Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information. 2022 A For the 2021 calendar year, or tax year beginning SEP 1, 2021 and ending AUG 31, Check if applicable: C Name of organization D Employer identification number THE NATIONAL SOCIETY OF THE COLONIAL Address change DAMES OF AMERICA Name change 53-0224364 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 202-337-2288 2715 Q STREET, NW 5,182,193. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return 20007 WASHINGTON, DC H(a) Is this a group return Applica-tion pending F Name and address of principal officer: ELIZABETH HAGOPIAN for subordinates? Yes X No 158 LEWIS ROAD, BELMONT, MA 02478 H(b) Are all subordinates included? Tax-exempt status: \mathbf{X} 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list. See instructions J Website: ► WWW.NSCDA.ORG **H(c)** Group exemption number ▶ K Form of organization: Trust X Association Other > L Year of formation: 1891 M State of legal domicile: DC Corporation [Part I Summary Briefly describe the organization's mission or most significant activities: PROMOTION OF OUR HERITAGE **Activities & Governance** THROUGH PRESERVATION, PATRIOTIC SERVICE, AND EDUCATIONAL PROJECTS. if the organization discontinued its operations or disposed of more than 25% of its net assets. 69 3 Number of voting members of the governing body (Part VI, line 1a) 69 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 48 5 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Prior Year Current Year** $1,762,\overline{637}$ 1,434,505. Contributions and grants (Part VIII, line 1h) 8 750,753. 674,095. Program service revenue (Part VIII, line 2g) 271,444. 776,160. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 78,667. 340,595. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 2,786,843. 3,302,013. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 196,437. 412,602. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 1,070,003. 937,289. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 1,137,072. 1,340,708. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,270,798. 2,823,313. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 516,045. 478,700. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 28 17,260,658. 15,915,610. 20 Total assets (Part X, line 16) 733,063. 1,050,435. 21 Total liabilities (Part X, line 26) 三年 527,595. 14,865,175 22 Net assets or fund balances. Subtract line 21 from line 20 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. Signature of officer Date Sign ELIZABETH HAGOPIAN, TREASURER Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature 02/02/23 self-employed P01249346 DANIEL L. WEAVER DANIEL L. WEAVER Paid

X Yes

Firm's EIN ▶ 52-1711839

Phone no. (301) 986-0600

BETHESDA, MD 20814

Firm's address 7910 WOODMONT AVE.

May the IRS discuss this return with the preparer shown above? See instructions

Firm's name COUNCILOR, BUCHANAN & MITCHELL, P.C.

STE. 500

Preparer

Use Only

Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE NATIONAL SOCIETY OF THE COLONIAL DAMES OF AMERICA ACTIVELY
	PROMOTES OUR NATIONAL HERITAGE THROUGH HISTORIC PRESERVATION,
	PATRIOTIC SERVICE, AND EDUCATIONAL PROJECTS.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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 X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$1,350,004. including grants of \$160,202.) (Revenue \$)
	MUSEUM PROPERTIES PRESERVATION, RESTORATION, AND INTERPRETATION OF
	HISTORIC SITES THAT OFFER INVALUABLE OPPORTUNITIES TO EXPERIENCE THE
	RICH VARIETY OF AMERICA'S HERITAGE.
	150 405
4b	(Code:) (Expenses \$150 , 405 . including grants of \$) (Revenue \$)
	HISTORIAL ACTIVITIES PROJECTS INCLUDE RESEARCH, PRESERVATION, AND
	EDUCATIONAL PUBLICATIONS.
4c	(Code:) (Expenses \$ 323,457. including grants of \$) (Revenue \$)
40	PATRIOTIC SERVICE PROGRAMS ARE DESIGNED OT PROMOTE RESPONSIBLE
	CITIZENSHIP AND THE STUDY OF AMERICAN HISTORY WITH PARTICULAR EMPHASIS
	ON THE FUNDAMENTAL DOCUMENTS, TRADITIONS AND WORKINGS OF OUR COUNTRY
	AND ITS GOVERNMENT.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 1,823,866.
	Form 990 (2021)

Form 990 (2021) DAMES OF AMERICA 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		1
8	, ,		Х	
•	Schedule D, Part III	8	Λ	-
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?			3,7
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	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		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	IZU		
D	, .	12b		x
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
13	Did the appropriation projection of the control of the United Otelson			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
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			x
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			.
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			3,7
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> X</u>
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		<u> X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	

THE NATIONAL SOCIETY OF THE COLONIAL DAMES OF AMERICA

Form 990 (2021)

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	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			٦,
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			٦,
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			7,7
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			x
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-		Х
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	28c		х
20	"Yes," complete Schedule L, Part IV	29		X
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		25
30		30		X
31	contributions? If "Yes," complete Schedule M	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
52	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 02		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
٠.	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	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			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	

132004 12-09-21

Form **990** (2021)

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 48			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	J , , , , , , , , , , , , , , , , , , ,	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			,,
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_		- V
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		, v
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7.		х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		122
g h	If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?	7 <u>9</u> 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711		
Ü	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	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:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b				
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			77
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			.
	excess parachute payment(s) during the year?	15		X
40	If "Yes," see the instructions and file Form 4720, Schedule N.	40		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
47	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.			

53-0224364 Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 69 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 69 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? Х 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? Х Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes " describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Х Did the organization have a written document retention and destruction policy? 14 14 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? The organization's CEO, Executive Director, or top management official Х 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a 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? Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website X Upon request Own website Other (explain on Schedule O) Describe on 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. State the name, address, and telephone number of the person who possesses the organization's books and records

Form **990** (2021)

20007

ELIZABETH HAGOPIAN - 202-337-2288 2715 O STREET, NW, WASHINGTON, DC

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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nei	(B)	J. ga	<u>.</u> u		C)	.,,		(D)	(E)	(F)
Name and title	Average			Posi		1		Reportable	Reportable	Estimated
Name and the	hours per					than o		compensation	compensation	amount of
	week					r/trus		from	from related	other
	(list any	octor						the	organizations	compensation
	hours for	or dire	a			ted		organization	(W-2/1099-MISC/	from the
	related	stee	truste		a)	beusa		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tru	ional		ploye	t com		1099-NEC)		and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			Organizations
(1) CAROL CADOU	40.00		=	0	×	Ξ 65	-			
EXEC DIR DUMBARTON HOUSE				х				45,538.	0.	0.
(2) MRS. KATHERINE CAMMACK	5.00							V		
PRESIDENT - NSCDA		Х		X				0.	0.	0.
(3) MRS. JOHN PARKS BOYLIN JR.	5.00									
VICE-PRESIDENT, NHQ-DUMBAR		Х		X				0.	0.	0.
(4) MRS. ROBERT WINSLOW HAGOPIAN	5.00									
TREASURER		X		X				0.	0.	0.
(5) MS. ROSALIE LANGE	5.00	4								_
ASSISTANT TREASURER		X		X				0.	0.	0.
(6) MRS. CHARLES ANDREW LILES SR.	5.00				ľ					
REGISTRAR		Х		X				0.	0.	0.
(7) SALLY CONGDON	5.00									•
SENIOR REPRESENTATIVE - SU	F 00	Х		Х				0.	0.	0.
(8) MRS. JAMES OTEY WALKER III	5.00								_	•
NATIONAL CORRESPONDING SEC	F 00	Х		X				0.	0.	0.
(9) MRS. JERE D. FREEMAN III	5.00	37		37					_	0
CHAIR, NATIONAL PATRIOTIC	F 00	Х		Х				0.	0.	0.
(10) MRS. WILLIAM B. BLAYLOCK	5.00	Х		х					0.	0
CHAIR, CODIFICATION COMMITTEE (11) MRS. ERNEST EDWARD HUNT IV	5.00	Λ		Λ				0.	0.	0.
CHAIR, MEMBERSHIP COMMITTEE	3.00	Х		Х				0.	0.	0.
(12) MRS. HUGH A. MERRILL	5.00			Λ				0.	0.	0.
CHAIR, NATIONAL MUSEUM ALL	3.00	Х		Х				0.	0.	0.
(13) MS. ELIZABETH BREWSTER ROBINSON	5.00							0.	0.	0.
CHAIR, NATIONAL STRATEGIC	3.00	Х		Х				0.	0.	0.
(14) MRS. ROBERT G. ROGERS. JR.	5.00								•	`
CHAIR, NATIONAL FINANCE CO	3.00	Х		Х				0.	0.	0.
(15) ELSIE SMITH	5.00									
CHAIR, NATIONAL HISTORICAL		х		х				0.	0.	0.
(16) MS. GAIL SOLLID	5.00								-	-
CHAIR, NEW BUSINESS COMMITTEE		х		х				0.	0.	0.
(17) MRS. JONATHAN TRACE	5.00									
CHAIR, GHR NOMINATING COMMITTEE		Х		Х	L			0.	0.	0.

132007 12-09-21

Form **990** (2021)

101111330 (2021)		-									<u></u>		<u> </u>
Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	l Hig	ghes	st C	ompensated Employee	s (continued)				
(A)	(B)			(0	C)			(D)	(E)			(F)	
Name and title	Average	(da		Pos				Reportable	Reportable	,	Es	timate	ed
	hours per	box	not c , unle	ss per	rson i	s bot	n an	compensation	compensation	n n	an	nount	of
	week		cer ar	d a d	irecto	r/trus	tee)	from	from related	l t		other	
	(list any	director						the	organization		com	pensa	tion
	hours for	or dir	ao			rted		organization	(W-2/1099-MIS			om th	
	related	stee	truste			bens		(W-2/1099-MISC/	1099-NEC)		•	anizat	
	organizations below	ıal tru	onal		oloye	E S		1099-NEC)				d relat	
	line)	Individual trustee or	nstitutional trustee	Officer	key employee	Highest compensated employee	Former				orga	anizati	ons
(18) MRS. MALCOLM WALLOP	5.00	르	Ë	70	. Ye	宝 5	요			\dashv			
CHAIR, DEVELOPMENT COMMITTEE	3100	х		x				0.		0.			0.
(19) MRS. GENE MASON WHITE	5.00							•		- 			
CHAIR, GOVERNANCE COMMITTEE	3.00	х						0.		0.			0.
(20) MRS. MARK WOLSEY-PAIGE	5.00												
CHAIR, COMMUNICATIONS-MARK		Х		х				0.		0.			0.
(21) MRS. MARK RICHARD ALLEN	1.00												
NATIONAL BOARD MEMBER		Х						0.		0.			0.
(22) MRS. JOHN ROBERTSON ARNOLD JR.	1.00	1											
NATIONAL BOARD MEMBER	1 00	Х						0.		0.			0.
(23) MRS. JEFFREY A ARTZ	1.00	٠,,											^
NATIONAL BOARD MEMBER	1 00	Х						0.		0.			0.
(24) MRS. PETER RAYMOND BEASLEY II ARCHIVIST	1.00	Х						0.		0.			0.
(25) MS. MARY JAQUELIN BENNETT	1.00	Λ						0.		- 			<u> </u>
NATIONAL BOARD MEMBER	1.00	Х				l 🔻		0.		0.			0.
(26) ELLEN MACBETH BOOMER	1.00												
VP OF REGION IV		Х						0.		0.			0.
1b Subtotal	•			7	7			45,538.		0.			0.
c Total from continuation sheets to Part VI							\triangleright	0.		0.			0.
d Total (add lines 1b and 1c)								45,538.		0.			0.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	,000 of reportable	Э			
compensation from the organization		4										. I	0
										ſ		Yes	No
3 Did the organization list any former officer,		ee, k	кеу є	empl	oye	e, or	hig	hest compensated emp	loyee on				v
line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the su											4		Х
and related organizations greater than \$150Did any person listed on line 1a receive or a											-		
rendered to the organization? If "Yes." com											5		х
Section B. Independent Contractors	ipioto Comedun	<i></i> .	<u> </u>		2013	<i>-</i> 11							
1 Complete this table for your five highest co	mpensated inc	lepe	nder	nt co	ontra	acto	rs th	nat received more than \$	6100,000 of comp	pensat	ion fro	om	
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thin	the organization's tax y	ear.				
(A)								(B)			(C		
Name and business	address							Description of s	services	C	omper	nsatio	n

(A)	(B)	(C)
Name and business address	Description of services	Compensation
VAUGHAN RESTORATION MASONARY INC.	REPOINTING PROJECT	
3917 WHEELER AVE, ALEXANDRIA, VA 22304	LABOR	148,249.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	

\$100,000 of compensation from the organization \blacktriangleright 1
SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2021)

Form 990 DAMES OF		_								4364
Part VII Section A. Officers, Directors, Tru	ustees, Key Er	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos				Reportable	Reportable	Estimated
	hours	(c	heck	all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				yee		the	organizations	compensation
	(list any	or directo				em plc		organization	(W-2/1099-MISC)	from the
	hours for	ordi	ee			ated		(W-2/1099-MISC)		organization
	related	ustee	trust		ee	Suadr				and related
	organizations below	lual tr	tional		nploy	tcon	_			organizations
	line)	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) MRS. LEONORA ALICE BRANCA	1.00	H	 		F		_			
NATIONAL PARLIAMENTARIAN	1100	х						0.	0.	0.
(28) MRS. SAUNDERS M. BRIDGES JR.	1.00								0.	•
NATIONAL BOARD MEMBER	1.00	Х						0.	0.	0.
(29) MRS. MICHAEL DORING CONNELLY	1.00								0.	•
HISTORIAN	1100	х						0.	0.	0.
(30) MRS. RICHARD THOMAS CRAWFORD	1.00								0.	
NATIONAL BOARD MEMBER		Х						0.	0.	0.
(31) MRS. ELIZABETH LONGLEY DONALD	1.00								3.	•
NATIONAL BOARD MEMBER		х						0.	0.	0.
(32) MARTA MILLER DUNETZ	1.00	ļ <u></u>							0.1	
NATIONAL BOARD MEMBER		х						0.	0.	0.
(33) MS. SUSAN GRIFFITHS DUNLAP	1.00							0.	0.1	
NATIONAL BOARD MEMBER		х						0.	0.	0.
(34) SUSAN DUNNAVAN	1.00							1	•	
NATIONAL BOARD MEMBER		х						0.	0.	0.
(35) MRS. WILLIAM WORTH GEDDES, JR.	1.00								•	
NATIONAL BOARD MEMBER		х						0.	0.	0.
(36) MRS. L. MARTIN GIBBS	1.00					7		7.	•	
NATIONAL BOARD MEMBER		х						0.	0.	0.
(37) MRS. MARK DAVID GOULD	1.00								•	
NATIONAL BOARD MEMBER		X						0.	0.	0.
(38) MRS. C. KIRTLAND HAYES JR.	1.00				7				•	
NATIONAL BOARD MEMBER		х						0.	0.	0.
(39) MRS. MARK MARION HEATWOLE	1.00								•	
NATIONAL BOARD MEMBER		Х						0.	0.	0.
(40) MARGARET MYER HURST	1.00								<u> </u>	
VP OF REGION III		Х						0.	0.	0.
(41) MRS. CHRISTY F. JAMES	1.00									
NATIONAL BOARD MEMBER		Х						0.	0.	0.
(42) MRS. JAMES GOEDHART	1.00									
JUNIOR REPRESENTATIVE - SU		Х						0.	0.	0.
(43) MRS. JEFFREY LOUD KERN	1.00							-	-	-
NATIONAL BOARD MEMBER		Х						0.	0.	0.
(44) SALLY KERNAN	1.00									
NATIONAL BOARD MEMBER		х						0.	0.	0.
(45) MRS. DANIEL MARTIN KIMBALL	1.00								•	
NATIONAL BOARD MEMBER		Х						0.	0.	0 .
(46) MRS. WALTER MILLS LUCY	1.00								3.	
	<u> </u>	-	I	l	1	l		ا م ا	•	0.
NATIONAL BOARD MEMBER		Х	l					0.	0.	[]

Key Er B) age urs er ek any s for ted cations ow e) 0 0	stee or director		(C Posi	tion hat			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
age ars er ek any s for ted ations ow e)	or director	neck	(C Posi all t	tion hat	appl		(D) Reportable compensation from	(E) Reportable compensation from related	Estimated amount of
age urs er ek any s for ted cations ow e)	or director	neck	Posi all t	tion hat	appl	у)	Reportable compensation from	Reportable compensation from related	Estimated amount of
er ek any s for ted cations ow e)	or director				m	y)	from	from related	
ek any s for ted ations ow e)	Individual trustee or director	Institutional trustee	ficer	оуее	ted employee	-			other
any s for ted cations ow e)	Individual trustee or director	Institutional trustee	ficer	oyee	ted employee		the I		0010
s for ted ations ow e)	Individual trustee or director	Institutional trustee	ficer	oyee	ted emplo			organizations	compensation
ted cations ow e)	Individual trustee or di	Institutional trustee	ficer	oyee	ted		organization	(W-2/1099-MISC)	from the
eations ow e)	Individual trustee	Institutional trust	ficer	oyee	ಡ		(W-2/1099-MISC)		organization
ow e) • 0 0	Individual tr	Institutional	ficer	§	suadu				and related
e) • 0 0	Individ	Institu	ficer	힐	tcom	_			organizations
.00	-		=	Key employee	lighes	Former			
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.00	х						0.	0.	0.
• • •	22	Н	\dashv				0.		
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Form 990 DAMES OF	AMERICA	1							53-022	4364
Part VII Section A. Officers, Directors, Tru	stees, Key En	nplo	yee	s, aı	nd F	ligh	est	Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos	ition	1		Reportable	Reportable	Estimated
	hours	(cl	heck	all :	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	7				loyee		the	organizations	compensation
	(list any hours for	lirecto				l em p		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	9e or 0	stee			satec		(88-2/1099-181130)		and related
	organizations	Individual trustee or director	Institutional trustee		yee	Highest compensated employee				organizations
	below	idual	tution	ъ	Key employee	estoc	er			
	line)	Indi	Insti	Officer	Key	High	Former			
(67) MRS. GRAHAM BERKELEY WILLIAMS	1.00									
VP OF REGION 1		Х						0.	0.	0.
(68) MRS. RICHARD LEE WILSON	1.00									
NATIONAL BOARD MEMBER		Х						0.	0.	0.
(69) MRS. STEVEN B. WIRTS	1.00									
NATIONAL BOARD MEMBER		Х						0.	0.	0.
								_		
						١,				
							1			
						-	-			
				,						
Total to Part VII, Section A, line 1c										

Form 990 (2021) DAMES O
Part VIII Statement of Revenue

		Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
			,	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
SS	1 :	a Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	1 4	b Membership dues 1b					
Ę g	'						
ts, Ar	(
ij Gi	•		249,983.				
ns, Sim	•	Government grants (contributions)	249,905.				
utio er (1	f All other contributions, gifts, grants, and	1 104 500				
ĕŧ		similar amounts not included above 1f	1,184,522.				
ont od (9	Noncash contributions included in lines 1a-1f		4 404 505			
<u>0 p</u>	ŀ	n Total. Add lines 1a-1f	_	1,434,505.			
			Business Code				
e	2 8	MEMBERSHIP DUES	900099	601,613.	601,613.		
Program Service Revenue	ŀ	SPECIAL PROJECT INCOME	900099	149,140.	149,140.		
Sen	(·					
am	(d					
oga	•	e					
P	1	f All other program service revenue					
	9	Total. Add lines 2a-2f	>	750,753.			
	3	Investment income (including dividends, intere					
		other similar amounts)		137,624.			137,624.
	4	Income from investment of tax-exempt bond p					
	5	Royalties	-				
		(i) Real	(ii) Personal				
	6 :	6a Gross rents 6a 408,430.					
		b Less: rental expenses 6b 106,181.					
		c Rental income or (loss) 6c 302,249.					
		d Net rental income or (loss)		302,249.	302,249.		
		a Gross amount from sales of (i) Securities	(ii) Other		, , , , , , , , , , , , , , , , , , , ,		
	, ,	assets other than inventory 7a 2,421,167.	(, c				
		b Less: cost or other basis					
ø.							
Ď							
eve		, siam or (1999)		638,536.			638,536.
her Revenue		d Net gain or (loss)	P	030,330.			030,330.
	8 8	a Gross income from fundraising events (not					
Ò		including \$ of					
		contributions reported on line 1c). See					
	_	Part IV, line 18					
		b Less: direct expenses8b					
		Net income or (loss) from fundraising events	D				
	9 a	a Gross income from gaming activities. See					
		Part IV, line 199a					
		b Less: direct expenses9b					
	(Net income or (loss) from gaming activities	<u> </u>				
	10 a	a Gross sales of inventory, less returns					
		and allowances 10a	23,508.				
	ŀ	b Less: cost of goods sold10b	-8,632.				
	•	Net income or (loss) from sales of inventory		32,140.	32,140.		
_ω			Business Code				
ño 6	11 a	MISCELLANEOUS	900099	6,206.	6,206.		
Miscellaneous Revenue	ŀ	b					
eve							
lisc		d All other revenue					
2	_	e Total. Add lines 11a-11d	>	6,206.			
	12	Total revenue. See instructions	>	3,302,013.	1,091,348.	0.	776,160.

Part IX | Statement of Functional Expenses

Total expenses Program service contributes and other assistance to domestic organizations and domestic governments. See Part IV, line 21	Check if Schedule O contains a respon	nse or note to any line in t	this Part IX		X
and domestic governments. Size Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 25 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 25 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 25 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 27 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 27 Grants and sand wages Compensation for furner officers, directors, trustees, and tele yemployees Compensation not included above to disqualified persons (as defined under section 4980(IVI)) and persons described in section 4980(IVI) and perso	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service		Fundraising
Grants and other assistance to demostic individuals. See Part IV, line 17 and 16 and 1	•	119,522.	119,522.		
Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trusteses, and key employees Compensation of current officers, directors, trusteses, and key employees Compensation of current officers, directors, trusteses, and key employees Compensation of current officers, directors, trusteses, and key employees Compensation of current officers, directors, trusteses, and key employees Compensation of current officers, directors, trusteses, and key employees Compensation of current officers, directors, trusteses, and key employees Compensation of current officers, directors, trusteses, and key employees Compensation of current officers, directors, trusteses, and key employees Compensation of current officers, directors, trusteses, and key employees Compensation of current officers, directors, trusteses, and key employees Compensation of current officers, directors, trusteses, and key employees Compensation of current officers, directors, trusteses, and wages Compensation of current officers, directors, trusteses, and additional persons described in section 4958(r)(1)) and persons described in section 4958(r)(1) and persons described in section 4958(r)(1) and 4952 point 49, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20		293.080.	293.080.		
Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 156,308. 78,154. 39,077. 39,07 39,07 Compensation not included above to disqualified persons (ascified under section 4986((1)) and persons discribed in scrion 4966((3)(8) Chris response discribed in scrion 49	3 Grants and other assistance to foreign organizations, foreign governments, and foreign	230,000	230,000		
Compensation of current officers, directors, trustees, and key employees 156,308. 78,154. 39,077. 39,07 Compensation not included above to disqualified persons (as defined under section 4988(f(1)) and persons described in section 4988(f(1)) and 498					
trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(f)(1) and persons described in section 4958(c)(3)(8) Chter salaries and wages Chter salaries and wages Section 401(k) and 401(k) and 401(k) and 401(k) and 401(k) employer contributions (include section plan accrusts and tontributions (include section 4958(c)(3)(8) Chter employee benefits 70,908. 40,927. 23,783. 6,19 Paryrol taxes 79,027. 45,614. 26,506. 6,90 Fees for services (nonemployees): a Management b Legal Checounting Check (I line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on 5ch.0, and verticing and promotion 71,432. 41,230. 23,959. 6,24 Column (A), amount, list line 11g expenses on 5ch.0, and verticing and promotion 71,432. 41,230. 23,959. 6,24 Column (A), amount, list line 11g expenses on 5ch.0, and verticing and promotion 71,432. 41,230. 23,959. 6,24 Cortice expenses on covered above, (list miscellaneus expenses on line 24c. If					
Compensation not included above to disqualified persons (as defined under section 498(t)(1)) and persons (as defined under section 498(t)(1)) and persons described in section 498(t)(3)(8) 763,760	•	156,308.	78,154.	39,077.	39,077
Pension plan accruals and contributions (include section 40 (K) and 402(b) employer contributions) Other employee benefits Payroll taxes Fees for services (nonemployees): A Management B Legal C Accounting C Accounting C Accounting P Professional fundraising services. See Part IV, line 17 (Investment management fees Coulumn (A), amount, list line 11 g expenses on Sch O.) Advertising and promotion Office expenses Indirect or entertainment expenses for any federal, state, or local public officials C Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance D DUES AND SUBSCRIPTIONS TAXES AND LICENSES Total functional expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and		,	,	,
Section 401(k) and 403(b) employer contributions) Other employee benefits 70,908. 40,927. 23,783. 6,19 Payroll taxes 79,027. 45,614. 26,506. 6,90 Fees for services (nonemployees): a Management b Legal	7 Other salaries and wages	763,760.	452,901.	269,516.	41,343
Other employee benefits 70,908. 40,927. 23,783. 6,19 Payroll taxes 79,027. 45,614. 26,506. 6,90 Fees for services (nonemployees): a Management b Legal CACCOUNTING 94,594. 54,599. 31,727. 8,26 d Lobbying 94,594. 44,230. 23,959. 5,24 d Lobby	•				
Payroll taxes		70,908.	40,927.	23,783.	6,198
Fees for services (nonemployees): a Management b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) Advertising and promotion 71, 432. 41, 230. 23, 959. 6, 24 Office expenses 110, 722. 63, 909. 37, 136. 9, 67 Information technology 91, 507. 51, 538. 31, 706. 8, 26 Royalties Occupancy 35, 600. 20, 548. 11, 940. 3, 11 Travel 68, 442. 39, 505. 22, 955. 5, 98 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule (D), amount, list line 24e expenses on Schedule (D) Agricultural of the expenses on Schedule (D) Agricu		79,027.	45,614.	26,506.	6,907
b Legal c Accounting d Lobbying 94,594. 54,599. 31,727. 8,26 d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees 49,905. 9	1 Fees for services (nonemployees):				
Quantified Qua	b Legal				
d Lobbying Professional fundraising services. See Part IV, line 17 for Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) Advertising and promotion Advertising and promotion Office expenses 110,722, 63,909, 37,136, 9,67 Information technology Royattes Occupancy Travel Occupancy Travel Advertising and promotion Occupancy Advertising and promotion Advertising and promotion Advertising and promotion Advertising and promotion Occupancy Advertising and promotion Advertising and promotion Advertising and promotion Occupancy Advertising and promotion Advertising and promotion Advertising and promotion Occupancy Advertising and promotion Advertising and promotion Occupancy Advertising and promotion Advertising and fundraising solicitation. Advertising and promotion Advertising and fundraising solicitation. Advertising and fundraising solicitation.		94,594.	54,599.	31,727.	8,268
Investment management fees 49,905. 49,905.	d Lobbying				
Column (A), amount, list line 11g expenses on Sch O. 465,595. 268,738. 156,161. 40,69	•	49,905.	49,905.		
Office expenses Information technology 91,507. 51,538. 31,706. 8,26	-				40,696
Information technology 91,507. 51,538. 31,706. 8,26	2 Advertising and promotion				
Royalties	3 Office expenses				
35,600 20,548 11,940 3,11	1 Information technology	91,507.	51,538.	31,706.	8,263
Travel 68,442. 39,505. 22,955. 5,98 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) a OTHER EXPENSES DUES AND SUBSCRIPTIONS TAXES AND LICENSES Of Interest All other expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	5 Royalties				
Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) DUES AND SUBSCRIPTIONS TAXES AND LICENSES All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	6 Occupancy				3,112
Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25e column (A), amount, list line 24e expenses on Schedule 0.) a OTHER EXPENSES DUES AND SUBSCRIPTIONS C TAXES AND LICENSES All other expenses Total functional expenses. Add lines 1 through 24e All other expenses. Total functional expenses. Add lines 1 through 24e educational campaign and fundraising solicitation.	Payments of travel or entertainment expenses	68,442.	39,505.	22,955.	5,982
Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Depreciation, depletion, and amortization Depreciation, depletion, and amortization Insurance Depreciation, depletion, and amortization Depreciation, depletion, and amortization Depreciation, depletion, and amortization Insurance Depreciation, depletion, and amortization Depreciation, depletion, and amortization Insurance Depreciation, depletion, and amortization Depreciation, depletion, depletion, and amortization Depreciation, dependence of the properties of the properties of the properties of the		54 172	21 269	19 160	1 725
Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) a OTHER EXPENSES b DUES AND SUBSCRIPTIONS c TAXES AND LICENSES d All other expenses Total functional expenses. Add lines 1 through 24e All other expenses. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.		J#,1/4•	JI, 200•	10,109.	4,735
Depreciation, depletion, and amortization Insurance Insurance Depreciation, depletion, and amortization Insurance Depreciation, and amortization Insurance Depreciation, and amortization Insurance Depreciation, and amortization Insurance Depreciation, and Insurance Depreciation an					
Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) a OTHER EXPENSES b DUES AND SUBSCRIPTIONS c TAXES AND LICENSES d All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.					21,498
above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) a OTHER EXPENSES b DUES AND SUBSCRIPTIONS c TAXES AND LICENSES d All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.		22,814.	13,168.	7,652.	1,994
a OTHER EXPENSES b DUES AND SUBSCRIPTIONS c TAXES AND LICENSES d All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
TAXES AND LICENSES 9,281. 5,357. 3,113. 81 All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	a OTHER EXPENSES				963
d All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.					846
All other expenses Total functional expenses. Add lines 1 through 24e 2,823,313. 1,823,866. 792,834. 206,61 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.		9,281.	5,357.	3,113.	811
Total functional expenses. Add lines 1 through 24e 2,823,313. 1,823,866. 792,834. 206,61 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.					
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	•	2,823,313.	1,823,866.	792,834.	206,613
	6 Joint costs. Complete this line only if the organization	, , , , , ,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	.,
	educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

Form **990** (2021)

Part X Balance Sheet

	ILV	balance Sneet					
		Check if Schedule O contains a response or not	e to any	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,182,592.	1	1,668,647.
	2	Savings and temporary cash investments Pledges and grants receivable, net			847,000.	2	890,228.
	3				1,116,098.	3	887,722.
	4	Accounts receivable, net			295.	4	2,555.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst	antial c	ontributor, or 35%			
		controlled entity or family member of any of thes	e perso	ons		5	
	6	Loans and other receivables from other disqualit	ied per	sons (as defined			
		under section 4958(f)(1)), and persons described	l in sect	tion 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			11,436.	8	30,660.
ğ	9	Prepaid expenses and deferred charges			37,503.	9	109,059.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		7,587,846.	A		
	b	Less: accumulated depreciation	10b	4,237,242.	3,415,498.	10c	3,350,604.
	11	Investments - publicly traded securities			10,650,236.	11	8,976,135.
	12	Investments - other securities. See Part IV, line 1	1			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equa			17,260,658.	16	15,915,610.
	17	Accounts payable and accrued expenses			89,945.	17	276,097.
	18	· /		642 442	18		
	19	Deferred revenue			643,118.	19	774,338.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I				21	
es	22	Loans and other payables to any current or form					
Ħ		trustee, key employee, creator or founder, subst					
Liabilities		controlled entity or family member of any of thes	_			22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	17-24).	. Complete Part X		05	
	06	of Schedule D			733,063.	25	1,050,435.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, che			755,005.	26	1,030,433.
S			ck nere				
nce	27	and complete lines 27, 28, 32, and 33. Net assets without donor restrictions			12,556,022.	27	10,683,515.
Net Assets or Fund Balances	28	Net assets with donor restrictions Net assets with donor restrictions			3,971,573.	28	4,181,660.
	20	Organizations that do not follow FASB ASC 9			3,371,373	20	4,101,000.
		and complete lines 29 through 33.	oo, che	ck liefe			
þ	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or ed				30	
ASS	31	Retained earnings, endowment, accumulated in				31	
et/	32	Total net assets or fund balances			16,527,595.	32	14,865,175.
	102	Total not assets of fully balances			,,	UZ	, ,

Form **990** (2021)

Form **990** (2021)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		02,0	
2	Total expenses (must equal Part IX, column (A), line 25)	2		23,3	
3	Revenue less expenses. Subtract line 2 from line 1	3		78,7	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	16,5	<u>27,5</u>	<u> 95.</u>
5	Net unrealized gains (losses) on investments	5	-2,1	<u>41,1</u>	20.
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 on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	14,8	65,1	.75.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	3	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		21	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	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?		20	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin				
	Act and OMB Circular A-133?	-	3	a 📗	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		ા	, [

132012 12-09-21

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

THE NATIONAL SOCIETY OF THE COLONIAL

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

DAMES OF AMERICA 53-0224364 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. 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. 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. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other vour governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

DAMES OF AMERICA

53-0224364 Page 2

Part II	Suppor	rt Schedule for Org	ganizations	Described in	Sections	170(b)(1)(A)(iv) a	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.)

<u> </u>	Stion A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants ")						
0	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						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
	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)						
	Public support. Subtract line 5 from line 4.						
	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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			V			
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10	ata (analization II				40	
	Gross receipts from related activities,			iourth or fifth town		01(a)(2)	
13	First 5 years. If the Form 990 is for the	J		<i></i>		()()	▶□
Sec	organization, check this box and stoperion C. Computation of Public						·········· P
	Public support percentage for 2021 (li			column (f))		14	%
	Public support percentage from 2020					15	<u>%</u>
	33 1/3% support test - 2021. If the co						
	stop here. The organization qualifies						
b	33 1/3% support test - 2020. If the co		•				
-	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts	-					
	meets the facts-and-circumstances te				raani-ation		\sim
b	10% -facts-and-circumstances test	-	•	*	-		
	more, and if the organization meets th	-					
	organization meets the facts-and-circu						>
18	Private foundation. If the organization		-				
		·	·		·	0 - 1 1 - 1 - 4	(Farm 000) 0001

Schedule A (Form 990) 2021

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	qualify under the tests listed better A. Public Support	elow, please comp	lete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and	(a) 2017	(D) 2016	(6) 2019	(a) 2020	(e) 2021	(i) rotai
'	membership fees received. (Do not						
	include any "unusual grants.")	1873228.	1788853.	1987831.	1497905.	1184522.	8332339.
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	857,738.	940,814.	743,031.	688,671.	774,261.	4004515.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization'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	2730966.	2729667.	2730862.	2186576.	1958783.	12336854.
	Amounts included on lines 1, 2, and				7		
	3 received from disqualified persons	335,600.	346,400.	171,000.	298,788.	594,565.	1746353.
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			6			0.
С	Add lines 7a and 7b	335,600.	346,400.	171,000.	298,788.	594,565.	1746353.
	Public support. (Subtract line 7c from line 6.)	-				-	10590501.
Sec	tion B. Total Support						•
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6	2730966.	2729667.	2730862.	2186576.	1958783.	12336854.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	370,818.	373,150.	229,762.	252,099.	546,054.	1771883.
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	370,818.	373,150.	229,762.	252,099.	546,054.	1771883.
	Net income from unrelated business activities not included on 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.)	20.	3,220.	714.	28.	6,206.	10,188.
13	Total support. (Add lines 9, 10c, 11, and 12.)	3101804.	3106037.	2961338.	2438703.	2511043.	14118925.
	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third. 1	ourth, or fifth tax v	ear as a section 5	01(c)(3) organizatio	on,
				•		. , . ,	
Sec	ction C. Computation of Publi	c Support Per	centage				<u>, ————</u>
	Public support percentage for 2021 (I			olumn (f))		15	75.01 %
16	Public support percentage from 2020					16	78.71 %
	ction D. Computation of Inves					i - I	70
17	Investment income percentage for 20			ne 13. column (f))		17	12.55 %
18	Investment income percentage from			10, 001011111 (1))		18	10.89 %
	33 1/3% support tests - 2021. If the	•					
ıya							. 37
	more than 33 1/3%, check this box ar						
b	33 1/3% support tests - 2020. If the line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	is box and see ins	tructions	
						0	(Form 000) 2021

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Schedule A (Form 990) 2021

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 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.
- 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).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **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.
- 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.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **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.
- 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **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.)

		Yes	No
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-	10a		
	10b		
مار		n 990)	2021

Par	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		<u> </u>
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			l
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			l
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			l
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	_		
_	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations			
	and or type in earpporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	IVO
•	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			l
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations	•		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			l
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			l
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			l
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	_		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
		1		
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction of the organization satisfied the Activities Test. Complete line 2 below.	115).		
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 governmental entity (see	instruction	101	
2	Activities Test. Answer lines 2a and 2b below.	- IIIStruction	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,			l
	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 on line 2a, above, 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			l
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b				
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b	i l	1

53-0224364 Page 6

Part V Ty	pe III Non-Functionally Integrated 509(a)(3) Supporting	ng Orga	nizations	
1 Che	eck here if the organization satisfied the Integral Part Test as a qualifying	ng trust or	n Nov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	other Type III non-functionally integrated supporting organizations mus		· ·	
Section A - Adj	usted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-	term capital gain	1		
2 Recoverie	s of prior-year distributions	2		
3 Other gros	ss income (see instructions)	3		
4 Add lines	1 through 3.	4		
5 Depreciat	ion and depletion	5		
6 Portion of	operating expenses paid or incurred for production or			
collection	of gross income or for management, conservation, or			
maintenar	nce of property held for production of income (see instructions)	6		
7 Other exp	enses (see instructions)	7		
8 Adjusted	Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Min	nimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate	e fair market value of all non-exempt-use assets (see			
instruction	ns for short tax year or assets held for part of year):			
a Average n	nonthly value of securities	1a		
b Average n	nonthly cash balances	1b		
c Fair marke	et value of other non-exempt-use assets	1c		
d Total (add	d lines 1a, 1b, and 1c)	1d		
e Discount	claimed for blockage or other factors			
(explain in	detail in Part VI):			
2 Acquisitio	n indebtedness applicable to non-exempt-use assets	2		
3 Subtract I	ine 2 from line 1d.	3		
4 Cash deel see instru	med held for exempt use. Enter 0.015 of line 3 (for greater amount, ctions).	4		
	of non-exempt-use assets (subtract line 4 from line 3)	5		
	ne 5 by 0.035.	6		
	es of prior-year distributions	7		
8 Minimum	Asset Amount (add line 7 to line 6)	8		
Section C - Dis	tributable Amount			Current Year
1 Adjusted	net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85		2		
3 Minimum	asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter grea	ater of line 2 or line 3.	4		
5 Income ta	x imposed in prior year	5		
6 Distributa	able Amount. Subtract line 5 from line 4, unless subject to			
	sy temporary reduction (see instructions).	6		
$\overline{}$	eck here if the current year is the organization's first as a non-functional	ally integra	ted Type III supporting orga	nization (see

Schedule A (Form 990) 2021

instructions).

Par	rt V Type III Non-Functionally Integrated 50	9(a)(3) Supporting Orga	nizations (continued)	
<u>Secti</u>	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e	1		
2	Amounts paid to perform activity that directly furthers exe			
	organizations, in excess of income from activity	2		
3	Administrative expenses paid to accomplish exempt purport	s 3		
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required -	provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which	the organization is responsive		
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2021 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2021			
<u>a</u>	From 2016			
<u>b</u>	From 2017			
<u>C</u>	From 2018			
d	From 2019			
<u> e </u>	From 2020			
	Total of lines 3a through 3e			
	Applied to underdistributions of prior years			
	Applied to 2021 distributable amount			
	Carryover from 2016 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2021 distributable amount			
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greate			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h			
Ü	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
•	and 4c.			
8	Breakdown of line 7:			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			
	Excess from 2020			
	Excess from 2021			

Schedule A (Form 990) 2021

THE NATIONAL SOCIETY OF THE COLONIAL DAMES OF AMERICA

53-022<u>4364 Page 8</u> DAMES OF AMERICA Schedule A (Form 990) 2021 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part VI Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule A (Form 990) 2021

Schedule A

Payments from Disqualified Persons Included on Part III, Line 7a

2021

** Do Not File **

*** Not Open to Public Inspection ***

Payer's Name	2017 Amount	2018 Amount	2019 Amount	2020 Amount	2021 Amount
ESTIMATE BOD CONTRIBUTIONS	80,000.	80,000.	80,000.	218,788.	156,780.
STUART C. COBB	255,600.	266,400.	91,000.	80,000.	0.
EDITH STICKNEY	0.	0.	0.	0.	437,785.
Total to Schedule A, Part III, Line 7a	335,600.	346,400.	171,000.	298,788.	594,565.

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Name of the organization

THE NATIONAL SOCIETY OF THE COLONIAL DAMES OF AMERICA

Employer identification number

53-0224364

Organization type (check one):							
Filers of	:	Section:					
Form 99	0 or 990-EZ	$\boxed{\textbf{X}}$ 501(c)(3) (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 99	0-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
Check if	your organization is	s covered by the General Rule or a Special Rule.					
Note: Or	nly a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General	Rule						
X		i filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special	Rules						
	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.					
	contributor, during literary, or education	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, and purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.					
	year, contributions is checked, enter h purpose. Don't con	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., etc., contributions totaling \$5,000 or more during the year for some exclusively to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year					
answer "	No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify grequirements of Schedule B (Form 990).					

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990) (2021)

DAMES OF AMERICA Schedule D (Form 990) 2021

Par	t XI Reconciliation of Revenue per Audited Financial Statements \	With Revenue per Re	turn.					
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.							
1	Total revenue, gains, and other support per audited financial statements		1	1,110,988.				
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:							
а		a -2,141,120.						
b		tb						
С		lc l						
d		ld .						
е	Add lines 2a through 2d	•	2e	-2,141,120.				
3	Subtract line 2e from line 1		3	3,252,108.				
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:							
а		49,905.						
b		b						
С	Add lines 4a and 4b	•	4c	49,905.				
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	3,302,013.				
	rt XII Reconciliation of Expenses per Audited Financial Statements	With Expenses per F	Retur					
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.							
1	Total expenses and losses per audited financial statements		1	2,773,408.				
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			, ,				
a	1	a						
b		b lb	-					
c		c	-					
d		d d						
e	Add lines 2a through 2d		2e	0.				
3	Subtract line 2e from line 1		3	2,773,408.				
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:							
a .		49,905.						
b		b						
	Add lines 4a and 4b	L	4c	49,905.				
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	2,823,313.				
Pai	rt XIII Supplemental Information.							
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lin	es 1h and 2h: Part V line 4	· Part `	X line 2: Part XI				
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional		, , , , , ,	Λ, ΙΙΙΟ Σ, Γαιτ ΛΙ,				
	2d and 45, and 1 are xiii, into 2d and 45. Also complete this part to provide any additional	information.						
PAF	RT III, LINE 1A:							
THE	E COLLECTIONS, WHICH WERE ACQUIRED THROUGH PUR	RCHASES AND CO	NTR	IBUTIONS				
SI	NCE THE SOCIETY'S INCEPTION, ARE NOT RECOGNIZE	ED AS ASSETS O	N T	HE				
STATEMENT OF FINANCIAL POSITION. PURCHASES OF COLLECTION ITEMS ARE								
KE(CORDED IN THE YEAR IN WHICH THE ITEMS ARE ACQU	DIKED AS DECKE	ASE	D TIN				
UNE	RESTRICTED NET ASSETS, OR AS DECREASES IN TEM	PORARILY OR PE	RMA	NENTLY				

RECOVERIES ARE REFLECTED AS INCREASES IN THE APPROPRIATE NET ASSET CLASSES.

THE FINANCIAL STATEMENTS. PROCEEDS FROM DEACCESSIONS OR INSURANCE

RESTRICTRED NET ASSETS IF THE ASSETS USED TO PURCHASE THE ITEMS ARE

RESTRICTED BY DONORS. CONTRIBUTED COLLECTION ITEMS ARE NOT REFLECTED ON

Part XIII Supplemental Information (continued)

PART III, LINE 4:

THE SOCIETY COLLECTS AND PRESERVES MANUSCRIPTS, RELICS, AND MEMENTOS OF BYGONE DAYS TO EDUCATE FELLOW CITIZENS ABOUT AND CREATE INTEREST IN OUR COLONIAL HISTORY.

PART V, LINE 4:

THE ORGANIZATION'S ENDOWMENT FUNDS ARE USED TO SATISFY THE RESTRICTIONS THAT HAVE BEEN PLACED ON THOSE FUNDS.

PART X, LINE 2:

THE SOCIETY FOLLOWS THE FINANCIAL ACCOUNTING STANDARDS BOARD ACCOUNTING STANDARDS CODIFICATION (FASB ASC), WHICH PROVIDES GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ORGANIZATION'S FINANCIAL STATEMENTS. THE GUIDANCE PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, AND ALSO PROVIDES GUIDANCE ON DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, DISCLOSURE, AND TRANSITION. AS OF AUGUST 31, 2022, THE SOCIETY HAD NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN ITS FINANCIAL STATEMENTS.

THE SOCIETY'S POLICY IS TO RECOGNIZE INTEREST AND PENALTIES ON TAX POSITIONS RELATED TO ITS UNRECOGNIZED TAX BENEFITS IN INCOME TAX EXPENSE IN THE FINANCIAL STATEMENTS. NO INTEREST AND PENALTIES WERE RECORDED DURING THE YEAR ENDED AUGUST 31, 2022.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

COLLECTION ACQUISITIONS

Schedule D (Form 990) 2021

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

2021
Open to Public Inspection

OMB No. 1545-0047

THE NATIONAL SOCIETY OF THE COLONIAL **Employer identification number** Name of the organization 53-0224364 DAMES OF AMERICA Part I **General Information on Grants and Assistance** 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 X Yes criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) FRIENDS OF SULGRAVE MANOR 51-0244162 501C3 50,000 0.FMV CONTRIBUTION 52-1284368 501C3 16,000 GUNSTON HALL REGENTS FUND 0.FMV CONTRIBUTION Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2021

Page 2

Schedule I (Form 990) 2021

Part III

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

(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 noncash assistance
12	18,000.	0.		
127	215,900.	0.		
1	6,100.	0.		
4	20,000.	0.		
	recipients 12	12 18,000. 127 215,900. 1 6,100.	recipients cash grant cash assistance 12 18,000. 0. 127 215,900. 0. 1 6,100. 0.	12 18,000. 0. 127 215,900. 0. 1 6,100. 0.

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

TO THE EDUCATIONAL INSTITUTION WHERE THE AWARDEES ARE ENROLLED.

PART I, LINE 2:

GRANTS AWARDED TO HIGH SCHOOL STUDENTS TO ATTEND THE WASHINGTON WORKSHOPS

CONGRESSIONAL SEMINAR ARE MONITORED BY NSCDA SOCIETY MEMBERS WHO ARE

PRESENT WITH THE GROUP OF AWARDEES IN WASHINGTON FOR THE SPONSORED EVENTS

AND ACTIVITIES. ATTENDANCE IS TAKEN BY SOCIETY MEMBERS AND ALL PAYMENTS ARE

MADE DIRECTLY TO THE WASHINGTON WORKSHOPS FOUNDATION ON BEHALF OF THE

AWARDEES. TRAVEL EXPENSES ARE REIMBURSED TO SOME ATTENDEES UPON REQUEST.

GRANTS AWARDED FOR THE INDIAN NURSE SCHOLARSHIP PROGRAM ARE MADE DIRECTLY

THE

Schedule I (Form 990)

16490131 759370 14076.0000

SCHEDULE O (Form 990)

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 Form 990-EZ.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

2021
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

THE NATIONAL SOCIETY OF THE COLONIAL DAMES OF AMERICA

Employer identification number 53-0224364

FORM 990, PART VI, SECTION A, LINE 6:

THE SOCIETY'S MEMBERS ARE MADE UP OF OVER 15,000 MEMBERS FROM THE FORTY-FOUR STATE SOCIETIES AROUND THE NATION.

FORM 990, PART VI, SECTION A, LINE 7A:

THE DIRECTORS ARE ELECTED BY THE VOTING MEMBERS OF THE SOCIETY.

FORM 990, PART VI, SECTION A, LINE 7B:

DECISIONS AND ACTIONS OF THE SOCIETY'S NATIONAL BOARD WHICH MIGHT AFFECT

THE SOCIETY'S CONSTITUTION ARE SUBJECT TO APPROVAL OF THE BIENNIAL COUNCIL.

THE BIENNIAL COUNCIL INCLUDES FIVE DELEGATES FROM EACH COLONIAL STATE PLUS

THE DISTRICT OF COLUMBIA AND ONE DELEGATE FROM EACH ASSOCIATE STATE.

FORM 990, PART VI, SECTION B, LINE 11B:

DRAFT COPIES OF THE FORM 990 ARE PROVIDED TO PRESIDENT, TREASURER,

ASSISTANT TREASURER, FINANCE COMMITTEE CHAIRMAN, EXECUTIVE DIRECTOR AND THE

AUDIT COMMITTEE FOR REVIEW PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE SOCIETY CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH ITS CONFLICT
OF INTEREST POLICY BY HAVING EACH MEMBER OF THE NATIONAL BOARD AND THE

DUMBARTON HOUSE BOARD SIGN THE CONFLICT OF INTEREST DISCLOSURE FORM

ANNUALLY. THOSE FORMS ARE REVIEWED FOR POSSIBLE CONFLICTS OF INTEREST WHICH

ARE INVESTIGATED IF NEEDED.

FORM 990, PART VI, SECTION B, LINE 15A:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2021

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Name of the organization THE NATIONAL SOCIETY OF THE COLONIAL DAMES OF AMERICA	Employer identification number 53-0224364
BOARD SOURCE REFERENCES ARE USED TO ARRIVE AT PROPOSED SAI	LARY
RECOMMENDATIONS WHICH ARE DISCUSSED BY THE FINANCE COMMIT	TEE AND THE
EXECUTIVE COMMITTEE OF THE BOARD BEFORE APPROVAL.	
FORM 990, PART VI, SECTION C, LINE 19:	
DOCUMENTS ARE AVAILABLE UPON WRITTEN REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
PRINTING AND PUBLICATIONS:	
PROGRAM SERVICE EXPENSES	28,935.
MANAGEMENT AND GENERAL EXPENSES	16,814.
FUNDRAISING EXPENSES	4,382.
TOTAL EXPENSES	50,131.
FACILITIES AND GROUND MAINTENANCE:	
PROGRAM SERVICE EXPENSES	163,398.
MANAGEMENT AND GENERAL EXPENSES	94,949.
FUNDRAISING EXPENSES	24,744.
TOTAL EXPENSES	283,091.
CONSULTANTS:	
PROGRAM SERVICE EXPENSES	76,405.
MANAGEMENT AND GENERAL EXPENSES	44,398.
FUNDRAISING EXPENSES	11,570.
TOTAL EXPENSES	132,373.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	465,595.
FORM 990, PART XII, LINE 2C:	
132212 11-11-21	Schedule O (Form 990) 202

Schedule O (Form 990) 2021	Page 2
Name of the organization THE NATIONAL SOCIETY OF THE COLONIAL DAMES OF AMERICA	Employer identification number 53-0224364
HE SOCIETY HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBII	ITY FOR
OVERSIGHT OF THE AUDIT AND SELECTION OF THE PUBLIC ACCOUNT	ANT. THE
PROCESS HAS NOT CHANGED SINCE PRIOR YEAR.	
FROCESS HAS NOT CHANGED SINCE FRIOR TEAR.	