

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.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2015 calendar year, or tax year beginning , 2015, and ending ,

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending	C Name of organization THE WORLD WAR II FOUNDATION		D Employer identification number
	Doing business as		27-4793304
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number
	333 WHITE HORN DRIVE		(401) 862-3422
	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ 539,992.
KINGSTON RI 02881			
F Name and address of principal officer: TIM GRAY 333 WHITE HORN DR KINGSTON RI 02881		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)	
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527		H(c) Group exemption number ▶	
J Website: ▶ N/A			
K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶		L Year of formation: 2011 M State of legal domicile: RI	

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities:	TO PRODUCE EDUCATIONAL FILMS AND CREATE INITIATIVES RECOGNIZING THE BRAVERY AND ENORMOUS CONTRIBUTIONS MADE BY THE MEN AND WOMEN OF THE UNITED STATES MILITARY DURING WORLD WAR II SO THAT FUTURE GENERATIONS OF AMERICANS APPRECIATE THE DETERMINATION AND SACRIFICES THAT ENABLES PERPETUATION OF OUR BASIC FREEDOMS.	
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	13
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	1
	6	Total number of volunteers (estimate if necessary)	6	10
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	558,603.	445,440.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	18.	820.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	37,713.	44,121.
	12	Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)	596,334.	490,381.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	52,364.	52,306.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶	17,025.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	356,335.	535,262.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	408,699.	587,568.
19	Revenue less expenses. Subtract line 18 from line 12	187,635.	-97,187.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	229,420.	133,560.
	22	Net assets or fund balances. Subtract line 21 from line 20	1,301.	2,628.
			228,119.	130,932.

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	03/15/16	
	TIM GRAY	PRESIDENT/CHAIRMAN	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	KENNETH L RICHARDSON JR	KENNETH L RICHARDSON JR	02/29/16
	Firm's name	KENNETH L. RICHARDSON, JR CPA INC	
	Firm's address	535 ATWOOD AVE SUITE 1 CRANSTON RI 02920	
	Check ☐ if self-employed	PTIN	P00291998
	Firm's EIN ▶	54-2091252	
	Phone no.	(401) 941-0900	

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