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Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

OMB No 1545-0047

Open to Public

				0 and its instructions is at <u>www.1R</u>					
			endar year, or tax year beginning  C Name of organization	g 01-01-2013 , 2013, and ending 1	12-31-201	L3			
		oplicable	NATIONAL SOCIETY DAUGHTERS OF	THE			D Emplo	yer ide	entification number
Addr	ess ch	ange	AMERICAN REVOLUTION  Doing Business As				53-02	0592	3
Nam	e char	nge	boing business / B						
☐ Inıtıa	l retur	m	Number and street (or P O box if m	all is not delivered to street address) Rooi	m/suite		E Teleph	one nun	nher
Term	ınated	t	1776 D STREET NW				·		
Men	nded r	eturn	City or town, state or province, cour	ntry, and ZIP or foreign postal code		-	(202)	879-	3365
┌ <sub>Appli</sub>	cation	pending	WASHINGTON, DC 200065303				<b>G</b> Gross r	eceints	\$ 96,374,043
			<b>F</b> Name and address of prin	icinal officer	ш	-			
			LYNN F YOUNG	respair offices	"(	a) Is this subor	s a group dinates?	returr	TYes ▼ No
			1776 D STREET NW WASHINGTON, DC 20006!	5202					
			WASHINGTON, DC 20000.	3303	H(I	<b>b)</b> Are al includ		nates	│ Yes │ No
<b>T</b> Tax-	exem	pt status	▼ 501(c)(3)	insert no )				a lıst	(see instructions)
						_			
J We	DSITE	** <b> -</b> VV VV	/W DAR ORG		H(4	c) Grou	exempt	ion nu	mber 🟲
<b>K</b> Form	of org	janization	Corporation Trust Associatio	n	L	Year of for	mation 18	96 <b>M</b>	State of legal domicile DC
Par	t I	Sum	mary						
	1 8	Briefly d	escribe the organization's mission	n or most significant activities					
	<u> </u>	ROMO.	TE HISTORIC PRESERVATION	<u>, EDUCATION, AND PATRIOTIS</u>	М				
೪	-								
ੁ	-								
<u>=</u>	2 (	Check th	nis box 🕶 if the organization dis	scontinued its operations or dispos	ed of mor	re than 2!	5% of its	net a	ssets
Governance	_		John   and organization and				70 01 110		
	<b>3</b> N	Number	of voting members of the govern	ing body (Part VI, line 1a)				3	86
တို့	<b>4</b> N	Number	of independent voting members o	of the governing body (Part VI, line	1b) .			4	85
員	<b>5</b> T	Total nu	mber of individuals employed in a	calendar year 2013 (Part V, line 2a	a)			5	190
Activities &	<b>6</b> T	otal nu	mber of volunteers (estimate if n	ecessary)				6	4,775
۹	<b>7</b> a ⊺	Total uni	related business revenue from P	art VIII, column (C), line 12				7a	43,614
				om Form 990-T, line 34				7b	-4,363
						Prio	Year	<u> </u>	Current Year
	8	Contri	butions and grants (Part VIII. li)	ne 1h)	. 🗀		5,255,	924	9,192,192
9	9			ne 2g)			7,415,		9,135,327
Rayentle	10			(A), lines 3, 4, and 7d)			1,957,		9,791,621
윤	11		· · · · · · · · · · · · · · · · · · ·	lines 5, 6d, 8c, 9c, 10c, and 11e)	·		2,223,		2,414,564
	12			(must equal Part VIII, column (A)	, line				
				·			16,852,	398	30,533,704
	13	Grants	and similar amounts paid (Part	IX, column (A), lines 1-3)	· L		422,	466	1,582,997
	14	Benefi	ts paid to or for members (Part I	X, column (A), line 4)				0	0
	15			ee benefits (Part IX, column (A), lin	es		6.006	_ , _	7 262 502
δ.   Σ.		5-10)					6,096,		7,263,592
Expenses	16a			column (A), line 11e)	• • ⊢			0	0
	b		ndraising expenses (Part IX, column (D)		-			$\perp$	
	17			ines 11a-11d, 11f-24e)	_		6,259,	_	7,354,357
	18			st equal Part IX, column (A), line 2	· —		12,779,		16,200,946
-	19	Reven	ue less expenses Subtract line	18 from line 12			4,073,	-	14,332,758
Net Assets or Fund Balances					[	Beginning Yo	of Curre ear	nt	End of Year
25.00 25.00 36.00	20	Total	assets (Part X line 16)		. H		90,346,	818	107,826,548
유민	20 21		iabilities (Part X, line 26)		·		8,161,		9,399,192
<b>変数</b>	21 22			line 21 from line 20	∵ . ⊢		82,185,		98,427,356
Part			ature Block		·		J = , = 0 J ,	1	70,727,330
				mana ad blace makering in alcodom a second					
my kno	wled	lge and i		amined this return, including accom aplete Declaration of preparer (oth					
		****	**			20	14-04-10		
Sign		Signa	ture of officer			Da			
Here		SARA	H POTTS VOLL TREASURER GENERAL						
			or print name and title						
			rint/Type preparer's name DAVID TRIMNER	Preparer's signature	Date		k 📙 ıf	PTIN P0044	4822
Paid			im's name FCLIFTONLARSONALLEN	I IIP			employed s EIN 🟲 4		
			PRINCE E SELLEVILLE SUMMELLIN						

Firm's address ► 4250 N FAIRFAX DRIVE SUITE 1020

ARLINGTON, VA 22203

May the IRS discuss this return with the preparer shown above? (see instructions)

Preparer

**Use Only** 

Phone no (571) 227-9500

✓ Yes ☐ No

	550 (2015)					raye
Par					II	
1	Briefly describe the	organization's missio	n			
THE SOCIETY 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 HISTORESEARCH AND PUBLICATION, PRESERVATION OF HISTORICAL RELICS AND DOCUMENTS, EDUCATION AND PROMOTIC PATRIOTIC ENDEAVORS  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-627 .	NCOURAGE HISTORICAL					
2	_			rvices during the year	which were not listed on	
	If "Yes," describe th	ese new services on S	Schedule O			
3	_	cease conducting, or	make significan	t changes in how it coi	nducts, any program	
	If "Yes," describe th	ese changes on Sche	dule O			
4	expenses Section 5	01(c)(3) and 501(c)(	4) organizations	are required to report		•
4a	(Code	) (Expenses \$	3,568,336	ıncludıng grants of \$	) (Revenue \$	3,502,178 )
4b	(Code	) (Expenses \$	2,777,958	ıncludıng grants of \$	) (Revenue \$	2,468,459 )
	AMERICAN REVOLUTION MANUSCRIPT AND IMPR	N THE MUSEUM IS OPEN T RINT MATERIALS PERTAINI	O MEMBERS AND TI	HE GENERAL PUBLIC FREE ( DNIAL AMERICA, THE REVOL	OF CHARGE NSDARS AMERICANA	COLLECTION INCLUDES
4c	(Code	) (Expenses \$	2,900,986	ıncludıng grants of \$	256,110 ) (Revenue \$	3,552,087 )
	IN POLITICAL SCIENCE,	HISTORY, GOVERNMENT,	ECONOMICS, BUSIN	IESS, LAW, CHEMISTRY, NU	IRSING, AND OCCUPATIONAL THE	RAPY NSDAR ALSO PUBLISHES
	(Code	) (Expenses \$	621,854	ıncludıng grants of \$	1,326,887 ) (Revenue \$	552,696 )
	ONGOING RESTORATION	N AND IMPROVEMENT OF	THE NSDAR COMPLE	X OF HISTORIC BUILDINGS	, PROMOTING MEMBERSHIP, ADV	ANCING DAR'S TECHNOLOGICAL
4d	Other program serv	vices (Describe in Sch	redule O )			
	(Expenses \$	•	•	f\$ 1,326,	387 ) (Revenue \$	552,696)
4e	Total program serv	ice expenses 🟲	9,869,134			

art 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 $IV^{\square}$	9	Yes	
<b>.</b> 0	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
1	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			
а	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		Νο
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)? If "Yes," complete Schedule D, Part X	11f	Yes	
.2a	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
.3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
.4a	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	Yes	
.5	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	Yes	
L <b>6</b>	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
. <b>7</b>	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		No
.8	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
L <b>9</b>	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		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States 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? <i>If "Yes," complete Schedule J</i>	23		No
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	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	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, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			1
		28a		Νo
D	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νo
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$ $\footnotemark$	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	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? <i>If "Yes," complete Schedule N, Part II</i>	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? <i>If "Yes," complete Schedule R, Part I</i>	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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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?	20	Yes	

GII	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	] No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   49		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
	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			
)	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	
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	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		N
	If "Yes," enter the name of the foreign country ►  See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
	services provided to the payor?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to		165	
	file Form 8282?	<b>7</b> c		N
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	H		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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		
ı	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes" has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule O	14h		

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 an	/ line in this Part VI

Se	ection 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	1a	86			
	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					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	85			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management cor		3		No	
4	Did the organization make any significant changes to its governing documents since filed?	the p	orior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the or	rganız	ation'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 pow more members of the governing body?			7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?			7b	Yes	
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons u	ndertaken during the			
а	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, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ection B. Policies (This Section B requests information about policies not i	requ	ired by the Internal R	even	ue Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not i	requ	ired by the Internal R	eveni	ue Cod Yes	e.) <b>No</b>
	Did the organization have local chapters, branches, or affiliates?		ired by the Internal R	10a		·
10a			s of such chapters,		Yes	·
10a b	Did the organization have local chapters, branches, or affiliates?	 tivitie on's e	s of such chapters, exempt purposes?	10a 10b	<b>Yes</b> Yes	·
10a b 11a	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization than the organization provided a complete copy of this Form 990 to all members of it	tivitie on's e	s of such chapters, xempt purposes? erning body before filing	10a 10b	Yes Yes Yes	·
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov	s of such chapters, exempt purposes? erning body before filing	10a 10b	Yes Yes Yes	·
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a	Yes Yes Yes	·
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov  Form 9	s of such chapters, exempt purposes? erning body before filing erning body before filing erning body before filing	10a 10b 11a	Yes Yes Yes Yes	·
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov  Form 9	s of such chapters, exempt purposes? erning body before filing erning body before filing erning body before filing	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes	·
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	tivitie on's e s gov  Form 9	s of such chapters, exempt purposes? erning body before filing erning body before filing erning body before filing	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes Yes	·
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov form s ly inte the p	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	·
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov form s ly inte the p	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	·
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov form s ly inte the p	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes Yes	·
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov form s ly inte the p	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14	Yes	·
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov form S ly inte the p	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14	Yes	·
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	tivitie on's e s gov form 9 the p the p iew ar ie deli	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14	Yes	No

- List the States with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ, CO, CT, FL, GA, HI, IL, KS, KY, MA, ME, MI, MN, MS, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, WA, WI, WV, MD, VA
- Section 6104 requires an organization to make its Form 1023 (or 1024 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, physical address, and telephone number of the person who possesses the books and records of the organization
  ►SUSAN KINNECOME 1776 D STREET NW
  WASHINGTON,DC 200065303 (202)628-1776

Form 990	(2013	
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#### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an d r/tru	heck sofficer (stee) Highest compensated	Former	(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

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

Na	(A) ime and Title	(B) Average hours per week (list any hours	more t	han o	ne l both	oox, an d	heck unless officer stee)	3	(E Repor comper from organiza	table sation the tion (W-	(E) Reportable compensation from related organizations (W	.   .	(F) Estima mount o compens from t	ited f other ation the
		for related organizations below dotted line)	Individual trustie or director	Institutional Trustee	Officei	2/1099-MISC) 2/1099 Highest compensated Key employee				2/1099-MISC)		rganizati relate organiza	ed	
1b Sub-To								•						
	rom continuation sheet add lines 1b and 1c) .	ts to Part VII, S	ection A	٩.	•	•	•	<b>P</b>		396,698		0		29,261
	umber of individuals (in	cluding but not	· ·	to the	se l	ıste	d abov	e) w	l ho receive			<u> </u>		
	00 of reportable comp							·						
											_		Yes	No
	organization list any <b>f</b> o					key	emplo	yee,	or highes	t compen	sated employee	_		1
4 For any	ındıvıdual lısted on lın	e 1a, is the sum	of repo	rtabl	e co							3		No
organız <i>ındıvıdı</i>	ation and related organ ual	ıızatıons greater	than \$1	150,0 • •	000	? If •	"Yes," (	comp •	lete Sched	ule J for s	uch	4		No
	person listed on line 1 s rendered to the organ								-	anızatıon	or individual for	5		No
Continu	D. Toodayaardayat Ca													
	<b>B. Independent Co</b> ete this table for your fiv		ensate	d ınde	epen	dent	t contr	acto	rs that red	eived mo	re than \$100,000	of		
compei	nsation from the organia	zation Report co (A)	ompens	atıon	fort	he c	alend	arye	ar ending	with or wi	thin the organizati (B)	on's t	tax year (C	
THE CHRISTMAI		lame and business		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	0101						cription of services	4	Comper	sation
	N COMPANY 1881 CAMPUS C 3322 WEST END AVE SUITE			v vAZ	0131						RESTORATION PUBLISHER	+		974,439 793,657
	ENTENNIAL DRIVE PEABODY										CONSULTING, AND	$\top$		568,572
JS WAGNER CO	MPANY INC 4909 46TH AVE I	HYATTSVILLE MD 20	781								OOFING REPLACEMENT			297,941
	ERVICES LLC PARK 80 EAST											-	-	281,738

\$100,000 of compensation from the organization ► 15

Contributions, Giffs, Grants and Other Similar Amounts	
Program Service Revenue	
Other Revenue	1
	1

VIII	Statement of Check of Sched	o <b>r Revenue</b> ule O contains a respoi	nse or note to any lu	ne in this Part VIII			
	oncer ii oenea	are o comeanio a respon	isc of note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated cam	paigns 1a					
Ь	Membership du	ıes <b>1b</b>					
c	Fundraising ev	ents <b>1c</b>					
	_						
d		zations 1d					
e	Government grant	is (contributions) <b>1e</b>					
f	sımılar amounts no		9,192,192				
g	Noncash contributi 1a-1f \$	ons included in lines	3,267				
h	Total. Add line:	s 1 a - 1 f		9,192,192			
			Business Code				
2a	MEMBERSHIP DUE	S	900099	5,555,526	5,555,526		
Ь	APPLICATION OTH	ER MEMBER FEES	900099	2,275,399	2,275,399		
c	MAGAZINE REVENU	 UE	541800	973,722	949,108	24,614	
d	RECORD COPY		900099	314,477	314,477	,	
e	LIBRARY AND OTH	ER FEES	900099	16,203	16,203		
f	All other progra	am service revenue			·		
	T-1-1 Add 1	- 2- 26		0.125.227			
3		s 2a-2f		9,135,327			
		ar amounts)		1,870,563			1,870,563
4	Income from inves	stment of tax-exempt bond	proceeds 🕨				
5	Royalties .		🕨	254,105			254,105
	Cuana manta	(ı) Real 1,201,366	(II) Personal				
l ba	Gross rents Less rental	0					
	expenses Rental income	1,201,366					
C	or (loss)			4 204 255			1 201 266
d	Net rental inco	me or (loss)	-	1,201,366			1,201,366
7a	Gross amount from sales of	(1) Securities 73,269,030	(II) O ther				
	assets other than inventory						
b	Less cost or other basis and	65,347,972					
<sub>c</sub>	sales expenses Gaın or (loss)	7,921,058					
d		ss)		7,921,058			7,921,058
8a		from fundraising					
	\$of contributions See Part IV, lir	s reported on line 1c)					
		а					
		penses <b>b</b>					
C		(loss) from fundraising	events 🛌				
94	See Part IV, lir	from gaming activities ne 19 a					
Ь	Less direct ex	penses b					
		(loss) from gaming acti	vities				
10a	Gross sales of returns and allo	owances .	4 4 50 - 77-				
_	1	a	1,150,777				
		oods sold <b>b</b> (loss) from sales of inv	492,367	658,410	658,410		
<b>⊢</b>	Miscellaneou		Business Code	230,110	220,120		
11a	MANAGEMEN		900099	150,474	150,474		
Ь	OTHER		900099	131,209	131,209		
c		ER COMMISSION	711300	19,000		19,000	
d		ue					
e	Total. Add lines	s 11a-11d	🕨	300,683			
12	Total revenue.	See Instructions .	🕨	·	10.050.000	45.01	11 247 000
1				30,533,704	10,050,806	43,614	11,247,092

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)

April	Section	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns $$ All	other organizati	ons must comp	lete column (A )	
Total despiration   Processing   Processin		Check if Schedule O contains a response or note to any line in this	Part IX	<u> </u>	<u> </u>	<u> </u>
Compensation of Compensation				Program service	Management and	( <b>D)</b> Fundraising expenses
Grants and other assistance to individuals in the United States See Part IV, line 22   29,110   239,110	1					
United States See Part IV, line 22  3 Grants and other sasistance to governments, organizations, and individuals outside the United States See Part IV, lines 25 and 16  4 Benefits paid to or for members  5 Compensation of current officers, directors, trustees, and key employees		in the United States See Part IV, line 21	1,230,969	1,230,969		
3   Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 17   11,	2	Grants and other assistance to individuals in the				
States See Part IV, lines 17   States See Part IV, line 17   States See Part IV, line 17   Investment Imagement Res   States See Part IV, line 17   Investment Imagement Image		United States See Part IV, line 22	256,110	256,110		
States See Part IV, lines 17   States See Part IV, line 17   States See Part IV, line 17   Investment Imagement Res   States See Part IV, line 17   Investment Imagement Image	3	Grants and other assistance to governments,	,			
### Benefits paid to or for members    Compensation of current officers, directors, trustees, and key employees		organizations, and individuals outside the United				
5 Compensation of current officers, directors, trustees, and key employees   307,553   37,393   206,737   11.		•	95,918	95,918		
Responsible	4	·				
Case defined under section 4958 (f)(1)) and persons described in section 4958 (e)(13) (8)   5,784,253   3,398,310   1,941,749   444,	5		307,553	87,393	208,737	11,423
Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)   167,884   100,332   54,438   13, and 403(b) employer contributions)   580,696   335,947   200,405   44, and 403,212   243,542   147,837   33, and 403(b) employees)	6	(as defined under section 4958(f)(1)) and persons				
16,03(b) employer contributions)   167,884   100,332   54,438   13,	7	Other salaries and wages	5,784,253	3,398,310	1,941,749	444,194
10   Payroll taxes	8		167,884	100,332	54,438	13,114
### Management	9	Other employee benefits	580,690	335,947	200,405	44,338
### Management	10	Payroll taxes	423,212	243,542	147,837	31,833
a Management	11					
b Legal	а		150.072	133.453	16.619	
C   Accounting   S6,926   S6	b		· ·			16,121
Company   Comp	c	-		,	· · ·	<u>,                                      </u>
e Professional fundraising services See Part IV, line 17 f Investment management fees	d		,		,	
Foundation   Transfer   Transfe		· ·				
Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)			185 510	136 272	49 238	
column (A) amount, list line 11g expenses on Schedule O)         170,560         38,535         42,663         89,           12 Advertising and promotion         7,967         7,967         7,967         133         0ffice expenses         2,121,821         1,136,378         660,477         324,         324,         14         Information technology         22,2744         2,344         5,         324,         15         Royalties         4         2,218,181         1,136,378         660,477         324,         324,         15         324,         15         32,412,821         1,136,378         660,477         324,         5,         324,         15         324,         15         32,414         15,         324,         15,         32,414         15,         32,414         15,         324,418         15,         32,414         15,         32,414         15,         32,414         15,         32,414         14,318         19,         32,414         14,318         19,         32,414         14,018         14,018         14,318         19,         12,014         14,019         12,014         14,019         12,014         14,019         12,014         14,019         12,014         14,019         12,014         14,019         12,014         14,019		_	103,310	130,272	13,230	
Advertising and promotion   7,967   7,967   7,967   7,967   324,	y	column (A) amount, list line 11g expenses on	170,560	38,535	42,663	89,362
13	12		7,967	7,967		
14	13		-	-	660,477	324,966
15   Royalties	14	•			· ·	5,191
16     Occupancy     612,318     458,829     144,318     9,       17     Travel     120,071     59,602     20,147     40,       18     Payments of travel or entertainment expenses for any federal, state, or local public officials     \$\$12,0071     59,602     20,147     40,       19     Conferences, conventions, and meetings     512,880     114,720     329,126     69,       20     Interest     \$\$12,880     114,720     329,126     69,       21     Payments to affiliates     \$\$\$12,880     114,720     329,126     69,       22     Depreciation, depletion, and amortization     \$\$\$1,148,330     916,909     209,300     22,       23     Insurance     \$\$\$381,197     95,299     285,898       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 )     \$\$\$\$1,353,387     723,559     52,281     577,       b     AWARDS AND GIFTS     \$\$\$\$136,711     68,485     50,051     18,       c     REAL ESTATE TAXES     \$\$\$\$115,803     79,672     35,877       d     SUBSCRIPTIONS & MEMBERS     80,135     46,625     21,789     11,       e     All other expenses     116,810     76,631 <td></td> <td></td> <td>,</td> <td>,</td> <td>,</td> <td>,</td>			,	,	,	,
17       Travel		•	612.318	458.829	144.318	9,171
Payments of travel or entertainment expenses for any federal, state, or local public officials			· · · · · · · · · · · · · · · · · · ·	,		40,322
19   Conferences, conventions, and meetings		Payments of travel or entertainment expenses for any federal,	120,071	33,002	20,117	10,322
20       Interest	10		E13 000	114 720	220 126	69,034
21       Payments to affiliates			312,880	114,720	329,120	03,034
22         Depreciation, depletion, and amortization					+	
23       Insurance			1 140 220	016 000	200 200	22 121
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  1,353,387  723,559  52,281  577,  b AWARDS AND GIFTS  136,711  68,485  50,051  18,  c REAL ESTATE TAXES  115,803  79,672  35,877  d SUBSCRIPTIONS & MEMBERS  80,135  46,625  21,789  11,  25 Total functional expenses. Add lines 1 through 24e  16,200,946  9,869,134  4,591,789  1,740,  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				,	<del>                                     </del>	22,121
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  b AWARDS AND GIFTS  c REAL ESTATE TAXES  d SUBSCRIPTIONS & MEMBERS  e All other expenses  116,810  76,631  29,043  1,740,  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			381,197	93,299	200,898	
b AWARDS AND GIFTS  136,711 68,485 50,051 18, c REAL ESTATE TAXES  115,803 79,672 35,877  d SUBSCRIPTIONS & MEMBERS  80,135 46,625 21,789 11, e All other expenses  116,810 76,631 29,043 11,  25 Total functional expenses. Add lines 1 through 24e  16,200,946 9,869,134 4,591,789 1,740,  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	24	miscellaneous expenses in line 24e If line 24e amount exceeds 10%				
c REAL ESTATE TAXES  115,803  79,672  35,877  d SUBSCRIPTIONS & MEMBERS  80,135  46,625  21,789  11, 25  Total functional expenses. Add lines 1 through 24e  16,200,946  9,869,134  4,591,789  1,740,  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	а	PRINTING & PUBLICATIONS	1,353,387	723,559	52,281	577,547
d SUBSCRIPTIONS & MEMBERS  e All other expenses  116,810  76,631  29,043  11, 25  Total functional expenses. Add lines 1 through 24e  16,200,946  9,869,134  4,591,789  1,740,  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	b	AWARDS AND GIFTS	136,711	68,485	50,051	18,175
All other expenses 116,810 76,631 29,043 11,  Total functional expenses. Add lines 1 through 24e 16,200,946 9,869,134 4,591,789 1,740,  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check	c	REAL ESTATE TAXES	115,803	79,672	35,877	254
Total functional expenses. Add lines 1 through 24e  16,200,946  9,869,134  4,591,789  1,740,  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	d	SUBSCRIPTIONS & MEMBERS	80,135	46,625	21,789	11,721
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	e	All other expenses	116,810	76,631	29,043	11,136
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check	25	Total functional expenses. Add lines 1 through 24e	16,200,946	9,869,134	4,591,789	1,740,023
	26	reported in column (B) joint costs from a combined				rm <b>990</b> (2013)

Part X Balance Sheet

Par	τχ	Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	5,163,934	1	1,414,556
	2	Savings and temporary cash investments	3,164,549	2	6,502,815
	3	Pledges and grants receivable, net	368,060	3	3,896,065
	4	Accounts receivable, net	541,082	4	628,503
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
Assets	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
% %	7	Notes and loans receivable, net		7	
₹	8	Inventories for sale or use	536,363	8	646,005
	9	Prepaid expenses and deferred charges	182,741	9	288,492
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  10a  36,024,634	·		
	ь	Less accumulated depreciation 10b 17,820,572	17,071,009	10c	18,204,062
	11	Investments—publicly traded securities	62,415,076	11	75,340,920
	12	Investments—other securities See Part IV, line 11	853,753	12	904,953
	13	Investments—program-related See Part IV, line 11		13	<u> </u>
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	50,251	15	177
	16	Total assets. Add lines 1 through 15 (must equal line 34)	90,346,818	16	107,826,548
	17	Accounts payable and accrued expenses	1,498,155	17	1,571,191
	18	Grants payable	1,100,100	18	.,,,,,,,
	19	Deferred revenue	5,911,096	19	7,082,211
	20	Tax-exempt bond liabilities	3,011,000	20	.,,,,,,,,,
	21	Escrow or custodial account liability Complete Part IV of Schedule D	219		14,169
lities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	210	21	14,100
Liabiliti		persons Complete Part II of Schedule L		22	
ä	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	751,895	25	731,621
	26	Total liabilities. Add lines 17 through 25	8,161,365	26	9,399,192
s e o		Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete lines 27 through 29, and lines 33 and 34.			
G G	27	Unrestricted net assets	25,366,313	27	31,136,813
- B3	28	Temporarily restricted net assets	44,344,411	28	51,247,624
뒫	29	Permanently restricted net assets	12,474,729	29	16,042,919
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
¥ Met	33	Total net assets or fund balances	82,185,453	33	98,427,356
Z	34	Total liabilities and net assets/fund balances	90,346,818	34	107,826,548
		· · · · · · · · · · · · · · · · · · ·			

Par	Reconcilliation 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		30,5	33,704
2	Total expenses (must equal Part IX, column (A), line 25)	2		16.2	200,946
3	Revenue less expenses Subtract line 2 from line 1	3			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				332,758
		4		82,1	185,453
5	Net unrealized gains (losses) on investments	5		1,9	09,145
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 33, column (B))	10		98,4	127,356
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. $\sqsubset$
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis			i	1
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
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?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

SHARON THORNE-SULIMA

VICE PRESIDENT GENERAL

Software ID: **Software Version:** 

**EIN:** 53-0205923

Name: NATIONAL SOCIETY DAUGHTERS OF THE

AMERICAN REVOLUTION

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (C) (E) Name and Title Average Position (do not check Reportable Reportable Estimated amount more than one box, unless hours per compensation compensation of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization (Worganizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Highest employe Individual 1 or director Office Former organizations related Institutional , employ below organizations dotted line) t compensated ee trustee 98 l Trustee IYNN F YOUNG 40 00 Χ 12,000 Х 0 PRESIDENT GENERAL ANN T DILLON 20 00 Χ Χ 0 0 0 FIRST VICE PRESIDENT GENERAL ANN S CRIDER 20 00 Х Х 0 0 0 CHAPLAIN GENERAL BARBARA H CARPENTER 20 00 0 Х Х 0 0 RECORDING SECRETARY GENERAL KARON JARRARD 20 00 Х Х 0 0 0 CORRESPONDING SEC'Y GENERAL DENISE D VANBUREN 20 00 Х Χ 0 0 0 ORGANIZING SECRETARY GENERAL MARTHA G BARNHART 20 00 Χ 0 0 0 Χ TREASURER GENERAL SHARON M WITHERS 20 00 Х Х 0 REGISTRAR GENERAL BANA W CASKEY 20 00 Х Х 0 0 0 HISTORIAN GENERAL JUDITH H CHAFFIN 20 00 Х 0 0 0 Х LIBRARIAN GENERAL JENNIE MAY REHNBERG 20 00 Х Х 0 0 0 CURATOR GENERAL MINDY T KAMMEYER 20 00 Х Χ 0 0 0 REPORTER GENERAL 10 B ANDRESS 4 00 0 0 0 VICE PRESIDENT GENERAL MARY ANN MIDDLETON Х 0 0 0 VICE PRESIDENT GENERAL DEBORA J REFLOR 0 Х 0 0 VICE PRESIDENT GENERAL LEMIRA S PARKS 4 00 0 Х 0 0 VICE PRESIDENT GENERAL VIRGINIA H TRADER 4 00 0 Х 0 0 VICE PRESIDENT GENERAL SUSAN D HARRIS 4 00 Х 0 0 0 VICE PRESIDENT GENERAL DIANE B KREIS 4 00 0 0 0 Χ VICE PRESIDENT GENERAL DIANE B HAMILL 4 00 0 0 VICE PRESIDENT GENERAL MARGUERITE P HORTON Х 0 0 0 VICE PRESIDENT GENERAL CINDY M TOONE 4 00 0 0 0 Χ VICE PRESIDENT GENERAL SUE T THOMPSON 4 00 Х 0 0 0 VICE PRESIDENT GENERAL BARBARA W MAKANT 4 00 Χ 0 0 0 VICE PRESIDENT GENERAL

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (A) (D) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation any hours organization (Worganizations (Wfrom the and a director/trustee) for related 2/1099-MISC) 2/1099-MISC) organization and Highest employe Individual or director ♂ organizations related Institutional Trustee below organizations employee dotted line) t compensated ee JOY D HAGG 4 00 Χ 0 0 VICE PRESIDENT GENERAL NANCY G HEMMRICH 4 00 Χ 0 0 VICE PRESIDENT GENERAL JANET L WHITTINGTON 4 00 Χ 0 0 VICE PRESIDENT GENERAL ZADEEA G HARRIS 4 00 0 0 0 Х VICE PRESIDENT GENERAL MARY B FRISCH 4 00 Х 0 0 0 VICE PRESIDENT GENERAL PATRICIA M HATFIELD 4 00 Χ 0 0 VICE PRESIDENT GENERAL **ELIZABETH W JONES** 4 00 Χ 0 0 0 VICE PRESIDENT GENERAL BONNIE P COOK 4 00 Х 0 0 O VICE PRESIDENT GENERAL LUCINDA D GRYDER 4 00 Χ 0 0 STATE REGENT - AK CONSTANCE H GRUND 4 00 0 Χ 0 STATE REGENT - AL JO ANN R COOPER 4 00 Х 0 0 0 STATE REGENT - AR DANNA S KOELLING 4 00 Χ 0 0 0 STATE REGENT - AZ DEBRA P JAMISON 4 00 Χ 0 0 STATE REGENT - CA MARCY S KIMMINAU 4 00 0 Х 0 0 STATE REGENT - CO APRIL B STALEY 4 00 Χ 0 0 0 STATE REGENT - CT JULIA M ROGERS 4 00 Χ 0 0 STATE REGENT - DC CLAUDIA M ONKEN 4 00 Χ 0 0 STATE REGENT - DE CYNTHIA W SYMANEK 4 00 Χ 0 0 0 STATE REGENT - FL VIRGINIA G LINGELBACH 4 00 Χ 0 0 0 STATE REGENT - GA MARY ELLEN C SMITH 4 00 Χ 0 0 STATE REGENT - HI BARBARA T HALPIN 4 00 Х 0 0 0 STATE REGENT - IA REBECCA BOWEN-ODOM 4 00 0 0 Χ STATE REGENT - ID PAMELA P BORK 4 00 Χ 0 0 STATE REGENT - IL JEANIE P HORNUNG 4 00

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4 00

STATE REGENT - IN BRENDA J DOOLEY

STATE REGENT - KS

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(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th perso and a	ion (d nan o n is b	ne bo	ox, u an of	ınless fficer	i	( <b>D)</b> Reportable compensation from the organization (W-	<b>(E)</b> Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
			æ			ted				
BARBARA G ZINK	4 00	x						0	0	0
STATE REGENT - KY SUE L SIMPSON	4 00									
STATE REGENT - LA		X						0	0	0
GAIL S TERRY	4 00	х						0	0	0
STATE REGENT - MA LINDA MISTLER	4 00							_	-	
STATE REGENT - MD	4 00	x						0	0	0
SANDRA H SWALLOW	4 00	x						0	0	0
STATE REGENT - ME M ZANDRA BAKER								Ů	Ŭ	
STATE REGENT - MI	4 00	x						0	0	0
DIANE L CONE	4 00									
STATE REGENT - MN		X						0	0	0
PATRICIA WEST	4 00	x						0	0	0
STATE REGENT - MO BILLIE F BREEDLOVE	4 00									
STATE REGENT - MS		Х						0	0	0
JOY E LINN	4 00	x						0	0	0
STATE REGENT - MT PEGGY C TROXELL	4 00									
STATE REGENT - NC	4 00	x						0	0	0
NANCY S LEGERSKI	4 00	х						0	0	0
STATE REGENT - ND								Ů	Ů	
JACQUELINE G OHLMANN	4 00	x						0	0	0
STATE REGENT - NE PHYLLIS M GAGNON	4 00									
STATE REGENT - NH		Х						0	0	0
CORNELIA B OLDE	4 00	×						0	0	0
STATE REGENT - NJ  JACQUELYN A CHASE	4 00									
STATE REGENT - NM		x						0	0	0
REBECCA S EISENMAN	4 00	×						0	0	0
STATE REGENT - NV MARTHA M CRAPSER	4.00							-		
STATE REGENT - NY	4 00	x						0	0	0
SANDRA M MCCANN	4 00								0	
STATE REGENT - OH		×						0	0	0
PATSY M MCFALL	4 00	×						0	0	0
STATE REGENT - OK ELLEN HOPKINS	4 00									
STATE REGENT - OR		Х						0	0	0
ROBERTA P MCMULLEN	4 00	x						0	0	0
STATE REGENT - PA BARBARA P SIMMONS	4 00									
STATE REGENT - RI		×						0	0	0
DOROTHY R LIND	4 00	x						0	0	0
STATE REGENT - SC MARGARET BOBERTZ	4.00	<u> </u>								
STATE REGENT - SD	4 00	×						0	0	0
STATE RECEIVED SU	J					<u> </u>	<u> </u>	I		

(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th persoi and a	ion (d nan oi n is b	ne bo oth a	ox, u an of	nless ficer tee)		(D)  Reportable compensation from the organization (W- 2/1099-MISC)	(E)  Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
			9			;ated				
SUSAN R THOMAS	4 00	х						0	0	0
STATE REGENT - TN PAMELA R WRIGHT	4 00									
STATE REGENT - TX		Х						0	0	0
SHIRLEY W NELSON STATE REGENT - UT	4 00	х						0	0	0
VIRGINIA S STORAGE	4 00	х						0	0	0
STATE REGENT - VA ELIZABETH B BICKNELL	4.00							Ů	0	
STATE REGENT - VT	4 00	x						0	0	0
JANELLE L BRAITHWAIT	4 00	х						0	0	0
STATE REGENT - WA CLAUDETTE R FINKE	4 00									
STATE REGENT - WI		Х						0	0	0
BARBARA M FRANKENBERRY	4 00	х						0	0	0
STATE REGENT - WV MARY AGNES MCALEENAN	4 00									
STATE REGENT - WY		Х						0	0	0
DOMINIQUE FAVREUL  STATE REGENT - FRANCE	4 00	х						0	0	0
JANET T FRY	4 00	х						0	0	0
STATE REGENT - MEXICO MERRY ANN WRIGHT	40 00							Ů	0	
PRESIDENT GENERAL	40 00	х		Х				12,000	0	0
BEVERLY W JENSEN	20 00	х		Х				0	0	0
FIRST VICE PRESIDENT GENERAL LAURA M REID	20 00									
CHAPLAIN GENERAL		Х		Х				0	0	0
JEAN D MANN	20 00	×		Х				0	0	0
ORGANIZING SECRETARY GENERAL SARAH P VOLL	20 00							_	_	
TREASURER GENERAL		Х		Х				0	0	0
PATRICIA E CARPENTER  REGISTRAR GENERAL	20 00	х		Х				0	0	0
ANN A HUNTER	20 00	х		Х				0	0	0
HISTORIAN GENERAL JOAN A HUNTER	20 00			^				Ů	0	
LIBRARIAN GENERAL	20 00	Х		Х				0	0	0
BEVERLY D WEST	20 00	х		Х				0	0	0
CURATOR GENERAL CHASTAIN BARBARA	4 00									
VICE PRESIDENT GENERAL		Х		Х				0	0	0
SANDLIN LINDA	4 00	х		Х				0	0	0
GRIMES POLLY	4 00			.,				_	_	
VICE PRESIDENT GENERAL		Х		Х				0	0	0
MICOL JANE P STATE REGENT - AK	4 00	х						0	0	0
CRAFTON GALE A	4 00	х						0	0	0
STATE REGENT - CO	J									

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below	Posit more th persol and a	ion (d nan o n is b i dired	ne booth a	ox, u an of 'trus	nless ficer tee)		(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
	dotted line)	Individual trustee or director	Institutional Trustee	<u>"</u>	Key employee	Highest compensated employee	)er			organizations
CAHILL JOYCE A  STATE REGENT - CT	4 00	×						0	0	0
FRAMPTON MARJORIE A STATE REGENT - DE	4 00	х						0	0	0
CULLEN DONNA G	4 00	х						0	0	0
STATE REGENT - FL KOOS-LEE KATHRYN A	4 00	x						0	0	0
STATE REGENT - HI JONES ELIZABETH A	4 00	х						0	0	0
STATE REGENT - ID FRYBURGER CANDACE	4 00									
STATE REGENT - IL FRISCH MARY K	4 00	Х						0	0	0
STATE REGENT - KS WELLS JESSIEANNE H	4 00	Х						0	0	0
STATE REGENT - KY		х						0	0	0
COOK BONNIE P STATE REGENT - LA	4 00	x						0	0	0
EACOTT JULIA R STATE REGENT - MA	4 00	х						0	0	0
SPILLER VIRGINIA M	4 00	х						0	0	0
STATE REGENT - ME KOTTSCHADE BONNIE R	4 00	х						0	0	0
STATE REGENT - MN WHITTINGTON JANET L	4 00	x						0	0	0
STATE REGENT - MS MCHENRY LAURIE L	4 00									
STATE REGENT - ND KESSLER LAURA M	4 00	X						0	0	0
STATE REGENT - NH ARGRAVES EMILY D	4 00	Х						0	0	0
STATE REGENT - NJ		х						0	0	0
HARRIS ZADEEA J STATE REGENT - NM	4 00	х						0	0	0
VANBUREN DENISE D STATE REGENT - NY	4 00	х						0	0	0
SHOAF SHARLENE J	4 00	х						0	0	0
STATE REGENT - OH  DAVIS DEBORAH L	4 00	х						0	0	0
STATE REGENT - PA GREINER MARCIA N	4 00	X						0	0	0
STATE REGENT - RI BAILEY ROSE E	4 00									_
STATE REGENT - SD HEMMRICH NANCY G	4 00	X						0	0	0
STATE REGENT - TN HATFIELD PATRICIA M	4 00	Х						0	0	0
STATE REGENT - VA GRAY ANN		Х						0	0	0
STATE REGENT - VT	4 00	Х						0	0	0

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

compensated Employees, and Inde	pendent cor	i	,, ,				J	1	I	1
(A) Name and Title	(B) Average hours per week (list any hours	Posit more th person and a	ion (e nan o n is b	ne bo	ox, u an of	ınless fficer		<b>(D)</b> Reportable compensation from the organization (W-	<b>(E)</b> Reportable compensation from related organizations (W-	<b>(F)</b> Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Forner	2/1099-MISC)	2/1099-MISC)	organization and related organizations
LESH NANCY BALDWIN STATE REGENT - WI	4 00	х						0	0	0
NUTTER CHARLA L STATE REGENT - WV	4 00	х						0	0	0
SIMONARD STEPHANIE H	4 00	х						0	0	0
STATE REGENT FRANCE CURTIS REE J STATE REGENT MEXICO	4 00	х						0	0	0
STEPHEN W NORDHOLT ADMINISTRATOR	40 00			х				136,525	0	12,922
SUSAN KINNECOME CONTROLLER	40 00			х				123,535	0	10,571
LEANNE VIGLIANO DIRECTOR OF HUMAN RESOURCES	40 00					х		112,638	0	5,768
	_									

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As Filed Data -

DLN: 93493105006274

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1)nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

Open to Public Inspection

Name of the organization NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION

**Employer identification number** 

53-0205923

The o	rganı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ınes 1 throu	gh 11, check	only one b	ox)		
1	$\sqcap$	A churc	ch, conventi	on of churches, or as	ssociation of	churches d	escribed in <b>s</b> e	ection 170(l	b)(1)(A)(i).		
2	Γ	A scho	ol described	in <b>section 170(b)(1</b>	.)( <b>A</b> )(ii). (At	tach Schedu	ıle E )				
3	$\sqcap$	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descri	bed in <b>sectio</b>	n 170(b)(1)	(A)(iii).		
4	$\sqcap$	A medi	cal researcl	n organization operat	ed ın conjun	ction with a	hospital desc	cribed in <b>sec</b>	ction 170(b)	(1)(A)(iii). E	nter the
_	_			ty, and state							<del></del>
5	ı	_	•	erated for the benefi	_	or universit	ty owned or o	perated by a	a governmen	tal unit desc	cribed in
	_			A)(iv). (Complete P							
6	<u> </u>			local government or	_						
7	ı	_		at normally receives		•	support from	a governme	ental unit or f	rom the gen	eral public
8	$\vdash$			on 170(b)(1)(A)(vi). described in <b>sectior</b>			nnlete Part II	1			
9	<u>`</u>		•	at normally receives			•	•	nutions mem	hershin fees	and aross
_	,			ities related to its ex							
				oss investment inco							
		•		janization after June				•		,	
10	Г	•	,	ganized and operated	•			•	•		
11	Γ	one or the box	more public	ganized and operated ly supported organiz bes the type of supp <b>b</b> Type II <b>c</b>	ations descr or <u>ti</u> ng organ	ibed in secti ization and c	ion 509(a)(1) complete line	) or section s 11e th <u>ro</u> u	509(a)(2) S gh 11h	ee <b>section 5</b>	
e f g	ı	other the section of the ocheck the Since A	nan foundati n 509(a)(2) rganization this box August 17, 2 ng persons?	ox, I certify that the on managers and other received a written do 2006, has the organitectly or indirectly or	ner than one etermination zation accep	or more pub from the IR: oted any gift	olicly support	ed organizat Type I, Typ on from any	tions describe	ed in sectio	n 509(a)(1) or
				governing body of th			_	persons de.	scribed iii (ii	/ <b>11g</b>	
		•		er of a person descri		_				11g	<del></del>
		• •	•	lled entity of a perso	• •		ahove?			11g	<del></del>
h		• •		ng information about		., .,				[==9	<u>(,                                   </u>
s	) Nam uppor ganiza		(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see	(iv) Is t organizati col (i) list your gove docume	on in ted in rning	(v) Did you the organi in col (i) o suppor	zation f your	(vi) Is organizat col (i) org in the U	ion in janized	(vii) A mount of monetary support
				instructions))	Yes	No	Yes	No	Yes	No	
Total											

Sch	edule A (Form 990 or 990-EZ) 2013						Page <b>2</b>
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	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	<b>Public support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts 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 IV )						
11	<b>Total support</b> (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is t	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and <b>stop here.</b> The organization qua <b>33</b> 1/3% <b>support test—2012.</b> If the				and line 15 is 33	8 1/3% or more	
	box and <b>stop here.</b> The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	<b>-2013.</b> If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	<b>-2012</b> . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	<b>▶</b> □
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		<b>▶</b> □
18	<b>Private foundation.</b> If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2009	<b>(b)</b> 2010	<b>(c)</b> 2011	(d) 2012	<b>(e)</b> 2013	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	4,508,874	4,586,659	4,081,464	5,255,924	9,192,192	27,625,113
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	8,522,198	9,342,856	9,327,735	8,336,425	10,261,490	45,790,704
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	13,031,072	13,929,515	13,409,199	13,592,349	19,453,682	73,415,817
	Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b	A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of						0
_	the amount on line 13 for the year Add lines 7a and 7b						0
8	<b>Public support</b> (Subtract line 7c from line 6)						73,415,817
	ction B. Total Support						
Cale	ndar year (or fiscal year	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
_	beginning in)	13,031,072	13,929,515	13,409,199	13,592,349	19,453,682	73,415,817
9	Amounts from line 6 Gross income from interest.	13,031,072	13,929,313	13,409,199	13,392,349	19,433,002	73,413,617
10a	dividends, payments received on securities loans, rents, royalties and income from similar sources	3,538,283	3,948,002	4,706,246	3,380,262	3,326,034	18,898,827
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	46,749	64,872	52,161	34,054	43,614	241,450
C	Add lines 10a and 10b	3,585,032	4,012,874	4,758,407	3,414,316	3,369,648	19,140,277
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 IV)	229,196	239,574	229,779	248,374	281,683	1,228,606
13	Total support. (Add lines 9,					22 105 012	93,784,700
	10c, 11, and 12)	16,845,300	18,181,963	18,397,385	17,255,039	23,105,013	
14	10c, 11, and 12)  First five years. If the Form 990 is check this box and stop here	for the organizati	on's first, second	, ,		' '	
Se	10c, 11, and 12)  First five years. If the Form 990 is check this box and stop here ction C. Computation of Pub	for the organizati	on's first, second	, thırd, fourth, or f		' '	ization,
	10c, 11, and 12)  First five years. If the Form 990 is check this box and stop here  ction C. Computation of Pub  Public support percentage for 2013	for the organizati	on's first, second  ercentage f) divided by line	, thırd, fourth, or f		' '	ization,
Se 15 16	10c, 11, and 12)  First five years. If the Form 990 is check this box and stop here  ction C. Computation of Pub  Public support percentage for 2013  Public support percentage from 20:	for the organizati lic Support Post (line 8, column ( 12 Schedule A, P	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or f		501(c)(3) organ	ization,
Se 15 16	10c, 11, and 12)  First five years. If the Form 990 is check this box and stop here  ction C. Computation of Pub  Public support percentage for 2013  Public support percentage from 203  ction D. Computation of Inv	for the organizati lic Support Post (line 8, column ( 12 Schedule A, P estment Inco	on's first, second ercentage f) divided by line art III, line 15 me Percentage	, third, fourth, or f	I ifth tax year as a	501(c)(3) organ	78 280 % 76 520 %
Se 15 16 Se 17	10c, 11, and 12)  First five years. If the Form 990 is check this box and stop here  ction C. Computation of Pub Public support percentage for 2013 Public support percentage from 202  ction D. Computation of Inv Investment income percentage for	for the organizati lic Support Po (line 8, column ( 12 Schedule A, P estment Inco 2013 (line 10c, co	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	third, fourth, or f	I ifth tax year as a	501(c)(3) organ	78 280 % 76 520 % 20 410 %
Se 15 16 Se 17 18	10c, 11, and 12)  First five years. If the Form 990 is check this box and stop here  ction C. Computation of Pub  Public support percentage for 2013  Public support percentage from 203  ction D. Computation of Inv	for the organization of the organization of the second of	on's first, second ercentage f) divided by line art III, line 15 me Percentage blumn (f) divided A, Part III, line 1	third, fourth, or four	ifth tax year as a	501(c)(3) organ	78 280 % 76 520 % 20 410 % 21 970 %

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV	Supplemental Information. Pr	rovide the explanations	required by Part II, line 1	10; Part II, line 1	7a or
	17b; and Part III, line 12. Also co				

Facts And Circumstances Test					
Return Reference	Explanation				
PART III, SECTION B, LINE 12	THE OTHER INCOME REPRESENTS MANAGEMENT FEES AND MISCELLANEOUS INCOME				

Schedule A (Form 990 or 990-EZ) 2013

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### DLN: 93493105006274

OMB No 1545-0047

**SCHEDULE D** 

(Form 990)

Department of the Treasury

## **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990)

Open to Public

emal Revenu	e Service and its instruct	ions is at <u>www.irs.gov/10111990</u> .			Inspec	tion
NATIONAL	the organization SOCIETY TOURS		Emp	oloyer ident if ica	tion numbe	er
	REVOLUTION		_	0205923		
Part I	Organizations Maintaining Donor Adv organization answered "Yes" to Form 990		ınds	or Accounts	. Comple	te if the
	organization answered Tes to Form 990	(a) Donor advised funds		(b) Funds and o	other accou	unts
. Tota	I number at end of year					
2. Aggr	regate contributions to (during year)					
	regate grants from (during year)					
l Aggr	egate value at end of year					
	the organization inform all donors and donor adviso s are the organization's property, subject to the or		or adv	ısed	┌ Yes	┌ No
used conf	the organization inform all grantees, donors, and do donly for charitable purposes and not for the benef ferring impermissible private benefit?	it of the donor or donor advisor, or for an	y othe	er purpose	┌ Yes	┌ No
art II	Conservation Easements. Complete if	the organization answered "Yes" to	Forr	<u>n 990, Part IV</u>	', line 7.	
	pose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Inplete lines 2a through 2d if the organization held a ement on the last day of the tax year	or education)  Preservation of an Preservation of a c	ertıfıe	d historic struct	ture	
	·			Held at the	End of the	Year
a Tota	Il number of conservation easements		2a			
<b>b</b> Tota	I acreage restricted by conservation easements		2b			
c Num	ber of conservation easements on a certified histo	oric structure included in (a)	2c			
	nber of conservation easements included in (c) acq oric structure listed in the National Register	uired after 8/17/06, and not on a	2d			
Num	ber of conservation easements modified, transferr	red, released, extinguished, or terminate	d by th	ne organization (	during	
the t	tax year 🗠					
Num	ber of states where property subject to conservat	ion easement is located 🕨				
Doe	s the organization have a written policy regarding treement of the conservation easements it holds?			f violations, and	┌ Yes	┌ No
Staf ►	f and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	ents (	during the year		
 A mo ► \$	ount of expenses incurred in monitoring, inspecting	, and enforcing conservation easements	durın	g the year		
Doe	s each conservation easement reported on line 2(o section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sect	tion 1	70(h)(4)(B)(ı)	┌ Yes	┌ No
bala	art XIII, describe how the organization reports coince sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the organization's financial		•		
art III	Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures, of es" to Form 990, Part IV, line 8.	or Ot	her Similar <i>i</i>	Assets.	
work	e organization elected, as permitted under SFAS 1 as of art, historical treasures, or other similar asse ice, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education, o	r rese	earch in furthera		
work	e organization elected, as permitted under SFAS 1 as of art, historical treasures, or other similar asse lice, provide the following amounts relating to thes	ts held for public exhibition, education, o				lıc
(i) <sub>F</sub>	Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$		
(ii)	Assets included in Form 990, Part X					
Ifth	e organization received or held works of art, histor wing amounts required to be reported under SFAS		r finan			
a Reve	enues included in Form 990 Part VIII line 1			<b>b</b> ¢		

**b** Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art, F	listor	ical Tr	eası	ires, or Ot	he	r Similar As	sets (	continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records,	check	any of t	the fol	lowing that ai	re a	significant use	of its	
а	Public exhibition	•	d L	Loan	orexc	hange progra	ms			
b	Scholarly research	•	e 「	Other	r					
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how the	y furthe	er the	organızatıon':	s ex	empt purpose	ın	
5	During the year, did the organization solicit							ılar	<b>_</b> ,,	- ·
Dar	assets to be sold to raise funds rather than to the transfer to be sold to raise funds rather than to the transfer to be sold to raise funds rather than to the transfer to be sold to raise funds rather than the transfer than the rather than the rathe	<u> </u>						ac" to Form (	☐ Yes	✓ No
FGI	Part IV, line 9, or reported an an	•		_		ii aliswered		es to rolling	, ,	
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?	ian or other intermedia	ary for	ontribu	itions	or other asse	ets r	not	┌ Yes	√ No
b	If "Yes," explain the arrangement in Part XII	I and complete the fol	lowing	table		_				
						<u> </u>		An	nount	
C	Beginning balance					_	1c			
d	Additions during the year					<u> </u>	ld			
e •	Distributions during the year					<u> </u>	le			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	17						✓ Yes	Г No
ь	If "Yes," explain the arrangement in Part XII									<u></u>
Pa	rt V Endowment Funds. Complete		ınswer (b)Prior					t IV, line 10. hree years back	(e)Four	years back
1a	Beginning of year balance	45,683,427		787,812	<i>D</i> (c)	40,683,147	(4)	34,971,313	(C) our	27,911,020
b	Contributions	8,895,167	5	,662,058		1,910,798		921,881		985,317
c	Net investment earnings, gains, and losses	2.455.104	2	116 050		1 000 042		F F70 CC4		6 630 363
d	Grants or scholarships	-2,455,184 696,540		.116,850 .883,293		1,860,942 667,075		5,570,664 780,711		6,628,363
e	Other expenditures for facilities			,		,		,		
_	and programs									
f	Administrative expenses									
g	End of year balance	51,426,870	45	.683,427		43,787,812		40,683,147		34,971,313
2	Provide the estimated percentage of the cur	· · · · · · · · · · · · · · · · · · ·	(lıne 1g	ı, colum	ın (a))	held as				
а	Board designated or quasi-endowment 🕨	30 660 %								
b	Permanent endowment ► 24 060 %									
C	Temporarily restricted endowment ► 45 The percentages in lines 2a, 2b, and 2c sho	280 % uld equal 100%								
3a	Are there endowment funds not in the posse	ssion of the organization	on that	are held	danda	admınıstered	for	the		
	organization by (i) unrelated organizations							3a	(i) Yes	No No
	(ii) related organizations				•		•	3a(		No
ь	If "Yes" to 3a(II), are the related organization		n Sche	· · dule R?	٠			3		<del>                                     </del>
4	Describe in Part XIII the intended uses of th	ne organization's endov	wment	unds						
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line							•		
	Description of property			) Cost or is (invest		( <b>b)</b> Cost or oth basis (other)		(c) Accumulated depreciation	(d) B	ook value
1a	Land					207,4	420			207,420
b	Buildings					30,775,6	640	13,717,86	8	17,057,772
C	Leasehold improvements									
	Equipment					5,041,	574	4,102,70	4	938,870
	Jitner	aual Form 990. Part X c	column	B), line	10(c)	) <u> </u>			+	18,204,062
	= 1 1 (3) (3)	,		-,,	( -) -,	, •	-		_	990) 2013

Part VII Investments—Other Securities. Con See Form 990, Part X, line 12.	nplete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
(a) Description of security or category	(b)Book value	(c) Method of va	
(including name of security)		Cost or end-of-year	market value
(1) Financial derivatives			
(2)Closely-held equity interests Other			
Tatal (Column (h) must equal Form 000, Bart V, col. (B) line 12.)	<b>F</b>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)  Part VIII  Investments—Program Related. Co		] a answered 'Ves' to Fo	orm 990 Part IV line 11c
See Form 990, Part X, line 13.	implete il tile organization	i aliswered Tes to TC	orni 990, Parciv, inie 11c.
(a) Description of investment	(b) Book value	(c) Method of va	
		Cost or end-of-year	market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )	<b>F</b>		
Part IX Other Assets. Complete if the organization		, Part IV, line 11d See I	Form 990, Part X, line 15
(a) Descri	ption		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1.	5.)		
Part X Other Liabilities. Complete if the orga			ine 11e or 11f. See
Form 990, Part X, line 25.			
1 (a) Description of liability	(b) Book value		
Federal income taxes			
CHARITABLE GIFT ANNUITY	731,621		
	†		
	-		
Tabl (Orbital II)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	731,621		

A mounts included on line 1 but not on Form 990, Part VIII, line 12  a Net unrealized gains on investments		·		9
A mounts included on line 1 but not on Form 990, Part VIII, line 12  a Net unrealized gains on investments	Par		oer I	Return Complete if
a Net unrealized gains on investments	1	Total revenue, gains, and other support per audited financial statements	1	32,552,349
b Donated services and use of facilities	2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
C   Recoveries of prior year grants   2c   2d   2d   2d   2d   2d   2d   2d	а	Net unrealized gains on investments		
Mathematical Content   Mathematical Content	b	Donated services and use of facilities		
Add lines 2a through 2d	C	Recoveries of prior year grants		
3 3 30.9 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	d	Other (Describe in Part XIII)	1	
A mounts included on Form 990, Part VIII, line 12, but not on line 1  a Investment expenses not included on Form 990, Part VIII, line 7b . 4a    b Other (Describe in Part XIII )	e	Add lines <b>2a</b> through <b>2d</b>	2e	2,018,645
a Investment expenses not included on Form 990, Part VIII, line 7b . 4a   4b   4b   4c   4b   4c   4b   4c   4c	3	Subtract line <b>2e</b> from line <b>1</b>	3	30,533,704
b Other (Describe in Part XIII )	4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
Add lines 4a and 4b	а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	b	Other (Describe in Part XIII )		
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Con if the organization answered 'Yes' to Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements	C	Add lines <b>4a</b> and <b>4b</b>	4c	0
If the organization answered 'Yes' to Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements	5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	30,533,704
Total expenses and losses per audited financial statements	Par		s pe	r Return. Complete
Donated services and use of facilities	1	_	1	16,310,446
b Prior year adjustments	2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
c Other losses	а	Donated services and use of facilities		
d Other (Describe in Part XIII )	b	Prior year adjustments	1	
e Add lines 2a through 2d	c	Other losses	1	
Subtract line 2e from line 1	d	Other (Describe in Part XIII )	1	
A mounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b 4a  b Other (Describe in Part XIII )	e	Add lines <b>2a</b> through <b>2d</b>	2e	109,500
a       Investment expenses not included on Form 990, Part VIII, line 7b       .       4a	3	Subtract line <b>2e</b> from line <b>1</b>	3	16,200,946
b Other (Describe in Part XIII )	4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
c Add lines 4a and 4b	а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
	b	Other (Describe in Part XIII )		
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	c	Add lines <b>4a</b> and <b>4b</b>	4c	0
	5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	16,200,946

#### 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	NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION ACQUIRES ITS COLLECTIONS, WHICH INCLUDE MICROFILM, LIBRARY BOOKS AND HISTORICAL TREASURES OF ITS MUSEUM AND AMERICANA COLLECTION, THROUGH PURCHASE OR DONATION NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION'S COLLECTIONS ARE HELD FOR PUBLIC EXHIBITION, EDUCATION OR RESEARCH AND ARE PROTECTED AND PRESERVED AS PERMITTED BY U.S. GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, COLLECTIONS ARE NOT CAPITALIZED BY NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION, BUT RATHER EXPENSED CURRENTLY. AS OF DECEMBER 31, 2013, THE ESTIMATED FAIR VALUE OF THE COLLECTIONS WAS IN EXCESS OF \$53 MILLION NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION HAD NO SIGNIFICANT DEACCESSIONS OR DISPOSALS OF MUSEUM/LIBRARY COLLECTIONS DURING THE YEAR ENDED DECEMBER 31, 2013
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 \$14,169 AT DECEMBER 31, 2013 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	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 THE TAX RETURNS FOR THE FISCAL YEARS ENDED FEBRUARY 28, 2011 AND 2012, AND FOR THE PERIOD MARCH 1, 2012 - DECEMBER 31, 2012 ARE OPEN TO EXAMINATION BY FEDERAL AND STATE AUTHORITIES

	<u> </u>	
Part XIII Supplemental 1  Return Reference	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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DLN: 93493105006274 OMB No 1545-0047

2013

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

**Statement of Activities Outside the United States** 

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

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

Open to Public **Inspection** 

NAT	e of the organization IONAL SOCIETY DAUGHTERS C	FTHE			Employer ident	ification number
	RICAN REVOLUTION				53-0205923	
Pa	rt I General Information "Yes" to Form 990, Pai			ne United States. Co	omplete if the organiz	ation answered
1	For grantmakers. Does the o	rganızatıon ma	aıntaın records	to substantiate the a	mount of its grants ar	nd
	other assistance, the grantee	s' eligibility fo	r the grants o	r assistance, and the s	selection criteria used	
	to award the grants or assista	ance?				✓ Yes
2	<b>For grantmakers.</b> Describe in assistance outside the United		ganızatıon's p	rocedures for monitori	ng the use of its gran	ts and other
3	Activites per Region (The follow	ing Part I, line 3	table can be d	uplicated if additional spa	ace is needed )	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
	EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	GRANTS	5,000
	EUROPE (INCLUDING ICELAND & GREENLAND)	0	0		GRANTS	49,218
	EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	GRANT	41,700
За	Sub-total	0	0			95,918
b	Total from continuation sheets to Part I	0	0			0
c	: <b>Totals</b> (add lines 3a and 3b)	0	0			95,918

•	<b>a)</b> Name of rganization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	<b>(f)</b> Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
			EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATIONAL WORKSHOPS FOR INNER CITY LONDON SCHOOL CHILDREN	5,000	CHECK			
			EUROPE (INCLUDING ICELAND & GREENLAND)	ASSISTANCE TO WOUNDED U S MILITARY PERSONNEL	41,700		·	GIFT CARDS, POLO SHIRTS, UNDERSHIRTS, PAJAMAS	FM∨
				sted above that are r					

Schedule F (Form 990) 2013

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	( <b>b)</b> Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
							appraisal, other)
							ula E (Earry 000) 2012

## Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	V	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Г	Yes	V	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	<u>ح</u> ا	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	V	. No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	দ	. No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	V	. No

Schedule F (Form 990) 2013

### Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions)

this part to provide any additional information (see instructions). ReturnReference Explanation NATIONAL SOCIETY SCHEDULE F PART I # DAUGHTERS OF THE AMERICAN REVOLUTION (NSDAR) AWARDS SCHOLARSHIPS TO QUALIFIED APPLICANTS THE APPLICATION PROCESS IS CONDUCTED WITHOUT REGARD TO RACE, SEX, RELIGION, OR NATIONAL lorigin SCHOLARSHIPS ARE AWARDED BY THE SCHOLARSHIP COMMITTEE BASED ON ACADEMIC EXCELLENCE, COMMITMENT TO FIELD OF STUDY (AS REQUIRED), AND NEED THE SPECIAL PROJECTS GRANTS COMMITTEE MONITORS THE USE OF NSDAR GRANT FUNDS BASED ON THE TERMS OF A GRANT AGREEMENT SIGNED BY THE GRANTEE ORGANIZATION A FINAL WRITTEN REPORT MUST BE SUBMITTED TO THE COMMITTEE CHAIRMAN, INCLUDING PHOTOS OF THE PROJECT AND A COMPLETE FINANCIAL REPORT OFPROJECT EXPENDITURES, BEFORE THE SECOND HALF OF THE GRANT FUNDING IS RELEASED FOR PROJECTS TAKING LONGER THAN SIX MONTHS TO COMPLETE, THE GRANTEE ORGANIZATION MUST SUBMIT A STATUS REPORT, INCLUDING THE PROJECT TIMELINE AND PHOTOS OF THE PROJECT PROGRESS NSDAR MUST AUTHORIZE ANY PROPOSED MODIFICATIONS TO THE ORIGINAL PROJECT IN ADVANCE NSDAR RESERVES THE RIGHT TO EXERCISE OVERSIGHT INCLUDING STATUS CALLS, INTERIM PROGRESS REPORTS, AND REVIEW OF FILES AND RECORDS

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Schedule I

(Form 990)

Department of the Treasury

NATIONAL SOCIETY DAUGHTERS OF THE

Internal Revenue Service

Name of the organization

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

► Attach to Form 990 ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

**Employer identification number** 

DLN: 93493105006274

Open to Public Inspection

AMERICAN REVOLUTION						53-0205923	
Part I General Information  1 Does the organization maintain the selection criteria used to available of the properties	records to substant ward the grants or as	ate the amount of the sıstance?					√ Yes
Part II Grants and Other A Form 990, Part IV, lin	ssistance to Go	vernments and O	rganizations in the	United States. Con			es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Addıtıonal Data Table							
2 Enter total number of section 5	1 01(c)(3) and govern	nent organizations list	ed in the line 1 table.			▶	13

Enter total number of other organizations listed in the line 1 table . . . . .

Schedule I	(Form 990) 2013
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
				, appraisal, saller,	
See Additional Data Table					
Part IV Supplemental Info	ormation. Provide the inf	ormation required in Pa	rt I, line 2, Part III, col	umn (b), and any other a	dditional 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 THE SPECIAL PROJECTS GRANTS COMMITTEE MONITORS THE USE OF NSDAR GRANT FUNDS BASED ON THE TERMS OF A
	GRANT AGREEMENT SIGNED BY THE GRANTEE ORGANIZATION A FINAL WRITTEN REPORT MUST BE SUBMITTED TO THE COMMITTEE
	CHAIRMAN, INCLUDING PHOTOS OF THE PROJECT AND A COMPLETE FINANCIAL REPORT OF PROJECT EXPENDITURES, BEFORE THE
	SECOND HALF OF THE GRANT FUNDING IS RELEASED FOR PROJECTS TAKING LONGER THAN SIX MONTHS TO COMPLETE, THE GRANTEE
	ORGANIZATION MUST SUBMIT A STATUS REPORT, INCLUDING THE PROJECT TIMELINE AND PHOTOS OF THE PROJECT PROGRESS NSDAR
	MUST AUTHORIZE ANY PROPOSED MODIFICATIONS TO THE ORIGINAL PROJECT IN ADVANCE NSDAR RESERVES THE RIGHT TO
	EXERCISE OVERSIGHT INCLUDING STATUS CALLS INTERIM PROGRESS REPORTS AND REVIEW OF FILES AND RECORDS

Software ID: **Software Version:** 

**EIN:** 53-0205923

Name: NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION

Form 990,Schedule I, Par	t II, Grants an	d Other Assistance	e to Governments	and Organization	s in the United Sta	ites	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLENVILLE AREA WOMEN OF TODAY 85739 157TH ST GLENVILLE, MN 56036	30-0064661	501(C)(3)	10,000				CREATION OF VETERAN'S MEMORIAL IN BOHEMIAN NATIONAL CEMETERY
KUMP EDUCATION CENTER PO BOX 1106 ELKINS,WV 26241	27-1875896	501(C)(3)	10,000				REPAIR, REPAINT FRONT AND BACK PORCHES
SANTA BARBARA MARITIME MUSEUM 113 HARBOR WAY SUITE 190 SANTA BARBARA, CA 93109	77-0392953	501(C)(3)	10,000				POINT CONCEPTION LIGHTHOUSE PHASE II LENS RESTORATION & EXHIBIT
REBECCA MOTTE CHAPTER NSDAR 122 EAST BAY ST CHARLESTON, SC 29401	57-6021868	501(C)(3)	8,950				RESTORATION AND PRESERVATION OF THE HISTORIC PARISH CHURCHYARD BERKELEY COUNTY
BERKELEY COUNTY HISTORICAL SOCIETY PO BOX 1624 MARTINSBURG, WV 25402	55-0726703	501(C)(3)	5,108				UPGRADE MICROFILM READER/PRINTER EQUIPMENT IN RESEARCH CENTER
BACONE COLLEGE 2299 OLD BACONE ROAD MUSLOGEE,OK 74403	73-0590036	501(C)(3)	6,355				ENDOWMENT ASSISTANCE, GENERAL SUPPORT
BERRY COLLEGE PO BOX 490039 MOUNT BERRY,GA 30149	58-0566133	501(C)(3)	27,000				SCHOLARSHIP, DIGITAL ARCHIVES, HISTORIC GUIDEBOOK, INTERPRETIVE MARKERS
CROSSNORE SCHOOL 100 DAR DRIVE CROSSMORE,NC 28616	56-0567980	501(C)(3)	186,068				ENDOWMENT INTEREST, FUNDING FOR NURSE PRACTIONER AND RECREATION DIRECTOR, FURNISHINGS, COTTAGE RENOVATION
HILLSIDE SCHOOL INC 404 ROBIN HILL ROAD MARLBOROUGH, MA 01752	04-2111216	501(C)(3)	34,544				WORKBENCHES, DISPLAY CASE, MEDIA LAB, CLASSROOM PRINTERS, HEATING OIL FOR WINTER
HINDMAN SETTLEMENT SCHOOL PO BOX 844 HINDMAN,KY 41822	61-0447248	501(C)(3)	59,262				DYSLEXIA PROGRAM, SUMMER TUTORING PROGRAM SCHOLARSHIPS, READING LAB PARTNERSHIP, AFTER SCHOOL TUTORING PROGRAM, ENDOWMENT INTEREST

Form 990,Schedule I, Pa	rt II, Grants a	nd Other Assistanc	e to Governments	and Organization	ns in the United Sta	ates	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KATE DUNCAN SMITH SCHOOL 6077 MAIN STREET GRANT,AL 35747	63-0338084	501(C)(3)	230,848				ENDOWMENT INTEREST, POST SECONDARY EDUCATION SUPPORT, LAMINATING SYSTEM, SCHOOL NURSE SALARY, REFINISHING OF STAGE FLOOR, PARTIAL FUNDING OF MAINTENANCE STAFF, REPAIR OF MUSICAL INSTRUMENTS
TAMASSEE DAR SCHOOL PO BOX 8 TAMASSEE,SC 29686	57-6000973	501(C)(3)	364,416				ENDOWMENT INTEREST, TECHNOLOGY SUPPORT SERVICES, LEAD TEACHER SALARY, BOARDING SCHOLARSHIP, LEARNING CENTER TUTOR, STUDENT WORK/STUDY PROGRAM, CHAPEL REPAIR WORK
DOD VIETNAM WAR PROGRAM OFFICE 2521 S CLARKE STREET SUITE 650 ARLINGTON, VA 22202			10,000				50TH ANNIVERSARY COMMEMORATION VIETNAM WAR

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
SCHOLARSHIPS	87	162,750			
OUTSTANDING TEACHER AWARD	1	3,000			
U S MILITARY ACADEMY AWARDS	8	2,631			
FRIENDS OF AMERICAN HISTORY	12	7,000			
FRIENDS OF VETERANS	2	1,600			
JUNIOR AMERICAN CITIZENS	499	7,933			
GOOD CITIZENS AWARDS	58	16,500			
WARRIOR TRANSITIONAL BRIGADE WALTER REED NATIONAL MILITARY MEDICAL CENTER BETHESDA, MD			32,349	FMV	GIFT CARDS, DUFFLE BAGS, PACKPACKS, PILLOWS & CASES
WOUNDED WARRIOR & FAMILY SUPPORT CENTER BROOKE ARMY MEDICAL CENTER SAN ANTONIO, TX			20,667	FMV	SWEATSHIRTS, SWEATPANTS, GIFT CARDS, UNDERGARMENTS
CAMP ATTERBURY JOINT MANEUVER TRAINING CENTER EDINBURGH, IN			1,680	FMV	PHONE CARDS FOR DEPLOYING SERVICE MEMBERS

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**SCHEDULE M** (Form 990)

Department of the Treasury

Internal Revenue Service

# **Noncash Contributions**

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization **Employer identification number** 

<u>Inspection</u>

NATI	ONAL SOCIETY DAUGHTERS OF THE RICAN REVOLUTION				53-0205923			
Pa	rt I Types of Property				33-0203923			
	туров от горогоу	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	( <b>d</b> Method of d noncash contrib	- etermı		ts
1	Art—Works of art							
2	Art—Historical treasures .	Х	44					
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
_	goods							
_								
7 8	Boats and planes  Intellectual property							
9	Securities—Publicly traded .	X	2	3 267	FAIR MARKET VAL	HE		
10	Securities—Closely held stock .		2	3,207	TAIR MARKET VAL	.0 L		
	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—O ther							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
	Taxıdermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
25	O ther ► ()							
26	\							
27	Other ►()							
28	Other ► ()							
29	Number of Forms 8283 received for which the organization comple				29			0
	for which the organization comple	ced i oiiii o	205, rait IV, Donee Ackin	owiedgement			Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	rty reported in Part I. lines	1 through 28, that			
	it must hold for at least three ye							
	for exempt purposes for the enti			·		30a		No
H	If "Yes," describe the arrangeme							140
31	Does the organization have a gif			review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us	· ·	ies or related organizations	to solicit, process, or sell	noncash			
						32a		No
	If "Yes," describe in Part II				(-)			
33	If the organization did not report describe in Part II	: an amount	in column (c) for a type of	property for which column	(a) is checked,			

number of items re	ceived, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation
•	HISTORICAL TREASURES WITH AN ESTIMATED VALUE OF \$21,279 (BASED ON INDEPENDENT APPRAISALS AND INTERNAL ESTIMATES/COMPARABLES) WERE DONATED TO THE DAR MUSEUM COLLECTION THE COLLECTION IS NOT CAPTITALIZED, AS PERMITTED BY US

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the

Schedule M (Form 990) (2013)

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DLN: 93493105006274

OMB No 1545-0047

2013

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Inspection

## 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 to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION Employer identification number

53-0205923

#### 990 Schedule O, Supplemental Information

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 11	THE FINAL DRAFT OF THE FORM 990 (AS APPROVED BY THE PAID PREPARER) WILL BE REVIEWED BY THE 12-MEMBER EXECUTIVE COMMITTEE DURING A MEETING HELD PRIOR TO THE FILING DEADLINE. THE DETAILED REVIEW WILL BE CONDUCTED BY THE CONTROLLER
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	COMPARABILITY DATA IS OBTAINED AND REVIEWED ANNUALLY, COMPENSATION FOR TOP MANAGEMENT POSITIONS IS REVIEWED ANNUALLY WITH THE PERSONNEL COMMITTEE PRIOR TO THE BUDGET PROCESS
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, BY LAWS ARE AVAILABLE TO MEMBERS ON THE MEMBERS WEBSITE AND ARE AVAILABLE FOR SALE AS PART OF THE MEMBER HANDBOOK TO ANY ONE WHO VISITS NSDAR HEADQUARTERS