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Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014

B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending	C Name of organization NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION		D Employer identification number 53-0205923
	Doing business as		
	Number and street (or P O box if mail is not delivered to street address) Room/suite 1776 D STREET NW		E Telephone number (202) 879-3365
	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 200065303		G Gross receipts \$ 21,952,535
	F Name and address of principal officer LYNN F YOUNG 1776 D STREET NW WASHINGTON,DC 200065303		H(a) Is this a group return for subordinates? ☐ Yes ☒ No H(b) Are all subordinates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ▶
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527			
J Website: ▶ WWW.DAR.ORG			

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶	L Year of formation 1896	M State of legal domicile DC
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Part I		Summary		
Activities & Governance	1 Briefly describe the organization's mission or most significant activities PROMOTE HISTORIC PRESERVATION, EDUCATION, AND PATRIOTISM			
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3 Number of voting members of the governing body (Part VI, line 1a)		3 86	
	4 Number of independent voting members of the governing body (Part VI, line 1b)		4 85	
	5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5 176	
6 Total number of volunteers (estimate if necessary)		6 4,775		
7a Total unrelated business revenue from Part VIII, column (C), line 12		7a 50,877		
b Net unrelated business taxable income from Form 990-T, line 34		7b -7,213		
Revenue			Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)		9,192,192	5,796,086
	9 Program service revenue (Part VIII, line 2g)		9,135,327	9,904,037
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		9,791,621	1,997,970
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,414,564	2,766,839
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,533,704	20,464,932
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		1,582,997	1,363,200
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		7,263,592	7,313,560
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0	0
	b Total fundraising expenses (Part IX, column (D), line 25) 2,072,225			
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		7,354,357	7,648,082
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		16,200,946	16,324,842
	19 Revenue less expenses Subtract line 18 from line 12		14,332,758	4,140,090
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)		107,826,548	117,661,553
	21 Total liabilities (Part X, line 26)		9,399,192	9,327,908
	22 Net assets or fund balances Subtract line 21 from line 20		98,427,356	108,333,645

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here	***** Signature of officer		2015-04-24 Date			
	SARAH POTTS VOLL TREASURER GENERAL Type or print name and title					
Paid Preparer Use Only	Print/Type preparer's name DAVID TRIMNER		Preparer's signature DAVID TRIMNER	Date	Check ☐ if self-employed	PTIN P00444822
	Firm's name ▶ CLIFTONLARSONALLEN LLP				Firm's EIN ▶ 41-0746749	
	Firm's address ▶ 4250 N FAIRFAX DRIVE SUITE 1020 ARLINGTON, VA 22203				Phone no (571) 227-9500	

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

Part III

Statement of Program Service Accomplishments

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

☐ ☒

1

Briefly describe the organization's mission

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 HISTORICAL RESEARCH AND PUBLICATION, PRESERVATION OF HISTORICAL RELICS AND DOCUMENTS, EDUCATION AND PROMOTION OF PATRIOTIC ENDEAVORS

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 3,699,774 including grants of \$) (Revenue \$ 3,925,831)

GENEALOGY & RESEARCH NSDAR MAINTAINS A RESEARCH AND AN EXTENSIVE GENEALOGICAL LIBRARY THE LIBRARY CONTAINS OVER 225,000 VOLUMES, AS WELL AS MANY UNPUBLISHED GENEALOGY TYPESCRIPTS NOT AVAILABLE ELSEWHERE THE LIBRARY IS OPEN TO MEMBERS AND NON-MEMBERS

4b

(Code) (Expenses \$ 2,852,791 including grants of \$) (Revenue \$ 2,791,079)

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

4c

(Code) (Expenses \$ 2,678,682 including grants of \$ 1,046,898) (Revenue \$ 3,625,466)

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

See Additional Data

4d

Other program services (Describe in Schedule O)

(Expenses \$ 578,728 including grants of \$ 316,303) (Revenue \$ 566,210)

4e

Total program service expenses

9,809,975

Part IV

Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8 Yes	
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9 Yes	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 	14b Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 	15 Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part 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 domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</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? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. 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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	54	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	176	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).		2b	Yes
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	Yes
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		3b	Yes
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a	No
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b	No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a	No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b	
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a	Yes
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Yes
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c	No
d If "Yes," indicate the number of Forms 8282 filed during the year.		7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e	No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f	No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8	
9a Did the sponsoring organization make any taxable distributions under section 4966?		9a	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b	
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12.		10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		10b	
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders.		11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		13a	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		13b	
c Enter the amount of reserves on hand.		13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a	No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		14b	

Part VII

Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	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	85	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	Yes
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	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
18	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, address, and telephone number of the person who possesses the organization's books and records	SUSAN KINNECOME 1776 D STREET NW WASHINGTON, DC 200065303 (202) 628-1776

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) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	396,698	0	32,064

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶3

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
AMERGENT 9 CENTENNIAL DRIVE PEABODY, MA 01960	PRINTING, CONSULTING, AND MAILHOUSE SERV	908,573
HAMMOCK INC 814 CHURCH ST SUITE 500 NASHVILLE, TN 37203	MAGAZINE PUBLISHER	713,488
JAMES R WALLS CONTRACTING CO 7813 DELANO ROAD CLINTON, MD 20735	ROOFING REPAIR AND REPLACEMENT	706,895
AMERICAN COMBUSTION INDUSTRIES 7100 HOLLADAY TYLER RD 233 GLENN DALE, MD 20769	COOLING TOWER REPLACEMENT	621,542
GRAND HYATT WASHINGTON DC 1000 H ST NW WASHINGTON, DC 20001	BANQUET/RECEPTION SERVICES, LODGING	332,024

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶5

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a				
	b	Membership dues 1b				
	c	Fundraising events 1c				
	d	Related organizations 1d				
	e	Government grants (contributions) 1e				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	5,796,086			
	g	Noncash contributions included in lines 1a-1f \$	136,016			
	h	Total. Add lines 1a-1f	5,796,086			
Program Service Revenue	2a	MEMBERSHIP DUES				
		Business Code				
		900099	6,694,837	6,694,837		
	b	APPLICATION OTHER MEMBER FEES	1,895,442	1,895,442		
	c	MAGAZINE REVENUE	541800	1,007,666	977,872	29,794
	d	RECORD COPY	900099	291,308	291,308	
	e	LIBRARY AND OTHER FEES	900099	14,784	14,784	
	f	All other program service revenue				
Other Revenue	g	Total. Add lines 2a-2f	9,904,037			
	3	Investment income (including dividends, interest, and other similar amounts)	1,993,348			1,993,348
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties	367,957			367,957
	6a	Gross rents	(i) Real	(ii) Personal		
			1,375,330			
			0			
			1,375,330			
	b	Less rental expenses				
	c	Rental income or (loss)				
	d	Net rental income or (loss)	1,375,330			1,375,330
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
			856,733			
			852,111			
			4,622			
	b	Less cost or other basis and sales expenses				
	c	Gain or (loss)				
	d	Net gain or (loss)	4,622			4,622
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18				
		a				
	b	Less direct expenses b				
	c	Net income or (loss) from fundraising events				
	9a	Gross income from gaming activities See Part IV, line 19				
		a				
	b	Less direct expenses b				
	c	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less returns and allowances				
		a	1,308,122			
	b	Less cost of goods sold b	635,492			
	c	Net income or (loss) from sales of inventory	672,630	672,630		
		Miscellaneous Revenue	Business Code			
	11a	MANAGEMENT FEES	900099	209,887	209,887	
	b	OTHER	900099	119,952	119,952	
	c	TICKETMASTER COMMISSION	711300	21,083		21,083
	d	All other revenue				
	e	Total. Add lines 11a-11d	350,922			
	12	Total revenue. See Instructions	20,464,932	10,876,712	50,877	3,741,257

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	1,108,162	1,108,162		
2	Grants and other assistance to domestic individuals See Part IV, line 22	222,243	222,243		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	32,795	32,795		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	428,761	87,816	328,594	12,351
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	5,750,299	3,470,603	1,791,558	488,138
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	163,811	102,319	47,101	14,391
9	Other employee benefits	542,079	316,681	181,136	44,262
10	Payroll taxes	428,610	248,483	145,178	34,949
11	Fees for services (non-employees)				
a	Management	212,476	189,209	23,267	
b	Legal	23,808	1,265	9,568	12,975
c	Accounting	56,535		56,535	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	67,322	46,826	20,496	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	178,158	50,203	26,863	101,092
12	Advertising and promotion	18,699	18,699		
13	Office expenses	2,396,757	1,255,691	660,707	480,359
14	Information technology	41,505	23,269	17,557	679
15	Royalties				
16	Occupancy	725,762	546,960	163,519	15,283
17	Travel	89,460	20,304	33,639	35,517
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	404,027	58,614	292,331	53,082
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,222,336	972,373	222,087	27,876
23	Insurance	361,027	90,257	270,770	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	PRINTING & PUBLICATIONS	1,462,582	730,226	23,688	708,668
b	REAL ESTATE TAXES	114,958	78,994	35,696	268
c					
d					
e	All other expenses	272,670	137,983	92,352	42,335
25	Total functional expenses. Add lines 1 through 24e	16,324,842	9,809,975	4,442,642	2,072,225
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		1,414,556	1	2,058,839
	2	Savings and temporary cash investments		6,502,815	2	7,019,135
	3	Pledges and grants receivable, net		3,896,065	3	3,521,590
	4	Accounts receivable, net		628,503	4	1,233,010
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		646,005	8	672,073
	9	Prepaid expenses and deferred charges		288,492	9	401,931
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a38,318,595			
	b	Less: accumulated depreciation	10b19,042,927	18,204,062	10c	19,275,668
	11	Investments—publicly traded securities		75,340,920	11	82,570,703
	12	Investments—other securities. See Part IV, line 11.		904,953	12	908,427
	13	Investments—program-related. See Part IV, line 11.			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11.		177	15	177
	16	Total assets. Add lines 1 through 15 (must equal line 34).		107,826,548	16	117,661,553
Liabilities	17	Accounts payable and accrued expenses		1,571,191	17	1,481,125
	18	Grants payable			18	
	19	Deferred revenue		7,082,211	19	7,105,438
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		14,169	21	19,130
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.			22	
	23	Secured mortgages and notes payable to unrelated third parties			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.		731,621	25	722,215
	26	Total liabilities. Add lines 17 through 25.		9,399,192	26	9,327,908
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		31,136,813	27	37,515,511
	28	Temporarily restricted net assets		51,247,624	28	54,201,367
	29	Permanently restricted net assets		16,042,919	29	16,616,767
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		98,427,356	33	108,333,645
	34	Total liabilities and net assets/fund balances		107,826,548	34	117,661,553

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	20,464,932
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,324,842
3	Revenue less expenses Subtract line 2 from line 1	3	4,140,090
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	98,427,356
5	Net unrealized gains (losses) on investments	5	5,766,199
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	108,333,645

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:
Software Version:
EIN: 53-0205923
Name: NATIONAL SOCIETY DAUGHTERS OF THE
AMERICAN REVOLUTION

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code	) (Expenses \$	578,728	including grants of \$	316,303) (Revenue \$	566,210)
BOARD PROJECTS THIS PROGRAM INCLUDES ACTIVITIES TARGETED FOR ACTION BY THE PRESIDENT GENERAL THE MOST RECENT PROJECT INVOLVES THE ONGOING RESTORATION AND IMPROVEMENT OF THE NSDAR COMPLEX OF HISTORIC BUILDINGS, PROMOTING MEMBERSHIP, ADVANCING DAR'S TECHNOLOGICAL CAPABILITIES IN SUPPORT OF ITS MISSION, AND FUNDING COMMUNITY GRANTS FOR HISTORIC PRESERVATION, EDUCATION, AND PATRIOTISM					

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LYNN F YOUNG PRESIDENT GENERAL	40 00	X		X				24,000	0	0
(1) ANN T DILLON FIRST VICE PRESIDENT GENER	10 00	X		X				0	0	0
(2) ANN S CRIDER CHAPLAIN GENERAL	10 00	X		X				0	0	0
(3) BARBARA H CARPENTER RECORDING SECRETARY GENERA	10 00	X		X				0	0	0
(4) KARON JARRARD CORRESPONDING SEC'Y GENERA	10 00	X		X				0	0	0
(5) DENISE D VANBUREN ORGANIZING SECRETARY GENER	10 00	X		X				0	0	0
(6) MARTHA G BARNHART TREASURER GENERAL	10 00	X		X				0	0	0
(7) SHARON M WITHERS REGISTRAR GENERAL	10 00	X		X				0	0	0
(8) BANA W CASKEY HISTORIAN GENERAL	10 00	X		X				0	0	0
(9) JUDITH H CHAFFIN LIBRARIAN GENERAL	10 00	X		X				0	0	0
(10) JENNIE MAY REHNBERG CURATOR GENERAL	10 00	X		X				0	0	0
(11) MINDY T KAMMEYER REPORTER GENERAL	10 00	X		X				0	0	0
(12) LYNDA W CLOSSON VICE PRESIDENT GENERAL	4 00	X						0	0	0
(13) GALE A CRAFTON VICE PRESIDENT GENERAL	4 00	X						0	0	0
(14) LUANNE F BRUCKNER VICE PRESIDENT GENERAL	4 00	X						0	0	0
(15) LAURA C KESSLER VICE PRESIDENT GENERAL	4 00	X						0	0	0
(16) DANNA S KOELLING VICE PRESIDENT GENERAL	4 00	X						0	0	0
(17) DONNA C NASH VICE PRESIDENT GENERAL	4 00	X						0	0	0
(18) BARBARA T HALPIN VICE PRESIDENT GENERAL	4 00	X						0	0	0
(19) DIANE B HAMILL VICE PRESIDENT GENERAL	4 00	X						0	0	0
(20) MARGUERITE P HORTON VICE PRESIDENT GENERAL	4 00	X						0	0	0
(21) CINDY M TOONE VICE PRESIDENT GENERAL	4 00	X						0	0	0
(22) SUE T THOMPSON VICE PRESIDENT GENERAL	4 00	X						0	0	0
(23) BARBARA W MAKANT VICE PRESIDENT GENERAL	4 00	X						0	0	0
(24) SHARON THORNE-SULIMA VICE PRESIDENT GENERAL	4 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(26) JOY D HAGG VICE PRESIDENT GENERAL	4 00	X						0	0	0
(1) NANCY G HEMMRICH VICE PRESIDENT GENERAL	4 00	X						0	0	0
(2) JANET L WHITTINGTON VICE PRESIDENT GENERAL	4 00	X						0	0	0
(3) ZADEEA G HARRIS VICE PRESIDENT GENERAL	4 00	X						0	0	0
(4) MARY B FRISCH VICE PRESIDENT GENERAL	4 00	X						0	0	0
(5) PATRICIA M HATFIELD VICE PRESIDENT GENERAL	4 00	X						0	0	0
(6) ELIZABETH W JONES VICE PRESIDENT GENERAL	4 00	X						0	0	0
(7) BONNIE P COOK VICE PRESIDENT GENERAL	4 00	X						0	0	0
(8) LUCINDA D GRYDER STATE REGENT - AK	4 00	X						0	0	0
(9) CONSTANCE H GRUND STATE REGENT - AL	4 00	X						0	0	0
(10) MARY H DEERE STATE REGENT - AR	4 00	X						0	0	0
(11) GILLIAN L MORSE STATE REGENT - AZ	4 00	X						0	0	0
(12) CAROL O JACKSON STATE REGENT - CA	4 00	X						0	0	0
(13) MARCY S KIMMINAU STATE REGENT - CO	4 00	X						0	0	0
(14) APRIL B STALEY STATE REGENT - CT	4 00	X						0	0	0
(15) ANN T SCHAEFFER STATE REGENT - DC	4 00	X						0	0	0
(16) CLAUDIA M ONKEN STATE REGENT - DE	4 00	X						0	0	0
(17) CYNTHIA W SYMANEK STATE REGENT - FL	4 00	X						0	0	0
(18) IDA B FISCHER STATE REGENT - GA	4 00	X						0	0	0
(19) MARY ELLEN C SMITH STATE REGENT - HI	4 00	X						0	0	0
(20) SHARON A BRADEN STATE REGENT - IA	4 00	X						0	0	0
(21) REBECCA BOWEN-ODOM STATE REGENT - ID	4 00	X						0	0	0
(22) PAMELA P BORK STATE REGENT - IL	4 00	X						0	0	0
(23) JEANIE P HORNUNG STATE REGENT - IN	4 00	X						0	0	0
(24) BRENDA J DOOLEY STATE REGENT - KS	4 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(51) BARBARA G ZINK STATE REGENT - KY	4 00	X						0	0	0
(1) SUE L SIMPSON STATE REGENT - LA	4 00	X						0	0	0
(2) GAIL S TERRY STATE REGENT - MA	4 00	X						0	0	0
(3) LINDA MISTLER STATE REGENT - MD	4 00	X						0	0	0
(4) SANDRA H SWALLOW STATE REGENT - ME	4 00	X						0	0	0
(5) M ZANDRA BAKER STATE REGENT - MI	4 00	X						0	0	0
(6) DIANE L CONE STATE REGENT - MN	4 00	X						0	0	0
(7) MORGAN L LAKE STATE REGENT - MO	4 00	X						0	0	0
(8) BILLIE F BREEDLOVE STATE REGENT - MS	4 00	X						0	0	0
(9) CATHERINE J LANE STATE REGENT - MT	4 00	X						0	0	0
(10) PEGGY C TROXELL STATE REGENT - NC	4 00	X						0	0	0
(11) NANCY S LEGERSKI STATE REGENT - ND	4 00	X						0	0	0
(12) KATHLEEN J OCASIO STATE REGENT - NE	4 00	X						0	0	0
(13) PHYLLIS M GAGNON STATE REGENT - NH	4 00	X						0	0	0
(14) CORNELIA B OLDE STATE REGENT - NJ	4 00	X						0	0	0
(15) JACQUELYN A CHASE STATE REGENT - NM	4 00	X						0	0	0
(16) LYNDA L MORRISON-RADER STATE REGENT - NV	4 00	X						0	0	0
(17) MARTHA M CRAPSER STATE REGENT - NY	4 00	X						0	0	0
(18) SANDRA M MCCANN STATE REGENT - OH	4 00	X						0	0	0
(19) ORIENTINE F DENSLOW STATE REGENT - OK	4 00	X						0	0	0
(20) CYNTHIA A PARNELL STATE REGENT - OR	4 00	X						0	0	0
(21) ROBERTA P MCMULLEN STATE REGENT - PA	4 00	X						0	0	0
(22) BARBARA P SIMMONS STATE REGENT - RI	4 00	X						0	0	0
(23) DOROTHY R LIND STATE REGENT - SC	4 00	X						0	0	0
(24) LAVONNE C ANDERSON STATE REGENT - SD	4 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(76) SUSAN R THOMAS STATE REGENT - TN	4 00	X						0	0	0
(1) PAMELA R WRIGHT STATE REGENT - TX	4 00	X						0	0	0
(2) JUDY D BARKING STATE REGENT - UT	4 00	X						0	0	0
(3) VIRGINIA S STORAGE STATE REGENT - VA	4 00	X						0	0	0
(4) ELIZABETH B BICKNELL STATE REGENT - VT	4 00	X						0	0	0
(5) CAROL J GAFFNEY STATE REGENT - WA	4 00	X						0	0	0
(6) CLAUDETTE R FINKE STATE REGENT - WI	4 00	X						0	0	0
(7) BARBARA M FRANKENBERRY STATE REGENT - WV	4 00	X						0	0	0
(8) SUSAN M HAINES STATE REGENT - WY	4 00	X						0	0	0
(9) DOMINIQUE FAVREUL STATE REGENT - FRANCE	4 00	X						0	0	0
(10) JANET T FRY STATE REGENT - MEXICO	4 00	X						0	0	0
(11) JO B ANDRESS VICE PRESIDENT GENERAL	4 00	X						0	0	0
(12) MARY ANN MIDDETON VICE PRESIDENT GENERAL	4 00	X						0	0	0
(13) DEBORA J REFIOR VICE PRESIDENT GENERAL	4 00	X						0	0	0
(14) LEMIRA PARKS VICE PRESIDENT GENERAL	4 00	X						0	0	0
(15) VIRGINIA TRADER VICE PRESIDENT GENERAL	4 00	X						0	0	0
(16) SUSAN HARRIS VICE PRESIDENT GENERAL	4 00	X						0	0	0
(17) DIANE KREIS VICE PRESIDENT GENERAL	4 00	X						0	0	0
(18) DANNA KOELLING STATE REGENT - AZ	4 00	X						0	0	0
(19) JO ANN COOPER STATE REGENT - AR	4 00	X						0	0	0
(20) DEBRA JAMISON STATE REGENT - CA	4 00	X						0	0	0
(21) JULIA ROGERS STATE REGENT - DC	4 00	X						0	0	0
(22) VIRGINIA LINGELBACH STATE REGENT - GA	4 00	X						0	0	0
(23) BARBARA HALPIN STATE REGENT - IA	4 00	X						0	0	0
(24) PATRICIA WEST STATE REGENT - MO	4 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(101) JOY LINN STATE REGENT - MT	4 00	X						0	0	0
(1) JACQUELINE OHLMANN STATE REGENT - NE	4 00	X						0	0	0
(2) REBECCA EISENMAN STATE REGENT - NV	4 00	X						0	0	0
(3) PATSY MCFALL STATE REGENT - OK	4 00	X						0	0	0
(4) ELLEN HOPKINS STATE REGENT - OR	4 00	X						0	0	0
(5) SHIRLEY NELSON STATE REGENT - UT	4 00	X						0	0	0
(6) JANELLE BRAITHWAIT STATE REGENT - WA	4 00	X						0	0	0
(7) MARY MCALEENAN STATE REGENT - WY	4 00	X						0	0	0
(8) STEPHEN W NORDHOLT ADMINISTRATOR	40 00			X				136,525	0	14,950
(9) SUSAN KINNECOME CONTROLLER	40 00			X				123,535	0	11,080
(10) LEANNE VIGLIANO DIRECTOR OF HUMAN RESOURCE	40 00					X		112,638	0	6,034

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION	Employer identification number 53-0205923
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Part I

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1

☐

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

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3

☐

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

4

☐

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

5

☐

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

6

☐

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

7

☐

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

8

☐

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

9

☒

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10

☐

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

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

a

☐

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

b

☐

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

c

☐

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

d

☐

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

e

☐

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

f

Enter the number of supported organizations _____

g

Provide the following information about the supported organization(s)

(i)Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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 behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11 Total support Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						▶

Section C. Computation of Public Support Percentage						
14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))		14				
15 Public support percentage for 2013 Schedule A, Part II, line 14		15				
16a 33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						▶
b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						▶
17a 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization						▶
b 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization						▶
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions						▶

Part IIISupport Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	4,586,659	4,081,464	5,255,924	9,192,192	5,794,006	28,910,245
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	9,342,856	9,327,735	8,336,425	10,261,490	11,182,365	48,450,871
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	13,929,515	13,409,199	13,592,349	19,453,682	16,976,371	77,361,116
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b						0
8 Public support (Subtract line 7c from line 6.)						77,361,116

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6	13,929,515	13,409,199	13,592,349	19,453,682	16,976,371	77,361,116
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,948,002	4,706,246	3,380,262	3,326,034	3,736,635	19,097,179
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	64,872	52,161	34,054	43,614	50,877	245,578
c Add lines 10a and 10b	4,012,874	4,758,407	3,414,316	3,369,648	3,787,512	19,342,757
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	239,574	229,779	248,374	281,683	331,919	1,331,329
13 Total support. (Add lines 9, 10c, 11, and 12.)	18,181,963	18,397,385	17,255,039	23,105,013	21,095,802	98,035,202
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage			
15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	78.910%	
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	78.280%	

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	19.730%	
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	20.410%	
19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		☒	
b 33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		☐	
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		☐	

Part IV

Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. . . .	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990) .	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b	
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c	
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a	
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b	
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a ☐ The organization satisfied the Activities Test. Complete line 2 below.			
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 <u>Activities Test</u> Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 <u>Parent of Supported Organizations</u> Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

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

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009.			
b From 2010.			
c From 2011.			
d From 2012.			
e From 2013.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010.			
b From 2011.			
c From 2012.			
d From 2013.			
e From 2014.			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

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.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION	Employer identification number 53-0205923
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Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

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

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4

Number of states where property subject to conservation easement is located ► _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included in Form 990, Part VIII, line 1

► \$ _____

(ii) Assets included in Form 990, Part X

► \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenue included in Form 990, Part VIII, line 1

► \$ _____

b

Assets included in Form 990, Part X

► \$ _____

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 52283D

Schedule D (Form 990) 2014

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☒

Public exhibition

b

☒

Scholarly research

c

☒

Preservation for future generations

d

☒

Loan or exchange programs

e

☐

Other

4

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

5

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

☐ Yes

☒ No
- Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.
- 1a

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

☐ Yes

☒ No

b

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

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☒ Yes

☐ No

b

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

☒
- Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.
- | | (a)Current year | (b)Prior year | b (c)Two years back | (d)Three years back | (e)Four years back |
|--|-----------------|---------------|---------------------|---------------------|--------------------|
| 1a Beginning of year balance | 51,426,870 | 45,683,427 | 43,787,812 | 40,683,147 | 34,971,313 |
| b Contributions | 9,006,848 | 8,895,167 | 5,662,058 | 1,910,798 | 921,881 |
| c Net investment earnings, gains, and losses | -4,010,686 | -2,455,184 | 2,116,850 | 1,860,942 | 5,570,664 |
| d Grants or scholarships | 416,304 | 696,540 | 5,883,293 | 667,075 | 780,711 |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | 56,006,728 | 51,426,870 | 45,683,427 | 43,787,812 | 40,683,147 |

2

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

a

Board designated or quasi-endowment

29 660 %

b

Permanent endowment

23 860 %

c

Temporarily restricted endowment

46 480 %

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

3a

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

(i) unrelated organizations

3a(i)

☐ Yes

☐ No

(ii) related organizations

3a(ii)

☐ Yes

☐ No

b

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

3b

☐ Yes

☐ No

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		207,420		207,420
b Buildings		32,833,083	14,628,534	18,204,549
c Leasehold improvements				
d Equipment		5,278,092	4,414,393	863,699
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				19,275,668

Schedule D (Form 990) 2014

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	26,340,631
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	2e	5,875,699
a	Net unrealized gains (losses) on investments	2a	5,766,199
b	Donated services and use of facilities	2b	109,500
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	5,875,699
3	Subtract line 2e from line 1	3	20,464,932
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	4c	0
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	20,464,932

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	16,434,342
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	2e	109,500
a	Donated services and use of facilities	2a	109,500
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	109,500
3	Subtract line 2e from line 1	3	16,324,842
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :	4c	0
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	16,324,842

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, 2014, THE ESTIMATED FAIR VALUE OF THE COLLECTIONS WAS IN EXCESS OF \$54.5 MILLION. NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION HAD NO SIGNIFICANT DEACCESSIONS OR DISPOSALS OF MUSEUM/LIBRARY COLLECTIONS DURING THE YEAR ENDED DECEMBER 31, 2014.
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 \$19,130 AT DECEMBER 31, 2014 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, 2012, THE PERIOD MARCH 1, 2012 - DECEMBER 31, 2012, AND FISCAL YEAR ENDED DECEMBER 31, 2013 ARE OPEN TO EXAMINATION BY FEDERAL AND STATE AUTHORITIES.

[illegible]

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
NATIONAL SOCIETY DAUGHTERS OF THE
AMERICAN REVOLUTION

Employer identification number
53-0205923

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space 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
(1) EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	GRANT	6,436
(2) EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	GRANTS	26,359
(3)					
(4)					
(5)					
3a Sub-total	0	0			32,795
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			32,795

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	SUPPORT FOR PRODUCTION OF BERNARDO DE GALVEZ DOCUMENTARY	6,436	WIRE			
(2)			EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM	ASSISTANCE TO WOUNDED U S MILITARY PERSONNEL	25,000	CHECK	1,359	BLANKETS, WOMEN'S UNDERGARMENTS	FMV
(3)									
(4)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ 0

3 Enter total number of other organizations or entities ▶ 2

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) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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)*

☐ Yes

☒ 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; do not file with Form 990)*

☐ Yes

☒ 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)*

☐ Yes

☒ 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)*

☐ Yes

☒ 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)*

☐ Yes

☒ 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; do not file with Form 990)*

☐ Yes

☒ No

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).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	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 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.

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," 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

2014

Open to Public
Inspection

Name of the organization
NATIONAL SOCIETY DAUGHTERS OF THE
AMERICAN REVOLUTION

Employer identification number
53-0205923

Part I

General Information on Grants and Assistance

- 1

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

☒ Yes ☐ No
- 2

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

Part II

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

Part III

Grants and Other Assistance to Domestic Individuals. 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)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Additional Data Table					

Part IV

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

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

Additional Data

Software ID:
Software Version:
EIN: 53-0205923
Name: NATIONAL SOCIETY DAUGHTERS OF THE
AMERICAN REVOLUTION

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW MEXICO VETERANS INTEGRATION CENTER 13032 CENTRAL AVE SE ALBUQUERQUE,NM 87123	55-0901604	501(C)(3)	6,176				WHEELCHAIR-ACCESSIBLE VANS FOR VETERANS IN TRANSITIONAL LIVING FACILITIES

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMEN IN MILITARY SERVICE FOR AMERICAN INC (WOMEN'S MEMORIAL FOUNDATION)200 N GLEBE RD STE 400 ARLINGTON,VA 222033755	52-1513535	501(C)(3)	10,200				COMPUTER AND SOFTWARE FOR REGISTRATION AND THE ORAL HISTORY PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BACONE COLLEGE2299 OLD BACONE ROAD MUSKOGEE, OK 744031568	73-0590036	501(C)(3)	22,050				ENDOWMENT INTEREST, BRIDGE SCHOLAR PROGRAM, GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BERRY COLLEGE2277 MARTHA BERRY HWY MOUNT BERRY,GA 30149	58-0566133	501(C)(3)	21,000				STUDENT SCHOLARSHIPS, DIGITAL ARCHIVES, EMERGENCY RELIEF FUND

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CROSSNORE SCHOOL100 DAR DRIVE CROSSNORE, NC 286160249	56-0567980	501(C)(3)	158,434				ENDOWMENT INTEREST, CHILDREN'S PLAYGROUND, SUMMER PROGRAMS, BOARDING SCHOLARSHIPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILLSIDE SCHOOL INC404 ROBIN HILL ROAD MARLBOROUGH, MA 017521099	04-2111216	501(C)(3)	31,139				ENDOWMENT INTEREST, HEATING OIL FOR WINTER, PART-TIME EVENING NURSE'S SALARY, KITCHEN EXPANSION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HINDMAN SETTLEMENT SCHOOL238 HIGHWAY 100 S HINDMAN, KY 41822	61-0447248	501(C)(3)	40,578				ENDOWMENT INTEREST, AFTER-SCHOOL TUTORING, FOLK ART PROGRAM, READING LAB

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KATE DUNCAN SMITH SCHOOL6077 MAIN STREET GRANT,AL 357478331	63-0338084	501(C)(3)	203,893				ENDOWMENT INTEREST, SCHOOL NURSE SALARY, FINE ARTS ENRICHMENT PROGRAM, ADMINISTRATIVE AND MAINTENANCE STAFF SALARIES, UTILITIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TAMASSEE DAR SCHOOL 1925 BUMGARDNER DR TAMASSEE, SC 29686	57-6000973	501(C)(3)	303,352				ENDOWMENT INTEREST, LEAD TEACHER SALARY, CAMPUS SECURITY, LIGHTING SYSTEM FOR DINING HALL, TUTORING RESOURCE CENTER, STAFF SALARIES, UTILITIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WARRIOR TRANSITIONAL BRIGADE WALTER REED NATIONAL MILITARY MEDICAL CENTER8901 WISCONSIN AVENUE BETHESDA,MD 208895600				20,891	FMV	GIFT CARDS, COOKWARE, MEN'S & WOMEN'S SHORTS	GIFT CARDS, COOKWARE, MEN'S & WOMEN'S SHORTS

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
SCHOLARSHIPS	73	179,500			
OUTSTANDING TEACHER AWARD	1	3,000			
U S MILITARY ACADEMY AWARDS	8	3,845			
FRIENDS OF AMERICAN HISTORY	12	7,000			
FRIENDS OF VETERANS	2	1,600			
JUNIOR AMERICAN CITIZENS	474	7,548			
GOOD CITIZENS AWARDS	59	16,750			
INDIAN YOUTH OF AMERICA, INC	10	3,000			

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION

Employer identification number
53-0205923

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII
Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 STEPHEN W NORDHOLT, ADMINISTRATOR	(i)	136,525	0	0	0	14,950	151,475	0
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

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

Return Reference	Explanation
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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.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION

Employer identification number
53-0205923

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	3		
2 Art—Historical treasures	X	60		
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	12	136,016	FAIR MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (COMPUTER EQUIPMENT)	X	1	11,000	FAIR MARKET VALUE
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29

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

30a

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

30a

Yes

No

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a

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

32a

No

b

If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 51227J

Schedule M (Form 990) (2014)

Part II

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

Return Reference	Explanation
PART I, COLUMN (B)	WORKS OF ART 3 ITEMS FROM 1 DONOR, HISTORICAL TREASURES 60 ITEMS FROM 21 DONORS
PART I, LINE 33	HISTORICAL TREASURES WITH AN ESTIMATED VALUE OF \$33,012 (BASED ON INDEPENDENT APPRAISALS AND INTERNAL ESTIMATES/COMPARABLES) WERE DONATED TO THE DAR MUSEUM COLLECTION THE COLLECTION IS NOT CAPTITALIZED, AS PERMITTED BY U S GAAP

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization NATIONAL SOCIETY DAUGHTERS OF THE AMERICAN REVOLUTION	Employer identification number 53-0205923
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990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	
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 HUMAN RESOURCES 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, BYLAWS ARE AVAILABLE TO MEMBERS ON THE MEMBERS WEBSITE AND ARE AVAILABLE FOR SALE AS PART OF THE MEMBER HANDBOOK TO ANYONE WHO VISITS NSDAR HEADQUARTERS.