CLIFTON LIPFORD HARDISON & PARKER
1503 Bass Road, Macon, GA 31210 (478) 742-3313
468 South Houston Lake Road, Warner Robins, GA 31088 (478) 953-0125

June 28, 2017

Museum of Aviation at Robins AFB,
Georgia Foundation, Inc.
P.O. Box 2469
Warner Robins, GA 31099

Dear Chrissy:

Your 2015 Federal Return of Organization Exempt from Income Tax will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879-EO - IRS e-file Signature Authorization.

Your 2015 Federal Return of Organization Exempt from Income Tax is due by August 15, 2017 and is not complete until you return the signed Form 8879-EO to us and we transmit your tax return to the Internal Revenue Service. Due to the heavy volume of returns around the due date and in order to avoid any unforeseen problems or technical difficulties, we ask that you please return the signed form to us at least three days prior to the due date. We will send you an acknowledgement letter once the transmission has been accepted.

No tax is payable with the filing of this return.

A copy of the Federal return should also be signed and mailed to:

GEORGIA DEPARTMENT OF REVENUE
P O BOX 740395
ATLANTA, GA 30374-0395

An electronic copy of your tax return(s) are published on the enclosed CD for your records.

Of course, we will gladly provide you with a paper copy of your tax return upon request.

Thank you for choosing our firm to prepare your income tax returns. We appreciate your business. Please feel free to call us if you have any questions.

Sincerely,

J. Russell Lipford, Jr.

Form **8879-EO**

Department of the Treasury
Internal Revenue Service

IRS *e-file* Signature Authorization for an Exempt Organization

For calendar year 2015, or fiscal year beginning 10/01 , 2015, and ending 9/30 , 20 2016

► **Do not send to the IRS. Keep for your records.**

► **Information about Form 8879-EO and its instructions is at *www.irs.gov/form8879eo.***

OMB No. 1545-1878

2015

Name of exempt organization
MUSEUM OF AVIATION AT ROBINS AFB, GEORGIA FOUNDATION, INC.

Employer identification number
58-1451656

Name and title of officer
CHRISTINE K. MINER PRESIDENT & CEO

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a,** or **5a,** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b,** or **5b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here ►	[X]	**b Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	**1b** 3,946,377.
2a Form 990-EZ check here ►	[ ]	**b Total revenue,** if any (Form 990-EZ, line 9)	**2b**
3a Form 1120-POL check here ►	[ ]	**b Total tax** (Form 1120-POL, line 22)	**3b**
4a Form 990-PF check here ►	[ ]	**b Tax based on investment income** (Form 990-PF, Part VI, line 5)	**4b**
5a Form 8868 check here ►	[ ]	**b Balance Due** (Form 8868, Part I, line 3c or Part II, line 8c)	**5b**

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2015 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

[X] I authorize CLIFTON LIPFORD HARDISON & PARKER to enter my PIN 14998 as my signature

ERO firm name

Enter five numbers, but do not enter all zeros

on the organization's tax year 2015 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

[ ] As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2015 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ► _____ Date ► _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 58250572758

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2015 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature ► _____ Date ► _____

ERO Must Retain This Form – See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So

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

OMB No. 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 10/01 , 2015, and ending 9/30 , 2016

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

C
MUSEUM OF AVIATION AT ROBINS AFB,
GEORGIA FOUNDATION, INC.
P.O. BOX 2469
WARNER ROBINS, GA 31099

D Employer identification number
58-1451656

E Telephone number
478-923-6600

G Gross receipts $ 4,398,131.

F Name and address of principal officer:
SAME AS C ABOVE

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

J Website: ► WWW.MUSEUMOFAVIATION.ORG

H(c) Group exemption number ►

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ► **L** Year of formation: 1982 **M** State of legal domicile: GA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: EDUCATION - CUSTODIAN OF AIR FORCE HISTORY

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**	72
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	70
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	**5**	61
6	Total number of volunteers (estimate if necessary)	**6**	100
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.

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	1,827,153.	1,686,439.
9	Program service revenue (Part VIII, line 2g)		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	19.	4.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	537,300.	2,259,934.
12	Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,364,472.	3,946,377.
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)	1,810,557.	1,721,790.
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ► 219,203.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	962,159.	411,955.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,772,716.	2,133,745.
19	Revenue less expenses. Subtract line 18 from line 12	-408,244.	1,812,632.

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	948,669.	825,860.
21	Total liabilities (Part X, line 26)	2,724,462.	732,130.
22	Net assets or fund balances. Subtract line 21 from line 20	-1,775,793.	93,730.

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

CHRISTINE K. MINER — PRESIDENT & CEO
Type or print name and title.

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
J. RUSSELL LIPFORD, JR.				P01308497

Firm's name ► CLIFTON LIPFORD HARDISON & PARKER
Firm's address ► 1503 BASS RD
MACON, GA 31210-7511
Firm's EIN ► 58-2253342
Phone no. (478) 742-3313

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

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:

EDUCATION - CUSTODIAN OF AIR FORCE HISTORY

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 $ 1,364,089. including grants of $) (Revenue $)

THE EXEMPT PURPOSE IS THE CONSTRUCTION, OPERATION AND MAINTENANCE OF THE MUSEUM OF AVIATION AT ROBINS AIR FORCE BASE, GEORGIA.

4b (Code:) (Expenses $ including grants of $) (Revenue $)

4c (Code:) (Expenses $ including grants of $) (Revenue $)

4d Other program services. (Describe in Schedule O.)

(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ► 1,364,089.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If 'Yes,' complete Schedule A*	**1**	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	**2**		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If 'Yes,' complete Schedule C, Part I*	**3**		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If 'Yes,' complete Schedule C, Part II*	**4**		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If 'Yes,' complete Schedule C, Part III*	**5**		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If 'Yes,' complete Schedule D, Part I*	**6**		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If 'Yes,' complete Schedule D, Part II*	**7**		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If 'Yes,' complete Schedule D, Part III*	**8**		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If 'Yes,' complete Schedule D, Part IV*	**9**		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If 'Yes,' complete Schedule D, Part V*	**10**		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings and equipment in Part X, line 10? *If 'Yes,' complete Schedule D, Part VI*	**11 a**	X	
b	Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VII*	**11 b**		X
c	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VIII*	**11 c**		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part IX*	**11 d**	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If 'Yes,' complete Schedule D, Part X*	**11 e**	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If 'Yes,' complete Schedule D, Part X*	**11 f**	X	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? *If 'Yes,' complete Schedule D, Parts XI, and XII*	**12a**	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional*	**12 b**		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If 'Yes,' complete Schedule E*	**13**		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	**14a**		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If 'Yes,' complete Schedule F, Parts I and IV*	**14b**		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If 'Yes,' complete Schedule F, Parts II and IV*	**15**		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If 'Yes,' complete Schedule F, Parts III and IV*	**16**		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If 'Yes,' complete Schedule G, Part I* (see instructions)	**17**		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If 'Yes,' complete Schedule G, Part II*	**18**	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If 'Yes,' complete Schedule G, Part III*	**19**		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
20a	Did the organization operate one or more hospital facilities? *If 'Yes', complete Schedule H*	**20a**		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	**20b**		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If 'Yes,' complete Schedule I, Parts I and II*	**21**		X
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If 'Yes,' complete Schedule I, Parts I and III*	**22**		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If 'Yes,' complete Schedule J*	**23**		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a*	**24a**		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	**24d**		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If 'Yes,' complete Schedule L, Part I*	**25a**		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If 'Yes,' complete Schedule L, Part I*	**25b**		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If 'Yes', complete Schedule L, Part II*	**26**		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If 'Yes,' complete Schedule L, Part III*	**27**		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV*	**28a**		X
b	A family member of a current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV*	**28b**		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If 'Yes,' complete Schedule L, Part IV*	**28c**		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If 'Yes,' complete Schedule M*	**29**		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If 'Yes,' complete Schedule M*	**30**		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If 'Yes,' complete Schedule N, Part I*	**31**		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If 'Yes,' complete Schedule N, Part II*	**32**		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If 'Yes,' complete Schedule R, Part I*	**33**		X
34	Was the organization related to any tax-exempt or taxable entity? *If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1*	**34**		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	**35a**		X
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If 'Yes,' complete Schedule R, Part V, line 2*	**35b**		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If 'Yes,' complete Schedule R, Part V, line 2*	**36**		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If 'Yes,' complete Schedule R, Part VI*	**37**		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	X	

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
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	**1a**	0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	**1b**	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			**1c**	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	**2a**	61		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			**2b**	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			**3a**		X
b	If 'Yes' has it filed a Form 990-T for this year? *If 'No' to line 3b, provide an explanation in Schedule O*			**3b**		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			**4a**		X
b	If 'Yes,' enter the name of the foreign country: ►					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			**5a**		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**		X
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?			**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			**6a**		X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			**7a**	X	
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?			**7b**	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			**7c**		X
d	If 'Yes,' indicate the number of Forms 8282 filed during the year	**7d**				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			**7e**		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			**7f**		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			**7h**		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			**8**		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the sponsoring organization make any taxable distributions under section 4966?			**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			**9b**		
10	**Section 501(c)(7) organizations.** Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	**10a**				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**				
11	**Section 501(c)(12) organizations.** Enter:					
a	Gross income from members or shareholders	**11a**				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	**11b**				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			**12a**		
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	**12b**				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state?			**13a**		
	Note. See the instructions for additional information the organization must report on Schedule O.					
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	**13b**				
c	Enter the amount of reserves on hand	**13c**				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			**14a**		X
b	If 'Yes,' has it filed a Form 720 to report these payments? *If 'No,' provide an explanation in Schedule O*			**14b**		

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

Section A. Governing Body and Management

			Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year . . . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	**1a**	72		
b Enter the number of voting members included in line 1a, above, who are independent	**1b**	70		
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? SEE SCHEDULE O	**2**		X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	**3**			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	**4**			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	**5**			X
6 Did the organization have members or stockholders?	**6**			X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	**7a**			X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	**7b**			X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	**8a**		X	
b Each committee with authority to act on behalf of the governing body?	**8b**		X	
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*	**9**			X

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

		Yes	No
10a Did the organization have local chapters, branches, or affiliates?	**10a**		X
b 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?	**10b**		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	**11a**	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O			
12a Did the organization have a written conflict of interest policy? *If 'No,' go to line 13*	**12a**	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? *If 'Yes,' describe in Schedule O how this was done* SEE SCHEDULE O	**12c**	X	
13 Did the organization have a written whistleblower policy?	**13**	X	
14 Did the organization have a written document retention and destruction policy?	**14**	X	
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?			
a The organization's CEO, Executive Director, or top management official SEE SCHEDULE O	**15a**	X	
b Other officers or key employees of the organization SEE SCHEDULE O	**15b**	X	
If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	**16a**		X
b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	**16b**		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► GA

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other *(explain 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. SEE SCHEDULE O

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ►

JENNY MAAS BOOTH RD & HWY 247 WARNER ROBINS GA 31088 478-923-6600

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

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

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

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

☐ Check this box if neither the organization 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			
(1) MARLON NICHOLS	2									
BOARD MEMBER	0	X						0.	0.	0.
(2) CAROLYN CRAYTON	1									
CHAIR EMERITUS	0	X						0.	0.	0.
(3) DON BAILEY	1									
BOARD MEMBER	0	X						0.	0.	0.
(4) BOB MCMAHON	2									
BOARD MEMBER	0	X						0.	0.	0.
(5) TOM MCMICHAEL	1									
PAST CHAIRMAN	0	X		X				0.	0.	0.
(6) RANDY MEAD	1									
BOARD MEMBER	0	X						0.	0.	0.
(7) JOHN LUPPINO	2									
TREASURER	0	X		X				0.	0.	0.
(8) JIMMY AUTRY	1									
BOARD MEMBER	0	X						0.	0.	0.
(9) CHUCK DEBOE	1									
BOARD MEMBER	0	X						0.	0.	0.
(10) OLIVER BATEMAN, III	1									
BOARD MEMBER	0	X						0.	0.	0.
(11) MARK BAYER	1									
BOARD MEMBER	0	X						0.	0.	0.
(12) MARSHALL BUTLER	1									
BOARD MEMBER	0	X						0.	0.	0.
(13) MARK BYRD	1									
BOARD MEMBER	0	X						0.	0.	0.
(14) DR. DAN CALLAHAN	1									
BOARD MEMBER	0	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organiza - tions 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			
(15) DAVID CANADY	1									
BOARD MEMBER	0	X						0.	0.	0.
(16) DR. IVAN ALLEN	1									
BOARD MEMBER	0	X						0.	0.	0.
(17) DR. JOHN BLACK	1									
BOARD MEMBER	0	X						0.	0.	0.
(18) STEVE DAVISON	2									
BOARD MEMBER	0	X						0.	0.	0.
(19) DAVE CYR	1									
BOARD MEMBER	0	X						0.	0.	0.
(20) ROB BROOKS	1									
BOARD MEMBER	0	X						0.	0.	0.
(21) SPENCER STRICKLAND	1									
BOARD MEMBER	0	X						0.	0.	0.
(22) GUY EBERHARDT	1									
BOARD MEMBER	0	X						0.	0.	0.
(23) ROBBO HATCHER	1									
BOARD MEMBER	0	X						0.	0.	0.
(24) SUE DRYDEN	1									
BOARD MEMBER	0	X						0.	0.	0.
(25) ROY FICKLING	1									
BOARD MEMBER	0	X						0.	0.	0.
1 b Sub-total ►								0.	0.	0.
c Total from continuation sheets to Part VII, Section A ►								101,890.	0.	0.
d Total (add lines 1b and 1c) ►								101,890.	0.	0.

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 ► 0

		Yes	No
3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If 'Yes,' complete Schedule J for such individual*	**3**		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If 'Yes' complete Schedule J for such individual*	**4**		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If 'Yes,' complete Schedule J for such person*	**5**		X

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.

(A) Name and business address	(B) Description of services	(C) Compensation

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 ► 0

Form 990

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

OMB No. 1545-0047

2015

Name of the Organization

MUSEUM OF AVIATION AT ROBINS AFB,

Employer Identification number

58-1451656

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (check all that apply)						(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			
BRAD FINK	1									
BOARD MEMBER	0	X						0.	0.	0.
GEORGE MCCANLESS	1									
BOARD MEMBER	0	X						0.	0.	0.
RICHARD HADDAD	1									
BOARD MEMBER	0	X						0.	0.	0.
LISA FRUGE-CIRILLI	1									
BOARD MEMBER	0	X						0.	0.	0.
DAVID HOLLINGSWORTH	1									
BOARD MEMBER	0	X						0.	0.	0.
DR. STEPHAN F. HOLCOMB	1									
BOARD MEMBER	0	X						0.	0.	0.
STEVE HOLCOMB, JR.	1									
BOARD MEMBER	0	X						0.	0.	0.
JOHNNY JONES	1									
BOARD MEMBER	0	X						0.	0.	0.
KAREN LAMBERT	1									
BOARD MEMBER	0	X						0.	0.	0.
WAYNE LOWE	1									
BOARD MEMBER	0	X						0.	0.	0.
HENRY LOWE	1									
SECRETARY	0	X		X				0.	0.	0.
ED OLSON	1									
BOARD MEMBER	0	X						0.	0.	0.
LARRY PUGH	1									
BOARD MEMBER	0	X						0.	0.	0.
BOB RAY	1									
BOARD MEMBER	0	X						0.	0.	0.
LOWELL REGISTER	1									
BOARD MEMBER	0	X						0.	0.	0.
JOHN RHEA	1									
BOARD MEMBER	0	X						0.	0.	0.
KEITH YEAGER	1									
BOARD MEMBER	0	X						0.	0.	0.
CHRISTINE K. MINER	40									
PRESIDENT & CEO	0	X		X				6,081.	0.	0.
MAJ.GEN. GEORGE HARRISON	1									
BOARD MEMBER	0	X						0.	0.	0.
JEFF SMITH	1									
BOARD MEMBER	0	X						0.	0.	0.
TERRY SMITH	1									
BOARD MEMBER	0	X						0.	0.	0.

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Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

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2015

Name of the Organization

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58-1451656

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (check all that apply)						(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			
JACK STEED	1									
BOARD MEMBER	0	X						0.	0.	0.
MARK STEVENS	1									
BOARD MEMBER	0	X						0.	0.	0.
AL STEWART	1									
BOARD MEMBER	0	X						0.	0.	0.
BROTHER STEWART	1									
BOARD MEMBER	0	X						0.	0.	0.
WILLIE JONES	1									
BOARD MEMBER	0	X						0.	0.	0.
BILAL KHAN	1									
BOARD MEMBER	0	X						0.	0.	0.
LANCE TOLAND	1									
BOARD MEMBER	0	X						0.	0.	0.
BOB WALKER	1									
BOARD MEMBER	0	X						0.	0.	0.
ANDY WATSON, JR.	1									
BOARD MEMBER	0	X						0.	0.	0.
DAVID LANIER	1									
BOARD MEMBER	0	X						0.	0.	0.
STEVE WILLIAMS	1									
BOARD MEMBER	0	X						0.	0.	0.
DR. TODD KINNEBREW	8									
BOARD MEMBER	0	X						0.	0.	0.
WALTER LINDSLEY	1									
BOARD MEMBER	0	X						0.	0.	0.
ROBIN NELSON	1									
BOARD MEMBER	0	X						0.	0.	0.
CARL MAYS	1									
BOARD MEMBER	0	X						0.	0.	0.
NEIL TALTON	1									
BOARD MEMBER	0	X						0.	0.	0.
ANDY THOMAS	1									
BOARD MEMBER	0	X						0.	0.	0.
LARRY WALKER III	1									
BOARD MEMBER	0	X						0.	0.	0.
JAY SMITH	0									
BOARD MEMBER	0	X						0.	0.	0.
PATRICK BARTNESS	40									
PRESIDENT & COO	0	X						95,809.	0.	0.
DAWN LANCASTER	1									
BOARD MEMBER	0	X						0.	0.	0.

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2015

Name of the Organization

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Employer Identification number

58-1451656

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (check all that apply)						(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			
SHAW BLACKMON	1									
BOARD MEMBER	0	X						0.	0.	0.
JOE BROWNLEE	1									
BOARD MEMBER	0	X						0.	0.	0.
CASEY KING	1									
BOARD MEMBER	0	X						0.	0.	0.
DAN PENNY	1									
CHAIRMAN	0	X		X				0.	0.	0.
LINDA SHINGLER	1									
BOARD MEMBER	0	X						0.	0.	0.

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
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	495,321.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,191,118.				
	g Noncash contributions included in lines 1a-1f: $ 1,363.						
	h **Total.** Add lines 1a-1f			1,686,439.			
Program Service Revenue		**Business Code**					
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a-2f						
	3 Investment income (including dividends, interest and other similar amounts)			4.			4.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
		(i) Real	(ii) Personal				
	6a Gross rents						
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory						
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)						
Other Revenue	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18	a	697,409.				
	b Less: direct expenses	b	295,392.				
	c Net income or (loss) from fundraising events			402,017.			402,017.
	9a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	a	301,942.				
	b Less: cost of goods sold	b	156,362.				
	c Net income or (loss) from sales of inventory			145,580.			145,580.
	Miscellaneous Revenue		**Business Code**				
	11a RELEASE OF DEBT			1,712,337.			1,712,337.
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a-11d			1,712,337.			
	12 **Total revenue.** See instructions			3,946,377.	0.	0.	2,259,938.

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 . . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	**(A)** Total expenses	**(B)** Program service expenses	**(C)** Management and general expenses	**(D)** Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	124,335.	0.	59,947.	64,388.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	1,332,951.	908,865.	284,848.	139,238.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	144,339.	125,908.	18,431.	
10 Payroll taxes	120,165.	79,001.	25,587.	15,577.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	22,831.		22,831.	
12 Advertising and promotion	714.	714.		
13 Office expenses	53,282.		53,282.	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	18,340.	18,340.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	60,458.	60,458.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	17,607.	17,607.		
23 Insurance	13,946.	13,946.		
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a EDUCATION	81,205.	81,205.		
b ADMINISTRATION	56,079.		56,079.	
c MARKETING	35,030.	35,030.		
d BANK CHARGES	29,448.		29,448.	
e All other expenses	23,015.	23,015.		
25 **Total functional expenses.** Add lines 1 through 24e	2,133,745.	1,364,089.	550,453.	219,203.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash — non-interest-bearing		247,417.	1	182,116.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		251,312.	3	199,765.
	4	Accounts receivable, net		17,637.	4	8,290.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		59,560.	8	44,397.
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 668,595.			
	b	Less: accumulated depreciation	10b 328,122.	327,107.	10c	340,473.
	11	Investments — publicly traded securities			11	
	12	Investments — other securities. See Part IV, line 11			12	
	13	Investments — program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		45,636.	15	50,819.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		948,669.	16	825,860.
Liabilities	17	Accounts payable and accrued expenses		249,759.	17	62,043.
	18	Grants payable			18	
	19	Deferred revenue		13,879.	19	4,765.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	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			22	
	23	Secured mortgages and notes payable to unrelated third parties		1,959,721.	23	287,809.
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		501,103.	25	377,513.
	26	**Total liabilities.** Add lines 17 through 25		2,724,462.	26	732,130.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ► ☒ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		-1,951,455.	27	93,730.
	28	Temporarily restricted net assets		175,662.	28	
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		-1,775,793.	33	93,730.
	34	Total liabilities and net assets/fund balances		948,669.	34	825,860.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	**1**	3,946,377.
2	Total expenses (must equal Part IX, column (A), line 25)	**2**	2,133,745.
3	Revenue less expenses. Subtract line 2 from line 1	**3**	1,812,632.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	**4**	-1,775,793.
5	Net unrealized gains (losses) on investments	**5**	
6	Donated services and use of facilities	**6**	
7	Investment expenses	**7**	
8	Prior period adjustments	**8**	10,081.
9	Other changes in net assets or fund balances (explain in Schedule O) SEE SCHEDULE O	**9**	46,810.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	**10**	93,730.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: [ ] Cash [X] 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?	**2a**		X
	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?	**2b**	X	
	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: [X] 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?	**2c**	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	**3a**		X
b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	**3b**		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.**

► **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.***

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization	Employer identification number
MUSEUM OF AVIATION AT ROBINS AFB, GEORGIA FOUNDATION, INC.	58-1451656

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 11, 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 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.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ 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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.

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 1-9 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
(A)							
(B)							
(C)							
(D)							
(E)							
Total							

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

(Complete only if you checked the box on line 5, 7, or 8 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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	1,742,016.	1,874,784.	1,995,624.	1,827,153.	1,686,439.	9,126,016.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 **Total.** Add lines 1 through 3	1,742,016.	1,874,784.	1,995,624.	1,827,153.	1,686,439.	9,126,016.
5 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)						0.
6 **Public support.** Subtract line 5 from line 4						9,126,016.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	1,742,016.	1,874,784.	1,995,624.	1,827,153.	1,686,439.	9,126,016.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	61.	15.	78.	19.	4.	177.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11 **Total support.** Add lines 7 through 10						9,126,193.

12 Gross receipts from related activities, etc. (see instructions)	12	0.

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

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	100.00 %
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	99.98 %

16a **33-1/3% support test — 2015.** 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 — 2014.** 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 — 2015.** 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 — 2014.** 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 9 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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')						
2 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						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **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

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2015** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2014** Schedule A, Part III, line 17	18	%

19a **33-1/3% support tests — 2015.** 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 — 2014.** 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 in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If 'No,' describe in* ***Part VI*** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain*	**1**		
2	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* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2)*	**2**		
3 a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If 'Yes,' answer (b) and (c) below*	**3a**		
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* ***Part VI*** *when and how the organization made the determination*	**3b**		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If 'Yes,' explain in* ***Part VI*** *what controls the organization put in place to ensure such use*	**3c**		
4 a	Was any supported organization not organized in the United States ('foreign supported organization')? *If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below*	**4a**		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If 'Yes,' describe in* ***Part VI*** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations*	**4b**		
c	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* ***Part VI*** *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*	**4c**		
5 a	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* ***Part VI,*** *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)*	**5a**		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	**5b**		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	**5c**		
6	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* ***Part VI***	**6**		
7	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)*	**7**		
8	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)*	**8**		
9 a	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* ***Part VI***	**9a**		
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* ***Part VI***	**9b**		
c	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* ***Part VI***	**9c**		
10 a	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 10b below*	**10a**		
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.)*	**10b**		

Part IV Supporting Organizations *(continued)*

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	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?	**11a**	
b	A family member of a person described in (a) above?	**11b**	
c	A 35% controlled entity of a person described in (a) or (b) above? *If 'Yes' to a, b, or c, provide detail in* ***Part VI***	**11c**	

Section B. Type I Supporting Organizations

		Yes	No
1	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? *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*	**1**	
2	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? *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*	**2**	

Section C. Type II Supporting Organizations

		Yes	No
1	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)? *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)*	**1**	

Section D. All Type III Supporting Organizations

		Yes	No
1	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?	**1**	
2	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? *If 'No,' explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s)*	**2**	
3	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? *If 'Yes,' describe in* ***Part VI*** *the role the organization's supported organizations played in this regard*	**3**	

Section E. Type III Functionally-Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* ***(see instructions):***

- **a** ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*
- **b** ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*
- **c** ☐ The organization supported a governmental entity. *Describe in Part VI how you supported a government entity (see instructions).*

		Yes	No
2	Activities Test. ***Answer (a) and (b) below.***		
a	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? *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*	**2a**	
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? *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*	**2b**	
3	Parent of Supported Organizations. ***Answer (a) and (b) below.***		
a	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? *Provide details in* ***Part VI***	**3a**	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If 'Yes,' describe in* ***Part VI*** *the role played by the organization in this regard*	**3b**	

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

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

Section A — Adjusted Net Income

			(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	**1**		
2	Recoveries of prior-year distributions	**2**		
3	Other gross income (see instructions)	**3**		
4	Add lines 1 through 3	**4**		
5	Depreciation and depletion	**5**		
6	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)	**6**		
7	Other expenses (see instructions)	**7**		
8	**Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	**8**		

Section B — Minimum Asset Amount

			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	**1a**		
b	Average monthly cash balances	**1b**		
c	Fair market value of other non-exempt-use assets	**1c**		
d	**Total** (add lines 1a, 1b, and 1c)	**1d**		
e	**Discount** claimed for blockage or other factors (explain in detail in **Part VI**):			
2	Acquisition indebtedness applicable to non-exempt-use assets	**2**		
3	Subtract line 2 from line 1d	**3**		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	**4**		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	**5**		
6	Multiply line 5 by .035	**6**		
7	Recoveries of prior-year distributions	**7**		
8	**Minimum Asset Amount** (add line 7 to line 6)	**8**		

Section C — Distributable Amount

				Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	**1**		
2	Enter 85% of line 1	**2**		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	**3**		
4	Enter greater of line 2 or line 3	**4**		
5	Income tax imposed in prior year	**5**		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	**6**		

7 ☐ 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)*

Section D – Distributions	**Current Year**
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in **Part VI**). See instructions	
7 **Total annual distributions.** Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E – Distribution Allocations (see instructions)	**(i) Excess Distributions**	**(ii) Underdistributions Pre-2015**	**(iii) Distributable Amount for 2015**
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required – see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 **Excess distributions carryover to 2016.** Add lines 3j and 4c			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

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.)

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.
► Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization

MUSEUM OF AVIATION AT ROBINS AFB,
GEORGIA FOUNDATION, INC.

Employer identification number

58-1451656

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
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 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? ☐ Yes ☐ No

6 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? ☐ Yes ☐ 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)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of a historically important land area
☐ Preservation of a certified historic structure

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 Tax Year
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

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 ►$

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.

1 a 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
c Beginning balance	**1 c**	
d Additions during the year	**1 d**	
e Distributions during the year	**1 e**	
f Ending balance	**1 f**	

2 a 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 on 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
1 a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- **a** Board designated or quasi-endowment ► _____ %
- **b** Permanent endowment ► _____ %
- **c** Temporarily restricted endowment ► _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	**No**
(i) unrelated organizations	**3a(i)**		
(ii) related organizations	**3a(ii)**		
b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R?	**3b**		

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
1 a Land		275,433.		275,433.
b Buildings				
c Leasehold improvements		20,024.		20,024.
d Equipment				
e Other		373,138.	328,122.	45,016.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ►				340,473.

Part VII **Investments — Other Securities.** N/A
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)		
(I)		
Total. *(Column (b) must equal Form 990, Part X, column (B) line 12.)* ►		

Part VIII **Investments — Program Related.** N/A
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)		
(10)		
Total. *(Column (b) must equal Form 990, Part X, column (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) CASH VALUE LIFE INSURANCE	50,739.
(2) DEPOSITS	80.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, column (B) line 15.)* ►	50,819.

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	
(2) ACCRUED VACATION	101,966.
(3) ACCRUED WITHHELD TAXES	13,947.
(4) DUE TO GEORGIA AVIATION HALL OF FAM	20,000.
(5) DUE TO STARBASE	217,930.
(6) OTHER LIABILITIES	1,085.
(7) SALARIES PAYABLE	22,585.
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, column (B) line 25.)* ►	377,513.

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. SEE PART XIII [X]

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.

1	Total revenue, gains, and other support per audited financial statements			**1**	4,551,641.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	**2a**			
b	Donated services and use of facilities	**2b**	106,700.		
c	Recoveries of prior year grants	**2c**			
d	Other (Describe in Part XIII.) SEE PART XIII	**2d**	498,564.		
e	Add lines **2a** through **2d**			**2e**	605,264.
3	Subtract line **2e** from line **1**			**3**	3,946,377.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	**4a**			
b	Other (Describe in Part XIII.)	**4b**			
c	Add lines **4a** and **4b**			**4c**	
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			**5**	3,946,377.

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.

1	Total expenses and losses per audited financial statements			**1**	2,692,199.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	**2a**	106,700.		
b	Prior year adjustments	**2b**			
c	Other losses	**2c**			
d	Other (Describe in Part XIII.) SEE PART XIII	**2d**	451,754.		
e	Add lines **2a** through **2d**			**2e**	558,454.
3	Subtract line **2e** from line **1**			**3**	2,133,745.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	**4a**			
b	Other (Describe in Part XIII.)	**4b**			
c	Add lines **4a** and **4b**			**4c**	
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			**5**	2,133,745.

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.

PART X - FIN 48 FOOTNOTE

THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, EXCEPT ON NET INCOME DERIVED FROM UNRELATED BUSINESS ACTIVITIES. FOR THE YEAR ENDED SEPTEMBER 30, 2016, THE ORGANIZATION IS TAKING THE POSITION THAT ALL INCOME IS DERIVED AS A RESULT OF ITS TAX EXEMPT PURPOSE AND THERE IS NO INCOME DERIVED FROM UNRELATED BUSINESS ACTIVITIES. AS A RESULT, NO TAX LIABILITY HAS BEEN RECORDED. THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX

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

PART X - FIN 48 FOOTNOTE (CONTINUED)

POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS.

THE ORGANIZATION'S FEDERAL RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX (FORM 990) FOR 2013, 2014 AND 2015 ARE SUBJECT TO EXAMINATION BY THE IRS, GENERALLY FOR THREE YEARS AFTER THEY ARE FILED.

SCHEDULE D, PART XI, LINE 2D
OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990

CGS NOT INCLUDED IN REVENUE	$	156,362.
DECREASE IN STARBASE NET ASSETS		46,810.
FUNDRAISER EXPENSES NOT INCLUDED IN REVE		295,392.
TOTAL	$	498,564.

SCHEDULE D, PART XII, LINE 2D
OTHER EXPENSES AND LOSSES PER AUDITED F/S

COST OF SALES	$	156,362.
COST OF SPECIAL EVENTS		295,392.
TOTAL	$	451,754.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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.

► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at ***www.irs.gov/form990.***

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization: MUSEUM OF AVIATION AT ROBINS AFB, GEORGIA FOUNDATION, INC.

Employer identification number: 58-1451656

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** [X] Mail solicitations
- **b** [X] Internet and email solicitations
- **c** [X] Phone solicitations
- **d** [X] In-person solicitations
- **e** [X] Solicitation of non-government grants
- **f** [X] Solicitation of government grants
- **g** [X] Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ..... [ ] **Yes** [X] **No**

b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	**(iii)** No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in column **(i)**	**(vi)** Amount paid to (or retained by) organization
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total ►							0.

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.

GA

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.

		(a) Event #1 GOLF TOURNAMEN (event type)	(b) Event #2 AUCTION (event type)	(c) Other events 1 (total number)	(d) Total events (add column (a) through column (c))
REVENUE	1 Gross receipts	328,781.	187,103.	181,525.	697,409.
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	328,781.	187,103.	181,525.	697,409.
DIRECT EXPENSES	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	86,791.	53,838.	154,763.	295,392.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ►				295,392.
	11 Net income summary. Subtract line 10 from line 3, column (d) ►				402,017.

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.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
REVENUE	1 Gross revenue				
DIRECT EXPENSES	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ☐ No %	☐ Yes ☐ No %	☐ Yes ☐ No %	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ►				
	8 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:

a The organization's facility	**13a**	%
b An outside facility	**13b**	%

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 to be 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).

SCHEDULE O (Form 990 or 990-EZ)	Supplemental Information to Form 990 or 990-EZ	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	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. ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.*	2015 Open to Public Inspection

Name of the organization	Employer identification number
MUSEUM OF AVIATION AT ROBINS AFB, GEORGIA FOUNDATION, INC.	58-1451656

FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.

BOARD MEMBER STEPHAN F. HOLCOMB, SR. IS FATHER OF BOARD MEMBER STEVE HOLCOMB, JR.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE 990 IS REVIEWED BY THE AUDITORS ALONG WITH THE PRESIDENT, FINANCE COMMITTEE CHAIRMAN, AND THE CHAIRMAN OF THE BOARD.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

EMPLOYEES ARE REQUIRED TO REPORT CONFLICTS AS THEY ARISE. EMPLOYEES ALSO SIGN A CONFLICT OF INTEREST DISCLOSURE FORM ANNUALLY.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

THE BOARD APPROVES THE PRESIDENT'S SALARY.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

ANY INCREASE IS INITIATED BY THE CHAIRMAN AND REVIEWED/APPROVED BY THE EXECUTIVE COMMITTEE.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

UPON REQUEST

FORM 990, PART XI, LINE 9
OTHER CHANGES IN NET ASSETS OR FUND BALANCES

DECREASE IN STARBASE NET ASSETS	$	46,810.
TOTAL	$	46,810.

MUSEUM OF AVIATION
AT ROBINS AIR FORCE BASE,
GEORGIA FOUNDATION, INC.

INDEPENDENT AUDITOR'S REPORT
AND FINANCIAL STATEMENTS

SEPTEMBER 30, 2016

MUSEUM OF AVIATION AT ROBINS AIR FORCE
BASE, GEORGIA FOUNDATION, INC.

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SEPTEMBER 30, 2015

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INDEPENDENT AUDITOR'S REPORT

Board Members
Museum of Aviation at Robins Air Force Base, Georgia Foundation, Inc.
Warner Robins, Georgia

Report on the Financial Statements

We have audited the accompanying financial statements of Museum of Aviation at Robins Air Force Base, Georgia Foundation, Inc. (a nonprofit organization), which comprise the statement of financial position as of September 30, 2016, and the related statements of activities and cash flows for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

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Phone 478-953-0125 ▪ Fax 478-953-0983

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Museum of Aviation at Robins Air Force Base, Georgia Foundation, Inc. as of September 30, 2016, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matters

Other Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The schedule of functional expenses and schedule of receipts and disbursements – STARBASE are presented for purposes of additional analysis and are not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated May 31, 2017, on our consideration of Museum of Aviation at Robins Air Force Base, Georgia Foundation, Inc.'s internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Museum of Aviation at Robins Air Force Base, Georgia Foundation, Inc.'s internal control over financial reporting and compliance.

Macon, Georgia
May 31, 2017

MANAGEMENT'S DISCUSSION & ANALYSIS

MUSEUM OF AVIATION AT ROBINS AIR FORCE
BASE, GEORGIA FOUNDATION, INC.

MANAGEMENT'S DISCUSSION AND ANALYSIS
SEPTEMBER 30, 2016

The management of the Museum of Aviation at Robins Air Force Base, Georgia Foundation, Inc. offers readers of our financial statements the following narrative overview and analysis of the financial activities for the fiscal year ended September 30, 2016. We encourage the readers to consider this information in conjunction with the Foundation's financial statements, which follows:

2016 Financial Highlights

- Revenue and support increased 7%, or approximately $139,339, from fiscal year 2015. Special events, hotel/motel tax and education increased and contributions and services, grants and sales decreased.
- Expenses were 7%, or approximately $158,602, less in fiscal year 2016 than in fiscal year 2015. The large decrease was mainly for classroom construction that was done in 2015.
- The Foundation's net assets increased $1,859,442 from fiscal year 2015. The large increase was due to the release of debt of $1,712,337.

Using This Annual Report

The annual report consists of a series of financial statements and other information, as follows:

Management's Discussion and Analysis introduces the basic financial statements and provides an analytical overview of the Foundation's financial activities.

The Basic Financial Statements consist of a statement of financial position, statement of activities and a statement of cash flows. These provide information about the activities of the Foundation as a whole and present an overall view of the Foundation's finances.

Notes to the Financial Statements provide additional information essential to a full understanding of the data provided in the basic financial statements.

Reporting the Foundation's Financial Activities

The Statement of Financial Position

The Statement of Financial Position presents the assets, liabilities and net assets of the Foundation as a whole at the end of the fiscal year. The Statement of Financial Position is a point-in-time financial statement. The purpose of this statement is to present a fiscal snapshot of the Foundation to the readers of the financial statements. The Statement of Financial Position includes year-end information concerning current and non-current assets, current and noncurrent liabilities, and net assets (assets less liabilities). Over time, readers of the financial statements will be able to determine the Foundation's financial position by analyzing the increases and decreases in net assets. This statement is also a good source for readers to determine how much the Foundation owes to outside vendors and creditors. The statement also presents the available assets that can be used to satisfy those liabilities.

Financial Position

	September 30	
	2016	2015
Assets		
Current and other assets	$ 190,665	$ 257,168
Restricted assets	117,483	175,662
Property and equipment, net	340,473	327,107
Other assets	177,239	188,632
Total assets	825,860	948,569
Liabilities		
Current and other liabilities	448,662	874,560
Noncurrent liabilities	283,468	1,839,721
Total liabilities	732,130	2,714,281
Net assets		
Temporarily restricted	-	175,662
Unrestricted	93,730	(1,941,374)
Total net assets	$ 93,730	$ (1,765,712)

Comparison of Net Assets

In prior years, unrestricted nets assets reflected a deficit balance due to the Foundation's policy to complete capital projects and gift them to the United States Air Force (USAF).

The following is a summary of the buildings and exhibits at the museum for which title was transferred to the USAF. These assets are not reflected in the Foundation's financial statements but are maintained by the Foundation.

Eagle building construction (1992)	$ 2,504,000
Eagle building major exhibits	220,000
Century of Flight construction (1995)	1,317,745
STARBASE Robins classroom expansion	489,274
GA Aviation Hall of Fame Mezzanines (2008)	708,000
Century of Flight major exhibits	1,600,726
Scott WWII Hangar construction	4,275,900
Scott WWII Hangar major exhibits	885,000
	$ 12,000,645

Statement of Activities

Changes in total net assets presented in the Statement of Financial Position are based on the activity presented in the Statement of Activities. The purpose of the statement is to present the revenues earned by the Foundation and the expenses incurred by the Foundation, and any other revenues, expenses, gains and losses received or spent by the Foundation.

Operating revenues are received from contributions, grants, special events and gift shop and snack bar sales. Operating expenses are those expenses paid to operate the museum, maintain the exhibits and sponsor the special events.

Change in Net Assets

	Year Ended September 30, 2016	2015
Revenue and Support		
Contributions and services	$ 780,682	$ 1,070,380
Grant income	78,874	116,717
Sales	301,942	402,082
Special events	697,409	694,125
Contributions in-kind	108,063	105,950
Education	321,390	203,732
City of Warner Robins hotel/motel tax	416,447	324,323
Release of debt	1,712,337	-
Interest and dividends	4	19
Net assets released from restrictions	263,345	117,559
Total Revenue and Support	4,680,493	3,034,887
Expenses		
Program services	1,922,543	2,746,253
Supporting services	550,453	464,957
Fundraising	219,203	216,283
Total expenses	2,692,199	3,427,493
Increase (decrease) in STARBASE net assets before STAREBASE deduction	1,988,294	(392,606)
(Increase) decrease in STARBASE net assets	46,810	247,328
Increase (decrease) in unrestricted net assets	2,035,104	(145,278)
Temporarily restricted net assets		
Contributions	87,683	112,001
Net assets released from restriction	(263,345)	(117,559)
Increase (decrease) in temporarily restricted net assets	(175,662)	(5,558)
Increase (decrease) in total net assets	1,859,442	(150,836)
Net assets (deficit)-beginning of year	(1,765,712)	(1,614,876)
Net assets (deficit)-end of year	$ 93,730	$ (1,765,712)

The statement of activities reflects an increase in net assets at the end of the fiscal year.

In fiscal year 2016, revenues and support increased approximately $139,339 (7%). There was a decrease in contributions and services of $289,698 due to STARBASE funding received in the prior year for classroom construction. Total expenses decreased approximately $158,602 (7%).

Statement of Cash Flows

The Statement of Cash Flows is an important tool in helping users assess the Foundation's ability to generate future net cash flows, its ability to meet its obligations as they come due, and its need for external financing. The Statement of Cash Flows presents information related to cash inflows and outflows, summarized by operating, investing and financing activities.

Cash Flows

	Year ended September 30,	
	2016	2015
Cash provided (used) by:		
Operating activities	$ (14,194)	$ (197,439)
Investing activities	(30,974)	-
Financing activities	(20,033)	(90,000)
Net increase (decrease) in cash	(65,201)	(287,439)
Cash beginning of year	247,317	534,756
Cash end of year	$ 182,116	$ 247,317

Cash provided by operating activities includes contributions, grants, special events and gift shop and snack bar sales. Cash used by investing activities includes purchases of property and equipment. Cash used by financing activities includes principal and interest payments on debt.

Property and Equipment

As of September 30, 2016, the Foundation had approximately $340,473 invested in property and equipment, net of accumulated depreciation of $328,122. Depreciation expense totaled $17,607 for fiscal year 2016.

Details of property and equipment are shown below:

	2016	2015
Land	$ 275,433	$ 275,433
Improvements	20,024	-
Machinery and equipment	373,138	362,189
Accumulated depreciation	(328,122)	(310,515)
Total net property and equipment	$ 340,473	$ 327,107

More detailed information about the Foundation's property and equipment is presented in Note 6 of the financial statements.

Long Term Debt

As of September 30, 2016, the Foundation had $287,809 in debt outstanding, a decrease of $1,671,912 from September 30, 2015.

More detailed information about the Foundation's outstanding debt is presented in Note 7 of the financial statements.

Economic Factors

The Foundation wrapped a banner year in 2016!

Overall visitation for the museum increased by more than 17% for the year, from 401,676 to 473,795 - our best visitation numbers since 2011.

We also had a 4% increase in the participation of our educational programming. We welcomed 52,018 students and teachers that span from 79 different counties in the state of Georgia, nine states and three different countries!

The Foundation worked diligently at process improvement for our internal business processes and did a comprehensive review of our numerous events and fundraisers. We looked to reduce waste and unnesscesary expenditures, while seeking new and innovative ways to do business and enhance associated revenue streams.

The Foundation significantly improved its financial position during the current fiscal year with a combination of the significant reduction of our capital debt on the Scott World War II building as well as a concentrated effort to reduce overall expenses and increase revenues.

Some additional items of note:

- We're in our sixth year of the seven year Gear-Up grant program conducted in partnership with the Bibb County School System. This program has been very successful, and at the end of the seventh year will provide a benchmark that will identify which non-traditional, non-standard programs have a significant impact on students, and which do not.
- We were awarded a three-year, Operation STEM NASA grant in a partnership with STARBASE Robins, worth over $1M over the grant period
- The city of Warner Robins allocated an additional 1 cent, for a total of 2.5 cents of hotel/motel tax for museum operations, marketing and tourism activites

For FY17, we will work to continue our process improvement efforts, and begin a comprehensive strategic planning process to lay the roadmap for future success. We will also enhance our marketing and public relations activities. Finally, we will look to significantly increase our grant/foundation gifts, with our improved financial position.

Requests for Information

This financial report is designed to provide our donors, customers and creditors with a general overview of the Foundation's finances and to demonstrate the Foundation's accountability for the resources it receives. If you have questions about the report or need additional financial information, contact Mrs. Chrissy Miner, President/Chief Operating Officer, P.O. Box 2469, Warner Robins, Georgia 31099.

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FINANCIAL STATEMENTS

MUSEUM OF AVIATION AT ROBINS AIR FORCE
BASE, GEORGIA FOUNDATION, INC.

STATEMENT OF FINANCIAL POSITION
SEPTEMBER 30, 2016

ASSETS

Current Assets		
Cash and cash equivalents	$	64,633
Restricted assets		
Cash and cash equivalents		117,483
Accounts receivable		8,290
Grants receivable		3,940
Unconditional promises to give, net of allowance		69,405
Inventory		44,397
Total Current Assets		308,148
Property and Equipment		
Land		275,433
Improvements		20,024
Furniture and equipment		373,138
Less: accumulated depreciation		(328,122)
Net Property and Equipment		340,473
Other Assets		
Other assets		50,739
Deposits		80
Unconditional promises to give, net of allowance		126,420
Total Other Assets		177,239
Total Assets	$	825,860

The accompanying notes are an integral part of these financial statements.

MUSEUM OF AVIATION AT ROBINS AIR FORCE
BASE, GEORGIA FOUNDATION, INC.

STATEMENT OF FINANCIAL POSITION
SEPTEMBER 30, 2016
(CONTINUED)

LIABILITIES AND NET ASSETS

Liabilities		
Current Liabilities		
Accounts payable	$	45,579
Credit cards payable		16,464
Due to Georgia Aviation Hall of Fame		20,000
Salaries payable		22,585
Accrued withheld taxes		13,947
Accrued vacation		101,966
Other liabilities		1,085
Deferred revenue		4,765
Due to STARBASE		217,930
Note payable - short term portion		4,341
Total Current Liabilities		448,662
Long-Term Liabilities		
Note payable - long term portion		283,468
Total Long-Term Liabilities		283,468
Total Liabilities		732,130
Net Assets		
Unrestricted		93,730
Total Net Assets		93,730
Total Liabilities and Net Assets	$	825,860

The accompanying notes are an integral part of these financial statements.

MUSEUM OF AVIATION AT ROBINS AIR FORCE
BASE, GEORGIA FOUNDATION, INC.

STATEMENT OF ACTIVITIES
FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2016

Unrestricted Net Assets	
Revenue and Support	
Contributions and services	$ 780,682
Grant income	78,874
Sales	301,942
Special events	697,409
Interest and dividends	4
Contributions in-kind	108,063
Education	321,390
City of Warner Robins hotel/motel tax	416,447
Release of debt	1,712,337
Net assets released from restrictions	
Satisfaction of purpose restrictions	263,345
Total Revenue and Support	4,680,493
Expenses	
Program services	1,922,543
Supporting services	550,453
Fundraising	219,203
Total Expenses	2,692,199
Increase (decrease) in unrestricted net assets before STARBASE deduction	1,988,294
(Increase) decrease in STARBASE net assets	46,810
Increase (decrease) in unrestricted net assets	2,035,104
Temporarily Restricted Net Assets	
Contributions	87,683
Net assets released from restrictions	(263,345)
Increase (decrease) in temporarily restricted net assets	(175,662)
Increase (decrease) in total net assets	1,859,442
Net assets - beginning of year	(1,765,712)
Net assets - end of year	$ 93,730

The accompanying notes are an integral part of these financial statements.

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MUSEUM OF AVIATION AT ROBINS AIR FORCE
BASE, GEORGIA FOUNDATION, INC.

STATEMENT OF CASH FLOWS
FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2016

Cash Flows from Operating Activities	
Revenue and Support Received	
Unrestricted Revenue and Support	$ 2,766,768
Temporarily Restricted Revenue and Support	87,683
Interest and dividends received	4
Cash Paid for	
Salaries and Benefits	(1,788,437)
Operating Expenses	(1,080,212)
Net Cash Provided by (Used for) Operating Activities	(14,194)
Cash Flows from Investing Activities	
Purchase of property and equipment	(30,974)
Net Cash Provided by (Used for) Investing Activities	(30,974)
Cash Flows from Financing Activities	
Payments of interest	(20,033)
Net Cash Provided by (Used for) Financing Activities	(20,033)
Net Increase (Decrease) in Cash and Equivalents	(65,201)
Cash and Equivalents - Beginning of Year	247,317
Cash and Equivalents - End of Year	$ 182,116
Classified as	
Cash and cash equivalents	$ 64,633
Restricted cash	117,483
	$ 182,116

The accompanying notes are an integral part of these financial statements.

MUSEUM OF AVIATION AT ROBINS AIR FORCE
BASE, GEORGIA FOUNDATION, INC.

STATEMENT OF CASH FLOWS
FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2016
(CONTINUED)

Reconciliation of Increase (Decrease) in Net Assets to Net Cash Provided by (Used for) Operating Activities	
Increase (Decrease) in Net Assets	$ 1,859,442
Adjustments to reconcile increase (decrease) in net assets to net cash provided by operating activities	
Depreciation	17,607
Interest expense	60,458
Release of debt	(1,712,337)
(Increase) decrease in accounts receivable	9,347
(Increase) decrease in grants receivable	12,323
(Increase) decrease in promises to give	39,224
(Increase) decrease in inventory	15,163
(Increase) decrease in other assets	(5,183)
Increase (decrease) in accounts payable	(140,516)
Increase (decrease) in credit cards payable	(47,199)
Increase (decrease) in salaries payable	(30,336)
Increase (decrease) in accrued vacation	(50,258)
Increase (decrease) in payroll liabilities	13,947
Increase (decrease) in other liabilities	(133)
Increase (decrease) in deferred revenue	1,067
Increase (decrease) in due to other agencies	(56,810)
Total Adjustments	(1,873,636)
Net Cash Provided by (Used for) Operating Activities	$ (14,194)

The accompanying notes are an integral part of these financial statements.

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NOTES TO THE FINANCIAL STATEMENTS

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Nature of Activities

Museum of Aviation at Robins Air Force Base, Georgia Foundation, Inc. (Foundation) is a nonprofit organization organized under the laws of the State of Georgia. The Foundation was formed to assist in raising funds for the construction, operation, and maintenance of the Museum of Aviation at Robins Air Force Base. The Foundation presently operates a gift shop and snack bar at the Museum. The original goal of the Heritage of Eagles Campaign was to raise approximately $5,000,000 over a five-year period for the construction of facilities. During 1993 the Foundation began the 21st Century Capital Campaign to raise capital for future construction and expansion. Presently "The Next Generation Capital Campaign" is underway with the goal of raising funds for use in construction of additional building and exhibits.

Funds are also raised through contributions from visitors to the Museum and various sponsored special events. These events included an annual golf tournament, car show, marathon and the Museum Foundation Auction in 2016.

Support is also received from various functions sponsored by the Air Force Association, allocations from the Combined Federal Campaign, and in-kind contributions from individuals and businesses.

In 1988 the City Council of Warner Robins passed an ordinance allocating 62.5% of the City's special 2% hotel/motel tax to the Foundation to be used in promoting, operating, and maintaining the Museum. The ordinance was revised in 2009 which increased the hotel/motel tax to 8% with the Foundation receiving 1.5 cents of the tax. The Foundation received $416,447 from this revenue source during its year ended September 30, 2016.

Basis of Accounting

The financial statements of the Foundation have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and other liabilities.

Basis of Presentation

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board (FASB) Accounting Standard Codification (ASC) 958 (formerly Statement of Financial Accounting Standards (SFAS) No. 117, *Financial Statements of Not-for-Profit Organizations*). Under FASB ASC 958, the organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Cash and Cash Equivalents

For purposes of the statement of cash flows, the Foundation considers all highly liquid investments with an initial maturity of three months or less to be cash equivalents.

Investments

The Foundation occasionally receives investment securities as donations. The basis is recorded at fair market value on the date of donation. At each year end the entire portfolio is adjusted by the lower of cost or market valuation method. The Foundation does not generally hold these securities as long-term investments, but liquidates them as soon as possible and reasonable.

Inventories

Inventories are stated at cost for purchased items. Donated items of inventory are recorded at their estimated wholesale value at the date of contribution.

Promises to Give

Unconditional promises to give are recognized as revenues or gains in the period received and as assets, decreases of liabilities, or expenses depending on the form of the benefits received. Conditional promises to give are recognized only when the conditions on which they depend are substantially met and the promises become unconditional.

Property and Equipment

Property and equipment acquisitions are recorded at cost, estimated cost, or, if donated, fair market value on the date of donation. The buildings are depreciated on a straight-line basis over lives ranging from 31.5 to 45 years. Equipment is depreciated on a straight-line basis over lives ranging from 5 to 10 years. The property and equipment of the Foundation are comprised primarily of office furnishings and equipment.

The value of materials and services purchased and/or donated associated with the exhibit hall and certain exhibit costs are accounted for as unrestricted net assets. The land upon which the Foundation is located is the property of the United States Government. Accordingly, permanent improvements are transferred to the United States Air Force at completion.

Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Revenue Recognition

Revenues are displayed in two broad categories. Earned revenues represent fees earned or revenue generated through the performance or provision of services. Contributed support represents unconditional gifts in a voluntary nonreciprocal transfer.

The Foundation recognizes all contributed support received as income in the period received. Contributed support is reported as unrestricted or as restricted, depending upon the existence of donor stipulations that limit the use of the support. When a donor stipulated time restriction ends or

purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activity as net assets released from restrictions.

In-kind Support

The Foundation receives various types of in-kind support, including contributed services. Contributed professional services are recognized if (a) the services received, create or enhance long-lived assets or (b) require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation. Contributions of tangible assets are recognized at fair market value when received. Any amounts reflected as in kind support is offset by like amounts included in expenses.

Additionally, the Foundation receives skilled, contributed time, which does not meet the two recognition criteria described above. Accordingly, the value of this contributed time has not been determined, and is not reflected in the accompanying financial statements.

Functional Allocation of Expenses

The costs of providing various programs and other activities have been summarized on a functional basis in the Statement of Activities and in the Schedule of Functional Expenses. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

Income Taxes

The Organization is exempt from federal income tax and state income taxes under Internal Revenue Code Section 501(c)(3). However, income from certain activities not directly related to the Organization's tax-exempt purpose is subject to taxation as unrelated business income. In addition, the Organization qualifies for the charitable contribution deduction under Section 170(b)(1)(A) and has been classified as an organization other than a private foundation under Section 509(a)(2).

NOTE 2 – CASH AND DEPOSITS

As of September 30, 2016, the carrying amount of the Foundation's deposits was $182,116, and the bank balance was $208,401.

NOTE 3 – RESTRICTED CASH

Cash in the amount of $117,483 is restricted for STARBASE operations.

NOTE 4 – ACCOUNTS RECEIVABLE

As of September 30, 2016, accounts receivable from contracts and other balances due was composed of:

Golf tournament	$ 8,290

NOTE 5 – PLEDGES RECEIVABLE

Unconditional promises are included in the financial statements as pledges receivable and revenue of the appropriate net asset category. Pledges receivable include the following programs:

Capital Campaign:

A discount rate of 6% has been used to calculate the present value of pledges receivable. Management has estimated the allowance for uncollectible pledges at 85%. The allowance is based on prior years' experience and management's analysis of specific promises made.

Sustaining Partners Program:

A discount rate of 6% has been used to calculate the present value of pledges receivable. Management has estimated the allowance for uncollectible pledges at 10%. The allowance is based on management's analysis of specific promises made.

Unconditional promises are expected to be realized in the following periods:

	Total	Discount	Allowance	Net
Pledges due in one year or less:				
Capital Campaign	$ 13,250	$ -	$ (11,262)	$ 1,988
Sustaining Partners	74,908	-	(7,491)	67,417
Total pledges due in one year or less	88,158	-	(18,753)	69,405
Pledges due between one year and five years				
Capital Campaign	16,600	(1,873)	(12,518)	2,209
Sustaining Partners	155,562	(17,550)	(13,801)	124,211
Total pledges between one year and five years	172,162	(19,423)	(26,319)	126,420
Net pledges receivable	$ 260,320	$ (19,423)	$ (45,072)	$ 195,825

NOTE 6 – EQUIPMENT AND DEPRECIATION

Property and equipment consist of the following:

Land	$ 275,433
Improvements	20,024
Furniture and equipment	373,138
Total	668,595
Less: accumulated depreciation	(328,122)
Net property and equipment	$ 340,473

Depreciation expense for 2016 was $17,607.

NOTE 7 – NOTES PAYABLE

The Foundation's obligations under notes payable consists of the following:

$287,809 unsecured note due to State Bank and Trust Company. Interest is at 4% due monthly. Payment terms on the note include monthly interest payments beginning October 1, 2016 and principal and interest payments beginning September 1, 2017 amortized over 60 months.

Interest expense for the year was $60,458.

The future maturities of notes payable are as follows:

Year Ended	State Bank
9/30/2017	$ 5,300
9/30/2018	63,605
9/30/2019	63,605
9/30/2020	63,605
9/30/2021	63,605
9/30/2022	58,304
Less: interest	(30,215)
Total	$ 287,809

NOTE 8 – RELEASE OF DEBT

On September 1, 2016, the Foundation entered into a forbearance agreement with State Bank and Trust Company for the balance of its outstanding notes payable. Under terms of the agreement, the bank agreed to release the Foundation from a portion of its indebtedness in the amount of $1,712,337. The release of indebtedness results in a remaining outstanding balance of $287,809 as of October 1, 2016. As part of the agreement, the Foundation is required to sell real estate which is currently held, with proceeds to be applied to any outstanding balance.

NOTE 9 – LOAN FROM GEORGIA AVIATION HALL OF FAME

The Foundation borrowed $30,000 from the Georgia Aviation Hall of Fame in January 2012. There is no formal agreement for repayment of the loan. The Foundation owed $20,000 on the loan at September 30, 2016. The Foundation paid the remaining balance off in November 2016.

NOTE 10 – DONATED SERVICES AND MATERIALS

The value of donated services and materials included in the financial statements and the corresponding expenses for the year ended September 30, 2016, is as follows:

Special events	$	106,700
Gift shop software		1,363
Total donated services and materials	$	108,063

NOTE 11 – EMPLOYEE BENEFIT PLAN

The Foundation adopted a SIMPLE retirement account plan effective January 1, 2008 covering substantially all employees. Under the plan, the Foundation matches up to 3% of employees' contributions. Plan expenses incurred by the Foundation during 2016 were $24,228.

NOTE 12 – STARBASE

Science and Technology Academics Reinforcing Basic Aviation & Science Exploration (STARBASE) are a hands on math, science and technology program for 5th graders in the MiddleGeorgia area. Its office and laboratory space is in the Museum of Aviation, and its personnel costs, expenses and other financial records are maintained by and are a part of the Museum of Aviation's bookkeeping system. Since STARBASE is an adjunct to the Museum of Aviation, its transactions are included in these financial reports. A separate schedule of STARBASE's cash receipts and disbursements is shown on page 18. STARBASE's net asset balance of $217,930 is not included in the Foundation's net assets, but is included in the "Due to Other Agencies" account on the Statement of Financial Position.

NOTE 13 – INCOME TAXES

The Organization is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code, except on net income derived from unrelated business activities. For the year ended September 30, 2016, the Organization is taking the position that all income is derived as a result of its tax exempt purpose and there is no income derived from unrelated business activities. As a result, no tax liability has been recorded. The Organization believes that it has appropriate support for any tax positions taken, and as such, does not have any uncertain tax positions that are material to the financial statements.

The Organization's federal Return of Organization Exempt from Income Tax (Form 990) for 2013, 2014 and 2015 are subject to examination by the IRS, generally for three years after they are filed.

NOTE 14 – EVALUATION OF SUBSEQUENT EVENTS

The Foundation has evaluated subsequent events through May 31, 2017, the date which the financial statements were available to be issued.

In April 2017, the Foundation received an offer on 19.73 acres of land for $78,920. When sold, the proceeds will reduce the principal balance of the State Bank and Trust Company loan from $287,809 to $208,889.

SUPPLEMENTARY INFORMATION

MUSEUM OF AVIATION AT ROBINS AIR FORCE
BASE, GEORGIA FOUNDATION, INC.

SCHEDULE OF FUNCTIONAL EXPENSES
FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2016

Description	Program Services	Administrative and General	Fundraising	Totals
Salaries	$ 908,865	$ 344,795	$ 203,626	$ 1,457,286
Payroll taxes	79,001	25,587	15,577	120,165
Employee benefits	125,908	18,431	-	144,339
Administration	-	56,079	-	56,079
Advertising	714	-	-	714
Bank charges	-	29,448	-	29,448
Cost of sales	156,362	-	-	156,362
Education	81,205	-	-	81,205
In kind	106,700	-	-	106,700
Insurance	13,946	-	-	13,946
Interest	60,458	-	-	60,458
Marketing	35,030	-	-	35,030
Membership	3,312	-	-	3,312
Office expense	-	53,282	-	53,282
Special events	295,392	-	-	295,392
Supplies and materials	5,451	-	-	5,451
Postage	3,485	-	-	3,485
Professional fees	-	22,831	-	22,831
Telephone	10,767	-	-	10,767
Travel	18,340	-	-	18,340
Total expenses before depreciation	1,904,936	550,453	219,203	2,674,592
Depreciation	17,607	-	-	17,607
Total Expenses	$ 1,922,543	$ 550,453	$ 219,203	$ 2,692,199

MUSEUM OF AVIATION AT ROBINS AIR FORCE
BASE, GEORGIA FOUNDATION, INC.

SCHEDULE OF RECEIPTS AND DISBURSEMENTS - STARBASE
FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2016

Revenue and Other Support	
Contributions	$ 593,841
Interest income	1
Total Revenue and Support	593,842
Expenses	
Payroll	440,356
Payroll taxes	33,206
Employee benefits	60,207
Telephone	5,060
Travel	14,504
Public relations and advertising	3,747
Dues and subscriptions	79
Training/meetings	2,296
Supplies	79,836
Miscellaneous	1,361
Total Expenses	640,652
Excess of Receipts over Expenses	(46,810)
Net assets - beginning of year	264,740
Net assets - end of year	$ 217,930

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INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH *GOVERNMENT AUDITING STANDARDS*

Board Members
Museum of Aviation at Robins Air Force Base, Georgia Foundation, Inc.
Warner Robins, Georgia

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Museum of Aviation at Robins Air Force Base, Georgia Foundation, Inc. (a nonprofit organization), which comprise the statement of financial position as of September 30, 2016, and the related statements of activities, and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated May 31, 2017.

Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered Museum of Aviation at Robins Air Force Base, Georgia Foundation, Inc.'s internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Museum of Aviation at Robins Air Force Base, Georgia Foundation, Inc.'s internal control. Accordingly, we do not express an opinion on the effectiveness of the Organization's internal control.

Our consideration of internal control was for the limited purpose described in the preceding paragraph and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and therefore, material weaknesses or significant deficiencies may exist that were not identified. However, as described in the accompanying schedule of findings and responses, we identified certain deficiencies in internal control that we consider to be material weaknesses.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. We consider the deficiency described in the accompanying schedule of findings and responses to be a material weakness. 2015-01

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Compliance and Other Matters

As part of obtaining reasonable assurance about whether Museum of Aviation at Robins Air Force Base, Georgia Foundation, Inc.'s financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards.*

Museum of Aviation at Robins Air Force Base, Georgia Foundation, Inc.'s Response to Findings

Museum of Aviation at Robins Air Force Base, Georgia Foundation, Inc.'s response to the findings identified in our audit is described in the accompanying schedule of findings and responses. Museum of Aviation at Robins Air Force Base, Georgia Foundation, Inc.'s response was not subjected to the auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on it.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Macon, Georgia
May 31, 2017

MUSEUM OF AVIATION AT ROBINS AIR FORCE
BASE, GEORGIA FOUNDATION, INC.

SCHEDULE OF FINDINGS AND RESPONSES
FOR THE FISCAL YEAR ENDED SEPTEMBER 30, 2016

Financial Statement Findings

Findings noted on the Independent Auditor's Report on Internal Control over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards*:

2016-01 **General Ledger – Maintenance (*reiteration of prior year*)**

CRITERIA
Timely and accurate financial reports are essential in order to perform analysis of the financial conditions of the Foundation, to review data for accuracy and completeness and to prepare financial statements.

CONDITION
During this audit a number of material adjustments were identified and made by the external auditor to complete the end-of-year audit.

CONTEXT
Material audit adjustments were needed to fairly state financial information in an accrual system for the year ended September 30, 2016. Audit procedures identified accounts payable and credit card charges that were not properly recorded.

CAUSE
Year-end data based on the accrual system was not recorded.

EFFECT
Management was not provided with complete and accurate interim financial reports to be used to make fiscal-related decisions.

RECOMMENDATION
Management should pursue a method to identify and accomplish material adjustments annually before the audit. This may require consulting with an (additional) outside audit agency or contracting with one to accomplish the annual pre-audit. Additionally, credit card charges should be recorded when incurred. Special event activity should be reconciled when each event occurs to ensure all revenue and expenses related to the event is properly recorded.

VIEWS OF RESPONSIBLE OFFICALS AND PLANNED CORRECTIVE ACTION
Effective October 1, 2016, the Museum of Aviation Foundation changed accounting policies from a cash accounting system to an accrual accounting system. This change was made due to a recommendation of our auditing firm. We believe that will eliminate the need for adjustments during the audit. Additionally, all credit card debt was settled prior to the beginning of the fiscal year, therefore no adjustment will be necessary to record balances on credit cards.