENT, BERNSTEIN'S OVERTURE TO ON THE TOWN ANNOUNCED THE START OF THE EVENING THE OPENING TO ON THE TOWN SPECIALLY STAGED BY JOSHUA BERGASSE AND FEATURING MANNY STARK, CLYDE ALVES, AND TONY YAZBECK, WINNER OF THE TONY FOR THE 2014 REVIVAL OF ON THE TOWN WITHIN THE UNIQUE SPACES OF THIS LEGENDARY WORLD WAR II AIRCRAFT CARRIER TURNED MUSEUM, WE REVISITED A FEW OF ROBBINS ENDURING WORKS THROUGH ANECDOTAL STORIES, ARCHIVAL FILM, RECORDINGS, AND OF COURSE DANCE GUEST INCLUDED GROVER DALE, ORIGINAL CAST MEMBER OF WEST SIDE STORY AND CO-DIRECTOR WITH ROBBINS FOR JEROME ROBBIN'S BROADWAY, JOSHUA BERGASSE, CHOREOGRAPHER OF THE 2014 BROADWAY REVIVAL OF ON THE TOWN, ADAM GREEN, JOURNALIST AND SON OF THE LEGENDARY ADOLPH GREEN, CO-AUTHOR OF THE BOOK AND LYRICS TO ON THE TOWN, AND AMANDA VAILL, AUTHOR OF - SOMEWHERE THE LIFE OF JEROME ROBBINS, AND THE EMMY-NOMINATED SCREENPLAY FOR THE EMMY- AND PEABODY AWARD-WINNING DOCUMENTARY, JEROME ROBBINS SOMETHING TO DANCE ABOUT</p>

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION A, LINE 2	KENNETH FISHER, STEVEN FISHER AND WINSTON FISHER, ALL MEMBERS OF THE BOARD OF TRUSTEES OF THE MUSEUM, ARE FAMILY MEMBERS MARTIN EDELMAN, KENNETH FISHER, STEVEN FISHER AND WINSTON FISHER, ALL MEMBERS OF THE BOARD OF TRUSTEES OF THE MUSEUM, HAVE A BUSINESS RELATIONSHIP BRUCE MOSLER AND KENNETH FISHER, ALL MEMBERS OF THE BOARD OF TRUSTEES OF THE MUSEUM, HAVE A BUSINESS RELATIONSHIP BRUCE MOSLER AND MARK LAPIDUS, ALL MEMBERS OF THE BOARD OF TRUSTEES OF THE MUSEUM, HAVE A BUSINESS RELATIONSHIP DAVID TURNER, DENIS BOVIN, BRUCE MOSLER AND THOMAS SECUNDA, ALL MEMBERS OF THE BOARD OF TRUSTEES OF THE MUSEUM, HAVE A BUSINESS RELATIONSHIP

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 WAS PREPARED BY THE MUSEUM'S OUTSIDE ACCOUNTING FIRM WITH INFORMATION PROVIDED BY THE MUSEUM'S STAFF. MANAGEMENT REVIEWED THE FORM AND PROVIDED ADDITIONAL COMMENTS. A DRAFT COPY WAS DISTRIBUTED TO THE AUDIT COMMITTEE VIA E-MAIL. THE COMMITTEE MEMBERS ARE GIVEN AN OPPORTUNITY TO REVIEW THE FORM AND ASK FOR ADDITIONAL INFORMATION OR MAKE COMMENTS PRIOR TO FINALIZATION. THE FINAL FORM 990 IS SUBMITTED TO THE AUDIT COMMITTEE FOR THEIR FINAL REVIEW AND APPROVAL VIA E-MAIL PRIOR TO THE FILING DATE. ONCE APPROVED, THE FORM 990 WAS SENT VIA E-MAIL BY THE CHAIRMAN OF THE AUDIT COMMITTEE TO MEMBERS OF THE BOARD OF TRUSTEES FOR THEIR REVIEW. THE BOARD OF TRUSTEES IS REQUIRED TO ACKNOWLEDGE THEIR RECEIPT OF THE FORM BY EMAIL. THE FORM 990 IS THEN APPROVED BY MANAGEMENT AND E-FILED WITH THE IRS.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	<p>THE BOARD OF TRUSTEES (THE "BOARD") IS THE GOVERNANCE AUTHORITY FOR THE INTREPID MUSEUM FOUNDATION (THE "MUSEUM") AND ITS MEMBERS HAVE A FIDUCIARY OBLIGATION TO ACT IN THE BEST INTEREST OF THE MUSEUM WITHOUT REGARD TO THEIR PERSONAL INTERESTS. THE BOARD PROVIDES GUIDANCE AND OVERSIGHT FOR THE DEVELOPMENT AND IMPLEMENTATION OF THE MUSEUM'S POLICIES AND PROGRAMS TO SEE THAT MUSEUM ACTIVITIES ARE CONDUCTED AND RESOURCES ARE UTILIZED IN SUPPORT OF THE MUSEUM'S MISSION, IN ACCORDANCE WITH PROFESSIONAL STANDARDS AND PRACTICES. TRUSTEES MUST EXERCISE DUE DILIGENCE AND GOOD FAITH IN CARRYING OUT THEIR DUTIES ON BEHALF OF THE MUSEUM, AND SHOULD REFRAIN FROM TAKING ANY ACTION THAT MIGHT CONFLICT, OR APPEAR TO CONFLICT, WITH THE INTERESTS OF THE MUSEUM. THIS CODE OF CONDUCT AND ETHICS (THIS "CODE") IS INTENDED TO PROVIDE GUIDANCE TO TRUSTEES TO HELP THEM WITH THEIR RESPONSIBILITIES, RECOGNIZE AND DEAL WITH ETHICAL AND COMPLIANCE ISSUES, PROVIDE MECHANISMS TO REPORT UNETHICAL CONDUCT, AND HELP FOSTER A CULTURE OF HONESTY AND ACCOUNTABILITY. EACH TRUSTEE MUST COMPLY WITH THE LETTER AND SPIRIT OF THIS CODE. THIS CODE IS INTENDED TO SUPPLEMENT BUT NOT REPLACE ANY APPLICABLE STATE OR FEDERAL LAWS GOVERNING ETHICAL CONDUCT OR CONFLICTS OF INTEREST APPLICABLE TO NON-PROFIT ORGANIZATIONS. NO CODE OR POLICY CAN ANTICIPATE EVERY SITUATION THAT MAY ARISE. ACCORDINGLY, THIS CODE IS INTENDED TO SERVE AS A SOURCE OF GUIDING PRINCIPLES FOR TRUSTEES. TRUSTEES ARE ENCOURAGED TO BRING QUESTIONS ABOUT PARTICULAR CIRCUMSTANCES THAT MAY IMPLICATE ONE OR MORE OF THE PROVISIONS OF THIS CODE TO THE ATTENTION OF THE CHAIRMAN OF THE AUDIT &amp; COMPLIANCE COMMITTEE, WHO MAY CONSULT WITH LEGAL COUNSEL AS APPROPRIATE.</p> <p><b>1. TRUSTEE RESPONSIBILITIES.</b> THE RESPONSIBILITIES OF THE BOARD AND TRUSTEES ARE SET FORTH IN THE INTREPID MUSEUM FOUNDATION BOARD OF TRUSTEES POSITION DESCRIPTION, WHICH IS UPDATED FROM TIME TO TIME. THE BOARD OF TRUSTEES IS THE GOVERNANCE AUTHORITY FOR THE MUSEUM AND HAS THE AUTHORITY AND RESPONSIBILITY FOR OVERSEEING THAT MUSEUM RESOURCES, PROGRAMS AND ACTIVITIES SUPPORT THE MUSEUM'S MISSION. THE BOARD IS RESPONSIBLE FOR REVIEWING AND MONITORING THE STRATEGIC DIRECTION OF THE MUSEUM, PROVIDING GUIDANCE ON AND OVERSIGHT OF POLICIES AND OPERATIONS AND SEEING THAT MUSEUM RESOURCES ARE RESPONSIBLY AND PRUDENTLY MANAGED IN COMPLIANCE WITH LEGAL AND ETHICAL REQUIREMENTS. TRUSTEES ARE REQUIRED BY LAW TO ADHERE TO A DUTY OF CARE AND DUTY OF LOYALTY IN CARRYING OUT THE RESPONSIBILITIES OF THE BOARD. A TRUSTEE'S DUTY OF CARE REFERS TO THE RESPONSIBILITY TO EXERCISE APPROPRIATE DILIGENCE IN OVERSEEING THE MANAGEMENT, BUSINESS AND AFFAIRS OF THE MUSEUM, MAKING DECISIONS AND TAKING OTHER ACTIONS. IN MEETING THE DUTY OF CARE, TRUSTEES ARE EXPECTED TO ATTEND AND PARTICIPATE IN BOARD AND COMMITTEE MEETINGS. PARTICIPATION (WHETHER IN PERSON OR BY REMOTE COMMUNICATION) IS REQUIRED. TRUSTEES MAY NOT VOTE OR PARTICIPATE BY PROXY.</p> <p><b>2. REMAIN PROPERLY INFORMED ABOUT THE FOUNDATION'S BUSINESS.</b></p>

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
<p>FORM 990, PART VI, SECTION B, LINE 12C</p>	<p>AND AFFAIRS TRUSTEES SHOULD REVIEW AND DEVOTE APPROPRIATE TIME TO STUDYING BOARD MATERIAL S C RELY ON OTHERS ABSENT KNOWLEDGE THAT MAKES RELIANCE UNWARRANTED, TRUSTEES MAY RELY ON BOARD COMMITTEES, MANAGEMENT, EMPLOYEES, AND PROFESSIONAL ADVISORS D MAKE INQUIRIES TRUSTEES SHOULD MAKE INQUIRIES ABOUT POTENTIAL PROBLEMS THAT COME TO THEIR ATTENTION AND F OLLOW UP UNTIL THEY ARE REASONABLY SATISFIED THAT MANAGEMENT IS ADDRESSING THESE PROBLEMS APPROPRIATELY A TRUSTEE'S DUTY OF LOYALTY REFERS TO THE RESPONSIBILITY TO ACT IN THE MUSE UM'S BEST INTERESTS CONSISTENT WITH ITS MISSION, NOT THE INTERESTS OF THE TRUSTEE, A FAMIL Y MEMBER OR AN ORGANIZATION WITH WHICH THE TRUSTEE IS AFFILIATED TRUSTEES MUST ALSO ACT I N GOOD FAITH TRUSTEES SHOULD NOT USE THEIR POSITIONS FOR PERSONAL GAIN THE DUTY OF LOYAL TY MAY BE RELEVANT IN CASES OF CONFLICT OF INTEREST AND CORPORATE OPPORTUNITIES 2 CONFLI CTS OF INTEREST TRUSTEES SHOULD TRY TO AVOID TAKING ANY ACTION THAT MIGHT CONFLICT, OR AP PEAR TO CONFLICT, WITH THE INTERESTS OF THE MUSEUM HOWEVER, THE MUSEUM IS AWARE THAT, BEC AUSE TRUSTEES ARE ACTIVELY INVOLVED IN A VARIETY OF OUTSIDE PURSUITS, CONFLICTS OF INTERES T MAY ARISE FROM TIME TO TIME ANY SITUATION THAT INVOLVES, OR MAY REASONABLY BE EXPECTED TO INVOLVE, A CONFLICT OF INTEREST WITH THE MUSEUM SHOULD BE DISCLOSED TO THE CHAIRMAN OF THE NOMINATING /GOVERNANCE COMMITTEE FOR REVIEW AND WILL BE MANAGED IN ACCORDANCE WITH APP LICABLE GUIDELINES, DIRECTIVES AND STANDARDS OF CONDUCT THIS POLICY ON CONFLICTS OF INTER EST SHOULD BE READ IN CONJUNCTION WITH THE MUSEUM'S INTERESTED PERSON TRANSACTION POLICIES AND PROCEDURES (THE "INTERESTED TRANSACTION POLICY") CONFLICTS OF INTEREST A CONFLICT OF INTEREST, OR A POTENTIAL OR PERCEIVED CONFLICT, CAN OCCUR WHEN A TRUSTEE'S PERSONAL INTER EST IS ADVERSE TO - OR MAY APPEAR TO BE ADVERSE TO - THE INTERESTS OF THE MUSEUM CONFLICT S OF INTEREST ALSO ARISE WHEN A TRUSTEE, OR A MEMBER OF HIS OR HER IMMEDIATE FAMILY, RECEI VES EXCESS PERSONAL BENEFITS AS A RESULT OF HIS OR HER POSITION AS A TRUSTEE OF THE MUSEUM A TRUSTEE'S IMMEDIATE FAMILY INCLUDES THE TRUSTEE'S SPOUSE OR DOMESTIC PARTNER, PARENTS, BROTHERS AND SISTERS (WHETHER WHOLE- OR HALF-BLOOD), CHILDREN (WHETHER NATURAL OR ADOPTED ), GRANDCHILDREN, GREAT-GRANDCHILDREN, AND SPOUSES OF BROTHERS, SISTERS, CHILDREN, GRANDCH ILDREN, AND GREAT- GRANDCHILDREN THIS CODE DOES NOT ATTEMPT TO DESCRIBE ALL POSSIBLE CONFL ICTS OF INTEREST WHICH COULD DEVELOP SOME OF THE MORE COMMON CONFLICTS, HOWEVER, ARE SET OUT BELOW A INTERESTED PERSON TRANSACTIONS TRANSACTIONS BETWEEN THE MUSEUM AND TRUSTEES OR ENTITIES WITH WHICH TRUSTEES ARE AFFILIATED SHOULD ONLY BE CONDUCTED PURSUANT TO THE G UIDELINES AND RESTRICTIONS SET FORTH IN THE INTERESTED TRANSACTION POLICY B RELATIONSHIP OF MUSEUM WITH THIRD PARTIES TRUSTEES MAY NOT ENGAGE IN ANY CONDUCT OR ACTIVITIES THAT D ISRUPT OR IMPAIR THE MUSEUM'S RELATIONSHIP WITH ANY PERSON OR ENTITY WITH WHICH THE MUSEUM HAS OR PROPOSES TO ENTER INTO</p>



**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION B, LINE 12C	A BUSINESS OR CONTRACTUAL RELATIONSHIP C COMPENSATION FROM NON-MUSEUM SOURCES TRUSTEES MAY NOT ACCEPT COMPENSATION (IN ANY FORM) FOR SERVICES PERFORMED FOR THE MUSEUM FROM ANY SOURCE (OTHER THAN REIMBURSEMENT OF EXPENSES RELATING TO MEETINGS OF THE BOARD, IF ANY, PROVIDED BY THE FOUNDATION) D GIFTS TRUSTEES AND MEMBERS OF THEIR IMMEDIATE FAMILIES MAY NOT ACCEPT GIFTS OF MORE THAN A NOMINAL VALUE FROM PERSONS OR ENTITIES WHO DEAL WITH THE MUSEUM E PERSONAL USE OF MUSEUM ASSETS TRUSTEES MAY NOT USE MUSEUM ASSETS, LABOR OR INFORMATION FOR PERSONAL USE UNLESS APPROVED BY THE CHAIRMAN OF THE NOMINATING /GOVERNANCE COMMITTEE OR AS PART OF A PROGRAM AVAILABLE TO ALL TRUSTEES DISCLOSURE OF CONFLICTS OF INTEREST ON AN ANNUAL BASIS, TRUSTEES MUST COMPLETE THE ATTACHED "ANNUAL CERTIFICATION," WHICH MUST DESCRIBE ANY EXISTING OR POTENTIAL CONFLICTS OF INTEREST AND PROPOSED INTERESTED PERSONS TRANSACTIONS AND AFFIRMS THAT SUCH PERSON A HAS RECEIVED A COPY OF THIS CODE AND THE INTERESTED TRANSACTION POLICY, B HAS READ AND UNDERSTANDS THIS CODE AND THE INTERESTED TRANSACTION POLICY, AND C HAS AGREED TO COMPLY WITH THIS CODE AND THE INTERESTED TRANSACTION POLICY DURING THE COURSE OF THE YEAR, IN THE EVENT THAT A TRUSTEE BECOMES AWARE OF AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST, WHETHER IT INVOLVES THE TRUSTEE OR ANOTHER MEMBER OF THE BOARD OR MEMBERS OF A TRUSTEE'S IMMEDIATE FAMILY, THE TRUSTEE MUST PROMPTLY NOTIFY THE CHAIRMAN OF THE NOMINATING /GOVERNANCE COMMITTEE IN ADDITION, ALL COMMITTEES OF THE BOARD SHALL INQUIRE ABOUT POTENTIAL CONFLICTS OF INTEREST AS IT RELATES TO ANY CONTRACTS OR COMPENSATION THAT THEY APPROVE AS PART OF THEIR OVERSIGHT RESPONSIBILITIES TRUSTEES MUST DISCLOSE THEIR INTEREST AND DESCRIBE ALL MATERIAL FACTS RELATED TO THE POTENTIAL CONFLICT OF INTEREST TO ENABLE THE NOMINATING /GOVERNANCE COMMITTEE TO REVIEW THE ACTUAL, POTENTIAL OR PERCEIVED CONFLICT

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	<p>THE EXECUTIVE COMMITTEE AND THE BOARD, VIA THE BUDGET PRESENTATION AND APPROVAL PROCESS, ARE RESPONSIBLE FOR APPROVING THE HIRING COMPENSATION AND ANNUAL EVALUATIONS FOR SALARY INCREASES. THE COMMITTEE STUDIES MARKET COMPENSATION AND COMPETITIVENESS, ANALYZING BOTH ECONOMIC CLIMATE, CURRENT BUDGET RESTRICTIONS IF HIRE IS WITHIN A BUDGET CYCLE, COMPETITIVE DATA AT SIMILAR INSTITUTIONS IN METROPOLITAN LOCATIONS BEGINNING WITH NYC (COMPARING BUDGET SIZE, POSITION RESPONSIBILITY, NUMBER OF SUBORDINATES TO BE MANAGED, ETC), POSITION WITHIN NON-PROFIT WORLD AND FOR PROFIT WORLD. THEY ALSO USE CURRENT SURVEY DATA FOR COMPARATIVE ANALYSIS FROM VARIOUS APPLICABLE SOURCES IN THE MUSEUM FIELD, SUCH AS AMERICAN ASSOCIATION OF MUSEUMS, MUSEUM ASSOCIATION OF NY, AS WELL AS A SALARY SURVEY FROM PNP (PROFESSIONALS FOR NON-PROFITS) AND COMPARATIVE SALARY INFORMATION FROM THE NEW YORK CULTURAL INSTITUTIONS HUMAN RESOURCES GROUP, AND DATA AVAILABLE FOR THE FIELDS APPLICABLE TO THE POSITION, E.G. ACCOUNTING, OPERATIONS, EDUCATION. AT MOST SENIOR LEVELS, PRESIDENT DISCUSSES REQUIREMENTS AND PROPOSED SALARY RANGE WITH THE COMPENSATION COMMITTEE. FOR PRESIDENT, THE CO-CHAIRMAN OF THE BOARD WOULD BE INVOLVED IN THE DECISION-MAKING PROCESS AND DISCUSS REQUIREMENTS AND SALARY RANGES WITH MEMBERS OF THE COMPENSATION AND EXECUTIVE COMMITTEES. TO ESTABLISH SALARY INCREASES AND BONUSES, THE PRESIDENT ASSESSES PERFORMANCE OF DIRECT REPORTS, AND PRESIDENT'S PERFORMANCE IS ASSESSED BY CO-CHAIRMEN. AT THE END OF THE FISCAL YEAR, ALL STAFF, INCLUDING SENIOR STAFF, UNDERGO PERFORMANCE REVIEWS. SENIOR MANAGEMENT PERFORMANCE IS EVALUATED BASED ON GOALS SET FOR THE MUSEUM, EACH DEPARTMENT, MANAGEMENT OF RESPECTIVE TEAMS, AND SUCCESS OF OVERALL VENUE (SUCCESS IS MEASURED THROUGH REVENUE, BRAND AWARENESS, CUSTOMER SATISFACTION, GROWTH OF PROGRAMMING AND CONTENT, GROWTH IN ATTENDANCE, INTEGRITY AND UPKEEP OF SAFE INFRASTRUCTURE) BASED ON THOSE ASSESSMENTS, THE PRESIDENT RECOMMENDS SALARY INCREASES AND BONUSES FOR EACH MEMBER OF SENIOR MANAGEMENT TO THE COMPENSATION COMMITTEE BASED ON ACHIEVEMENTS AND BUDGET AVAILABILITY. THE COMPENSATION COMMITTEE ENGAGES A COMPENSATION CONSULTANT TO PERFORM MARKET STUDIES OF COMPARABLE ORGANIZATIONS AND SENIOR MANAGEMENT POSITIONS. IT MEETS WITH THE CONSULTING FIRM AND THE PRESIDENT OF THE MUSEUM. IF THE COMPENSATION COMMITTEE HAS ANY QUESTIONS OR RECOMMENDATIONS, THE PRESIDENT ADDRESSES THEM AND MAKES REVISIONS. THE COMMITTEE THEN CONSIDERS THE PRESIDENT'S RECOMMENDATIONS AND APPROVES THEM OR DIRECTS THE PRESIDENT TO MODIFY HER RECOMMENDATIONS BASED ON OTHER FACTORS. THE PRESIDENT ALSO PRESENTS HER ACCOMPLISHMENTS TO THE CO-CHAIRMEN OF BOARD FOR REVIEW. THE CO-CHAIRMEN CONSULT WITH THE COMPENSATION COMMITTEE AND COMPENSATION CONSULTANT TO APPROVE SALARY INCREASES AND BONUSES FOR THE PRESIDENT. IF BONUS AND SALARY INCREASES ARE APPROVED BY THE COMPENSATION COMMITTEE, THE CHAIRMAN OF THE COMPENSATION COMMITTEE ADVISES THE PRESIDENT, AND THE PROPER DOCUMENTATION IS FILED.</p>

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION B, LINE 15	MENTATION IS PREPARED AND SUBMITTED TO FINANCE AND THE BONUSES ARE PAID AND THE INCREASES ARE IMPLEMENTED THIS PROCESS WAS LAST UNDERTAKEN DURING 2018

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION C, LINE 18	THE MUSEUM MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION AS REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE BY HAVING THE 990 POSTED ON GUIDESTAR ORG AS WELL AS THE INTREPID WEBSITE IN ADDITION, FORMS 990 AND 1023 AS WELL AS THE CONFLICT OF INTEREST POLICY, ARTICLES OF INCORPORATION, BY-LAWS AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST OF THE MUSEUM AT ONE INTREPID SQUARE (W 46 ST & 12TH AVE ), NEW YORK, NY 10036

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION C, LINE 19	THE MUSEUM MAKES ITS FINANCIAL STATEMENTS AND CERTAIN OF ITS CORPORATE DOCUMENTS REGARDING ITS 501(C)(3) STATUS AVAILABLE TO THE PUBLIC ON ITS WEBSITE THE MUSEUM MAKES CERTAIN OF ITS GOVERNING DOCUMENTS AND ITS CONFLICT OF INTEREST ARE AVAILABLE TO THE PUBLIC ON REQUEST

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART XII, LINE 2C	THE FOUNDATION'S PROCESS FOLLOWED FOR AUDIT OVERSIGHT AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM THE PROCESS EMPLOYED IN THE PRIOR YEAR

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No 1545-0047

**2018**

**Open to Public  
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**  
▶ **Attach to Form 990.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
INTREPID MUSEUM FOUNDATION INC

**Employer identification number**

13-3062419

**Part I Identification of Disregarded Entities** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

**Part II Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)INTREPID RELIEF FUND ONE INTREPID SQUARE W46TH ST 12TH A  NEW YORK, NY 10036 13-6894054	TO PROVIDE SUPPORT FOR PROGRAMS ASSISTING WOUNDED MILITARY PERSONNEL	NY	501 (C)(3)	LINE 7			No

**Part III Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No



**Part V Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

	Yes	No
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .		No
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .		No
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .		No
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .		No
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .		No
<b>f</b> Dividends from related organization(s) . . . . .		No
<b>g</b> Sale of assets to related organization(s) . . . . .		No
<b>h</b> Purchase of assets from related organization(s) . . . . .		No
<b>i</b> Exchange of assets with related organization(s) . . . . .		No
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .		No
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .		No
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .	Yes	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .		No
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .	Yes	
<b>o</b> Sharing of paid employees with related organization(s) . . . . .	Yes	
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .		No
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .		No
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .		No
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .		No

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

**Part VI Unrelated Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

**Part VII**   **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

<b>Return Reference</b>	<b>Explanation</b>