

A For the 2020 calendar year, or tax year beginning 01-01-2020, and ending 12-31-2020

B Check if applicable:

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION

Doing business as

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

Room/suite

1776 D STREET NW

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

WASHINGTON, DC 200065303

F Name and address of principal officer:

DENISE DORING VANBUREN

1776 D STREET NW

WASHINGTON, DC 200065303

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

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

H(c) Group exemption number

1050

D Employer identification number

53-0205923

E Telephone number

(202) 879-3365

G Gross receipts \$

37,208,713

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

J Website:

WWW.DAR.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: 1896

M State of legal domicile: DC

Part I	Summary																								
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PROMOTE HISTORIC PRESERVATION, EDUCATION, AND PATRIOTISM.																								
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.																								
	<table><tr><td>3 Number of voting members of the governing body (Part VI, line 1a)</td><td>3</td><td>87</td></tr><tr><td>4 Number of independent voting members of the governing body (Part VI, line 1b)</td><td>4</td><td>86</td></tr><tr><td>5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)</td><td>5</td><td>155</td></tr><tr><td>6 Total number of volunteers (estimate if necessary)</td><td>6</td><td>4,775</td></tr><tr><td>7a Total unrelated business revenue from Part VIII, column (C), line 12</td><td>7a</td><td>43,181</td></tr><tr><td>7b Net unrelated business taxable income from Form 990-T, line 39</td><td>7b</td><td>0</td></tr></table>	3 Number of voting members of the governing body (Part VI, line 1a)	3	87	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	86	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	155	6 Total number of volunteers (estimate if necessary)	6	4,775	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	43,181	7b Net unrelated business taxable income from Form 990-T, line 39	7b	0						
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Expenses	<table><tr><td>13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)</td><td>1,913,408</td><td>1,686,845</td></tr><tr><td>14 Benefits paid to or for members (Part IX, column (A), line 4)</td><td>0</td><td>0</td></tr><tr><td>15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)</td><td>8,263,758</td><td>9,168,490</td></tr><tr><td>16a Professional fundraising fees (Part IX, column (A), line 11e)</td><td>84,000</td><td>21,000</td></tr><tr><td>16b Total fundraising expenses (Part IX, column (D), line 25) 1,496,955</td><td></td><td></td></tr><tr><td>17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)</td><td>9,273,380</td><td>7,051,659</td></tr><tr><td>18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)</td><td>19,534,546</td><td>17,927,994</td></tr><tr><td>19 Revenue less expenses. Subtract line 18 from line 12</td><td>6,847,649</td><td>8,580,270</td></tr></table>	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,913,408	1,686,845	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	8,263,758	9,168,490	16a Professional fundraising fees (Part IX, column (A), line 11e)	84,000	21,000	16b Total fundraising expenses (Part IX, column (D), line 25) 1,496,955			17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	9,273,380	7,051,659	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	19,534,546	17,927,994	19 Revenue less expenses. Subtract line 18 from line 12	6,847,649	8,580,270
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Net Assets or Fund Balances	<table><tr><th></th><th>Beginning of Current Year</th><th>End of Year</th></tr><tr><td>20 Total assets (Part X, line 16)</td><td>184,561,189</td><td>207,089,115</td></tr><tr><td>21 Total liabilities (Part X, line 26)</td><td>3,795,043</td><td>4,588,155</td></tr><tr><td>22 Net assets or fund balances. Subtract line 21 from line 20</td><td>180,766,146</td><td>202,500,960</td></tr></table>		Beginning of Current Year	End of Year	20 Total assets (Part X, line 16)	184,561,189	207,089,115	21 Total liabilities (Part X, line 26)	3,795,043	4,588,155	22 Net assets or fund balances. Subtract line 21 from line 20	180,766,146	202,500,960												
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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

DAWN CRUMLY LEMONGELLO TREASURER GENERAL

2021-11-08

Date

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date 2021-11-08

Check ☐ if self-employed

PTIN P00843460

Firm's name

CLIFTONLARSONALLEN

Firm's EIN

41-0746749

Firm's address

901 N GLEBE ROAD SUITE 200

Phone no. (571) 227-9500

ARLINGTON, VA 22203

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

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2020)

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:

THE NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION (NSDAR) WAS ESTABLISHED TO PERPETUATE THE MEMORY AND SPIRIT OF THE MEN AND WOMEN WHO ACHIEVED AMERICAN INDEPENDENCE. THE SOCIETY ACHIEVES THIS OBJECTIVE THROUGH PROGRAMS WHICH ENCOURAGE HISTORICAL RESEARCH AND PUBLICATION, PRESERVATION OF HISTORICAL RELICS AND DOCUMENTS, EDUCATION AND PROMOTION OF PATRIOTIC ENDEAVORS.

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 \$ 4,710,194 including grants of \$) (Revenue \$ 3,626,513)

GENEALOGY AND RESEARCH: THE NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION (NSDAR) MAINTAINS A RESEARCH AND AN EXTENSIVE GENEALOGICAL LIBRARY. THE LIBRARY CONTAINS APPROXIMATELY 225,000 VOLUMES, AS WELL AS MANY UNPUBLISHED GENEALOGY TYPESCRIPTS NOT AVAILABLE ELSEWHERE. THE LIBRARY IS OPEN TO MEMBERS AND NON-MEMBERS.

4b (Code:) (Expenses \$ 3,627,127 including grants of \$) (Revenue \$ 2,525,649)

HISTORIC PRESERVATION: NSDAR MAINTAINS A MUSEUM FOR THE PURPOSE OF COLLECTING, EXHIBITING, AND PRESERVING OBJECTS RELATED TO THE AMERICAN REVOLUTION. THE MUSEUM IS OPEN TO MEMBERS AND THE GENERAL PUBLIC FREE OF CHARGE. NSDAR'S AMERICANA COLLECTION INCLUDES MANUSCRIPT AND IMPRINT MATERIALS PERTAINING TO LIFE IN COLONIAL AMERICA, THE REVOLUTIONARY WAR ERA, AND THE EARLY REPUBLIC. NSDAR ALSO MAINTAINS CONSTITUTION HALL, AN AUDITORIUM DEDICATED TO THE US CONSTITUTION.

4c (Code:) (Expenses \$ 3,254,494 including grants of \$ 1,686,845) (Revenue \$ 3,891,012)

EDUCATION: NSDAR SUPPORTS TWO SCHOOLS IN THE APPALACHIAN AREA AND MAKES CONTRIBUTIONS TO SIX OTHER SCHOOLS. NSDAR AWARDS SCHOLARSHIPS IN POLITICAL SCIENCE, HISTORY, GOVERNMENT, ECONOMICS, BUSINESS, LAW, CHEMISTRY, NURSING, AND OCCUPATIONAL THERAPY. NSDAR ALSO PUBLISHES AMERICAN SPIRIT MAGAZINE, A BIMONTHLY PUBLICATION FOCUSING ON AMERICAN HISTORY, HISTORIC PRESERVATION, PATRIOTISM, AND EDUCATION.

(Code:) (Expenses \$ 182,974 including grants of \$) (Revenue \$ 722,068)

BOARD PROJECTS: THIS PROGRAM INCLUDES ACTIVITIES TARGETED FOR ACTION BY THE PRESIDENT GENERAL. THE MOST RECENT PROJECT INVOLVES THE ONGOING PRESERVATION, RESTORATION AND IMPROVEMENT OF THE NSDAR COMPLEX OF HISTORIC BUILDINGS AND THE COLLECTIONS THEREIN, SUPPORTING CHAPTERS, ADVANCING DAR'S TECHNOLOGICAL CAPABILITIES IN SUPPORT OF ITS MISSION, FUNDING COMMUNITY GRANTS FOR HISTORIC PRESERVATION, EDUCATION, AND PATRIOTISM, AND IMPROVING NSDAR'S FINANCIAL STABILITY THROUGH PROMOTION OF ESTABLISHED PROGRAMS.

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

(Expenses \$ 182,974 including grants of \$) (Revenue \$ 722,068)

4e Total program service expenses ▶ 11,774,789

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 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
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	No
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	No
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	No
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	No
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	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8 Yes	
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 Yes	
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 Yes	
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. 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	No
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 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
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)?	11f Yes	
12a If "Yes," complete Schedule D, Part X. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
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 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
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	No
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	No
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	No
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 Yes	
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	No
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	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
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 Yes	

Part IV

Checklist of Required Schedules (continued)

		Yes	No	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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	Yes	
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		No
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		No
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		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons?	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions?	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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?	33		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		No
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		No
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	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	61	
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		

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)											
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	155				
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)						2b	Yes				
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?						3a	Yes				
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>						3b	Yes				
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			No		
b 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			No		
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?						5b			No		
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			No		
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	Yes				
b If "Yes," did the organization notify the donor of the value of the goods or services provided?						7b	Yes				
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?						7c			No		
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			No		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?						7f			No		
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? Note. See the instructions for additional information the organization must report on Schedule O.						13a					
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			No		
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>						14b					
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?						15			No		
16 If the organization is subject to the section 4968 excise tax on net investment income?						16			No		
If "Yes," complete Form 4720, Schedule O.											

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

☒

Section A. Governing Body and Management

			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	87	
b	Enter the number of voting members included in line 1a, above, who are independent	1b	86	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
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	Yes	
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No

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	Yes	
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	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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		No
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	AL, AR, CA, FL, GA, HI, IL, KS, KY, MA, MD, MI, MN, MS, NC, ND, NH, NJ, NM, NY, OR, PA, RI, SC, TN, UT, WI, WV
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	☐ 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.	
20	State the name, address, and telephone number of the person who possesses the organization's books and records:	CHRIS FORBERG 1776 D STREET NW WASHINGTON, DC 20006 5303 (202) 879-3365

Part VII

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

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

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

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

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

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

☐ 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) PAMELA BORK CHAPLAIN GENERAL	20.00	X		X				0	0	0
(2) KATHRYN WALKER WEST CORRESPONDING SECRETARY GENERAL	20.00	X		X				0	0	0
(3) JANET WHITTINGTON CURATOR GENERAL	20.00	X		X				0	0	0
(4) PAMELA WRIGHT FIRST VICE PRESIDENT GENERAL	20.00	X		X				0	0	0
(5) LAURA MCCRILLIS KESSLER HISTORIAN GENERAL	20.00	X		X				0	0	0
(6) CYNTHIA SWEENEY LIBRARIAN GENERAL	20.00	X		X				0	0	0
(7) LINDA SEHRT NATIONAL PARLIAMENTARIAN	20.00	X		X				0	0	0
(8) VIRGINIA SEBASTIAN STORAGE ORGANIZING SECRETARY GENERAL	20.00	X		X				0	0	0
(9) PEGGY CARNEY TROXELL RECORDING SECRETARY GENERAL	20.00	X		X				0	0	0
(10) PATSY MCFALL REGISTRAR GENERAL	20.00	X		X				0	0	0
(11) CYNTHIA PARNELL REPORTER GENERAL	20.00	X		X				0	0	0
(12) DAWN CRUMLY LEMONGELLO TREASURER GENERAL	20.00	X		X				0	0	0
(13) DONNA EVELYN WEIGEL WEAVER VICE PRESIDENT GENERAL	4.00	X						0	0	0
(14) ELIZABETH CANDLER GRAHAM VICE PRESIDENT GENERAL	4.00	X						0	0	0
(15) JOYCE BALL PATTON VICE PRESIDENT GENERAL	4.00	X						0	0	0
(16) JUDY CALLAWAY OSTLER VICE PRESIDENT GENERAL	4.00	X						0	0	0
(17) DIANNE TUCKER CULBERTSON VICE PRESIDENT GENERAL	4.00	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 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			
(18) NANCY STURKIE FOLK VICE PRESIDENT GENERAL	4.00	X					0	0	
(19) ANN TAYLOR SCHAEFFER VICE PRESIDENT GENERAL	4.00	X					0	0	
(20) CHARLOTTE STOUT REYNOLDS VICE PRESIDENT GENERAL	4.00	X					0	0	
(21) CYNTHIA CLEVELAND MCNAMARA VICE PRESIDENT GENERAL	4.00	X					0	0	
(22) NANCY CHRISTINE SCHIRM WRIGHT VICE PRESIDENT GENERAL	4.00	X					0	0	
(23) MALINDA HORNER DAVIS VICE PRESIDENT GENERAL	4.00	X					0	0	
(24) CAROL PATTERSON SCHWENK VICE PRESIDENT GENERAL	4.00	X					0	0	
(25) JUDY NEWELL MASON VICE PRESIDENT GENERAL	4.00	X					0	0	
(26) ZORA MCGUFFEE OLSSON VICE PRESIDENT GENERAL	4.00	X					0	0	
(27) LESLIE R MILLER VICE PRESIDENT GENERAL	4.00	X					0	0	
(28) HOLLY STONE BLAIR VICE PRESIDENT GENERAL	4.00	X					0	0	
(29) JEANNINE ANGLE DOBBINS VICE PRESIDENT GENERAL	4.00	X					0	0	
(30) CYNTHIA BEALL SUICH VICE PRESIDENT GENERAL	4.00	X					0	0	
(31) ADELE ELLISOR LANCASTER VICE PRESIDENT GENERAL	4.00	X					0	0	
(32) SUSAN LEAKE HARVEY HOLT VICE PRESIDENT GENERAL	4.00	X					0	0	
(33) SUE SUTHERS ALLEN VICE PRESIDENT GENERAL	4.00	X					0	0	
(34) VIRGINIA ANN MCMILLAN POFFENBERGER VICE PRESIDENT GENERAL-UNTIL JUNE 2020	4.00	X					0	0	
(35) APRIL BUTLER STALEY VICE PRESIDENT GENERAL-UNTIL JUNE 2020	4.00	X					0	0	
(36) BARBARA JEAN GLASS ZINK VICE PRESIDENT GENERAL-UNTIL JUNE 2020	4.00	X					0	0	
(37) CANDACE FRYBURGER VICE PRESIDENT GENERAL-UNTIL JUNE 2020	4.00	X					0	0	
(38) MARCY STORLIE KIMMINAU VICE PRESIDENT GENERAL-UNTIL JUNE 2020	4.00	X					0	0	
(39) STEPHANIE HILL TROTH VICE PRESIDENT GENERAL-UNTIL JUNE 2020	4.00	X					0	0	
(40) CLAUDIA MOORE ONKEN VICE PRESIDENT GENERAL-UNTIL JUNE 2020	4.00	X					0	0	
(41) ELIZABETH HARTLEY MARLOW STATE REGENT - AK	4.00	X					0	0	
(42) B CLEMONS STATE REGENT - AL	4.00	X					0	0	
(43) ALECE MAGEE STATE REGENT - AR	4.00	X					0	0	
(44) MARIE LINKE MONGNO STATE REGENT - AR-UNTIL JUNE 2020	4.00	X					0	0	
(45) ELLIOTT STATE REGENT - AZ	4.00	X					0	0	
(46) BEAVER FELLMAN STATE REGENT - AZ-UNTIL JUNE 2020	4.00	X					0	0	
(47) ABBOTT BRODERICK STATE REGENT - CA	4.00	X					0	0	
(48) ELLISOR LANCASTER STATE REGENT - CA-UNTIL JUNE 2020	4.00	X					0	0	
(49) HAWLEY CLARK-URBAN STATE REGENT - CO	4.00	X					0	0	
(50) ANDERSON HENDRIE STATE REGENT - CT	4.00	X					0	0	
(51) SHELTON HAYS STATE REGENT - DC	4.00	X					0	0	
(52) LYNN CASTELLI GUZAUSKAS STATE REGENT - DC-UNTIL JUNE 2020	4.00	X					0	0	
(53) ANN CONTE LESTER STATE REGENT - DE	4.00	X					0	0	
(54) YARBROUGH STATE REGENT - FL	4.00	X					0	0	
(55) MCCORKLE STATE REGENT - GA	4.00	X					0	0	
(56) GWYNNE BROWN STATE REGENT - GA-UNTIL JUNE 2020	4.00	X					0	0	
(57) ELLEN MORROW MANN STATE REGENT - HI	4.00	X					0	0	
(58) LOUISE HUEBLER SUTER STATE REGENT - IA	4.00	X					0	0	
(59) HUCKE STATE REGENT - IA-UNTIL JUNE 2020	4.00	X					0	0	
(60) ANN BIBBER SCHMIDT STATE REGENT - ID	4.00	X					0	0	
(61) LYNN WILSON LUKEN STATE REGENT - IL	4.00	X					0	0	
(62) SUE HURD BLAIR STATE REGENT - IN	4.00	X					0	0	
(63) THERESA LEE METZGER STATE REGENT - KS	4.00	X					0	0	
(64) JUNE DOAK ROGOW STATE REGENT - KY	4.00	X					0	0	
(65) HODGE WELCH WHITE STATE REGENT - LA	4.00	X					0	0	
(66) PRATT RENKAS STATE REGENT - MA	4.00	X					0	0	
(67) MARY DOUGHERTY TIPTON STATE REGENT - MD	4.00	X					0	0	
(68) ANN FOSTER ROBBINS STATE REGENT - ME	4.00	X					0	0	
(69) MARIE LEMARBE LACROIX STATE REGENT - MI	4.00	X					0	0	
(70) PLUNKETT LATHAM STATE REGENT - MN	4.00	X					0	0	
(71) ELIZABETH LEEPER MAGEE STATE REGENT - MO	4.00	X					0	0	
(72) BEALL SUICH STATE REGENT - MO-UNTIL JUNE 2020	4.00	X					0	0	
(73) HICKS POLK STATE REGENT - MS	4.00	X					0	0	
(74) HAISLIP SPENCER STATE REGENT - MT	4.00	X					0	0	
(75) NUNALEE WEISS STATE REGENT - NC	4.00	X					0	0	
(76) ELIZABETH SIDLER STATE REGENT - ND	4.00	X					0	0	
(77) J CAIN STATE REGENT - NE	4.00	X					0	0	
(78) TODD JARMAN STATE REGENT - NE-UNTIL JUNE 2020	4.00	X					0	0	
(79) MARIE JACKSON STATE REGENT - NH	4.00	X					0	0	
(80) SUE NEVARD MATTHEWS STATE REGENT - NJ	4.00	X					0	0	
(81) DIANE RADFORD HALVORSON STATE REGENT - NM	4.00	X					0	0	
(82) KATHERINE HORSELL BAGWELL STATE REGENT - NV	4.00	X					0	0	
(83) LYNN CLARK RUBENSTEIN STATE REGENT - NV-UNTIL JUNE 2020	4.00	X					0	0	
(84) FLORENCE POWLEY BIRNER STATE REGENT - NY	4.00	X					0	0	
(85) ANNE GOBIN DIXON STATE REGENT - OH	4.00	X					0	0	
(86) JANE ELLIS CALES STATE REGENT - OK	4.00	X					0	0	
(87) SUTHERS ALLEN STATE REGENT - OK-UNTIL JUNE 2020	4.00	X					0	0	
(88) SUE PETERSON DIAL STATE REGENT - OR	4.00	X					0	0	
(89) ANN LAFOLLETTE TAYLOR STATE REGENT - OR-UNTIL JUNE 2020	4.00	X					0	0	
(90) ANNE WALKER WATKINS STATE REGENT - PA	4.00	X					0	0	
(91) MARIE NIGRELLI DALEY STATE REGENT - RI	4.00	X					0	0	
(92) ANN KRUEGER BILLHAM STATE REGENT - SC	4.00	X					0	0	
(93) LOUISE DELL FANSLER STATE REGENT - SD	4.00	X					0	0	
(94) WIMBERLEY STATE REGENT - TN	4.00	X					0	0	
(95) GREENE TILLMAN STATE REGENT - TX	4.00	X					0	0	
(96) ASAY STATE REGENT - UT	4.00	X					0	0	
(97) LEAKE HARVEY HOLT STATE REGENT - UT-UNTIL JUNE 2020	4.00	X					0	0	
(98) FETHEROLF TURBYFILL STATE REGENT - VA	4.00	X					0	0	
(99) RUTH WHITEHEAD CURTIN STATE REGENT - VT	4.00	X					0	0	
(100) J BASSO LANGTON STATE REGENT - WA	4.00	X					0	0	
(101) LUNCEFORD HORGEN STATE REGENT - WA-UNTIL JUNE 2020	4.00	X					0	0	
(102) ANN THOLE MAJEWSKI STATE REGENT - WI	4.00	X					0	0	
(103) C ALEXANDER BROWN STATE REGENT - WV	4.00	X					0	0	
(104) SEARS HURSMAN STATE REGENT - WY	4.00	X					0	0	
(105) MCALPIN WEBSTER DELLENBACK STATE REGENT - WY-UNTIL JUNE 2020	4.00	X					0	0	
(106) MICHEL CHATEL DE BRANCION STATE REGENT - XF	4.00	X					0	0	
(107) MCKINNON LORIDANS STATE REGENT - XM	4.00	X					0	0	
(108) STEPHEN NORDHOLT ADMINISTRATOR	40.00			X			176,280	0	44,479
(109) HART FRANKO CONTROLLER	40.00			X			108,748	0	40,174
(110) DENISE DORING VANBUREN PRESIDENT GENERAL	40.00			X			60,000	0	12,384
(111) SANDRA POLLACK DEVELOPMENT DIRECTOR	40.00				X		127,197	0	31,449
(112) VICTOR KUNZE DIRECTOR OF INFORMATION SY	40.00				X		124,384	0	34,432
(113) DAVID COPPEDGE BUILDING SUPERINTENDENT	40.00				X		122,281	0	32,575
1b Sub-Total									
c Total from continuation sheets to Part VII, Section A									
d Total (add lines 1b and 1c)							718,890	0	195,493
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									
5									
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								Yes	No
								3	No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the									
								4	

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	8,169,023
c	Fundraising events	1c	
d	Related organizations	1d	
e	Government grants (contributions)	1e	
f	All other contributions, gifts, grants, and similar amounts not included above	1f	7,810,102
g	Noncash contributions included in lines 1a - 1f:\$	1g	50,307
h Total. Add lines 1a-1f		15,979,125	

Program Service Revenue

2a	APPLICATION FEES	Business Code				
		900099	1,395,668	1,395,668		
b	MAGAZINE REVENUE	541800	1,036,199	995,092	41,107	
c	MEMBER MEETING FEES	900099	283,382	283,382		
d	RECORD COPY FEES	900099	282,623	282,623		
e	LIBRARY RESEARCH FEES	900099	2,467	2,467		
f All other program service revenue.						
g Total. Add lines 2a-2f.		3,000,339				

Other Revenue

3	Investment income (including dividends, interest, and other similar amounts)		3,365,377			3,365,377
4	Income from investment of tax-exempt bond proceeds					
5	Royalties		58,426			58,426
		(i) Real	(ii) Personal			
6a	Gross rents	6a	165,396			
b	Less: rental expenses	6b	844,621			
c	Rental income or (loss)	6c	-679,225			
d Net rental income or (loss)			-679,225			-679,225
		(i) Securities	(ii) Other			
7a	Gross amount from sales of assets other than inventory	7a	11,429,991			
b	Less: cost or other basis and sales expenses	7b	8,720,060			
c	Gain or (loss)	7c	2,709,931			
d Net gain or (loss)			2,709,931			2,709,931
8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a				
b	Less: direct expenses	8b				
c Net income or (loss) from fundraising events						
9a	Gross income from gaming activities. See Part IV, line 19	9a				
b	Less: direct expenses	9b				
c Net income or (loss) from gaming activities						
10a	Gross sales of inventory, less					

returns and allowances . . .		10a	2,630,978				
b Less: cost of goods sold		10b	1,135,768				
c Net income or (loss) from sales of inventory . . .				1,495,210	1,493,136	2,074	
Miscellaneous Revenue		Business Code					
11a	MANAGEMENT FEES	900099		474,154			474,154
b							
c							
d All other revenue				104,927			104,927
e Total. Add lines 11a–11d				579,081			
12 Total revenue. See instructions				26,508,264	4,452,368	43,181	6,033,590

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	1,164,562	1,164,562		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	522,283	522,283		
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	718,890	471,296	187,677	59,917
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	6,910,612	4,530,518	1,804,120	575,974
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	245,120	160,698	63,992	20,430
9 Other employee benefits	704,495	461,859	183,919	58,717
10 Payroll taxes	589,373	386,386	153,865	49,122
11 Fees for services (non-employees):				
a Management	480,123	314,763	125,343	40,017
b Legal	25,433		25,433	
c Accounting	68,209		68,209	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	21,000			21,000
f Investment management fees	76,851	50,383	20,063	6,405
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion	13,871	9,094	3,621	1,156
13 Office expenses	1,242,920	814,844	324,483	103,593
14 Information technology	554,345	363,422	144,720	46,203
15 Royalties				
16 Occupancy	58,018	38,036	15,146	4,836
17 Travel	7,562	4,958	1,974	630
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	130,469	85,534	34,061	10,874
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,694,500	1,110,895	442,375	141,230
23 Insurance	334,216	219,108	87,252	27,856
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 PRINTING & PUBLICATIONS	712,892	467,364	186,111	59,417
b OTHER FUNDRAISING EXP.	449,841	294,910	117,438	37,493
c REPAIRS AND MAINTENANCE	194,066	127,227	50,664	16,175
d COLLECTIONS ADDITIONS	157,528	103,274	41,125	13,129
e All other expenses	850,815	73,375	574,659	202,781
25 Total functional expenses. Add lines 1 through 24e	17,927,994	11,774,789	4,656,250	1,496,955
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 IX

☐

				(A)		(B)	
				Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing		14,143,446	1	10,133,506	
	2	Savings and temporary cash investments		8,660,037	2	6,519,287	
	3	Pledges and grants receivable, net		388,122	3	359,852	
	4	Accounts receivable, net		1,052,008	4	285,666	
	5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6		
	7	Notes and loans receivable, net			7		
	8	Inventories for sale or use		598,601	8	1,417,776	
	9	Prepaid expenses and deferred charges		617,646	9	526,038	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	56,649,668			
	b	Less: accumulated depreciation	10b	27,322,970	23,448,465	10c	29,326,698
	11	Investments—publicly traded securities		134,691,446	11	157,598,036	
	12	Investments—other securities. See Part IV, line 11		961,418	12	922,256	
	13	Investments—program-related. See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			15		
16	Total assets. Add lines 1 through 15 (must equal line 33)		184,561,189	16	207,089,115		
Liabilities	17	Accounts payable and accrued expenses		1,674,083	17	2,121,624	
	18	Grants payable			18		
	19	Deferred revenue		1,450,585	19	1,529,428	
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		26,146	21	15,514	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22		
	23	Secured mortgages and notes payable to unrelated third parties			23		
	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		644,229	25	921,589	
	26	Total liabilities. Add lines 17 through 25		3,795,043	26	4,588,155	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ☒ and complete lines 27, 28, 32, and 33.						
	27	Net assets without donor restrictions		71,123,246	27	76,876,088	
	28	Net assets with donor restrictions		109,642,900	28	125,624,872	
	Organizations that do not follow FASB ASC 958, check here ☐ and complete lines 29 through 33.						
	29	Capital stock or trust principal, or current funds			29		
	30	Paid-in or capital surplus, or land, building or equipment fund			30		
	31	Retained earnings, endowment, accumulated income, or other funds			31		
	32	Total net assets or fund balances		180,766,146	32	202,500,960	
	33	Total liabilities and net assets/fund balances		184,561,189	33	207,089,115	

Part XI

Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	26,508,264
2	Total expenses (must equal Part IX, column (A), line 25)	2	17,927,994
3	Revenue less expenses. Subtract line 2 from line 1	3	8,580,270
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	180,766,146
5	Net unrealized gains (losses) on investments	5	13,154,544
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (A))	10	202,500,960

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 ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
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?		No
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.		

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

Name of the organization

NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION

Employer identification number

53-0205923

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

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

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10

☒

An organization that normally receives: (1) more than 33⅓% 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 33⅓% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11

☐

An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f

Enter the number of supported organizations
- g

Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 Total. Add lines 1 through 3						
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) . . .						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4. . .						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on . . .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .						
11 Total support. Add lines 7 through 10						

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

12

13 First 5 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 2020 (line 6, column (f) divided by line 11, column (f))	14	
15 Public support percentage for 2019 Schedule A, Part II, line 14	15	

16a 33 1/3% support test—2020. 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—2019. 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—2020. 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—2019. 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 IIISupport Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .	9,073,021	6,455,598	10,581,640	8,631,996	15,979,125	50,721,380
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	11,208,107	11,520,768	11,759,902	12,291,198	5,586,085	52,366,060
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	20,281,128	17,976,366	22,341,542	20,923,194	21,565,210	103,087,440
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	110,722	25,693	160,574	613,372	237,390	1,147,751
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						0
c Add lines 7a and 7b. .	110,722	25,693	160,574	613,372	237,390	1,147,751
8 Public support. (Subtract line 7c from line 6.)						101,939,689

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6. . .	20,281,128	17,976,366	22,341,542	20,923,194	21,565,210	103,087,440
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . .	4,009,423	3,968,696	4,570,135	5,089,062	3,589,199	21,226,515
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.	110,603	32,192	-189,312	309,715	0	263,198
c Add lines 10a and 10b.	4,120,026	4,000,888	4,380,823	5,398,777	3,589,199	21,489,713
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.) . .	398,436	467,446	489,288	473,358	579,081	2,407,609
13 Total support. (Add lines 9, 10c, 11, and 12.) . .	24,799,590	22,444,700	27,211,653	26,795,329	25,733,490	126,984,762
14 First 5 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 2020 (line 8, column (f) divided by line 13, column (f))	15	80.280 %
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	80.300 %

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2020 (line 10c, column (f) divided by line 13, column (f))	17	16.920 %
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	16.850 %
19a 33 1/3% support tests—2020. 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—2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization	☐	
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	☐	

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, 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? <i>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.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c 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).</i>		
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?		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a	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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
10a	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)? <i>If "Yes," answer line 10b below.</i>		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		

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 lines 11b and 11c below, the governing body of a supported organization?		
b	A family member of a person described in 11a above?		
c	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part VI		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the officers, 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.		
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.		

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).		

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?		
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).		
3	By reason of the relationship described in line 2 above, 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.		

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)			
2	Activities Test. Answer lines 2a and 2b 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.			
b	Did the activities described in line 2a 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.			
3	Parent of Supported Organizations. Answer lines 3a and 3b 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? If "Yes" or "No" provide details in Part VI.			
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.			

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 Nov. 20, 1970 (*explain in **Part VI***). **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):	1	
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 (<i>explain in detail in Part VI</i>):		
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 0.015 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 0.035	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	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6 Other distributions (describe in Part VI). See instructions	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	8	
9 Distributable amount for 2020 from Section C, line 6	9	
10 Line 8 amount divided by Line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020:			
a From 2015.			
b From 2016.			
c From 2017.			
d From 2018.			
e From 2019.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016.			
b Excess from 2017.			
c Excess from 2018.			
d Excess from 2019.			
e Excess from 2020.			

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).

Facts And Circumstances Test

Return Reference	Explanation
PART III, SECTION B, LINE 12:	THE OTHER INCOME REPRESENTS MANAGEMENT FEES AND MISCELLANEOUS INCOME.

Additional Data

Return to Form

Software ID:

Software Version:

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information.	OMB No. 1545-0047
		2020
Name of the organization NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION		Employer identification number 53-0205923

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number
53-0205923

Contributors

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED		\$ RESTRICTED	☐ Person
			☐ Payroll
			☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	☐ Person
			☐ Payroll
			☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	☐ Person
			☐ Payroll
			☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	☐ Person
			☐ Payroll
			☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	☐ Person
			☐ Payroll
			☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	☐ Person
			☐ Payroll
			☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	☐ Person
			☐ Payroll
			☐ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	☐ Person
			☐ Payroll
			☐ Noncash (Complete Part II for noncash contributions.)

Name of organization NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION	Employer identification number 53-0205923
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Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	

Name of organization NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION	Employer identification number 53-0205923
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	

Additional Data

Return to Form

Software ID:

Software Version:

Name of the organization NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION	Employer identification number 53-0205923
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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) ☐ Preservation of an historically important land area ☐ Protection of natural habitat ☐ Preservation of a certified historic structure ☐ Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
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 7/25/06, 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 FASB 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 FASB 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 FASB 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

d

☒ Loan or exchange programs

b

☒ Scholarly research

e

☐ Other

c

☒ Preservation for future generations

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .

☐ Yes

☒ No

Part IV Escrow and Custodial Arrangements.

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☒ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table:

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☒ Yes ☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☒

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	93,551,351	82,142,223	82,826,172	74,393,428	65,033,081
b Contributions	11,153,003	11,922,174	2,313,813	2,698,134	6,843,173
c Net investment earnings, gains, and losses	10,144,941	11,385,685	-1,963,090	6,600,793	3,302,299
d Grants or scholarships					
e Other expenditures for facilities and programs	5,733,277	11,898,731	1,034,672	866,183	785,125
f Administrative expenses					
g End of year balance	109,116,018	93,551,351	82,142,223	82,826,172	74,393,428

2

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

a

Board designated or quasi-endowment ▶ 31.497 %

b

Permanent endowment ▶ 24.708 %

c

Term endowment ▶ 43.795 %

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

3a

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

(i) Unrelated organizations

(ii) Related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		No
3a(ii)		No
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
1a Land		207,420		207,420
b Buildings		48,342,892	20,776,330	27,566,562
c Leasehold improvements				
d Equipment		8,099,356	6,546,640	1,552,716
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				29,326,698

Schedule D (Form 990) 2020

Part VII

Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII

Investments—Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX

Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X

Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	921,589

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

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

1	Total revenue, gains, and other support per audited financial statements	1	40,540,075
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	13,154,544
b	Donated services and use of facilities	2b	109,498
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	13,264,042
3	Subtract line 2e from line 1	3	27,276,033
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	76,852
b	Other (Describe in Part XIII.)	4b	-844,621
c	Add lines 4a and 4b	4c	-767,769
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	26,508,264

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	18,805,261
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	109,498
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	844,621
e	Add lines 2a through 2d	2e	954,119
3	Subtract line 2e from line 1	3	17,851,142
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	76,852
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	76,852
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	17,927,994

Part XIII

Supplemental Information

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

Return Reference	Explanation
PART III, LINE 1A:	THE NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION (NSDAR) ACQUIRES ITS COLLECTIONS, WHICH INCLUDE MICROFILM, LIBRARY BOOKS AND HISTORICAL TREASURES OF ITS MUSEUM AND AMERICANA COLLECTION, THROUGH PURCHASE OR DONATION. NSDAR'S COLLECTIONS ARE HELD FOR PUBLIC EXHIBITION, EDUCATION OR RESEARCH AND ARE PROTECTED AND PRESERVED.
PART III, LINE 4:	NSDAR'S COLLECTIONS INCLUDE MICROFILM, LIBRARY BOOKS, AND HISTORICAL TREASURES OF ITS MUSEUM LIBRARY, AND AMERICANA COLLECTION. THE COLLECTIONS ARE HELD FOR PUBLIC EXHIBITION, EDUCATION, AND RESEARCH AND ARE PROTECTED AND PRESERVED.
PART IV, LINE 2B:	NSDAR ACTS AS AN AGENT IN THE COLLECTION AND DISBURSEMENT OF FUNDS RECEIVED FROM CONTRIBUTORS TO DAR SCHOOLS. AS NSDAR DOES NOT HAVE VARIANCE POWER OVER THE DISBURSEMENT OF THESE FUNDS, AMOUNTS HELD FOR DAR SCHOOLS TOTALING \$15,514 AT DECEMBER 31, 2020 ARE REFLECTED IN ACCOUNTS PAYABLE AND ACCRUED EXPENSES IN THE FINANCIAL STATEMENT.
PART V, LINE 4:	NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION ENDOWMENT CONSISTS OF MULTIPLE FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES TO PROVIDE FOR THE LONG TERM SUPPORT OF THE ORGANIZATION AND ITS PROGRAMS.
PART X, LINE 2:	THE NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION (NSDAR) IS EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. IT IS SUBJECT TO TAX ONLY ON ITS NET UNRELATED BUSINESS INCOME. ADDITIONALLY, NSDAR IS EXEMPT FROM INCOME TAXES IN THE DISTRICT OF COLUMBIA. IT HAS BEEN DETERMINED THAT NSDAR IS NOT A PRIVATE FOUNDATION AS DEFINED IN SECTION 509(A) OF THE CODE. NSDAR FOLLOWS THE INCOME TAX STANDARD FOR UNCERTAIN INCOME TAX POSITIONS. NSDAR EVALUATED ITS TAX POSITIONS AND DETERMINED THAT ITS TAX POSITIONS ARE MORE-LIKELY-THAN-NOT TO BE SUSTAINED ON EXAMINATION. NSDAR'S INCOME TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AND STATE AUTHORITIES.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	RENTAL EXPENSE -844,621.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	RENTAL EXPENSE 844,621.

Additional Data

[Return to Form](#)

Software ID:

Software Version:

Name of the organization
NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION

Employer identification number
53-0205923

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

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a ☒ Mail solicitations

e ☐ Solicitation of non-government grants

b ☐ Internet and email solicitations

f ☐ Solicitation of government grants

c ☒ Phone solicitations

g ☐ Special fundraising events

d ☐ In-person solicitations
- 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 ☐ No
- b If "Yes," list the 10 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?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 CALMARK GROUP 6755 S SAYRE AVE BEDFORD PARK, IL 60638	PLAN AND MANAGE MAIL CAMPAIGNS; ADVISE ON DONOR SEGMENT		No	745,556	380,484	365,072
2 EDGE DIRECT PO BOX 840 TULSA, OK 74101	PLAN AND MANAGE MAIL CAMPAIGNS; ADVISE ON DONOR SEGMENT		No	276,770	141,246	135,524
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶				1,022,326	521,730	500,596

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.

AL, AR, CA, FL, GA, HI, IL, KS, KY, MA, MD, MI, MN, NC, ND, NH, NJ, NM, NY, OR, PA, RI, SC, TN, UT, VA, WI, WV, MS

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 50083H Schedule G (Form 990 or 990-EZ) 2020

Part II

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

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

Part III

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

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Direct Expenses	1 Gross revenue				
	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 distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	
Return Reference	Explanation
SCHEDULE G, PART I, LINE 2B, COLUMN (V)	NSDAR PAID EDGE DIRECT \$141,246 TO PLAN AND MANAGE MAIL CAMPAIGNS AND ADVISE ON DONOR SEGMENT. NSDAR ALSO PAID CALMARK GROUP \$380,484 TO PLAN AND MANAGE MAIL CAMPAIGNS AND ADVISE ON DONOR SEGMENT.

Schedule I
(Form 990)

Department of the
Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization
NATIONAL SOCIETY DAUGHTERS OF THE
AMERICAN REVOLUTION

Employer identification number
53-0205923

Part I General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) BACONE COLLEGE 2299 OLD BACONE ROAD MUSKOGEE,OK 74403	73-0590036	501C3	73,718		CASH		CHAIRS, ART SUPPLIES, BUILDING RENOVATIONS
(2) BERRY COLLEGE 2277 MARTHA BERRY HIGHWAY MOUNT BERRY,GA 30149	58-0566133	501C3	45,000		CASH		RENOVATION BUILDINGS, SCHOLARSHIPS, RELIEF FUND
(3) CENTER FOR AMERICAN MILITARY MUSIC OPPORTUNITIES 129 PINTAIL ROAD WOODBIDGE,V A 22192	38-3801781	501C3	5,000		CASH		CAMMO PROVIDES OPPORTUNITIES FOR VETERANS AND SERVICE MEMBERS TO FURTHER THEIR CARRER IN THE MUSIC INDUSTRY
(4) CHEMAWA INDIAN SCHOOL INC 3700 CHEMAWA ROAD NE SALEM,OR 97305	93-0735265	501C3	14,000		CASH		FOLDING CHAIRS, STAGE CURTAIN, TRAINING FOR STAFF
(5) CROSSNORE SCHOOL 100 DAR DRIVE CROSSNORE,NC 28616	56-0567980	501C3	159,689		CASH		AUDITORIUM RENOVATION, CHAIRS, STUDENT SUPPORT
(6) FISHER HOUSE FOUNDATION INC 12300 TWINBROOK PARKWAY SUITE 410 ROCKVILLE,MD 20850	11-3158401	501C3	20,000		CASH		TO CONSTRUCT AND FURNISH FISHER HOUSES, PROVIDE ASSISTANCE AND SCHOLARSHIPS TO MILITARY FAMILIES AND CHILDREN & ENHANCE THE QUALITY OF LIFE FOR VETERANS AND ARMED FORCES MEMBERS.
(7) HILLSIDE SCHOOL INC 404 ROBIN HILL ROAD MARLBOROUGH,MA 01752	04-2111216	501C3	46,027		CASH		DESK, FURNITURE FOR DORMS, HIKING TRAIL UPGRADES
(8) HINDMAN SETTLEMENT SCHOOL 238 HIGHWAY 100 S HINDMAN,KY 41822	61-0447248	501C3	48,082		CASH		DYSLEXIA TECHNOLOGY CENTER, COMPUTER, TUTOR
(9) INDIAN YOUTH OF AMERICA C/O PATRICIA GORDON PO BOX 2786 SIOUX CITY,IA 51106	52-1150452	501C3	15,159		CASH		CAMP SUPPLIES (FOOD, LODGING, ART AND CRAFTS)
(10) KATE DUNCAN SMITH SCHOOL 6077 MAIN STREET GRANT,AL 35747	63-0338084	501C3	377,846		CASH		FIRE ALARM SYSTEM, TRACK AND TENNIS EQUIPMENT, TENNIS BALL MACHINE, ART SUPPLIES
(11) NEBRASKA INDIAN COMMUNITY COLLEGE 1320 LINCOLN MALL STE 9 LINCOLN,NE 68508	47-0634861	501C3	6,000		CASH		SUPPORT TUITION FREE LANGUAGE CLASSES
(12) TAMASSEE DAR SCHOOL 1925 BUMGARDNER DRIVE TAMASSEE,SC 29686	57-6000973	501C3	179,659		CASH		SECURITY SERVICES, LAWN/DECK SERVICES, BUILDING REPAIRS, DRIVEWAY PAVING,

							AUDITORIUM REPAIRS
(13) ACCOKEEK FOUNDATION INC 3400 BRYAN POINT ROAD ACCOKEEK,MD 20607	52-6037288	501C3	5,000		CASH		RESTORATION OF THE LAUREL BRANCH FARMHOUSE PROJECT GRANT AWARD
(14) ALBANY COUNTY HISTORICAL ASSOCIATION 9 TEN BROECK PLACE ALBANY,NY 12210	14-6048668	501C3	5,000		CASH		HISTORIC RESTORATION OF THE TEN BROECK MANSION
(15) ALL SAINTS NATIONAL LANDMARK TRUST PO BOX 326 NAVESINK,NJ 07752	27-4036419	501C3	5,000		CASH		ROOF REPAIR GRANT AWARD
(16) APPLIED BEHAVIORAL REHABILITATION INSTITUTE 655 PARK AVENUE BRIDGEPORT,CT 06604	06-1520511	501C3	20,000		CASH		VIVIAN'S OUTREACH TO WOMEN GRANT FROM THE VIVIAN LUTHER SCHAFER FUND FOR INDIGENT AND HOMELESS WOMEN
(17) BLACKACRE STATE NATURE PRESERVE 3200 TUCKER STATION ROAD LOUISVILLE,KY 40299	31-1072398	501C3	10,000		CASH		BLACKACRE STATE NATURE PRESERVE FARMHOUSE PRESERVATION PROJECT GRANT AWARD
(18) DRIVER OPERA HOUSE 1744 HI VIEW DRIVE DARLINGTON,WI 53530	26-1812695	501C3	5,000		CASH		SEALING AND PAINTING CUSTOM WINDOWS PROJECT
(19) ELLEN PAYNE ODOM GENEALOGICAL LIBRARY PO BOX 2828 MOULTRIE,GA 31776	58-1819796	501C3	5,000		CASH		DIGITIZATION OF LOCAL NEWSPAPER 1814-2018
(20) FLORISSANT VALLEY HISTORICAL SOCIETY 1300 S WARSON ROAD ST LOUIS,MO 63124	43-0589597	501C3	5,425		CASH		PRESERVATION GOALS FOR 2020 WAS THE PROPERTIES FRONT OR WEST AND SOUTH ELEVATIONS
(21) GENESEE COUNTRY VILLAGE 1410 FLINT HILL ROAD MUMFORD,NY 14511	16-0918567	501C3	5,000		CASH		GENESEE CITY VILLAGE JONES FARMHOUSE PROJECT
(22) HEARD MEMORIAL CLUBHOUSE PO BOX 245 SEDALIA,MO 65302	43-6211188	501C3	5,000		CASH		HEARD MEMORIAL CLUBHOUSE PROJECT FOUNDATION STABILIZATION TO CARRIAGE HOUSE
(23) HISTORIC MORVEN INC 55 STOCKTON STREET PRINCETON,NJ 08540	22-2817982	501C3	5,000		CASH		REMEDiate FALLING WINDOWS AND SHUTTERS PROJECT GRANT
(24) KERNERSVILLE MUSEUM 5925 KENTON DRIVE KERNERSVILLE,NC 27784	46-2933514	501C3	5,000		CASH		PORCH RESTORATION OF 1800'S WEANING HOUSE PROJECT
(25) LYMAN HOUSE MEMORIAL MUSEUM 276 HAILI STREET HILO,HI 96720	99-0084350	501C3	5,000		CASH		RESTORING PART OF THE MISSION HOUSE BY REBUILDING THE SECOND FLOOR
(26) MEDAL OF HONOR PO BOX 492 GAINESVILLE,TX 76240	45-0502077	501C3	5,000		CASH		BUILDING MUSEUM CENTERPIECE FOR THE NCTC MAIN CAMPUS IN GAINESVILLE, TX
(27) MERCHANT'S HOUSE MUSEUM 29 EAST 4TH STREET NEW YORK,NY 10003	23-7186077	501C3	5,000		CASH		RESTORATION OF THE TEA ROOM PROJECT
(28) MORRIS-JUMEL MANSION 65 JUMEL TERRACE NEW YORK,NY 10032	13-2800646	501C3	5,000		CASH		WOOD CONSERVATION UPHOLSTERY FABRIC AND TRIM UPHOLSTERY CONSERVATION AND REPLACEMENT
(29) NANTUCKET HISTORICAL ASSOCIATION PO BOX 1016 NANTUCKET,MA 02554	04-6003451	501C3	5,000		CASH		PRESERVATION AND RESTORATION OF EXTERIOR OF THE THOMAS MACY WAREHOUSE

							PROJECT
(30) NICHOLAS GIBBS HISTORICAL SOCIETY 9909 EMORY ROAD NE CORRYTON,TN 37721	58-1326772	501C3	6,957		CASH		CABIN REPAIRS AND RESTORATION PROJECT
(31) PHILADELPHIA VETERANS COMFORT HOUSE 4108 BALTIMORE AVENUE PHILADELPHIA,PA 19104	23-2694118	501C3	40,000		CASH		HAVEN WOMEN SHELTER FOR COUNSELING, MEDICAL SERVICES, HEALTHY EATING AND PHYSICAL AND EMOTIONAL THERAPIES
(32) RIVERWALK FORT LAUDERDALE TRUST 200 SW 1ST AVENUE 101 FORT LAUDERDALE,FL 33301	65-0112666	501C3	5,000		CASH		CONSTRUCT THE RIVERWALK 9/11 MONUMENT
(33) SAPPINGTON HOUSE FOUNDATION 5033 ROMAINE SPRING DRIVE FENTON,MO 63119	83-1389951	501C3	5,000		CASH		SAPPINGTON HOUSE RENOVATION PROJECT
(34) WASHBURN- NORLANDS FOUNDATION 290 NORLANDS ROAD LIVERMORE,ME 04253	23-7324567	501C3	5,000		CASH		STEEPLE RESTORATION PROJECT
(35) WATERVILLE HISTORICAL SOCIETY 1122 WATERVILLE MONCLOVA ROAD WATERVILLE,O H 43566	34-6594795	501C3	7,000		CASH		SARGENT HOUSE WINDOW RESTORATION PROJECT

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶	35
3	Enter total number of other organizations listed in the line 1 table ▶	0

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) OUTSTANDING TEACHER AWARD	3	8,500		N/A	N/A
(2) U.S. MILITARY ACADEMY AWARDS	12	129,147		N/A	N/A
(3) OUTSTANDING TEACHER OF AMERICAN HISTORY AWARD	25	12,776		N/A	N/A
(4) GOOD CITIZENS AWARDS	52	23,610		N/A	N/A
(5) JR. MEMBERSHIP CLASSROOM GRANT	87	43,500		N/A	N/A
(6) SCHOLARSHIPS	94	304,750		N/A	N/A
(6)					
(7)					

Part IV

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

Return Reference	Explanation
PART I, LINE 2:	NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION (NSDAR) AWARDS SCHOLARSHIPS TO QUALIFIED APPLICANTS. APPLICANTS MUST BE UNITED STATES CITIZENS AND MUST ATTEND AN ACCREDITED COLLEGE OR UNIVERSITY IN THE UNITED STATES. THE APPLICATION PROCESS IS CONDUCTED WITHOUT REGARD TO RACE, SEX, RELIGION, OR NATIONAL ORIGIN. SCHOLARSHIPS ARE AWARDED BY THE SCHOLARSHIP COMMITTEE BASED ON ACADEMIC EXCELLENCE, COMMITMENT TO FIELD OF STUDY (AS REQUIRED), AND NEED.

Additional Data

Return to Form

Software ID:
Software Version:

Name of the organization
NATIONAL SOCIETY DAUGHTERS OF THE
AMERICAN REVOLUTION

Employer identification number
53-0205923

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e.g., maid, chauffeur, chef)		
1b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?		
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☒ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? b Any related organization? If "Yes," on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? b Any related organization? If "Yes," on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III		
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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

[illegible]

Part III **Supplemental Information**

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

Return Reference	Explanation
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Additional Data

Return to Form

Software ID:
Software Version:

Name of the organization
NATIONAL SOCIETY DAUGHTERS OF THE
AMERICAN REVOLUTION

Employer identification number
53-0205923

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ ▶ _____

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No

Total ▶ \$ _____

Part III Grants or Assistance Benefiting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) PAMELA WRIGHT	FIRST VP	70,088	DECORATIONS AND VARIOUS OTHER ITEMS FOR RESALE		No

Part V Supplemental Information

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

Return Reference	Explanation
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Additional Data

[Return to Form](#)

Software ID:

Software Version:

Name of the organization
NATIONAL SOCIETY DAUGHTERS OF THE
AMERICAN REVOLUTION

Employer identification number
53-0205923

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	905	50,307	PUBLISHED MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

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

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

No

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Return Reference

Explanation

Additional Data

[Return to Form](#)

Software ID:

Software Version:

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.**
▶ **Attach to Form 990 or 990-EZ.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization
NATIONAL SOCIETY DAUGHTERS OF THE
AMERICAN REVOLUTION

Employer identification number

53-0205923

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE TWELVE-MEMBER EXECUTIVE COMMITTEE CONSISTS OF NATIONAL OFFICERS, WHO ARE ALL MEMBERS OF THE NATIONAL BOARD OF MANAGEMENT (NBM). THE COMMITTEE HAS THE AUTHORITY TO MAKE RECOMMENDATIONS TO THE NBM AND PERFORM DUTIES OF THE BOARD BETWEEN MEETINGS, AS DEEMED EXPEDIENT. THE COMMITTEE HAS CHARGE OF ALL INVESTMENTS AND INSURANCE AS WELL AS THE AUTHORITY TO ENTER INTO CONTRACTS AND AGREEMENTS CONCERNING THE BUSINESS OF THE SOCIETY. IT ALSO MAKES RECOMMENDATIONS CONCERNING THE BUDGET TO THE NBM.
FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS MEMBERS IN THE NATIONAL SOCIETY THROUGH A CHAPTER OR AS A MEMBER-AT-LARGE.
FORM 990, PART VI, SECTION A, LINE 7A	EXECUTIVE OFFICERS ARE ELECTED BY MEMBERS AT THE ANNUAL MEETING, CONTINENTAL CONGRESS, EVERY THREE YEARS. ELECTIONS FOR THREE-YEAR TERMS FOR OTHER NBM POSITIONS ARE HELD ANNUALLY ON A ROTATING BASIS AT THE ANNUAL MEETING. OTHER HONORARY OFFICERS ARE ALSO ELECTED BY MEMBERS AT CONTINENTAL CONGRESS.
FORM 990, PART VI, SECTION A, LINE 7B	VOTING MEMBERS (STATE AND CHAPTER REGENTS AND DELEGATES) AT THE ANNUAL MEETING, CONTINENTAL CONGRESS, VOTE BY BALLOT UPON QUESTIONS INVOLVING NEW PROJECTS OR SPECIAL APPROPRIATIONS. 300 VOTING MEMBERS CONSTITUTE A QUORUM.
FORM 990, PART VI, SECTION B, LINE 11B	THE DETAILED REVIEW OF FORM 990 WILL BE CONDUCTED BY THE CONTROLLER. THE FINAL DRAFT OF FORM 990 WAS REVIEWED BY ALL MEMBERS OF THE FINANCE COMMITTEE PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C	MANAGEMENT AND THE EXECUTIVE COMMITTEE MONITOR PROPOSED OR ONGOING TRANSACTIONS FOR POTENTIAL CONFLICTS. THE CONFLICT OF INTEREST POLICY COVERS ALL NATIONAL BOARD OF MANAGEMENT MEMBERS, AS WELL AS COMMITTEE CHAIRMEN. THOSE COVERED UNDER THE POLICY HAVE A DUTY TO DISCLOSE ANY DIRECT OR INDIRECT FINANCIAL INTEREST. ANY DISCLOSED FINANCIAL INTERESTS ARE REVIEWED AND DISCUSSED BY THE AUDIT COMMITTEE, WHICH THEN DECIDES IF A CONFLICT OF INTEREST EXISTS AND DETERMINES WHETHER OR NOT TO ENTER INTO THE TRANSACTION/ARRANGEMENT. THE AUDIT COMMITTEE ALSO QUESTIONS ANY NBM MEMBER WHO MAY HAVE FAILED TO DISCLOSE ACTUAL OR POTENTIAL CONFLICTS OF INTEREST. IF THE COMMITTEE DETERMINES SUCH FAILURE TOOK PLACE, IT IS AUTHORIZED TO TAKE APPROPRIATE DISCIPLINARY OR CORRECTIVE ACTION.
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION FOR TOP MANAGEMENT POSITIONS ARE REVIEWED ANNUALLY WITH THE HUMAN RESOURCES COMMITTEE. IN ADDITION, THE PRESIDENT GENERAL APPROVES ANY COMPENSATION CHANGES FOR TOP MANAGEMENT POSITIONS. A COMPREHENSIVE SALARY STUDY IS CONDUCTED EVERY THREE YEARS. COMPARABILITY DATA IS OBTAINED AND REVIEWED ANNUALLY."
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. IN ADDITION, BYLAWS ARE AVAILABLE TO MEMBERS ON THE MEMBERS WEBSITE AND ARE AVAILABLE FOR SALE AS PART OF THE MEMBER HANDBOOK TO ANYONE WHO VISITS NSDAR HEADQUARTERS.
PART XII, LINE 2C	THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.

Additional Data

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