

## Return of Organization Exempt From Income Tax

2018

Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service

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

- Do not enter social security numbers on this form as it may be made public.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

A For the 2018 calendar year, or tax year beginning

, 2018, and ending

, 20

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

C Name of organization **PATRIOT HUNTS INC**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

**808 CAPE FEAR AVENUE**

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

**Fayetteville, NC 28303**

G Gross receipts

\$ **339,950**F Name and address of principal officer: **KENNETH BARNARD****808 CAPE FEAR AVENUE, Fayetteville, NC 28303**H(a) Is this a group return for subordinates?  Yes  NoH(b) Are all subordinates included?  Yes  No

If "No," attach a list. (see instructions)

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

H(c) Group exemption number ►

J Website: ► **NOT APPLICABLE**K Form of organization:  Corporation  Trust  Association  Other ►L Year of formation: **2010**M State of legal domicile: **NC****Part I Summary**

1 Briefly describe the organization's mission or most significant activities: **TO PROVIDE OUTDOOR EXPERIENCES FOR WOUNDED WARRIOR**

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	0
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	0
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	0
6 Total number of volunteers (estimate if necessary)	6	10
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 38	7b	0

		Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)		<b>186,551</b>	<b>339,950</b>
9 Program service revenue (Part VIII, line 2g)			0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)			0
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		<b>186,551</b>	<b>339,950</b>

		Prior Year	Current Year
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0
14 Benefits paid to or for members (Part IX, column (A), line 4)			0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			0
16a Professional fundraising fees (Part IX, column (A), line 11e)			0
b Total fundraising expenses (Part IX, column (D), line 25) ►	0		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		<b>189,926</b>	<b>290,243</b>
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		<b>189,926</b>	<b>290,243</b>
19 Revenue less expenses. Subtract line 18 from line 12		(3,375)	49,707

		Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)		<b>124,382</b>	<b>174,089</b>
21 Total liabilities (Part X, line 26)			0
22 Net assets or fund balances. Subtract line 21 from line 20		<b>124,382</b>	<b>174,089</b>

**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.

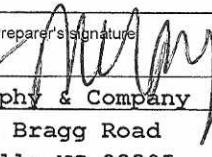
Sign  
Here

Signature of officer

Date

**KENNETH BARNARD, CEO**

Type or print name and title

Paid Preparer Use Only	Print/Type preparer's name <b>Glenn Murphy</b>	Preparer's signature 	Date <b>09-18-2019</b>	Check <input type="checkbox"/> if self-employed	PTIN <b>P00027181</b>
	Firm's name ► <b>Glenn Murphy &amp; Company</b>		Firm's EIN ►		
	Firm's address ► <b>1256 Fort Bragg Road Fayetteville NC 28305</b>		Phone no.		<b>910-485-6121</b>

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2018)