

Form **990**

**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

**2017**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A** For the 2017 calendar year, or tax year beginning **JUL 1, 2017** and ending **JUN 30, 2018**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>THE NATIONAL MUSEUM OF WOMEN IN THE ARTS</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>1250 NEW YORK AVENUE NW</b> City or town, state or province, country, and ZIP or foreign postal code <b>WASHINGTON, DC 20005</b> <b>F</b> Name and address of principal officer: <b>SUSAN FISHER STERLING</b> <b>SAME AS C ABOVE</b>	<b>D</b> Employer identification number <b>52-1238810</b> <b>E</b> Telephone number <b>(202) 783-5000</b> <b>G</b> Gross receipts \$ <b>22,219,929.</b> <b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <b>WWW.NMWA.ORG</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
<b>L</b> Year of formation: <b>1981</b>		<b>M</b> State of legal domicile: <b>DC</b>

**Part I Summary**

	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>SEE PART III, LINE 1.</b>	
Activities & Governance	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) .....	<b>41</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) .....	<b>40</b>
	<b>5</b> Total number of individuals employed in calendar year 2017 (Part V, line 2a) .....	<b>107</b>
	<b>6</b> Total number of volunteers (estimate if necessary) .....	<b>114</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 .....	<b>4,262.</b>
	<b>7b</b> Net unrelated business taxable income from Form 990-T, line 34 .....	<b>39,364.</b>
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h) .....	<b>13,765,715.</b>
	<b>9</b> Program service revenue (Part VIII, line 2g) .....	<b>480,951.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....	<b>1,499,518.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....	<b>709,372.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	<b>16,455,556.</b>
Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....	<b>0.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) .....	<b>0.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....	<b>3,624,291.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) .....	<b>258,166.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>771,948.</b>	
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) .....	<b>5,787,849.</b>
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....	<b>9,670,306.</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12 .....	<b>6,785,250.</b>	
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16) .....	<b>71,160,506.</b>
	<b>21</b> Total liabilities (Part X, line 26) .....	<b>1,620,213.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 .....	<b>69,540,293.</b>

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer <b>SUSAN FISHER STERLING, EXECUTIVE DIRECTOR</b> Type or print name and title	Date
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>TERRI MCKNIGHT, CPA</b>	Preparer's signature Date
	Firm's name ▶ <b>GELMAN, ROSENBERG &amp; FREEDMAN</b> Firm's address ▶ <b>4550 MONTGOMERY AVE SUITE 650N BETHESDA, MD 20814-2930</b>	Check if self-employed <input type="checkbox"/> PTIN <b>P00543022</b> Firm's EIN ▶ <b>52-1392008</b> Phone no. (301) <b>951-9090</b>

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: THE MISSION OF THE NATIONAL MUSEUM OF WOMEN IN THE ARTS IS TO COLLECT, CONSERVE AND ELEVATE THE ACHIEVEMENTS OF WOMEN ARTISTS FROM ALL NATIONALITIES AND TO EDUCATE THE PUBLIC ON THEIR OUTSTANDING ACCOMPLISHMENTS. WE STRIVE TO ACCOMPLISH OUR MISSION BY NATIONAL AND

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [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 \$ 2,863,726. including grants of \$ ) (Revenue \$ 610,953.) EXHIBITIONS:

REVIVAL

JUNE 23 - SEPTEMBER 10, 2017

SPECTACLE AND VISUAL ENCHANTMENT UNDERGIRD MUCH CONTEMPORARY ART, AND REVIVAL TAKES PART IN THAT IMPULSE. THIS DEBUT SHOW FOR NMWA'S 30TH ANNIVERSARY INCLUDES SCULPTORS AND PHOTO-BASED ARTISTS WHO USE SCALE, UNCONVENTIONAL MATERIALS, AND PROVOCATIVE SUBJECTS TO ROUSE THE SPIRIT, FOCUSING THEIR ART ON DEEP-ROOTED EMOTIONS RELATED TO THE HUMAN EXPERIENCE-LOVE AND FEAR FOREMOST AMONG THEM. THEIR SCULPTURES OF PECULIAR CREATURES AND PHOTOGRAPHS AND MESMERIC VIDEOS OF WAYWARD CHILDREN AND THE FRAGMENTED HUMAN BODY TEST THE HOLD WE HAVE ON THE

4b (Code: ) (Expenses \$ 2,535,066. including grants of \$ ) (Revenue \$ 345,067.) OUTREACH:

MORE THAN 625 NATIONAL AND INTERNATIONAL CULTURAL INSTITUTIONS FROM SIX CONTINENTS AND 36 COUNTRIES PARTICIPATED IN THE THIRD YEAR OF THE NATIONAL MUSEUM OF WOMEN IN THE ARTS' AWARD-WINNING #5WOMENARTISTS SOCIAL MEDIA CAMPAIGN. NMWA'S YEAR-ROUND MISSION IS TO ADDRESS GENDER IMBALANCE IN THE ART WORLD, BUT EVERY MARCH-WOMEN'S HISTORY MONTH-THE MUSEUM HAS THE OPPORTUNITY TO CAPTURE THE ATTENTION OF A WIDER AUDIENCE TO HELP CELEBRATE WOMEN ARTISTS.

THE CAMPAIGN ASKS CULTURAL ORGANIZATIONS AND INDIVIDUAL SOCIAL MEDIA USERS THE QUESTION "CAN YOU NAME FIVE WOMEN ARTISTS?" IT AIMS TO HELP

4c (Code: ) (Expenses \$ 1,787,784. including grants of \$ ) (Revenue \$ 1,714.) CURATORIAL & LIBRARY:

AT JUNE 30, 2018, THE MUSEUM'S HOLDINGS AGGREGATED 5,626 WORKS BY OVER 1,200 WOMEN ARTISTS FROM THE SIXTEENTH CENTURY TO THE PRESENT. THESE WORKS CONSIST PRINCIPALLY OF PAINTINGS, DRAWINGS, SCULPTURES, PRINTS AND BOOKS.

DURING THE YEAR ENDING JUNE 30, 2018, THE MUSEUM ADDED 134 WORKS WITH AN APPRAISED VALUE OF APPROXIMATELY \$4,076,245.00 TO ITS HOLDINGS AND NO WORKS WERE DEACCESSED. NO MATERIAL AMOUNT OF THE COLLECTION ITEMS WERE DAMAGED, DESTROYED, OR LOST DURING THE YEAR.

4d Other program services (Describe in Schedule O.) (Expenses \$ 1,131,965. including grants of \$ ) (Revenue \$ 48,073.)

4e Total program service expenses 8,318,541.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors?</i> .....	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....		X
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....		X
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .....		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....	X	
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV</i> .....		X
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....	X	
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	X	
<b>b</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? <i>If "Yes," complete Schedule D, Part VII</i> .....		X
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII</i> .....		X
<b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX</i> .....		X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....		X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....		X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....		X
<b>15</b> 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? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....		X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....		X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> .....	X	
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....	X	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....		X
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....	X	
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	X	

**Note.** All Form 990 filers are required to complete Schedule O .....

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O check

Main table with columns for question number, description, sub-questions (1a-14b), and Yes/No columns. Includes entries for Form 1096, Form W-2G, Form W-3, and various IRS forms like 8886-T, 8899, 720, and 8282.

**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 in Schedule O. See instructions.

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	<b>1a</b> 41		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent		
	<b>1b</b> 40		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?	X	
<b>b</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?	X	
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>b</b>	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</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**

- 17** List the states with which a copy of this Form 990 is required to be filed **SEE SCHEDULE O**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 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.  
 Own website     Another's website     Upon request     Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **PAM AYRES - (202)783-5000**  
**1250 NEW YORK AVENUE NW, WASHINGTON, DC 20005**

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CINDY JONES PRESIDENT	30.00	X		X				0.	0.	0.
(2) GINA F. ADAMS FIRST VICE PRESIDENT	2.00	X		X				0.	0.	0.
(3) SUSAN GOLDBERG SECOND VICE PRESIDENT	1.00	X		X				0.	0.	0.
(4) WILHELMINA COLE HOLLADAY CHAIR OF THE BOARD	5.00	X		X				0.	0.	0.
(5) WINTON S. HOLLADAY VICE CHAIR OF THE BOARD	15.00	X		X				0.	0.	0.
(6) JOANNE C. STRINGER TREASURER	1.00	X		X				0.	0.	0.
(7) NANCY DUBER SECRETARY	6.00	X		X				0.	0.	0.
(8) MARY V. MOCHARY FINANCE CHAIR	3.00	X		X				0.	0.	0.
(9) AMY WEISS NOMINATIONS CHAIR	1.00	X		X				0.	0.	0.
(10) NANCY NELSON STEVENSON WORKS OF ART	20.00	X		X				0.	0.	0.
(11) MARCIA MYERS CARLUCCI BUILDING CHAIR	1.00	X		X				0.	0.	0.
(12) CAROL MATTHEWS LASCARIS PRESIDENT EMERITA & ENDOWMENT CHAIR	7.00	X		X				0.	0.	0.
(13) DANA J. SNYDER AT LARGE	2.00	X		X				0.	0.	0.
(14) JANICE LINDHURST ADAMS MEMBER	3.00	X						0.	0.	0.
(15) PAMELA G. BAILEY MEMBER	1.00	X						0.	0.	0.
(16) M. A. RUDA BRICKFIELD MEMBER	2.00	X						0.	0.	0.
(17) CHARLOTTE CLAY BUXTON MEMBER	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ROSE CARTER MEMBER	0.07	X						0.	0.	0.
(19) DIANE CASEY-LANDRY INVESTMENT COMMITTEE CHAIR	1.00	X						0.	0.	0.
(20) LIZETTE CORRO MEMBER	1.00	X						0.	0.	0.
(21) ASHLEY DAVIS MEMBER	0.75	X						0.	0.	0.
(22) BETTY B. DETTRE MEMBER	2.00	X						0.	0.	0.
(23) DEBORAH I. DINGELL MEMBER	1.00	X						0.	0.	0.
(24) MARTHA LYN DIPPELL MEMBER	5.00	X						0.	0.	0.
(25) KAREN DIXON FULLER MEMBER	1.30	X						0.	0.	0.
(26) MARION HOPKINS MEMBER	1.00	X						0.	0.	0.
<b>1b Sub-total</b>								0.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b>								1,097,868.	0.	79,143.
<b>d Total (add lines 1b and 1c)</b>								1,097,868.	0.	79,143.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 7

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
DANILLER + COMPANY, 3724 JEFFERSON ST., SUITE 302, AUSTIN, TX 78731	PROGRAM AND FUNDRAISING SERVICES	553,438.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 1

SEE PART VII, SECTION A CONTINUATION SHEETS



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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				
(27) SALLY L. JONES MEMBER	2.00	X						0.	0.	0.	
(28) MARLENE MCARTHUR MALEK MEMBER	1.00	X						0.	0.	0.	
(29) JACQUELINE BADER MARS MEMBER	4.00	X						0.	0.	0.	
(30) BONNIE MCELVEEN-HUNTER MEMBER	1.00	X						0.	0.	0.	
(31) PAMELA PARIZEK AUDIT COMMITTEE CHAIR	2.00	X						0.	0.	0.	
(32) MARJORIE ODEEN MEMBER	1.00	X						0.	0.	0.	
(33) JACKIE QUILLEN MEMBER	1.00	X						0.	0.	0.	
(34) SHEILA SHAFFER MEMBER	0.50	X						0.	0.	0.	
(35) KATHLEEN ELIZABETH SPRINGHORN MEMBER	10.00	X						0.	0.	0.	
(36) JESSICA H. STERCHI MEMBER	0.25	X						0.	0.	0.	
(37) MAHINDER TAK MEMBER	3.00	X						0.	0.	0.	
(38) ANNIE TOTAH MEMBER	1.00	X						0.	0.	0.	
(39) FRANCES LUESSENHOP USHER MEMBER	5.00	X						0.	0.	0.	
(40) RUTHANNA MAXWELL WEBER MEMBER	1.00	X						0.	0.	0.	
(41) ALICE WEST MEMBER	1.00	X						0.	0.	0.	
(42) SUSAN FISHER STERLING EXECUTIVE DIRECTOR	40.00			X				329,867.	0.	22,425.	
(43) PAMELA J. AYRES DEPUTY DIRECTOR	40.00			X				163,523.	0.	8,460.	
(44) ILENE GUTMAN DEPUTY DIRECTOR	40.00			X				150,706.	0.	7,808.	
(45) CHRISTINA KNOWLES DIRECTOR OF MEMBERSHIP	40.00					X		127,741.	0.	6,671.	
(46) KATHRYN WAT CHIEF CURATOR	40.00					X		109,117.	0.	11,088.	
Total to Part VII, Section A, line 1c .....											

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) DOUG BEAVER DIRECTOR OF SECURITY	40.00				X			112,513.	0.	11,548.
(48) LORI BRUBAKER DIR. OF SPECIAL EVENTS & COMM. REL.	40.00				X			104,401.	0.	11,143.
Total to Part VII, Section A, line 1c .....								1,097,868.		79,143.

**Part VIII Statement of Revenue**

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b> 2,396.				
	<b>b</b> Membership dues .....	<b>1b</b> 1,546,278.				
	<b>c</b> Fundraising events .....	<b>1c</b> 560,191.				
	<b>d</b> Related organizations .....	<b>1d</b>				
	<b>e</b> Government grants (contributions) .....	<b>1e</b> 374,990.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b> 7,041,434.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ .....	1,833,323.				
	<b>h Total.</b> Add lines 1a-1f .....	▶ 9,525,289.				
	<b>Program Service Revenue</b>	<b>2 a</b> MEMBERSHIP DUES .....	<b>Business Code</b> 900099	331,534.	331,534.	
<b>b</b> ADMISSIONS .....		900099	210,801.	210,801.		
<b>c</b> PROGRAM FEES .....		900099	45,038.	45,038.		
<b>d</b> TOURS .....		900099	16,568.	16,568.		
<b>e</b> RIGHTS & REPRODUCTIONS .....		900099	1,714.	1,714.		
<b>f</b> All other program service revenue .....		541800	300.		300.	
<b>g Total.</b> Add lines 2a-2f .....		▶ 605,955.				
<b>Other Revenue</b>		<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....	▶ 1,533,814.		3,962.	1,529,852.
	<b>4</b> Income from investment of tax-exempt bond proceeds .....	▶				
	<b>5</b> Royalties .....	▶ 2,180.			2,180.	
	<b>6 a</b> Gross rents .....	(i) Real	658,363.			
		(ii) Personal				
		<b>b</b> Less: rental expenses .....	383,172.			
		<b>c</b> Rental income or (loss) .....	275,191.			
	<b>d</b> Net rental income or (loss) .....	▶ 275,191.			275,191.	
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	(i) Securities	8,193,357.			
		(ii) Other				
		<b>b</b> Less: cost or other basis and sales expenses .....	5,616,889.			
		<b>c</b> Gain or (loss) .....	2,576,468.			
	<b>d</b> Net gain or (loss) .....	▶ 2,576,468.			2,576,468.	
	<b>8 a</b> Gross income from fundraising events (not including \$ 560,191. of contributions reported on line 1c). See Part IV, line 18 .....	<b>a</b> 342,543.				
		<b>b</b> Less: direct expenses .....	<b>b</b> 577,896.			
<b>c</b> Net income or (loss) from fundraising events .....		▶ -235,353.			-235,353.	
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>a</b>					
	<b>b</b> Less: direct expenses .....	<b>b</b>				
	<b>c</b> Net income or (loss) from gaming activities .....	▶				
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>a</b> 400,152.					
	<b>b</b> Less: cost of goods sold .....	<b>b</b> 382,247.				
	<b>c</b> Net income or (loss) from sales of inventory .....	▶ 17,905.	17,905.			
Miscellaneous Revenue		<b>Business Code</b>				
<b>11 a</b> INSURANCE REIMBURSMT. ....	900099	958,047.			958,047.	
	<b>b</b> MISCELLANEOUS .....	900099	229.			229.
	<b>c</b> .....					
<b>d</b> All other revenue .....						
<b>e Total.</b> Add lines 11a-11d .....	▶ 958,276.					
<b>12 Total revenue.</b> See instructions. ....	▶ 15,259,725.	623,560.	4,262.	5,106,614.		

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	693,798.	161,876.	531,922.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,671,517.	1,798,946.	666,205.	206,366.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	86,501.	57,456.	22,593.	6,452.
9 Other employee benefits	202,461.	135,985.	50,043.	16,433.
10 Payroll taxes	247,463.	154,005.	77,491.	15,967.
11 Fees for services (non-employees):				
a Management				
b Legal	12,053.	33.	3,680.	8,340.
c Accounting	31,500.		31,500.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	100,256.			100,256.
f Investment management fees	279,276.		279,276.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	816,499.	412,086.	167,809.	236,604.
12 Advertising and promotion	628,340.	616,801.	2,132.	9,407.
13 Office expenses	302,980.	174,659.	101,263.	27,058.
14 Information technology	76,568.	44,742.	31,826.	
15 Royalties				
16 Occupancy	496,349.		496,349.	
17 Travel	245,922.	189,500.	14,583.	41,839.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	204,982.	184,791.	14,613.	5,578.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	722,095.		722,095.	
23 Insurance	103,638.	9,267.	94,371.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>BUILDING ALLOCATION</b>	-182,720.	2,767,790.	-2,976,346.	25,836.
b <b>MAINTENANCE</b>	1,073,406.	81.	1,073,325.	
c <b>DIRECT MAIL</b>	484,674.	484,674.		
d <b>ART TRANS. AND STORAGE</b>	333,724.	333,724.		
e All other expenses <b>SEE SCH O</b>	1,156,949.	792,125.	293,012.	71,812.
25 <b>Total functional expenses.</b> Add lines 1 through 24e	10,788,231.	8,318,541.	1,697,742.	771,948.
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....		<b>1</b>	1,152,289.
	<b>2</b> Savings and temporary cash investments .....	4,217,871.	<b>2</b>	4,780,392.
	<b>3</b> Pledges and grants receivable, net .....	537,228.	<b>3</b>	189,678.
	<b>4</b> Accounts receivable, net .....		<b>4</b>	219,383.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....	124,274.	<b>8</b>	176,570.
	<b>9</b> Prepaid expenses and deferred charges .....	69,390.	<b>9</b>	46,180.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 22,950,844.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 16,141,378.	<b>10c</b>	6,809,466.
	<b>11</b> Investments - publicly traded securities .....	58,711,823.	<b>11</b>	62,818,858.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	107,100.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	71,160,506.	<b>16</b>	76,299,916.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	1,144,905.	<b>17</b>	1,113,913.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	475,308.	<b>25</b>	496,866.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	1,620,213.	<b>26</b>	1,610,779.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets .....	11,653,747.	<b>27</b>	12,922,002.
	<b>28</b> Temporarily restricted net assets .....	16,073,774.	<b>28</b>	18,685,215.
	<b>29</b> Permanently restricted net assets .....	41,812,772.	<b>29</b>	43,081,920.
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>	
<b>33</b> Total net assets or fund balances .....	69,540,293.	<b>33</b>	74,689,137.	
<b>34</b> Total liabilities and net assets/fund balances .....	71,160,506.	<b>34</b>	76,299,916.	

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	15,259,725.
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,788,231.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,471,494.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	69,540,293.
5	Net unrealized gains (losses) on investments	5	677,350.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	74,689,137.

**Part XII Financial Statements and Reporting**

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

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

Form 990 (2017)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2017**

Open to Public Inspection

Name of the organization

THE NATIONAL MUSEUM OF WOMEN IN THE ARTS

Employer identification number

52-1238810

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

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

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An agricultural research organization described in **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 university: \_\_\_\_\_
- 10  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.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations .....
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	3,851,817.	6,271,062.	12,658,487.	13,765,715.	9,525,289.	46,072,370.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge ...						
<b>4 Total.</b> Add lines 1 through 3 .....	3,851,817.	6,271,062.	12,658,487.	13,765,715.	9,525,289.	46,072,370.
<b>5</b> 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) .....						18,750,367.
<b>6 Public support.</b> Subtract line 5 from line 4.						27,322,003.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>7</b> Amounts from line 4 .....	3,851,817.	6,271,062.	12,658,487.	13,765,715.	9,525,289.	46,072,370.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...	2,034,734.	2,303,258.	2,191,679.	2,403,097.	2,190,395.	11,123,163.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on ...	9,346.	12,856.	1,288.	2,191.	12,540.	38,221.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	52,917.	60,802.	146,016.	16,911.	958,276.	1,234,922.
<b>11 Total support.</b> Add lines 7 through 10						58,468,676.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	5,201,647.
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	46.73 %
<b>15</b> Public support percentage from 2016 Schedule A, Part II, line 14 .....	<b>15</b>	78.18 %
<b>16a 33 1/3% support test - 2017.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2016.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2017.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2016.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>



**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** .....

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2016 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2016 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2017.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**b 33 1/3% support tests - 2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions .....

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

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

**Section E. Type III Functionally Integrated Supporting Organizations**

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

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

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

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

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

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

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

Section D - Distributions	Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions.	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
<b>9</b> Distributable amount for 2017 from Section C, line 6	
<b>10</b> Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
<b>1</b> Distributable amount for 2017 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2017			
<b>a</b>			
<b>b</b> From 2013			
<b>c</b> From 2014			
<b>d</b> From 2015			
<b>e</b> From 2016			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2017 distributable amount			
<b>i</b> Carryover from 2012 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2017 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2017 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b> Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>6</b> Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>7 Excess distributions carryover to 2018.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2013			
<b>b</b> Excess from 2014			
<b>c</b> Excess from 2015			
<b>d</b> Excess from 2016			
<b>e</b> Excess from 2017			

**Part VI**

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

Multiple horizontal lines for supplemental information.

**Schedule B**

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2017**

Name of the organization

THE NATIONAL MUSEUM OF WOMEN IN THE ARTS

Employer identification number

52-1238810

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

**General Rule**

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

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

<b>Name of organization</b>  <b>THE NATIONAL MUSEUM OF WOMEN IN THE ARTS</b>	<b>Employer identification number</b>  <b>52-1238810</b>
--	--

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>1,565,100.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>1,140,556.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ <u>630,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ <u>622,384.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ <u>526,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ <u>240,350.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization  <b>THE NATIONAL MUSEUM OF WOMEN IN THE ARTS</b>	Employer identification number  <b>52-1238810</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/> <hr/>	\$ <u>200,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>THE NATIONAL MUSEUM OF WOMEN IN THE ARTS</b>	Employer identification number  <b>52-1238810</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u>2</u>	19,580 SHARES OF STARBUCKS STOCK _____ _____ _____	\$ <u>1,126,050.</u>	<u>03/29/18</u>
<u>6</u>	7,410 SHARES OF GE STOCK _____ _____ _____	\$ <u>182,325.</u>	<u>09/18/17</u>
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization  <b>THE NATIONAL MUSEUM OF WOMEN IN THE ARTS</b>	Employer identification number  <b>52-1238810</b>
---	---

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

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

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**  
▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2017**

**Open to Public Inspection**

**Name of the organization** THE NATIONAL MUSEUM OF WOMEN IN THE ARTS  
**Employer identification number** 52-1238810

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (e.g., recreation or education)     Preservation of a historically important land area  
 Protection of natural habitat     Preservation of a certified historic structure  
 Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

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

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

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

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

(ii) Assets included in Form 990, Part X .....

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

a Revenue included on Form 990, Part VIII, line 1 .....

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2017

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

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

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other YOUTH EDUCATION & CURRICULUM

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	59,745,026.	44,986,925.	46,996,974.	48,059,246.	42,551,276.
b Contributions	2,964,804.	11,857,490.	772,399.	128,365.	24,714.
c Net investment earnings, gains, and losses	4,470,296.	5,231,727.	-621,689.	794,781.	7,350,648.
d Grants or scholarships					
e Other expenditures for facilities and programs	2,380,024.	2,331,116.	2,160,759.	1,985,418.	1,867,392.
f Administrative expenses					
g End of year balance	64,800,102.	59,745,026.	44,986,925.	46,996,974.	48,059,246.

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

- a Board designated or quasi-endowment  7.94 %
- b Permanent endowment  66.49 %
- c Temporarily restricted endowment  25.57 %

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations  Yes  No
- (ii) related organizations  Yes  No

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  Yes  No

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

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,400,000.		1,400,000.
b Buildings		19,138,992.	14,158,444.	4,980,548.
c Leasehold improvements				
d Equipment		1,845,247.	1,475,696.	369,551.
e Other		566,605.	507,238.	59,367.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				6,809,466.

**Part VII Investments - Other Securities.**

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

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

**Part VIII Investments - Program Related.**

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

**Part IX Other Assets.**

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CHARITABLE GIFT ANNUITY PAYABLE	205,106.
(3) DEPOSITS HELD	291,760.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	496,866.

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

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	17,001,114.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	677,350.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	1,343,315.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	2,020,665.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	14,980,449.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	279,276.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	279,276.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	15,259,725.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	11,852,270.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	1,343,315.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	1,343,315.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	10,508,955.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	279,276.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	279,276.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	10,788,231.

**Part XIII Supplemental Information.**

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

**PART III, LINE 1A:**

AT JUNE 30, 2018, THE MUSEUM'S HOLDINGS AGGREGATED 5,626 WORKS BY OVER 1,200 WOMEN ARTISTS FROM THE SIXTEENTH CENTURY TO THE PRESENT. THESE WORKS CONSIST PRINCIPALLY OF PAINTINGS, DRAWINGS, SCULPTURES, PRINTS AND BOOKS.

DURING THE YEAR ENDING JUNE 30, 2018, THE MUSEUM ADDED 134 WORKS WITH AN APPRAISED VALUE OF APPROXIMATELY \$4,076,245 TO ITS HOLDINGS AND NO WORKS WERE DE-ACCESSED. NO MATERIAL AMOUNT OF THE COLLECTION ITEMS WERE DAMAGED, DESTROYED, OR LOST DURING THE YEAR.

**PART III, LINE 4:**

THE NATIONAL MUSEUM OF WOMEN IN THE ARTS HAS AN EXTENSIVE COLLECTION OF

**Part XIII** Supplemental Information (continued)

WORKS OF ART BY WOMEN ARTISTS. THROUGH THE DISPLAY OF THESE WORKS AND  
OUTREACH AND EDUCATION PROGRAMS ABOUT THESE WORKS, WE ARE ABLE TO PROMOTE  
AND EDUCATE THE PUBLIC ON THE ACCOMPLISHMENTS OF WOMEN ARTISTS.

PART V, LINE 4:

THE EARNINGS FROM THE ENDOWMENT ARE INTENDED TO SECURE THE MUSEUM'S LONG  
RANGE FUTURE. THEY ARE INTENDED TO SUPPORT ONGOING PROGRAMS, ADVANCE  
EDUCATIONAL OUTREACH, ENHANCE VISIBILITY AND EXPAND THE COLLECTION.

PART X, LINE 2:

FOR THE YEAR ENDED JUNE 30, 2018, THE MUSEUM HAS DOCUMENTED ITS  
CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR  
REPORTING UNCERTAINTY IN INCOME TAXES, AND HAS DETERMINED THAT NO MATERIAL  
UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN  
THE FINANCIAL STATEMENTS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES REPORTED AS EXPENSE ON THE 514,661.  
FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON

PART VIII, LINE 8B.

COST OF GOODS SOLD REPORTED AS EXPENSE ON THE 160,637.  
FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON

PART VIII, LINE 10B.

FACILITY RENTAL EXPENSE REPORTED AS EXPENSE ON THE 668,017.  
FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON

PART VIII, LINE 6B.

TOTAL TO SCHEDULE D, PART XI, LINE 2D 1,343,315.



**Part XIII** Supplemental Information (continued)

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES REPORTED AS EXPENSE ON THE FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON

514,661.

PART VIII, LINE 8B.

COST OF GOODS SOLD REPORTED AS EXPENSE ON THE FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON

160,637.

PART VIII, LINE 10B.

FACILITY RENTAL EXPENSE REPORTED AS EXPENSE ON THE FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON

668,017.

PART VIII, LINE 6B.

TOTAL TO SCHEDULE D, PART XII, LINE 2D

1,343,315.

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding Fundraising or Gaming Activities**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest instructions.

OMB No. 1545-0047

**2017**

Open to Public Inspection

Name of the organization **THE NATIONAL MUSEUM OF WOMEN IN THE ARTS** Employer identification number **52-1238810**

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

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a  Mail solicitations
- b  Internet and email solicitations
- c  Phone solicitations
- d  In-person solicitations
- e  Solicitation of non-government grants
- f  Solicitation of government grants
- g  Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
DANILER + COMPANY - 3724 JEFFERSON ST., SUITE 302,	FUNDRAISING CONSULTANT		X	0.	100,256.	-100,256.
<b>Total</b> .....					100,256.	-100,256.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.  
AL, AR, AK, AZ, CA, CT, CO, FL, GA, HI, IL, KS, KY, LA, MD, MA, MI, MN, MS, ME, ND, NH, NJ, NM, NY, NC, OK, OR, PA, RI, SC, TN, UT, VA, WV, WI, DC

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

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		SPRING GALA (event type)	(event type)	(total number)	(add col. (a) through col. (c))	
1	Gross receipts .....	895,861.		6,873.	902,734.	
2	Less: Contributions .....	553,318.		6,873.	560,191.	
3	Gross income (line 1 minus line 2) .....	342,543.			342,543.	
Direct Expenses	4	Cash prizes .....				
	5	Noncash prizes .....				
	6	Rent/facility costs .....				
	7	Food and beverages .....	85,260.		52,001.	137,261.
	8	Entertainment .....	10,950.		11,000.	21,950.
	9	Other direct expenses .....	395,346.		23,339.	418,685.
10	Direct expense summary. Add lines 4 through 9 in column (d) .....				577,896.	
11	Net income summary. Subtract line 10 from line 3, column (d) .....				-235,353.	

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

Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1	Gross revenue .....		
Direct Expenses	2	Cash prizes .....			
	3	Noncash prizes .....			
	4	Rent/facility costs .....			
	5	Other direct expenses .....			
	6	Volunteer labor .....	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d) .....				
8	Net gaming income summary. Subtract line 7 from line 1, column (d) .....				

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
 a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No  
 b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No  
 b If "Yes," explain: \_\_\_\_\_

- 11** Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13** Indicate the percentage of gaming activity conducted in:
- |                                      |            |   |
|--------------------------------------|------------|---|
| <b>a</b> The organization's facility | <b>13a</b> | % |
| <b>b</b> An outside facility         | <b>13b</b> | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_
- c** If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

**16** Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

\_\_\_\_\_

Director/officer       Employee       Independent contractor

**17** Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:**

(I) NAME OF FUNDRAISER: DANILLER + COMPANY

(I) ADDRESS OF FUNDRAISER: 3724 JEFFERSON ST., SUITE 302, AUSTIN, TX 78731



**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2017**

Open to Public Inspection

Name of the organization

**THE NATIONAL MUSEUM OF WOMEN IN THE ARTS**

Employer identification number

**52-1238810**

**Part I Questions Regarding Compensation**

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- |  |   |
|--|---|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use    |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence    |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees      |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

- b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....
- 2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....

- 3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.
- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee          | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant        | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

- 4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:
- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....
- c** Participate in, or receive payment from, an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

- 5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:
- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 5a or 5b, describe in Part III.
- 6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:
- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.
- 7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....
- 8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....
- 9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2017

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) SUSAN FISHER STERLING EXECUTIVE DIRECTOR	(i)	329,867.	0.	0.	16,493.	5,932.	352,292.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) PAMELA J. AYRES DEPUTY DIRECTOR	(i)	163,523.	0.	0.	8,176.	284.	171,983.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ILENE GUTMAN DEPUTY DIRECTOR	(i)	150,706.	0.	0.	7,536.	272.	158,514.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							





**SCHEDULE L**  
**(Form 990 or 990-EZ)**

**Transactions With Interested Persons**

OMB No. 1545-0047

**2017**

**Open To Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Name of the organization **THE NATIONAL MUSEUM OF WOMEN IN THE ARTS** Employer identification number **52-1238810**

**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

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

- 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ..... ▶ \$ \_\_\_\_\_
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ..... ▶ \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

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

**Part III Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

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

**Part IV Business Transactions Involving Interested Persons.**

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
LASCARIS DESIGN GROUP (LDG)	LDG IS OWNED BY CAR	35,000.	SUPPORT SER		X

**Part V Supplemental Information**

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

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: LASCARIS DESIGN GROUP (LDG)

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

LDG IS OWNED BY CAROL LASCARIS, A BOARD MEMBER OF NMWA

(D) DESCRIPTION OF TRANSACTION: SUPPORT SERVICES FOR ENDOWMENT TRIPS AND ENDOWMENT AND PLANNED GIVING FUNDRAISING. THIS CONTRACT WAS TERMINATED AS OF JUNE 30, 2018.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2017**

Open To Public Inspection

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization **THE NATIONAL MUSEUM OF WOMEN IN THE ARTS** Employer identification number **52-1238810**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art .....	X	134	0.	FMV
2 Art - Historical treasures .....				
3 Art - Fractional interests .....				
4 Books and publications .....				
5 Clothing and household goods .....				
6 Cars and other vehicles .....				
7 Boats and planes .....				
8 Intellectual property .....				
9 Securities - Publicly traded .....	X	23	1,712,244.	FMV
10 Securities - Closely held stock .....				
11 Securities - Partnership, LLC, or trust interests .....				
12 Securities - Miscellaneous .....				
13 Qualified conservation contribution - Historic structures .....				
14 Qualified conservation contribution - Other .....				
15 Real estate - Residential .....				
16 Real estate - Commercial .....				
17 Real estate - Other .....				
18 Collectibles .....				
19 Food inventory .....				
20 Drugs and medical supplies .....				
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....				
24 Archeological artifacts .....				
25 Other ▶ ( <b>AUCTION ITEMS</b> ) .....	X	42	121,079.	FMV
26 Other ▶ ( _____ ) .....				
27 Other ▶ ( _____ ) .....				
28 Other ▶ ( _____ ) .....				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement ..... **29** **2**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? .....		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? .....	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? .....		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2017

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

SCHEDULE M, PART I, COLUMN (B):

THIS COLUMN INCLUDES THE NUMBER OF CONTRIBUTIONS RECEIVED.

SCHEDULE M, LINE 32B:

ALL NON-STANDARD CONTRIBUTIONS MUST BE REVIEWED AND ACCEPTED OR DECLINED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS.

SCHEDULE M, LINE 33:

THE MUSEUM'S ART COLLECTION HOLDINGS AGGREGATED 5,626 WORKS BY OVER 1,200 WOMEN ARTISTS FROM THE SIXTEENTH CENTURY TO THE PRESENT. THESE WORKS CONSISTS PRINCIPALLY OF PAINTINGS, DRAWINGS, SCULPTURE, PRINTS AND BOOKS.

DURING THE YEAR ENDED JUNE 30, 2018, THE MUSEUM ADDED 134 WORKS WITH AN APPRAISED VALUE OF APPROXIMATELY \$4,076,245 TO ITS HOLDINGS AND NO WORKS WERE DEACCESSED. NO MATERIAL AMOUNT OF COLLECTION ITEMS WERE DAMAGED, DESTROYED OR LOST DURING THE YEAR.

CONSISTENT WITH THE PRACTICE FOLLOWED BY MANY MUSEUMS, THE VALUE OF ART OBJECTS IS NOT RECORDED ON THE STATEMENT OF FINANCIAL POSITION, AND GIFTS OF ART ARE NOT REFLECTED AS REVENUE IN THE STATEMENT OF ACTIVITIES. PURCHASES OF ART ARE SHOWN AS A DECREASE IN THE NET ASSETS ON THE STATEMENT OF ACTIVITIES.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2017**

Open to Public  
Inspection

Name of the organization

THE NATIONAL MUSEUM OF WOMEN IN THE ARTS

Employer identification number

52-1238810

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

INTERNATIONAL OUTREACH PROGRAMS DEDICATED TO PROVIDE AN OPPORTUNITY FOR ALL TO JOIN US IN THE RECOGNITION OF WOMEN ARTISTS, MOTIVATE CHILDREN AND ADULTS ALIKE IN THE PURSUIT OF A DEEPER UNDERSTANDING OF THE OBSTACLES AND ACCOMPLISHMENTS OF WOMEN ARTISTS. WITH THE MUSEUM'S OUTSTANDING EDUCATIONAL PROGRAMS, IN-HOUSE LIBRARY, MAGAZINE, MEMBER BENEFITS AND EXCEPTIONAL EXHIBITIONS, WE ARE ABLE TO PROMOTE AND EDUCATE THE PUBLIC ON THE ACCOMPLISHMENTS OF WOMEN ARTISTS AND ALLOW FOR THE GROWTH AND FUTURE OPPORTUNITY FOR ASPIRING WOMEN ARTISTS SO THAT THEY TOO MAY REALIZE THEIR DREAMS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

PSYCHIC SELF. INSPIRED BY THE MUSEUM'S RICH HOLDINGS OF CONTEMPORARY ART AND FEATURING WORKS FROM PUBLIC AND PRIVATE COLLECTIONS, THE EXHIBITION INCLUDES ART BY LOUISE BOURGEOIS, LALLA ESSAYDI, JOANA VASCONCELOS, AND OTHER GLOBAL ARTISTS.

MAGNETIC FIELDS

OCTOBER 13, 2017 - JANUARY 28, 2018

NMWA'S 30TH ANNIVERSARY CELEBRATION CONTINUES WITH MAGNETIC FIELDS, THE FIRST US EXHIBITION TO EXPLORE THE FORMAL AND HISTORICAL DIALOGUE ON ABSTRACTION AMONG AFRICAN AMERICAN WOMEN ARTISTS. FEATURING WORK BY MORE THAN TWENTY ARTISTS, THE EXHIBITION IS INTERGENERATIONAL IN SCOPE AND HIGHLIGHTS THE LONG-STANDING PRESENCE OF BLACK WOMEN IN AMERICAN ABSTRACTION. FROM THE BRILLIANT COLORS AND ENERGETIC BRUSHWORK OF ALMA WOODSEY THOMAS'S PAINTINGS TO SHREDDED TIRE SCULPTURES BY CHAKAIA

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

Schedule O (Form 990 or 990-EZ) (2017)

732211 09-07-17

Name of the organization THE NATIONAL MUSEUM OF WOMEN IN THE ARTS	Employer identification number 52-1238810
--	--

BOOKER, FEATURED WORKS TESTIFY TO THE ENDURING ABILITY OF ABSTRACTION TO CONVEY BOTH PERSONAL ICONOGRAPHY AND UNIVERSAL THEMES. THIS LANDMARK PROJECT UNDERSCORES THE DIVERSITY OF ABSTRACT ART, WHICH LIES IN ITS MATERIAL CONSTRUCTION AS WELL AS IN ITS PRACTITIONERS.

#### WOMANHOUSE 2.0

MARCH 2 - MAY 28, 2018

INSPIRED BY THE 1972 EXHIBITION WOMANHOUSE, A PROJECT ORGANIZED BY JUDY CHICAGO AND MIRIAM SCHAPIRO IN THE FEMINIST ART PROGRAM AT CALARTS, WOMANHOUSE 2.0 REFLECTS ON WOMEN'S COMPLEX RELATIONSHIP TO ARCHITECTURE, THE HOME, AND DAILY RITUALS OF DOMESTICITY. THROUGH PHOTOGRAPHS, VIDEOS, SCULPTURES, AND ROOM-LIKE INSTALLATIONS (BUILT WITH MATERIALS RANGING FROM FELT TO RUBBER BANDS) THEY RECAST CONVENTIONAL IDEAS ABOUT A WOMAN'S PLACE WITH ACUITY, INGENUITY, AND WIT. THE PROJECT IS CURATED BY CAMILLE MORINEAU, WHO FIRST WORKED WITH NMWA ON WOMEN TO WATCH WHILE SHE WAS CURATOR OF THE HIGHLY ACCLAIMED EXHIBITION ELLES (2010) THAT TOOK OVER THE ENTIRE MUSEUM OF THE CENTRE POMPIDOU. MORINEAU IS CURRENTLY DIRECTOR OF THE FRENCH GOVERNMENT'S PRESTIGIOUS CONTEMPORARY ART SPACE LA MONNAIE DE PARIS.

#### HEAVY METAL

JUNE 29 - SEPTEMBER 9, 2018

IN THIS FIFTH INSTALLMENT IN NMWA'S ACCLAIMED WOMEN TO WATCH EXHIBITION SERIES, ARTISTS ENTHUSIASTICALLY INVESTIGATE THE PHYSICAL PROPERTIES AND EXPRESSIVE POTENTIAL OF METALWORK, LONG CONSIDERED TO BE THE DOMAIN OF MEN. FEATURING HAND-BUILT SCULPTURES, FURNITURE, VESSELS, AND OBJECTS FOR PERSONAL ADORNMENT, THE EXHIBITION ALSO ENGAGES THE FLUIDITY BETWEEN FINE ART, DESIGN, AND CRAFT IN CONTEMPORARY CULTURE.

Name of the organization THE NATIONAL MUSEUM OF WOMEN IN THE ARTS	Employer identification number 52-1238810
--	--

HEAVY METAL IS CREATED IN THE MUSEUM'S PARTNERSHIP WITH CONSORTIUM OF INTERNATIONAL AND NATIONAL OUTREACH COMMITTEES. THE EXHIBITION COMPRISES INNOVATIVE WORKS BY EMERGING GLOBAL ARTISTS AS WELL AS NEW WORKS BY RENOWNED METAL-CENTRIC SCULPTORS AND CONCEPTUAL ARTISTS.

NMWA'S COLLECTION EXHIBITIONS AND INSTALLATIONS AS PART OF THE MUSEUM'S EXHIBITION PROGRAM, NMWA REGULARLY REINSTALLS ALL OR PART OF THE 3RD FLOOR COLLECTION GALLERIES AND OTHER SPACES WITHIN THE BUILDING. THESE EXHIBITIONS DEMONSTRATE THE RICHNESS OF THE COLLECTION, WHICH HAVE GROWN FROM THE HOLLADAY SEED DONATION OF 500 WORKS TO OVER 5,000 OBJECTS GIVEN BY DONORS OVER THE PAST THIRTY YEARS.

EXHIBITIONS IN THE GROUND FLOOR TERESA LOZANO LONG GALLERY REGULARLY FEATURE WORKS FROM THE MUSEUM'S PRINTS AND DRAWINGS COLLECTION AND ARTISTS BOOKS, SUCH AS THE CURRENT INSTALLATION OF COLORFUL ABSTRACTIONS BY MAJOR NY ARTIST POLLY APFELBAUM OR THE RECENT SHOWING OF POP-UP BOOKS OF COLETTE FU. EXCITING NEWS RE: OUR MAIN COLLECTION INSTALLATIONS IN THE GREAT HALL AND 3RD FLOOR GALLERIES: FOR THE FIRST TIME, IN HONOR OF THE 30TH ANNIVERSARY, THE COLLECTION IS INSTALLED IN A WAY THAT BREAKS THE BOND OF HISTORICAL CHRONOLOGY. WHY DID WE WANT TO DO THIS FOR SO MANY YEARS? BECAUSE THE SWEEP OF ART HISTORY HAS ALWAYS SHORT-CHANGED WOMEN AND PEOPLE OF COLOR.

NOW WHEN VISITORS COME TO SEE THE COLLECTION, THEY EXPERIENCE INSPIRING, NON-CHRONOLOGICAL THEMATIC STORIES THAT HELP US ALL SEE A BIGGER PICTURE--ABOUT WOMEN ARTISTS AND HISTORY (HERSTORY), WOMEN'S RELATIONSHIP TO THE DOMESTIC SPHERE, THEIR ENGAGEMENT WITH PUBLIC SPACE, OR APPROACH TO NATURE, TO NAME A FEW. THROUGH THESE THEMATIC

Name of the organization

THE NATIONAL MUSEUM OF WOMEN IN THE ARTS

Employer identification number

52-1238810

INTERCHANGES, WE ALSO ARE PROVIDING VISITORS WITH THE OPPORTUNITY TO VIEW OLDER WORKS OF ART IN DIALOGUE WITH CONTEMPORARY ART-TO SEE THEM IN FRESH AND OPEN WAYS. EQUALLY TRUE, THE RE-INSTALLATION FOREGROUNDS NEW ARTISTIC TERRITORIES WHERE WOMEN HAVE HELPED DRIVE ARTISTIC DISCOURSE, ESPECIALLY IN ART TODAY.

IN THE LAST QUARTER OF FY2018, WE CHANGED SOME OF THE GALLERIES AGAIN TO INTRODUCE NEW THEMES AND ROTATED THE ART IN THE GREAT HALL. THIS ALLOWS THE COLLECTION TO BECOME MORE DYNAMIC, FRESH, AND INTERESTING TO OUR VISITORS-ESPECIALLY REPEAT VISITORS. WE WANT EVERYONE WHO VISITS HERE TO SAY "THERE'S ALWAYS SOMETHING GREAT TO SEE AT NMWA!"

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

INCREASE AWARENESS OF GENDER INEQUALITY IN THE ART WORLD.

USING THE HASHTAG #5WOMENARTISTS, NMWA LAUNCHED THE CAMPAIGN MARCH 1 ON ITS WEBSITE AND BLOG AS WELL AS ON THE SOCIAL MEDIA PLATFORMS FACEBOOK, TWITTER AND INSTAGRAM. THE MUSEUM INVITED CULTURAL ORGANIZATIONS AND INDIVIDUALS TO SHARE INFORMATION ON SOCIAL MEDIA ABOUT WOMEN ARTISTS THROUGHOUT THE MONTH. THIS YEAR, NMWA ASKED PARTICIPANTS TO PLACE A SPECIAL EMPHASIS ON SHARING THE STORIES OF WOMEN ARTISTS OF COLOR WHO OFTEN FACE DISCRIMINATION BASED ON BOTH RACE AND GENDER.

IN ADDITION TO MORE THAN 625 CULTURAL INSTITUTIONS, MORE THAN 9,000 INDIVIDUALS JOINED THE CAMPAIGN TO PROMOTE WOMEN ARTISTS, GARNERING MORE THAN 4,000 INSTAGRAM POSTS AND MORE THAN 17,500 TWEETS. MORE THAN 90 INDIVIDUALS AND CULTURAL ORGANIZATIONS CREATED THEIR OWN BLOG POSTS. THIS WORLDWIDE INITIATIVE WELCOMED PARTICIPATING ORGANIZATIONS FROM



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BRAZIL, ESTONIA, HONG KONG, INDIA, LEBANON, NIGERIA AND THE UNITED ARAB EMIRATES, AMONG OTHERS.

NMWA SHARED INFORMATION ABOUT WOMEN ARTISTS, INCLUDING BIOGRAPHIES, QUOTES AND INFOGRAPHICS TAGGED WITH #5WOMENARTISTS, AND ASKED OTHER ORGANIZATIONS TO JOIN THEM IN HIGHLIGHTING WORK BY WOMEN IN THEIR COLLECTIONS AND EXHIBITIONS. AMONG THE NUMEROUS PARTICIPATING INSTITUTIONS WERE THE METROPOLITAN MUSEUM OF ART; NATIONAL GALLERY, LONDON; NATIONAL MUSEUM OF AFRICAN AMERICAN HISTORY AND CULTURE; SMITHSONIAN LATINO CENTER; INSTITUTE OF AMERICAN INDIAN ARTS; ASIAN ART MUSEUM; ARAB AMERICAN NATIONAL MUSEUM; GALLERIE UFFIZI; GUGGENHEIM BILBAO; MIGRATION MUSEUM AND MUSEO FRIDA KAHLO.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

LIBRARY EXHIBITIONS:

- MAKING A LIVING: WOMEN ARTISTS ILLUSTRATING BOOKS, (MARCH 26-JULY 27, 2018)
- HARD TO DEFINE: ARTISTS' BOOKS FROM THE COLLECTION (NOVEMBER 20, 2017-MARCH 23, 2018)
- INSIDE THE DINNER PARTY STUDIO (SEPTEMBER 17, 2017-JANUARY 5, 2018)
- WONDER WOMEN! (JULY 17-NOVEMBER 17, 2017)
- FROM THE DESK OF SIMONE DE BEAUVOIR (JANUARY 6-AUGUST 12, 2017)

LIBRARY EVENTS:

- WIKIPEDIA EDIT-A-THON (MARCH 17, 2018)
- DC ART BOOK FAIR (NOVEMBER 5, 2017)
- MEMBER'S VISIT SHOW AND TELL (AUGUST 3, 2017)
- ARTIST BOOK SHOW AND TELL FOR ABC TEACHERS INSTITUTE (JULY 2017)

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- GALLERY TALKS FOR EACH OF THE EXHIBITIONS

LIBRARY PROJECTS:

- JUDY CHICAGO WEB PORTAL

- WOMEN GETTY ARTIST NAME DATA PROJECT

- WOMEN IN ART DATA PROJECT:

- GETTY UNION LIST OF ARTIST NAMES CONTRIBUTIONS

- LIBRARY OF CONGRESS NAME AUTHORITY FILE CONTRIBUTIONS

- ARTIST BOOK CATALOGING PROJECT

- RITA KEPNER ORAL HISTORY PROJECT (IN PROGRESS)

- VARIOUS BETTY DIGITIZATION PROJECTS:

- DIGITIZATION AND METADATA OF EXHIBITION INSTALLATION IMAGES  
AND CHECKLISTS

- DIGITIZATION AND METADATA OF MEMBER MAGAZINES

- DIGITIZATION AND METADATA OF EVENT PHOTOS

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

EDUCATION AND PUBLIC PROGRAMS:

SCHOOL AND TEACHER PROGRAMS

AS A SMALL DEPARTMENT, NMWA'S EDUCATORS MAXIMIZE IMPACT ON STUDENT  
LEARNING BY TEACHING AND SUPPORTING ELEMENTARY AND SECONDARY SCHOOL  
TEACHERS. EVERY EDUCATOR NMWA REACHES INFLUENCES HUNDREDS OF STUDENTS  
IN TURN. NMWA'S VARIED EDUCATION PROGRAMS REFLECT THIS GOAL.

EDUCATOR WORKSHOPS

NMWA OFFERS THREE-HOUR EDUCATOR WORKSHOPS FOCUSED ON SPECIAL  
EXHIBITIONS TO AREA TEACHERS WHO ARE PROVIDED WITH RESOURCES TO DISCUSS

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THE EXHIBITION IN THEIR CLASSROOMS. UPON REQUEST, NMWA HOSTS PROFESSIONAL DEVELOPMENT OPPORTUNITIES FOR SCHOOL DISTRICTS IN THE AREA.

#### ARTS, BOOKS, AND CREATIVITY

NMWA HOSTS TWO FREE, WEEK-LONG TEACHER INSTITUTES CENTERED ON A MODEL ARTS INTEGRATION CURRICULUM-ARTS, BOOKS, AND CREATIVITY (ABC). THE ANNUAL ABC TEACHER INSTITUTE INTRODUCES ABC TO TEACHERS WHO CREATE BOOK FORMATS HIGHLIGHTED IN THE CURRICULUM, EXPERIMENT WITH WRITING EXERCISES, CONTRIBUTE TO THE ABC BLOG, AND PRACTICE FACILITATING DISCUSSIONS ABOUT ART IN THE GALLERIES. THE BIENNIAL ADVANCED TEACHER INSTITUTE ALLOWS ALUMNI OF THE ABC INSTITUTE TO EXPLORE THE CURRICULUM MORE DEEPLY, FOCUSING ON MORE COMPLEX BOOK FORMATS AND ARTS-SCIENCES INTEGRATION. THE ABC NATIONAL WORKSHOP IS A CONDENSED VERSION OF THE ABC INSTITUTE THAT NMWA TAKES ON THE ROAD, AS REQUESTED.

#### SCHOOL TOURS AND OUTREACH

NMWA PROVIDES SCHOOL TOURS AND OUTREACH, INTERACTIVE, AGE-APPROPRIATE TOURS AND CLASSROOM LESSONS FOR ELEMENTARY AND SECONDARY GRADES WHICH INTRODUCE STUDENTS TO THE ACHIEVEMENTS OF WOMEN ARTISTS, BASIC ART VOCABULARY AND VISUAL LITERACY SKILLS, AND ENCOURAGE CLOSE OBSERVATIONS AND CRITICAL THINKING. THE MUSEUM RECENTLY PILOTED NEW TOURS FOR EARLY LEARNERS (AGES 3-6) BASED ON GROWING REQUESTS FROM AREA EDUCATORS. BASED ON GROWING DEMAND, NMWA HAS TRANSPORTATION AND SUBSTITUTE TEACHER FUNDS TO PROVIDE NEED-BASED FUNDS TO SCHOOLS TO COVER THE COST OF BUSES AND SUBSTITUTE TEACHERS DURING FIELD TRIPS.

#### GALLERY INTERPRETATION

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NMWA'S EDUCATION DEPARTMENT STRIVES TO ENGAGE VISITORS OF ALL AGES THROUGH DYNAMIC INTERPRETATION MATERIALS AND RESOURCES.

#### TOUR PROGRAM

NMWA'S TOUR PROGRAM FOR GENERAL AUDIENCES, MOSTLY ADULTS, SERVES THE LIFELONG LEARNING NEEDS OF OUR VISITORS. THE MUSEUM RELIES ON VISITOR EXPERIENCE VOLUNTEERS AND DOCENTS TO GREET AND GUIDE VISITORS ONSITE AND TO PRESENT OFFSITE LECTURES WHEN REQUESTED. NMWA'S DEDICATED VOLUNTEERS ALSO PROVIDE DAILY CONVERSATION PIECES, SHORT DISCUSSIONS THAT PAIR TWO WORKS ON VIEW TO EXPLORE WAYS THEY "SPEAK" TO ONE ANOTHER.

#### GALLERY INTERPRETATION

MUSEUM STAFF FACILITATES WEEKLY GALLERY TALKS, PROVIDING VISITORS WITH THE OPPORTUNITY TO EXPLORE SELECTED WORKS FROM THE COLLECTIONS OR EXHIBITIONS IN MORE DEPTH. FOR VISITORS WHO PREFER TO EXPLORE ON THEIR OWN, NMWA OFFERS A SEE FOR YOURSELF SELF-GUIDE RESOURCE, WHICH CONTAIN CARDS RELATED TO WORKS OF ART IN THE COLLECTION AND SPECIAL EXHIBITIONS THAT INTRODUCE SELECTED WORKS AND ARTISTS, GUIDE LOOKING AND DISCOVERY, AND POSE QUESTIONS FOR DISCUSSION. PDF FILES OF THE CARDS ARE FREE TO DOWNLOAD ON NMWA.ORG.

#### AUDIO AND ONLINE RESOURCES

THE MUSEUM PROVIDES GUIDE BY CELL AUDIO GUIDES FOR SELECTED EXHIBITIONS AND THE COLLECTION AND DEVELOPS APPS AND ONLINE EXHIBITIONS TO ENHANCE VISITOR EXPERIENCE AND UNDERSTANDING

#### PROGRAMS

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NMWA OFFERS SEVERAL PROGRAMS TO FACILITATE A DEEPER UNDERSTANDING OF THE COLLECTION AND SPECIAL EXHIBITIONS.

#### FIRSTHAND WORKSHOPS

FIVE-HOUR PROGRAMS THAT GIVE PARTICIPANTS THE OPPORTUNITY TO WORK WITH A WOMAN ARTIST, EXPLORE THEIR OWN CREATIVITY, AND DEVELOP GREATER APPRECIATION FOR THE MATERIALS, TECHNIQUES, AND SKILLS OF ARTISTS ON VIEW IN A SPECIAL EXHIBITION.

#### ARTISTS IN CONVERSATION

CONVERSATIONS TO BRING AUDIENCES TOGETHER WITH ARTISTS FEATURED IN THE COLLECTION OR SPECIAL EXHIBITIONS FOR INTIMATE CONVERSATIONS IN THE GALLERIES. ARTISTS SPEAK IN FRONT OF THEIR WORKS AND INTERACT DIRECTLY WITH THE AUDIENCE. THE CONVERSATIONS CONTINUE DURING A RECEPTION FOLLOWING THE PRESENTATIONS.

#### FREE COMMUNITY DAYS

FREE COMMUNITY DAYS ARE HELD THE FIRST SUNDAY OF EACH MONTH AND FEATURE A VARIETY OF PROGRAMS THAT INTERPRET THE COLLECTION AND EXHIBITIONS, SUCH AS FILMS, LITERARY READINGS, LECTURES, AND SPECIAL TOURS.

#### NMWA'S PUBLIC PROGRAMS:

SHENSON CHAMBER MUSIC CONCERTS 2017-18

FOR THE 20TH ANNIVERSARY OF NMWA'S WELL-RESPECTED SHENSON CHAMBER MUSIC CONCERT SERIES, ARTISTIC DIRECTOR GILAN TOCCO CORN HAS CREATED A SPLENDID SCHEDULE. BUILDING ON THE SERIES' TRADITION OF PROMOTING DEBUTS AND PRESENTING STAR PERFORMERS, NMWA HOSTED FIVE CONCERTS IN 2017-18. ARTISTIC DIRECTOR CORN HAS IDENTIFIED A DIVERSE ARRAY OF

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PROGRAMMING OF THE HIGHEST QUALITY THAT APPEALS TO ALL.

SANG-EUN LEE, CELLO

WEDNESDAY, OCTOBER 18, 2017

CELLIST SANG-EUN LEE HAS BEEN HAILED AS "A PRODIGIOUSLY TALENTED YOUNG ARTIST" FOR HER EXPRESSIVE ARTISTRY AND DAZZLING TECHNIQUE. MS. LEE HAS WON TOP PRIZES IN VARIOUS INTERNATIONAL COMPETITIONS; SHE WON THE 2014 YOUNG CONCERT ARTISTS INTERNATIONAL AUDITIONS, AND FIRST PRIZE AT THE 2014 YCA AUDITIONS IN SEOUL, KOREA. AT 15, SHE WON FIRST PRIZE AT THE 2009 JOHANSEN INTERNATIONAL COMPETITION IN WASHINGTON, D.C., SECOND PRIZE AT THE 2009 TCHAIKOVSKY COMPETITION FOR YOUNG MUSICIANS, AND THE YOUNG MUSICIAN PRIZE OF THE EMANUEL FEUERMANN COMPETITION IN BERLIN. SHE WAS ALSO AWARDED GERMANY'S KRONBERG ACADEMY CELLO FESTIVAL'S 2009 INGRID ZU SOLMS CULTURE PRIZE.

DANBI UM, VIOLIN

WEDNESDAY, NOVEMBER 8, 2017

A CURRENT MEMBER OF CHAMBER MUSIC SOCIETY TWO OF LINCOLN CENTER, DANBU UM HAS APPEARED AS SOLOIST WITH THE ISRAEL SYMPHONY, AUCKLAND PHILHARMONIC, VERMONT SYMPHONY, HERZLITA CHAMBER ORCHESTRA, AND DARTMOUTH SYMPHONY, AMONG OTHERS, AND HAS BEEN AWARDED TOP PRIZES FROM THE YEHUDI MENUHIN AND THE MICHAEL HILL INTERNATIONAL VIOLIN COMPETITIONS. SHE HAS PERFORMED FOR THE SEATTLE CHAMBER MUSIC SOCIETY AND WITH THE JUPITER CHAMBER PLAYERS AND THE OMEGA ENSEMBLE. SHE TOURS FREQUENTLY WITH "MUSICIANS FROM MARLBORO" AND HAS PARTICIPATED AT THE MUSIC @MENLO, RAVINIA, CARAMOOR, MOAB, PRUSSIA COVE, AND NORTH SHORE CHAMBER MUSIC FESTIVALS. AT AGE TEN, SHE WAS ADMITTED TO THE CURTIS INSTITUTE OF MUSIC. SHE HOLDS AN ARTIST DIPLOMA FROM INDIANA

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ANGELA HEWITT, PIANO

WEDNESDAY, MAY 2, 2018

ONE OF THE WORLD'S LEADING PIANISTS, ANGELA HEWITT APPEARS IN RECITAL AND WITH MAJOR ORCHESTRAS THROUGHOUT EUROPE, THE AMERICAS AND ASIA.

HER INTERPRETATIONS OF BACH HAVE ESTABLISHED HER AS ONE OF THE COMPOSER'S FOREMOST INTERPRETERS OF OUR TIME. MS. HEWITT APPEARED FOR A SPECIAL GUEST PERFORMANCE IN HONOR OF SHENSON'S 20TH ANNIVERSARY.

MODERNMEDIIEVAL PRESENTS "THE LIVING WORD"

WEDNESDAY, MAY 9, 2018

JACQUELINE HORNER-KWIATEK, FORMALLY OF THE ACCLAIMED VOCAL QUARTET ANONYMOUS 4, IS JOINED BY MARTHA CLUVER AND ELIZA BAGG FROM THE CELEBRATED ENSEMBLE "ROOMFUL OF TEETH" TO PRESENT PROGRAMS THAT COMBINE MEDIEVAL CHANT AND POLYPHONY WITH NEW COMMISSIONS AND MUSIC FROM LATER ERAS. MODERNMEDIIEVAL ARTISTIC DIRECTOR, JACQUELINE HORNER-KWIATEK, MEZZO-SOPRANO, RECORDED TWELVE AWARD-WINNING CD'S WITH ANONYMOUS 4 FROM 2000-2015, INCLUDING AMERICAN ANGELS, WHICH TWICE TOPPED BILLBOARD'S CLASSICAL MUSIC CHARTS, AND THE CHERRY TREE, ONE OF THE TOP SELLING CLASSICAL CDS OF 2010.

AIZURI QUARTET

WEDNESDAY, MAY 23, 2018

THROUGH ITS ENGAGING AND THOUGHT-PROVOKING PROGRAMS, THE AIZURI QUARTET HAS GARNERED CRITICAL ACCLAIM FOR BRINGING "A TECHNICAL BRAVADO AND EMOTIONAL POWER" TO BOLD NEW COMMISSIONS, AND FOR ITS "FLAWLESS" PERFORMANCES OF THE GREAT MASTERPIECES OF THE PAST IN WHICH "EVERY NOTE

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IS LOVINGLY CRAFTED AND SCORED." CURRENTLY BASED IN NEW YORK CITY, THE AIZURI QUARTET WAS THE 2015-2016 ERNST STIEFEL STRING QUARTET-IN-RESIDENCE AT THE CARAMOOR CENTER FOR MUSIC AND THE ARTS. FROM 2014-2016, THE AIZURI QUARTET WAS THE STRING QUARTET-IN-RESIDENCE AT THE CURTIS INSTITUTE OF MUSIC IN PHILADELPHIA. THROUGHOUT ITS RESIDENCY, THE QUARTET APPROACHED INTERNATIONALLY IN CURTIS ON TOUR PERFORMANCES IN BREMEN, DRESDEN, PARIS, AND SALZBURG, IN ASPEN, LOGAN, NAPA, LA JOLLA, AND DAVIS WITH CLARINETIST MICHAEL RUSINEK, AT BOSTON'S ISABELLA STEWART GARDNER MUSEUM AND NEW YORK CITY'S MORGAN LIBRARY AND MUSEUM WITH CELLIST PETER WILEY, AND THROUGHOUT CHILE, COSTA RICA, AND MEXICO WITH VIOLIST ROBERTO DIAZ. ADDITIONALLY, THE QUARTET WAS THE RESIDENT ENSEMBLE OF THE 2014 RAVINIA FESTIVAL'S STEANS MUSIC INSTITUTE.

EXPENSES \$ 1,131,965. INCLUDING GRANTS OF \$ 0. REVENUE \$ 48,073.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

NMWA PUBLIC PROGRAMS

WOMEN, ARTS, AND SOCIAL CHANGE (WASC) 2017-18:

TO EXPAND OUR VISION TO ISSUES OF CONCERN TO MUSEUMGOERS TODAY AND TO MOTIVATE THE NEXT GENERATION, RELEVANCY MATTERS. WORKING FROM THE CENTER IN A NON-PARTISAN WAY, FOR THE PAST TWO YEARS, WASC HAS BROUGHT WOMEN ARTISTS TOGETHER WITH OTHER FEMALE THOUGHT LEADERS. THROUGH THE FRESH TALK AND CULTURAL CAPITAL EVENTS OFFERED AND THE ATTENDEES ATTRACTED THUS FAR, THIS PROGRAMMING BRINGS IN TRADITIONAL NMWA AUDIENCES AS WELL AS A YOUNGER CROWD, AND CREATES INTERGENERATIONAL DIALOGUE OVER SUNDAY SUPPERS OR OUR CATALYST COCKTAILS WITH A TWIST. THESE THOUGHT-PROVOKING TALKS AND AFTER-EVENTS ARE THE MEETING GROUND, THE RICH CONVENING SPACE FOR FUTURE NMWA MEMBERS AND LEADERS.



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HERE IS A REVIEW OF THE UPCOMING 2017-18 SEASON:

WASC 2017-2018 PROGRAMS

FRESH TALK: HOW CAN THE ARTS INSPIRE ENVIRONMENTAL ADVOCACY?

SUNDAY, MAY 21, 4:30-6 P.M., FOLLOWED BY SUNDAY SUPPER

ARTISTS ACROSS DISCIPLINES AND AROUND THE GLOBE ARE CREATING WORKS IN RESPONSE TO CLIMATE CHANGE AND OTHER ENVIRONMENTAL ISSUES. CAN THE ARTS COMMUNICATE SCIENTIFIC EVIDENCE IN WAYS THAT INSPIRE ADVOCACY OR CHANGE ATTITUDES AND BEHAVIORS? JOINING THE CONVERSATION ARE RUTH LITTLE, ASSOCIATE DIRECTOR, CAPE FAREWELL; MIRANDA MASSIE, DIRECTOR OF THE CLIMATE MUSEUM, NEW YORK; JACQUI PATTERSON, DIRECTOR, ENVIRONMENTAL AND CLIMATE JUSTICE PROGRAM, NAACP; AND LAURA TURNER SEYDEL, CHAIRPERSON, CAPTAIN PLANET FOUNDATION. MODERATED BY KARI FULTON, AWARD-WINNING ENVIRONMENTAL JUSTICE ADVOCATE AND NEW-MEDIA JOURNALIST BASED IN WASHINGTON, D.C.

FRESH TALK: WHO ARE THE NEW SUPERWOMEN OF THE UNIVERSE?

WEDNESDAY, JUNE 14, 7-8:30 P.M., FOLLOWED BY CATALYST, A COCKTAIL HOUR WITH A TOPIC AND A TWIST

FOR MUCH OF COMICS HISTORY, WOMEN CHARACTERS WERE INTRODUCED AS PLOT DEVICES FOR LEADING MALE CHARACTERS WITH DISHEARTENING REGULARITY. A NEW WAVE OF SUPERHEROINES IS ENTERING THE COMIC UNIVERSE, LEADING THE FIGHT FOR JUSTICE AND DISPELLING TRADITIONAL STEREOTYPES IN FICTION AND BEYOND. SPEAKERS INCLUDE JANELLE ASSELIN, FORMER WRITER FOR COMIC ALLIANCE AND FOUNDER OF ROSY PRESS; CAROLYN COCCA, AUTHOR OF SUPERWOMEN: GENDER, POWER, AND REPRESENTATION; ARIELL R. JOHNSON, FOUNDER OF AMALGAM COMICS AND COFFEEHOUSE IN PHILADELPHIA, THE ONLY

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BLACK-WOMAN OWNED COMIC BOOK STORE ON THE EAST COAST; ASHLEY WOODS, ILLUSTRATOR AND GRAPHIC NOVELIST, AND ARTIST FOR THE STRANGER COMICS SERIES "NIOBE: SHE IS LIFE"

FRESH TALK: SARAH LEWIS - CAN THE ARTS HELP US TO RISE WHEN WE FAIL? WEDNESDAY, OCTOBER 25, 2017, 7-8:30 P.M., FOLLOWED BY CATALYST, A COCKTAIL HOUR WITH A TOPIC AND A TWIST

FRESH TALK FEATURES SARAH LEWIS IS A BESTSELLING AUTHOR, CURATOR, AND AN ASSISTANT PROFESSOR AT HARVARD UNIVERSITY. LEWIS'S MOST RECENT BOOK IS THE LOS ANGELES TIMES BESTSELLER, THE RISE: CREATIVITY, THE GIFT OF FAILURE, AND THE SEARCH FOR MASTERY (SIMON & SCHUSTER), A LAYERED, STORY-DRIVEN INVESTIGATION OF HOW INNOVATION, DISCOVERY, AND THE CREATIVE PROCESS ARE ALL SPURRED ON BY ADVANTAGES GLEANED FROM IMPROBABLE FOUNDATIONS.

FRESH TALK: HOW CAN THE ARTS AMPLIFY OUR VOICES?

SUNDAY, NOVEMBER 12, 2017, 4:30-6 P.M., FOLLOWED BY SUNDAY SUPPER

FRESH TALK ON HOW THE ARTS CAN CREATE AWARENESS AND INSPIRE ADVOCACY TO SPECIFIC FEMALE EXPERIENCES OF OPPRESSION, VIOLENCE AND DOMESTIC ABUSE, WITH ARTIST MONICA MAYER AND OTHERS TO BE ANNOUNCED WILL BE FOLLOWED BY SUNDAY SUPPER WITH MEMBERS FROM COMMUNITY-BASED ORGANIZATIONS JOINING AS CONVERSATIONS STARTERS, HELPING US TO CO-CREATE AUDIENCE ENGAGEMENT ACTIVITIES AND EXPERIENCES.

FRESH TALK FORUM: COMMUNITY ART PROJECT WITH MONICA MAYER: EL TENDEDERO/THE CLOTHESLINE PROJECT

IN FALL 2017, WOMEN, ARTS, AND SOCIAL CHANGE PROGRAMMING WILL REACH BEYOND THE MUSEUM'S WALLS WITH AN INTERACTIVE ART PROJECT WITH MONICA

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MAYER. ARTISTS LIKE MAYER, HAVE A POWERFUL ROLE TO PLAY IN REFLECTING THE TIMES WE LIVE IN AND INSPIRING DIALOGUE ABOUT ART, CULTURE, AND THE ISSUES THAT IMPACT HUMANITY. EL TENDEDERO/THE CLOTHESLINE PROJECT EXTEND THE CONVERSATION STARTED AT OUR NOVEMBER 13, 2016 FRESH TALK: CAN THE ARTS ADVANCE BODY POLITICS? INTO THE COMMUNITY. AN EXHIBITION DOCUMENTING THE COMMUNITY PROJECT WAS HELD IN THE LONG GALLERY FRIDAY, NOVEMBER 10, 2017 THRU SUNDAY, JANUARY 5, 2018 AND INCLUDED PHOTOS/VIDEO FROM PAST PROJECTS AS WELL AS CONTENT FROM CREATED AS PART OF EL TENDEDERO/THE CLOTHESLINE PROJECT, DC.

FRESH TALK: RIGHTING THE BALANCE III: CAN THERE BE GENDER PARITY IN MUSEUMS? LET'S LOOK AT EUROPE!

MARCH 18, 21 OR APRIL 15, - TBA

FROM THE UFFIZI GALLERY IN FLORENCE TO THE TATE MODERN IN LONDON, MUSEUMS ACROSS EUROPE ARE EXPRESSING IS AN INCREASING COMMITMENT TO WORKS BY WOMEN ARTISTS AND HIGHLIGHT THE CONTRIBUTIONS MADE BY MANY WOMEN WHO HAVE BEEN OVERLOOKED. WHAT DO THESE CHANGES MEAN? WILL THEY BE SUSTAINED? IS TRUE GENDER PARITY IN MUSEUMS POSSIBLE? WHAT IS THE IMPACT ON INSTITUTIONS AND AUDIENCES? NMWA BROUGHT TOGETHER NEW DIRECTORS OF GREAT EUROPEAN INSTITUTIONS TOGETHER FOR A DISCUSSION: BARBARA JATTA, VATICAN MUSEUMS; EIKE SCHMIDT, UFFIZI GALLERY; LAURENCE DE CARS, MUSE D'ORSAY, AND FRANCES MORRIS TATE MODERN. ORGANIZED IN CONJUNCTION WITH NMWA'S COMMITTEES IN ITALY, FRANCE AND UK.

FRESH TALK: RIGHTING THE BALANCE IV: CAN THERE BE GENDER PARITY IN THE FILM INDUSTRY?

MARCH 18, 21 OR APRIL 15, 2018 - TBA

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FILM MAKERS, ADVOCATES AND CREATIVE CONVENE TO DISCUSS ADVANCES AND ONGOING CHALLENGES FOR WOMEN IN THE FILM INDUSTRY.

FRESH TALK: HOW CAN WORDS PAINT A PICTURE OF CHANGE?

SUNDAY, JUNE 10, 2018 - TBA

FROM SPOKEN WORD TO POETRY AND PROSE, HOW CAN WORDS BE A WITNESS TO OUR ASPIRATIONS AND HOPES? HOW DOES THE METHOD AND MEANS OF DELIVERY OF THOSE WORDS IMPACT OUR EXPERIENCE OF THEM? AN UPLIFTING CELEBRATION OF POEMS AND POETS WHO PAINT A BETTER WORLD.

CULTURAL CAPITAL SESSIONS:

IN ADDITION TO FRESH TALK, WASC ALSO INCLUDES PROGRAM PARTNERSHIPS WITH LEADING D.C.-AREA ORGANIZATIONS. THESE CONNECT THE MUSEUM WITH NEW AUDIENCES FOR PROGRAMS WITH A CAUSE-DRIVEN FOCUS. NMWA HOSTS UP TO 12 CULTURAL CAPITAL SESSIONS A YEAR WITH PARTNERS INCLUDING THE COMCAST, WASHINGTON NATIONAL OPERA, WPAS, ENVIRONMENTAL FILM FESTIVAL, MARCH ON WASHINGTON FILM FESTIVAL, EMBASSY OF SPAIN, INTERNATIONAL WOMEN'S FORUM, AND THE ALLIANCE OF AMERICAN MUSEUMS.

FORM 990, PART VI, SECTION A, LINE 2:

WILHELMINA HOLLADAY, WINTON HOLLADAY AND JESSICA STERCHI HAVE FAMILY RELATIONSHIPS.

CAROL LASCARIS AND FRANCES USHER HAVE A FAMILY RELATIONSHIP.

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

THE RETURN WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT. IT WAS THEN PRESENTED TO THE BOARD BY THE DEPUTY DIRECTOR FOR

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FINANCE AND OPERATIONS FOR REVIEW, BEFORE IT WAS FILED WITH THE IRS.

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

THE POLICY OF THE MUSEUM IS TO DISCUSS POTENTIAL CONFLICTS OF INTEREST IN THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES. THE EXECUTIVE COMMITTEE WILL ADDRESS ANY CONCERNING RELATIONSHIP BROUGHT TO THEIR ATTENTION, DETERMINE WHAT IS IN THE BEST INTEREST OF THE MUSEUM, AND ACT ACCORDINGLY. THE EXECUTIVE COMMITTEE MEETS MONTHLY AND IS MADE UP OF THE BOARD OFFICERS.

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

THE EXECUTIVE DIRECTOR OF THE NATIONAL MUSEUM OF WOMEN IN THE ARTS (NMWA) IS THE PRINCIPAL REPRESENTATIVE OF NMWA, AND THE PERSON RESPONSIBLE FOR THE EFFICIENT OPERATION OF THE MUSEUM.

THEREFORE, IT IS THE DESIRE OF THE BOARD OF TRUSTEES OF NMWA TO PROVIDE A FAIR YET REASONABLE AND NOT EXCESSIVE COMPENSATION FOR THE EXECUTIVE DIRECTOR.

THE ANNUAL PROCESS FOR REVIEW AND DETERMINING COMPENSATION SHALL BE AS FOLLOWS:

THE COMPENSATION COMMITTEE WILL BE COMPOSED OF THE CURRENT VICE CHAIR, PRESIDENT AND TREASURER, IMMEDIATE PAST PRESIDENT, AS WELL AS TWO (2) AT LARGE MEMBERS APPOINTED BY THE PRESIDENT FROM THE BOARD OF TRUSTEES OF NMWA.

UPON THE CLOSE OF EACH FISCAL YEAR, THE COMPENSATION COMMITTEE WILL MEET TO EVALUATE THE EXECUTIVE DIRECTOR ON HIS/HER PERFORMANCE, AND ASK FOR HIS/HER

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INPUT ON MATTERS OF PERFORMANCE AND COMPENSATION.

THE COMPENSATION COMMITTEE WILL OBTAIN RESEARCH AND INFORMATION TO MAKE A RECOMMENDATION TO THE EXECUTIVE COMMITTEE FOR THE COMPENSATION (SALARY AND BENEFITS) OF THE EXECUTIVE DIRECTOR BASED ON A REVIEW OF COMPARABILITY DATA.

FOR EXAMPLE, THE COMPENSATION COMMITTEE WILL SECURE DATA THAT DOCUMENTS COMPENSATION LEVELS AND BENEFITS FOR SIMILARLY QUALIFIED INDIVIDUALS IN COMPARABLE POSITIONS AT SIMILAR ORGANIZATIONS.

THIS DATA MAY INCLUDE THE FOLLOWING:

1. SALARY AND BENEFIT COMPENSATION STUDIES BY INDEPENDENT SOURCES;
2. WRITTEN JOB OFFERS FOR POSITIONS AT SIMILAR ORGANIZATIONS;
3. DOCUMENTED TELEPHONE CALLS ABOUT SIMILAR POSITIONS AT BOTH NONPROFIT AND FOR PROFIT ORGANIZATIONS; AND
4. INFORMATION OBTAINED FROM THE IRS FORM 990 FILINGS OF SIMILAR ORGANIZATIONS.

CONCURRENT DOCUMENTATION. TO APPROVE THE COMPENSATION FOR THE EXECUTIVE DIRECTOR THE COMPENSATION COMMITTEE MUST DOCUMENT HOW IT REACHED ITS DECISIONS, INCLUDING THE DATA ON WHICH IT RELIED, IN MINUTES OF THE MEETING DURING WHICH THE COMPENSATION WAS APPROVED.

DOCUMENTATION WILL INCLUDE:

A) A DESCRIPTION OF THE COMPENSATION AND BENEFITS AND THE DATE IT WAS

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APPROVED;

B) THE MEMBERS OF THE COMPENSATION AND EXECUTIVE COMMITTEES WHO WERE PRESENT DURING THE DISCUSSION ABOUT COMPENSATION AND BENEFITS, AND THE RESULTS OF THE VOTE;

C) A DESCRIPTION OF THE COMPARABILITY DATA RELIED UPON AND HOW THE DATA WAS OBTAINED; AND

D) ANY ACTIONS TAKEN (SUCH AS ABSTAINING FROM DISCUSSION AND VOTE) WITH RESPECT TO CONSIDERATION OF THE COMPENSATION BY ANYONE WHO IS OTHERWISE A MEMBER OF THE COMPENSATION AND/OR EXECUTIVE COMMITTEES, BUT WHO HAD A CONFLICT OF INTEREST WITH RESPECT TO THE DECISION ON THE COMPENSATION AND BENEFITS.

ONCE THE COMPENSATION COMMITTEE HAS REACHED A RECOMMENDATION THEY WILL PROVIDE THEIR RECOMMENDATION IN WRITING, ALONG WITH A COPY OF THE MINUTES FROM THE COMPENSATION COMMITTEE MEETING TO THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES OF NMWA.

FOLLOWING DIRECTION OF THE EXECUTIVE COMMITTEE, THE TREASURER OF THE BOARD OF TRUSTEES WILL INFORM THE CHIEF FINANCIAL OFFICER OF NMWA ON ANY CHANGES TO COMPENSATION OR BENEFITS FOR THE EXECUTIVE DIRECTOR PRIOR TO THE OCTOBER PAYROLL.

THE LAST COMPENSATION REVIEW TOOK PLACE IN OCTOBER 2017.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:  
AL, AR, AK, AZ, CA, CT, CO, FL, GA, HI, IL, KS, KY, LA, MD, MA, MI, MN, MS, ME, ND, NH, NJ, NM, NY, NC, OK, OR, PA, RI, SC, TN, UT, VA, WV, WI

Name of the organization THE NATIONAL MUSEUM OF WOMEN IN THE ARTS	Employer identification number 52-1238810
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## FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

## FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES:

## EXHIBITION CONSTRUCTION:

PROGRAM SERVICE EXPENSES	153,153.
MANAGEMENT AND GENERAL EXPENSES	82,588.
FUNDRAISING EXPENSES	5,269.
TOTAL EXPENSES	241,010.

## FOOD AND ENTERTAINMENT:

PROGRAM SERVICE EXPENSES	197,744.
MANAGEMENT AND GENERAL EXPENSES	14,818.
FUNDRAISING EXPENSES	24,818.
TOTAL EXPENSES	237,380.

## SERVICE CONTRACTS:

PROGRAM SERVICE EXPENSES	70,594.
MANAGEMENT AND GENERAL EXPENSES	85,089.
FUNDRAISING EXPENSES	27,812.
TOTAL EXPENSES	183,495.

## EXHIBITION LOAN FEES:

PROGRAM SERVICE EXPENSES	137,749.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	137,749.



Name of the organization <b>THE NATIONAL MUSEUM OF WOMEN IN THE ARTS</b>	Employer identification number <b>52-1238810</b>
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**MISCELLANEOUS:**

PROGRAM SERVICE EXPENSES	73,808.
MANAGEMENT AND GENERAL EXPENSES	48,222.
FUNDRAISING EXPENSES	10,291.
TOTAL EXPENSES	132,321.

**MAGAZINE:**

PROGRAM SERVICE EXPENSES	109,647.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	109,647.

**EQUIPMENT:**

PROGRAM SERVICE EXPENSES	11,049.
MANAGEMENT AND GENERAL EXPENSES	51,030.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	62,079.

**CREDIT CARD FEES:**

PROGRAM SERVICE EXPENSES	24,294.
MANAGEMENT AND GENERAL EXPENSES	-237.
FUNDRAISING EXPENSES	3,147.
TOTAL EXPENSES	27,204.

**TAXES AND LICENSES:**

PROGRAM SERVICE EXPENSES	12,587.
MANAGEMENT AND GENERAL EXPENSES	11,502.

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FUNDRAISING EXPENSES 475.

TOTAL EXPENSES 24,564.

ART ACQUISITION:

PROGRAM SERVICE EXPENSES 1,500.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 1,500.

TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL A 1,156,949.