

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

# Form 990

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

# 2023

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A** For the **2023** calendar year, or tax year beginning **JUL 1, 2023** and ending **JUN 30, 2024**

<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>31,177,178.</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) .....	3 39
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) .....	4 39
	<b>5</b> Total number of individuals employed in calendar year 2023 (Part V, line 2a) .....	5 99
	<b>6</b> Total number of volunteers (estimate if necessary) .....	6 88
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12 .....	7a 7,083.
	<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11 .....	7b 4,205.
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h) .....	22,864,764. 14,232,886.
	<b>9</b> Program service revenue (Part VIII, line 2g) .....	230,022. 833,672.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....	2,340,711. 4,029,711.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....	-632,807. -435,617.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	24,802,690. 18,660,652.
	Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) .....		0. 0.
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....		4,865,563. 6,329,790.
<b>16 a</b> Professional fundraising fees (Part IX, column (A), line 11e) .....		290,593. 1,419,964.
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) .....		2,316,302.
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) .....		5,976,015. 9,393,711.
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....		11,132,171. 17,143,465.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12 .....	13,670,519. 1,517,187.	
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16) .....	Beginning of Current Year 172,065,573. End of Year 196,094,531.
	<b>21</b> Total liabilities (Part X, line 26) .....	17,801,265. 35,662,461.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 .....	154,264,308. 160,432,070.

## 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: <i>Jummy Siwajuola</i> <b>OLAJUMOKE SIWAJUOLA, CFO</b> Type or print name and title	Date: <b>5/15/2025</b>
<b>Paid Preparer Use Only</b>	Print/Type preparer's name: <b>ELIZABETH W. HELLER</b> Preparer's signature: <i>Elizabeth Heller</i> Date: <b>5/15/2025</b> Firm's name: <b>GELMAN, ROSENBERG &amp; FREEDMAN</b> Firm's address: <b>4550 MONTGOMERY AVE SUITE 800N BETHESDA, MD 20814-2930</b>	Check if self-employed: <input type="checkbox"/> PTIN: <b>P00397829</b> Firm's EIN: <b>52-1392008</b> Phone no.: <b>301-951-9090</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 \$ 3,124,037. including grants of \$ ) (Revenue \$ 263,895.) OUTREACH:

YEAR AT A GLANCE:

- NMWA'S REOPENING GARNERED PRESS COVERAGE BY MORE THAN 350 OUTLETS, INCLUDING THE NEW YORK TIMES, WASHINGTON POST, VANITY FAIR, PEOPLE, AND SPECIAL SEGMENTS ON PBS NEWSHOUR, CBS SUNDAY MORNING, AND NPR.
- 56,755 PEOPLE VISITED THE MUSEUM BETWEEN OCTOBER 2023 AND JUNE 2024, A 101% INCREASE FROM BEFORE THE COVID-19 PANDEMIC AND RENOVATION.
- VISITORS LOVED THE MUSEUM'S TECHNOLOGICAL ENHANCEMENTS. A NEW TOUCHSCREEN TABLE IN THE COLLECTION GALLERIES INVITES GUESTS TO DISCOVER CONNECTIONS BETWEEN ARTWORKS ACROSS TIME, MEDIUM, AND GEOGRAPHY. VISITORS USED IT TO VIEW ARTWORKS MORE THAN 15,000 TIMES.

4b (Code: ) (Expenses \$ 3,082,505. including grants of \$ ) (Revenue \$ 284,540.) EXHIBITIONS:

THERE'S NO PLACE LIKE HOME

THE RENOVATED BUILDING EXPANDED NMWA'S GALLERY SPACE, ADDING STRUCTURAL CAPABILITIES AND UPDATED TECHNOLOGY TO ENABLE IMPRESSIVE INAUGURAL EXHIBITIONS. IN THE FIRST-FLOOR TERESA LOZANO LONG GALLERY, THE IMMERSIVE VIDEO INSTALLATION IN FOCUS: ARTISTS AT WORK GREET'S VISITORS AND INTRODUCES NMWA'S MISSION THROUGH THE STORIES OF EIGHT CONTEMPORARY WOMEN ARTISTS IN NMWA'S COLLECTION. IN SHORT, POWERFUL VIDEOS, AMBREEN BUTT, SONYA CLARK, COLETTE FU, THE GUERRILLA GIRLS, GRACIELA ITURBIDE, DELITA MARTIN, RANIA MATAR, AND ALISON SAAR DESCRIBE THEIR ARTISTIC PRACTICES IN THEIR OWN WORDS, AFFORDING VIEWERS AN INTIMATE

4c (Code: ) (Expenses \$ 2,744,105. including grants of \$ ) (Revenue \$ 1,135.) CURATORIAL, LIBRARY, AND PUBLICATIONS:

COLLECTION

DURING NMWA'S LANDMARK REOPENING YEAR, NEARLY ONE HUNDRED ACQUISITIONS STRENGTHENED THE MUSEUM'S COLLECTION. IN ADDITION TO THE SELECTIONS FEATURED HERE, HIGHLIGHTS INCLUDE PHOTOGRAPHS BY BERENICE ABBOTT, RENEE COX, ANN HAMILTON, MARTA MARA PREZ BRAVO, AND GILLIAN WEARING; WORKS ON PAPER BY CORITA KENT AND NELLIE MAE ROWE; A PAINTING BY HUNG LIU; AND A SCULPTURE BY DEBORAH BUTTERFIELD. THESE WORKS OF ART, DONATED BY LONGTIME PATRONS AND NEW FRIENDS, WILL DELIGHT VISITORS AND BOLSTER NMWA'S PROGRAMMING IN THE MONTHS AND YEARS TO COME.

4d Other program services (Describe on Schedule O.) (Expenses \$ 1,240,522. including grants of \$ ) (Revenue \$ 107,261.)

4e Total program service expenses 10,191,169.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and schedules.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 22-38 covering various IRS schedule requirements.

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

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 1a-1c regarding Form 1096 and backup withholding.

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

Table with columns for question number, question text, and Yes/No columns. Includes rows 2a through 17 with various tax-related questions and answers.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (39); 1b Enter the number of voting members included on line 1a, above, who are independent (39); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O (X).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (X); 10b 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); 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (X); 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (X); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (X); b Other officers or key employees of the organization (X); If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X); 16b 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? (X).

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 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [ ] Another's website [X] Upon request [ ] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
OLAJUMOKE SIWAJOULA - (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 the instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

Check this box if neither the organization 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) SUSAN FISHER STERLING EXECUTIVE DIRECTOR (ALICE WEST DIR.)	40.00			X			426,000.	0.	27,111.	
(2) PAMELA J. AYRES DEP. DIR. FIN. & OPS (UNTIL 4/2024)	40.00			X			219,112.	0.	12,099.	
(3) KATHRYN WAT DEPUTY DIR., ART, PROG. & PUBLIC ENG	40.00			X			208,009.	0.	22,056.	
(4) ILENE GUTMAN DEPUTY DIR., NAT. & INT'L. OUTREACH	40.00					X	182,121.	0.	9,070.	
(5) CHRISTINA KNOWLES DIR. OF DEV., ANNUAL GIVING & MEMBER	40.00			X			179,713.	0.	9,210.	
(6) DOUG BEAVER DIRECTOR OF SECURITY	40.00					X	142,595.	0.	18,774.	
(7) GORDON UMBARGER DIRECTOR OF OPERATIONS	40.00					X	138,579.	0.	13,056.	
(8) LORI BRUBAKER DIRECTOR OF SPECIAL EVENTS	40.00					X	126,449.	0.	21,192.	
(9) AMY MANNARINO DIRECTOR OF COMMUNICATIONS	40.00					X	116,942.	0.	6,182.	
(10) OLAJUMOKE SIWAJUOLA CFO (FROM 3/2024)	40.00			X			0.	0.	0.	
(11) WINTON S. HOLLADAY CHAIR OF THE BOARD	1.00	X		X			0.	0.	0.	
(12) SUSAN GOLDBERG PRESIDENT	1.00	X		X			0.	0.	0.	
(13) SHEILA SHAFFER TREASURER & FINANCE CHAIR	1.00	X		X			0.	0.	0.	
(14) CHARLOTTE CLAY BUXTON SECRETARY	1.00	X		X			0.	0.	0.	
(15) PAMELA PARIZEK AUDIT CHAIR	1.00	X		X			0.	0.	0.	
(16) MARCIA MYERS CARLUCCI BUILDING CHAIR	1.00	X		X			0.	0.	0.	
(17) AMY WEISS COMMUNICATIONS CHAIR	1.00	X		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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) ASHLEY DAVIS GOVERNMENT RELATIONS CHAIR	1.00	X		X				0.	0.	0.
(19) NANCY DUBER GOVERNANCE CHAIR	1.00	X		X				0.	0.	0.
(20) NANCY NELSON STEVENSON WORKS OF ART CHAIR	1.00	X		X				0.	0.	0.
(21) DIANE CASEY-LANDRY INVESTMENT CHAIR	1.00	X		X				0.	0.	0.
(22) GINA F. ADAMS MEMBER	1.00	X						0.	0.	0.
(23) JANICE LINDHURST ADAMS MEMBER	1.00	X						0.	0.	0.
(24) LIZETTE CORRO MEMBER	1.00	X						0.	0.	0.
(25) BELINDA DE GAUDEMAR MEMBER	1.00	X						0.	0.	0.
(26) DEBORAH I. DINGELL MEMBER	1.00	X						0.	0.	0.
<b>1b Subtotal</b>								1,739,520.	0.	138,750.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								1,739,520.	0.	138,750.

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 10

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	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	4	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	5	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
GRUNLEY CONSTRUCTION CO., INC. 15020 SHADY GROVE RD., ROCKVILLE, MD 20850	CONSTRUCTION SERVICES	24,618,559.
DANILLER + COMPANY, 3724 JEFFERSON ST., SUITE 302, AUSTIN, TX 78731	MEMBERSHIP ADVISOR	880,546.
TRONVIG GROUP INC. 68 34TH ST, BROOKLYN, NY 11232	STRATEGY & ADVERTISING SERVICES	619,735.
SPACESAVER SYSTEMS, INC. 10800 CONNECTICUT AVE, KENSINGTON, MD 20895	SPECIALTY CONTRACTOR SERVICES	589,489.
SEFTEL PRODUCTIONS INC., 347 W 36TH ST, SUITE 702, NEW YORK, NY 10018	PRODUCTION SERVICES	465,996.

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 20

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) SUSAN DUNLEVY MEMBER	1.00	X						0.	0.	0.
(28) ANJALI GUPTA MEMBER	1.00	X						0.	0.	0.
(29) PAM GWALTNEY MEMBER	1.00	X						0.	0.	0.
(30) CINDY JONES MEMBER	1.00	X						0.	0.	0.
(31) SALLY L. JONES MEMBER	1.00	X						0.	0.	0.
(32) MARLENE MALEK MEMBER	1.00	X						0.	0.	0.
(33) ANN WALKER MARCHANT MEMBER	1.00	X						0.	0.	0.
(34) JACQUELINE BADER MARS MEMBER	1.00	X						0.	0.	0.
(35) JULIANA E. MAY MEMBER	1.00	X						0.	0.	0.
(36) BONNIE MCELVEEN-HUNTER MEMBER	1.00	X						0.	0.	0.
(37) LUCRETIA ADYMY RISOLEO MEMBER	1.00	X						0.	0.	0.
(38) STEPHANIE SALES MEMBER	1.00	X						0.	0.	0.
(39) JULIE SAPONE MEMBER	1.00	X						0.	0.	0.
(40) KATHLEEN ELIZABETH SPRINGHORN MEMBER	1.00	X						0.	0.	0.
(41) ELIZA HOLLADAY MEMBER	1.00	X						0.	0.	0.
(42) ALEJANDRA SEGURA MEMBER	1.00	X						0.	0.	0.
(43) ANNIE TOTAH MEMBER	1.00	X						0.	0.	0.
(44) SARAH TRECO MEMBER	1.00	X						0.	0.	0.
(45) PATTI WHITE MEMBER	1.00	X						0.	0.	0.
(46) MARTHA DIPPELL MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c .....										



**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	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>					
	<b>b</b> Membership dues .....	<b>1b</b>	2,154,470.				
	<b>c</b> Fundraising events .....	<b>1c</b>	603,764.				
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	2,310,675.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	9,163,977.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 1,138,269.				
	<b>h Total.</b> Add lines 1a-1f .....		14,232,886.				
<b>Program Service Revenue</b>	<b>2 a</b> ADMISSIONS	<b>Business Code</b>					
		900099	461,381.	461,381.			
	<b>b</b> MEMBERSHIP DUES	900099	263,895.	263,895.			
	<b>c</b> PROGRAM FEES	900099	87,457.	87,457.			
	<b>d</b> TOURS	900099	19,804.	19,804.			
	<b>e</b> RIGHTS & PERMISSIONS	900099	1,135.	1,135.			
	<b>f</b> All other program service revenue .....						
<b>g Total.</b> Add lines 2a-2f .....		833,672.					
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		2,411,850.		7,083.	2404767.	
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....		630.			630.	
	<b>6 a</b> Gross rents .....	<b>6a</b>	(i) Real				
			(ii) Personal				
			723,600.				
	<b>b</b> Less: rental expenses ...	<b>6b</b>	454,577.				
	<b>c</b> Rental income or (loss)	<b>6c</b>	269,023.				
	<b>d</b> Net rental income or (loss) .....		269,023.			269,023.	
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	<b>7a</b>	(i) Securities				
			(ii) Other				
			12,599,576.				
	<b>b</b> Less: cost or other basis and sales expenses .....	<b>7b</b>	10,981,715.				
	<b>c</b> Gain or (loss) .....	<b>7c</b>	1,617,861.				
	<b>d</b> Net gain or (loss) .....		1,617,861.			1617861.	
<b>8 a</b> Gross income from fundraising events (not including \$ 603,764. of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>		63,750.				
		<b>b</b> Less: direct expenses .....	<b>8b</b>	592,106.			
		<b>c</b> Net income or (loss) from fundraising events .....		-528,356.			-528,356.
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
		<b>b</b> Less: direct expenses .....	<b>9b</b>				
		<b>c</b> Net income or (loss) from gaming activities .....					
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>		311,287.				
		<b>b</b> Less: cost of goods sold .....	<b>10b</b>	488,128.			
		<b>c</b> Net income or (loss) from sales of inventory .....		-176,841.	-176,841.		
<b>Miscellaneous Revenue</b>	<b>11 a</b> MISCELLANEOUS	<b>Business Code</b>					
		900099	-73.			-73.	
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> All other revenue .....						
<b>e Total.</b> Add lines 11a-11d .....		-73.					
<b>12 Total revenue.</b> See instructions .....		18,660,652.	656,831.	7,083.	3763852.		

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....	1,148,443.	331,259.	721,194.	95,990.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
<b>7</b> Other salaries and wages .....	4,212,158.	2,742,209.	1,233,963.	235,986.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	151,972.	101,908.	42,160.	7,904.
<b>9</b> Other employee benefits .....	367,580.	210,925.	132,622.	24,033.
<b>10</b> Payroll taxes .....	449,637.	258,940.	162,870.	27,827.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....	38,435.	24,827.	13,276.	332.
<b>c</b> Accounting .....	56,551.		56,551.	
<b>d</b> Lobbying .....				
<b>e</b> Professional fundraising services. See Part IV, line 17	1,419,964.			1,419,964.
<b>f</b> Investment management fees .....	272,036.		272,036.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	1,104,660.	750,091.	344,537.	10,032.
<b>12</b> Advertising and promotion .....	496,352.	493,263.	2,223.	866.
<b>13</b> Office expenses .....	385,995.	227,417.	114,843.	43,735.
<b>14</b> Information technology .....	629,931.	331,864.	263,419.	34,648.
<b>15</b> Royalties .....				
<b>16</b> Occupancy .....	355,577.		355,577.	
<b>17</b> Travel .....	454,379.	331,183.	58,075.	65,121.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....	559,432.	325,235.	10,004.	224,193.
<b>20</b> Interest .....	403,171.	36,190.	353,343.	13,638.
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....	2,098,228.	2,001,871.	77,621.	18,736.
<b>23</b> Insurance .....	186,504.		186,479.	25.
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a</b> <b>DIRECT MAIL</b>	783,399.	783,399.		
<b>b</b> <b>ART TRANS. AND STORAGE</b>	565,385.	479,095.	63,313.	22,977.
<b>c</b> <b>EXHIBITION CONSTRUCTION</b>	172,253.	137,720.	25,338.	9,195.
<b>d</b> <b>DUES &amp; SUBSCRIPTIONS</b>	23,481.	12,326.	10,259.	896.
<b>e</b> All other expenses .....	807,942.	611,447.	136,291.	60,204.
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	17,143,465.	10,191,169.	4,635,994.	2,316,302.
<b>26</b> <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 <input type="checkbox"/> 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 .....	2,509,337.	<b>1</b>	1,674,323.
	<b>2</b> Savings and temporary cash investments .....	15,976,607.	<b>2</b>	16,057,500.
	<b>3</b> Pledges and grants receivable, net .....	5,948,774.	<b>3</b>	4,987,583.
	<b>4</b> Accounts receivable, net .....	4,251.	<b>4</b>	223.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	4,547,133.
	<b>8</b> Inventories for sale or use .....	121,281.	<b>8</b>	146,142.
	<b>9</b> Prepaid expenses and deferred charges .....	127,360.	<b>9</b>	62,688.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 90,431,070.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 16,757,609.	57,386,105.	<b>10c</b> 73,673,461.
	<b>11</b> Investments - publicly traded securities .....	87,409,171.	<b>11</b>	89,689,128.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	2,561,437.	<b>12</b>	5,255,850.
	<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 .....	21,250.	<b>15</b>	500.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	172,065,573.	<b>16</b>	196,094,531.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	6,202,702.	<b>17</b>	2,024,171.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	142,528.	<b>19</b>	137,480.
	<b>20</b> Tax-exempt bond liabilities .....	11,108,591.	<b>20</b>	32,931,221.
	<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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<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 .....	347,444.	<b>25</b>	569,589.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	17,801,265.	<b>26</b>	35,662,461.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	15,433,737.	<b>27</b>	61,861,060.
	<b>28</b> Net assets with donor restrictions .....	138,830,571.	<b>28</b>	98,571,010.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	154,264,308.	<b>32</b>	160,432,070.
<b>33</b> Total liabilities and net assets/fund balances .....	172,065,573.	<b>33</b>	196,094,531.	

**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	18,660,652.
2	Total expenses (must equal Part IX, column (A), line 25)	2	17,143,465.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,517,187.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	154,264,308.
5	Net unrealized gains (losses) on investments	5	4,629,530.
6	Donated services and use of facilities	6	21,045.
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	160,432,070.

**Part XII Financial Statements and Reporting**

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

- 1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant? \_\_\_\_\_  
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant? \_\_\_\_\_  
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? \_\_\_\_\_  
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? \_\_\_\_\_
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits \_\_\_\_\_

	Yes	No
1		
2a		X
b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2023)



**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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	31152297.	17150056.	25310299.	22864764.	14232886.	110710302
<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 .....	31152297.	17150056.	25310299.	22864764.	14232886.	110710302
<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) .....						33844297.
<b>6 Public support.</b> Subtract line 5 from line 4.						76866005.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>7</b> Amounts from line 4 .....	31152297.	17150056.	25310299.	22864764.	14232886.	110710302
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	2450854.	1799649.	1524268.	1907213.	3128997.	10810981.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....	14,380.	9,530.	8,576.	10,767.	4,205.	47,458.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	185.	2,795.	-5,199.	-338.	-73.	-2,630.
<b>11 Total support.</b> Add lines 7 through 10						121566111
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	3,374,898.
<b>13 First 5 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 2023 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	63.23 %
<b>15</b> Public support percentage from 2022 Schedule A, Part II, line 14 .....	<b>15</b>	61.54 %
<b>16a 33 1/3% support test - 2023.</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 - 2022.</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 - 2023.</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 - 2022.</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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 on 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 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

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

<b>15</b> Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2022 Schedule A, Part III, line 15 .....	<b>16</b>	%

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

<b>17</b> Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2022 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2023.** 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 - 2022.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

	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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</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 on 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 on 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 line 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 on lines 11b and 11c below, the governing body of a supported organization?		
<b>b</b> A family member of a person described on line 11a above?		
<b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<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? <i>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.</i>		
<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)? <i>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).</i>		
<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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b> By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<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 governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<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? <i>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.</i>	Yes	No
<b>b</b> Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b 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? <i>If "Yes" or "No" provide details in Part VI.</i>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
<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.

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
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 ( <i>explain in detail in Part VI</i> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 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)

<b>Section D - Distributions</b>		<b>Current Year</b>
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>
<b>6</b>	Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2023 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

<b>Section E - Distribution Allocations</b> (see instructions)	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2023</b>	<b>(iii) Distributable Amount for 2023</b>
<b>1</b> Distributable amount for 2023 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2023			
<b>a</b> From 2018			
<b>b</b> From 2019			
<b>c</b> From 2020			
<b>d</b> From 2021			
<b>e</b> From 2022			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2023 distributable amount			
<b>i</b> Carryover from 2018 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2023 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2023 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2024.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2019			
<b>b</b> Excess from 2020			
<b>c</b> Excess from 2021			
<b>d</b> Excess from 2022			
<b>e</b> Excess from 2023			

Schedule A (Form 990) 2023



**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

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

OMB No. 1545-0047

**2023**

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), 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 (entering "N/A" in column (b) instead of the contributor name and address), 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), 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).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

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
<u>1</u>	 <hr/> <hr/> <hr/>	\$ <u>1,792,071.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	 <hr/> <hr/> <hr/>	\$ <u>1,644,029.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	 <hr/> <hr/> <hr/>	\$ <u>880,339.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	 <hr/> <hr/> <hr/>	\$ <u>850,908.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>	 <hr/> <hr/> <hr/>	\$ <u>500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>	 <hr/> <hr/> <hr/>	\$ <u>455,149.</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	_____ _____ _____	\$ <u>400,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	_____ _____ _____	\$ <u>335,863.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
9	_____ _____ _____	\$ <u>325,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	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>4</u>	1,448 SHARES OF ALIGN TECHNOLOGY _____ _____ _____	\$ <u>122,718.</u>	<u>03/28/24</u>
<u>4</u>	238 SHARES OF AMAZON _____ _____ _____	\$ <u>77,828.</u>	<u>03/28/24</u>
<u>4</u>	2 SHARES OF BLOCK INC _____ _____ _____	\$ <u>361.</u>	<u>03/28/24</u>
<u>6</u>	150 SHARES OF GENERAL MILLS INC. _____ _____ _____	\$ <u>10,233.</u>	<u>04/16/24</u>
<u>8</u>	97 SHARES OF VISTRA CORP _____ _____ _____	\$ <u>9,399.</u>	<u>05/31/24</u>
<u>8</u>	806 SHARES OF VISA INC. _____ _____ _____	\$ <u>205,998.</u>	<u>12/11/23</u>

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
8	1,279 SHARES OF KIRBY CP _____ _____ _____	\$ 93,695.	12/11/23
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

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 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
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
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 for instructions and the latest information.

OMB No. 1545-0047

2023

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number and acreage, modified easements, states where located, monitoring policy, staff hours, expenses, and requirements for section 170(h)(4)(B)(i) and (ii).

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include elected not to report works of art, elected to report works of art with amounts, and received or held works of art for financial gain with amounts.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2023

**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 make 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 program
  - 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 in Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	68565038.	66576395.	75543402.	65689610.	66106482.
b Contributions	3,150,829.	235,194.	446,299.	406,999.	2,028,565.
c Net investment earnings, gains, and losses	6,090,776.	5,347,822.	-5996915.	17093101.	669,033.
d Grants or scholarships					
e Other expenditures for facilities and programs	4,035,655.	3,594,373.	3,416,391.	7,646,308.	3,114,470.
f Administrative expenses					
g End of year balance	73770988.	68565038.	66576395.	75543402.	65689610.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 11.0000 %
  - b Permanent endowment 58.6000 %
  - c Term endowment 30.4000 %
- 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:
- |  | Yes | No                                  |
|--|-----|-------------------------------------|
| (i) Unrelated organizations?   |     | <input checked="" type="checkbox"/> |
| (ii) Related organizations?  |     | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? |     |                                     |
- 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		85,411,359.	16,210,594.	69,200,765.
c Leasehold improvements				
d Equipment		2,413,986.	423,482.	1,990,504.
e Other		1,205,725.	123,533.	1,082,192.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				73,673,461.

**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, line 12, col. (B))		

**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, line 13, col. (B))		

**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, line 15, col. (B))	

**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	78,451.
(3) DEFERRED COMPENSATION	116,792.
(4) DEPOSITS HELD	324,500.
(5) REFUNDABLE ADVANCES	49,846.
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, col. (B))	569,589.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB 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>	24,574,002.
<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>	4,629,530.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	21,045.
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	1,534,811.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	6,185,386.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	18,388,616.
<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>	272,036.
<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>	272,036.
<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>	18,660,652.

**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>	18,406,240.
<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>	1,534,811.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	1,534,811.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	16,871,429.
<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>	272,036.
<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>	272,036.
<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>	17,143,465.

**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, 2024, THE MUSEUM'S HOLDINGS AGGREGATED 6,313 WORKS BY OVER 1,320 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, 2024, THE MUSEUM ADDED 97 WORKS WITH AN APPRAISED VALUE OF APPROXIMATELY \$558,250 TO ITS HOLDINGS AND NO WORKS WERE DE-ACCESSIONED. 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 XI, LINE 2D - OTHER ADJUSTMENTS:

FUNDRAISING EVENT EXPENSES REPORTED AS EXPENSE ON THE 592,106.  
FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON  
FORM 990, PART VIII, LINE 8B.

COST OF GOODS SOLD REPORTED AS EXPENSE ON THE 488,128.  
FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON  
FORM 990, PART VIII, LINE 10B.

FACILITY RENTAL EXPENSE REPORTED AS EXPENSE ON THE 454,577.  
FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON  
FORM 990, PART VIII, LINE 6B.

TOTAL TO SCHEDULE D, PART XI, LINE 2D 1,534,811.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FACILITY RENTAL EXPENSE REPORTED AS EXPENSE ON THE 454,577.  
FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON  
FORM 990, PART VIII, LINE 6B.

COST OF GOODS SOLD REPORTED AS EXPENSE ON THE 488,128.  
FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON  
FORM 990, PART VIII, LINE 10B.

**Part XIII** Supplemental Information (continued)

FUNDRAISING EVENT EXPENSES REPORTED AS EXPENSE ON THE 592,106.

FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON

FORM 990, PART VIII, LINE 8B.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 1,534,811.

Multiple horizontal lines for supplemental information.

**SCHEDULE G  
(Form 990)**

**Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

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.

**2023**

Department of the Treasury  
Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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 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			
LUCY BUCHANAN - 7819 MARQUETTE ST, DALLAS, TX	DEVELOPMENT CONSULTANT		X	0.	334,784.	-334,784.
JACOBSON CONSULTING APPLICATIONS INC. - 575	DEVELOPMENT CONSULTANT		X	0.	49,270.	-49,270.
KENNETH DUTTER - 11150 BIG CANOE, BIG CANOE, GA 30143	PLANNED GIVING CONSULTANT		X	0.	107,083.	-107,083.
DANILLER + COMPANY - 3724 JEFFERSON ST., SUITE 302, BENEFACTOR - 450 S. FRONT ST, COLUMBUS, OH 43215	MEMBERSHIP ADVISOR		X	0.	807,472.	-807,472.
	DEVELOPMENT CONSULTANT		X	0.	121,355.	-121,355.
<b>Total</b>					1,419,964.	-1419964.

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.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		GALA (event type)	(event type)	NONE (total number)	
Revenue	1	Gross receipts	667,514.		667,514.
	2	Less: Contributions	603,764.		603,764.
	3	Gross income (line 1 minus line 2)	63,750.		63,750.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	79,642.		79,642.
	7	Food and beverages	101,150.		101,150.
	8	Entertainment	2,700.		2,700.
	9	Other direct expenses	408,614.		408,614.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			592,106.
11	Net income summary. Subtract line 10 from line 3, column (d)			-528,356.	

**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.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	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:
 

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Name \_\_\_\_\_

Address \_\_\_\_\_

16 Gaming manager information:

Name \_\_\_\_\_

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

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

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b Enter the amount of distributions required under state law 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: LUCY BUCHANAN

(I) ADDRESS OF FUNDRAISER: 7819 MARQUETTE ST, DALLAS, TX 75225

(I) NAME OF FUNDRAISER: JACOBSON CONSULTING APPLICATIONS INC.

(I) ADDRESS OF FUNDRAISER: 575 EIGHTH AVE, 12TH FLOOR, NEW YORK, NY 10018

(I) NAME OF FUNDRAISER: DANILLER + COMPANY

**Part IV** Supplemental Information *(continued)*

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

Multiple horizontal lines for supplemental information.

**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

**2023**

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 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 checked="" 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>		<b>X</b>
<b>4b</b>	<b>X</b>	
<b>4c</b>		<b>X</b>
<b>5a</b>		<b>X</b>
<b>5b</b>		<b>X</b>
<b>6a</b>		<b>X</b>
<b>6b</b>		<b>X</b>
<b>7</b>	<b>X</b>	
<b>8</b>		<b>X</b>
<b>9</b>		

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

Schedule J (Form 990) 2023

**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 and/or 1099-NEC 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 (ALICE WEST DIR.)	(i)	376,000.	50,000.	0.	19,219.	7,892.	453,111.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) PAMELA J. AYRES DEP. DIR. FIN. & OPS (UNTIL 4/2024)	(i)	209,112.	10,000.	0.	11,219.	880.	231,211.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) KATHRYN WAT DEPUTY DIR., ART, PROG. & PUBLIC ENG	(i)	208,009.	0.	0.	10,400.	11,656.	230,065.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ILENE GUTMAN DEPUTY DIR., NAT. & INT'L. OUTREACH	(i)	172,121.	10,000.	0.	8,863.	207.	191,191.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) CHRISTINA KNOWLES DIR. OF DEV., ANNUAL GIVING & MEMBER	(i)	179,713.	0.	0.	8,986.	224.	188,923.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) DOUG BEAVER DIRECTOR OF SECURITY	(i)	138,442.	4,153.	0.	7,130.	11,644.	161,369.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) GORDON UMBARGER DIRECTOR OF OPERATIONS	(i)	118,579.	20,000.	0.	6,929.	6,127.	151,635.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III** Supplemental Information

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

**PART I, LINE 4B:**

THE MUSEUM HAS A 457(F) DEFERRED COMPENSATION PLAN WHICH BECAME EFFECTIVE JULY 1, 2021. SUSAN FISHER STERLING PARTICIPATES IN THE PLAN. \$35,000 OF CONTRIBUTIONS TO THE PLAN ARE INCLUDED IN PART II, COLUMN (C).

**PART I, LINE 7:**

THE FOLLOWING EMPLOYEES RECEIVED MERIT-BASED BONUS PAYMENTS DURING THE YEAR:

- SUSAN FISHER STERLING	\$50,000
- PAMELA J. AYRES	\$10,000
- ILENE GUTMAN	\$10,000
- DOUG BEAVER	\$4,153
- GORDON UMBARGER	\$20,000
- LORI BRUBAKER	\$10,000

**Supplemental Information on Tax-Exempt Bonds**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,  
explanations, and any additional information in Part VI.  
Attach to Form 990. 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	Bond Issues	SEE PART VI FOR COLUMN (F) CONTINUATIONS											
		(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
								Yes	No	Yes	No	Yes	No
A	THE DISTRICT OF COLUMBIA	53-6001131	NONE	08/26/21	35000000.	FINANCE IN PART THE RENOVATION OF		X		X		X	
B													
C													
D													

Part II	Proceeds	A		B		C		D	
1	Amount of bonds retired								
2	Amount of bonds legally defeased								
3	Total proceeds of issue	33,573,418.							
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds								
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	33,573,418.							
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion	2024							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		X						
15	Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X						
16	Has the final allocation of proceeds been made?		X						
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?		X						

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

Schedule K (Form 990) 2023

<b>Part III Private Business Use</b>								
	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? .....		X						
<b>2</b> Are there any lease arrangements that may result in private business use of bond-financed property? .....		X						
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? .....		X						
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? .....		X						
<b>d</b> If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? ...								
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government .....								
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government .....								
<b>6</b> Total of lines 4 and 5 .....								
<b>7</b> Does the bond issue meet the private security or payment test? .....		X						
<b>8a</b> Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of .....								
<b>c</b> If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? .....								
<b>9</b> Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? .....	X							

<b>Part IV Arbitrage</b>								
	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? .....		X						
<b>2</b> If "No" to line 1, did the following apply?								
<b>a</b> Rebate not due yet? .....		X						
<b>b</b> Exception to rebate? .....		X						
<b>c</b> No rebate due? .....		X						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed .....								
<b>3</b> Is the bond issue a variable rate issue? .....		X						

**Part IV Arbitrage** (continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>4a</b> Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? .....		X						
<b>b</b> Name of provider .....								
<b>c</b> Term of hedge .....								
<b>d</b> Was the hedge superintegrated? .....								
<b>e</b> Was the hedge terminated? .....								
<b>5a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)? .....		X						
<b>b</b> Name of provider .....								
<b>c</b> Term of GIC .....								
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? .....								
<b>6</b> Were any gross proceeds invested beyond an available temporary period? .....		X						
<b>7</b> Has the organization established written procedures to monitor the requirements of section 148? .....	X							

**Part V Procedures To Undertake Corrective Action**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations? .....								
	X							

**Part VI Supplemental Information.** Provide additional information for responses to questions on Schedule K. See instructions.

**SCHEDULE K, PART I, BOND ISSUES:**

(A) ISSUER NAME: THE DISTRICT OF COLUMBIA

(F) DESCRIPTION OF PURPOSE:

FINANCE IN PART THE RENOVATION OF THE MUSEUM'S BUILDING.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2023**

Open to Public Inspection

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 instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

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	97	0	SEE BELOW
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	14	1,138,269	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 ( )				
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 V, Donee Acknowledgement ..... **29** **0**

	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 3 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.		

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

Schedule M (Form 990) 2023

**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 REPORTS 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 6,313 WORKS BY OVER 1,320 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, 2024, THE MUSEUM ADDED 97 WORKS WITH AN APPRAISED VALUE OF APPROXIMATELY \$558,250 TO ITS HOLDINGS AND NO WORKS WERE DE-ACCESSIONED. 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 AND CHANGE IN NET ASSETS.

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
Attach to Form 990 or Form 990-EZ.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2023**

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:

- MORE THAN 7,100 AUDIENCE MEMBERS ENJOYED EDUCATION PROGRAMS SUCH AS TOURS, TALKS, WORKSHOPS, AND ART MAKING.

ROOTED IN PLACE

THROUGHOUT THE INAUGURAL YEAR, VISITORS ENJOYED INNOVATIVE PROGRAMS AND EVENTS CONNECTED TO NMWA'S MISSION AND EXHIBITIONS. THE BUILDING'S REVAMPED SPACES NOT ONLY HOSTED RETURNING SIGNATURE PROGRAMS-THEY ALSO INSPIRED EXCITING NEW OFFERINGS THAT AMPLIFY THE VOICES OF ARTISTS.

A KEY ADDITION FROM NMWA'S RENOVATION IS THE BRAND-NEW SUSAN SWARTZ STUDIO. THIS FLEXIBLE CLASSROOM FEATURES SINKS, MOVABLE TABLES, STORAGE FOR ART SUPPLIES, AND TECHNOLOGY FOR PRESENTATIONS. AUDIENCES AND MUSEUM EDUCATORS ALIKE ENJOYED USING THE SPACE TO TRY OUT HANDS-ON

WORKSHOPS, NEW PROGRAMS, LECTURES, AND MORE. A NEW OPEN STUDIO SERIES

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

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ENGAGES VISITORS WITH DROP-IN ART-MAKING DURING FREE COMMUNITY DAYS.

NEARLY 1,600 GUESTS ATTENDED SIXTEEN SESSIONS-MAKING BUTTONS,

WATERCOLOR PAINTINGS, FELT BOWLS, BEADED PINS, AND OTHER

CREATIONS-INSPIRED BY WORKS IN THE MUSEUM'S COLLECTION.

THE STUDIO ALSO ENABLED A REINVIGORATED SCHEDULE OF FIRSTHAND

EXPERIENCE WORKSHOPS, A LONGSTANDING, POPULAR SERIES. ACROSS FOUR

EVENTS, ARTISTS ADJOA BURROWES, JAMILA FELTON, ROBIN HA, AND JEN

WHITE-JOHNSON TAUGHT LEARNERS HOW TO MAKE ZINES, DECORATIVE PAPERS,

ARTISTS' BOOKS, AND MONOTYPES. ONE PARTICIPANT SAID, "I FELT WELCOME AS

A BEGINNER TO A GREAT EXPERIENCE WHERE I ACTUALLY MADE ART. THE

INSTRUCTOR, EDUCATORS, AND FELLOW ATTENDEES WERE VERY HELPFUL."

EDUCATORS AND DOCENTS BROUGHT NMWA'S ART AND EXHIBITIONS TO LIFE VIA

ENGAGING TOURS:

- NEW DAILY DROP-IN TOURS ENGAGED 1,066 PEOPLE.

- MORE THAN 4,190 GUESTS ATTENDED COLLECTION HIGHLIGHTS TOURS AND

EXHIBITION TOURS. OF THESE, THIRTY-FOUR TOURS WERE FOR SCHOOL AND YOUTH

GROUPS COMPRISING 771 CHILDREN AND 113 CHAPERONES.

A NEW PROGRAM SERIES, THE BIGGER PICTURE, COMBINED IN-DEPTH LECTURES

WITH CONVERSATIONS IN THE GALLERIES. THESE PROGRAMS EXPLORED ART FROM

THE SIXTEENTH CENTURY TO TODAY THROUGH THE MUSEUM'S COLLECTION:

SEVENTY-TWO PARTICIPANTS JOINED ACROSS FIVE PROGRAMS.

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

UNDERSTANDING OF THE WORK. IN MAY, THE VIDEO SERIES, WHICH IS ALSO

AVAILABLE ON YOUTUBE, WAS NAMED A 2024 WEBBY AWARDS HONOREE, REACHING

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AN EVEN WIDER AUDIENCE.

CONTEMPORARY SCULPTURE TOOK CENTER STAGE IN THE SKY'S THE LIMIT. VISITORS WERE ENTHRALLED BY LARGE-SCALE WORKS THAT DANGLED FROM THE CEILING AND CASCADED DOWN WALLS. THIS DRAMATIC EXHIBITION WOULD NOT HAVE BEEN POSSIBLE IN THE BUILDING BEFORE ITS RENOVATION: NEW INFRASTRUCTURE ALLOWS CURATORS MORE FLEXIBILITY IN PLANNING INSTALLATIONS. THE SKY'S THE LIMIT DEBUTED SEVERAL COLLECTION WORKS NEVER BEFORE EXHIBITED AT NMWA, INCLUDING A 164-FOOT-LONG ABSTRACT PHOTOGRAPH BY MARIAH ROBERTSON, A SPARKLING, SUBTLY SHIMMYING SCULPTURE BY BEATRIZ MILHAZES, AND A SHOWSTOPPING CHANDELIER BY JOANA VASCONCELOS THAT COMBINES CROCHETED WOOL AND MURANO GLASS.

ON THE FOURTH FLOOR, WITHIN THE GLORIA AND DAN LOGAN LEARNING COMMONS, THE BRAND-NEW MARYROSS TAYLOR GALLERIES FEATURED THREE EXHIBITIONS FOCUSED ON KEY STRENGTHS IN NMWA'S COLLECTION:

- HUNG LIU: MAKING HISTORY PRESENTED LIU'S POIGNANT "WEEPING REALIST" PORTRAITS, THROUGH WORKS ON PAPER AND MAJOR PAINTINGS.

- HOLDING GROUND: ARTISTS' BOOKS FOR THE NATIONAL MUSEUM OF WOMEN IN THE ARTS HIGHLIGHTED NINE NEW WORKS BY CELEBRATED BOOK ARTISTS.

- IMPRESSIVE: ANTOINETTE BOUZONNET-STELLA FEATURED A FASCINATING SERIES OF TWENTY-FIVE CLASSICAL PRINTS BY THE SEVENTEENTH-CENTURY FRENCH ARTIST.

VISITORS ENJOYED THE BRAND-NEW GALLERIES-MORE SPACE DEDICATED TO NMWA'S MISSION-AS WELL AS THE BREADTH OF THESE EXHIBITIONS.

"EVEN FOR A CORRESPONDENT WITH A KEEN INTEREST IN FEMINIST ART HISTORY,

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NMWA'S INAUGURAL SHOWS ARE A REVELATION." SARAH CASCONI FOR ARTNET

IN THE THIRD-FLOOR GALLERIES, THE ONGOING COLLECTION INSTALLATION REMIX PRESENTS FAMILIAR FAVORITES AND NEVER-BEFORE EXHIBITED WORKS. A JOYOUS LIFE-SIZED SCULPTURE BY NIKI DE SAINT PHALLE, PREGNANT NANA (1995), GREETES VISITORS AS THEY ENTER. THE NEW FLOOR PLAN FEATURES EXTENDED SIGHTLINES AND OPEN NICHE: GALLERY-GOERS CAN CATCH A LONG-DISTANCE GLIMPSE OF DEBORAH BUTTERFIELD'S LARGE-SCALE HORSE SCULPTURE BIG HORN (2006); SPEND TIME WITH ARRESTING PORTRAITS BY DELITA MARTIN, MAY STEVENS, AND GWEN JOHN; AND DELVE INTO NMWA'S WIDE-RANGING COLLECTION OF PHOTOGRAPHY BY RANIA MATAR, BERENICE ABBOTT, AND YEVONDE, AMONG MANY OTHERS. GUESTS ENJOY DISCOVERING CONNECTIONS AMONG ARTWORKS IN THEMATIC GROUPINGS, IN SOME CASES ANCHORED BY A MEDIUM AND IN OTHERS BY A SHARED HUE OR IDEA.

MEANWHILE, THIRTEEN OTHER NMWA WORKS TRAVELED TO SPECIAL EXHIBITIONS AROUND THE WORLD, SHARING THE MUSEUM'S HOLDINGS WITH NEW AUDIENCES. LAVINIA FONTANA'S PORTRAIT OF COSTANZA ALIDOSI (CA. 1595) FEATURED IN EXHIBITIONS AT THE NATIONAL GALLERY OF IRELAND, ART GALLERY OF ONTARIO, AND BALTIMORE MUSEUM OF ART. LOUISE ABMA'S PAINTING A GAME OF CROQUET (1872) TRAVELED TO MUSE MARMOTTAN MONET IN PARIS, IN AN EXHIBITION-COINCIDING WITH THE SUMMER OLYMPICS IN PARIS-THAT EXPLORED THE VISUAL HISTORY OF SPORTS.

A WHOLE NEW WORLD

IN APRIL, NEW WORLDS: WOMEN TO WATCH 2024 OPENED TO GREAT FANFARE. IT WAS THE LARGEST ITERATION OF THE SIGNATURE EXHIBITION SERIES, A DYNAMIC COLLABORATION BETWEEN NMWA AND ITS NATIONAL AND INTERNATIONAL OUTREACH

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COMMITTEES. NEW WORLDS FEATURED TWENTY-EIGHT WOMEN ARTISTS FROM AROUND THE GLOBE WHOSE WORKS ENVISIONED NEW REALITIES, RESPONDING TO A WORLD TRANSFORMED BY A GLOBAL PANDEMIC, ADVOCACY FOR SOCIAL REFORM, AND POLITICAL DIVISION.

"IT'S HARD TO THINK OF A FINER EXAMPLE OF THE MUSEUM'S EXECUTION OF ITS . . . ROLE AS THE FIRST MUSEUM IN THE WORLD SOLELY DEDICATED TO CHAMPIONING WOMEN THROUGH THE ARTS THAN NEW WORLDS." BRIAN P. KELLY FOR THE WALL STREET JOURNAL

PROGRAMMING CONVENED ARTISTS AND ENGAGED OUR AUDIENCE TO ILLUMINATE THE EXHIBITION:

- SIX VIRTUAL ARTIST PANEL DISCUSSIONS, OPEN EXCLUSIVELY TO MEMBERS, FEATURED TWENTY-FOUR NEW WORLDS ARTISTS. NEARLY 400 MEMBERS ATTENDED THE PROGRAMS.

- AT A NMWA NIGHTS BASH IN MAY, ATTENDEES WORE COSTUMES INSPIRED BY THE EXHIBITION'S THEME.

OVER THE TWO-DAY COMMITTEE CONFERENCE COINCIDING WITH THE EXHIBITION'S OPENING, 110 REPRESENTATIVES FROM TWENTY-FIVE OF THE MUSEUM'S THIRTY-ONE NATIONAL AND INTERNATIONAL OUTREACH COMMITTEES CAME TOGETHER AT NMWA. MEMBERS TOURED NEW WORLDS AND THE NEWLY RENOVATED BUILDING; EXCHANGED IDEAS DURING PANELS FOCUSING ON PROGRAMMING, FUNDRAISING, AND ADVOCACY; NETWORKED WITH EACH OTHER AND NMWA STAKEHOLDERS; AND ATTENDED RECEPTIONS AT THE RESIDENCES OF THE FRENCH AND BRITISH AMBASSADORS. THE FORMAL CONFERENCE PROGRAM CONCLUDED WITH THE OPENING RECEPTION OF NEW WORLDS.

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

THE MUSEUM'S COLLECTION GREW BY 97 WORKS DURING THE RECENT YEAR: 87

PHOTOGRAPHS, 4 PRINTS, 3 DRAWINGS, 1 PAINTING, 1 SCULPTURE, AND 1

MIXED-MEDIA WORK.

THE POPULAR FRESH TALK SERIES RETURNED WITH THREE FORWARD-THINKING CONVERSATIONS. "DIGITAL FUTURES" FEATURED ARTISTS AND CREATORS WHO SPECIALIZE IN DIGITAL ART AND CURRENCY. "CONSCIOUS CREATORS," IN TANDEM WITH NMWA'S ANNUAL MAKERS' MARKET, FOCUSED ON ETHICAL PRODUCTION AND SUSTAINABILITY BY ARTISTS, BUSINESS OWNERS, AND CREATORS. "INFLUENCE AND COLLECTING" FEATURED COLLECTORS DISCUSSING GENDER EQUITY IN PRIVATE AND PUBLIC COLLECTIONS.

JANUARY BROUGHT THE DEBUT OF A LIVELY AND POPULAR NEW MONTHLY LATE-HOURS SERIES, NMWA NIGHTS, WHICH FEATURES ACTIVITIES AND ACTIVATIONS THROUGHOUT THE MUSEUM. EACH EVENING FEATURED A GUIDING THEME, APPEARANCES AND EVENTS FROM COMMUNITY PARTNERS, MUSIC, ART-MAKING, CREATIVE COCKTAILS AND MOCKTAILS, AND SPOTLIGHT CONVERSATIONS IN THE GALLERIES. IN TOTAL, MORE THAN 1,860 ATTENDEES ENJOYED THE LIVELY ENERGY OF EACH SOLD-OUT EVENT. PARTNERSHIPS AND HIGHLIGHTS-DRAG KINGS, DJS, A POP-UP LIBRARY, A CLOTHING SWAP, AND MORE-HAVE SURPRISED AND DELIGHTED NMWA NIGHTS ATTENDEES.

IN THE BEAUTIFULLY REDESIGNED BETTY BOYD DETTRE LIBRARY AND RESEARCH CENTER (LRC), STAFF WELCOMED NEARLY 4,000 VISITORS TO BROWSE THE COLLECTIONS, INCLUDING 25,000 BOOKS AND PRINT RESOURCES. THE BUSY YEAR FEATURED SCHOLARSHIP AND PUBLIC ENGAGEMENT:

- TWENTY-EIGHT PEOPLE BOOKED SPECIAL RESEARCH VISITS, AND THE LRC

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FULFILLED 191 REFERENCE REQUESTS.

- THE COLLECTION CONTINUED TO GROW WITH 160 NEW ACQUISITIONS, INCLUDING BOOKS, ZINES, ARTISTS' BOOKS, AND OTHER PUBLICATIONS.

- CURATED BOOK DISPLAYS CELEBRATE SPECIAL EXHIBITIONS AND THE COLLECTION.

THE PUBLIC ENGAGED WITH LIBRARY RESOURCES THROUGH TOURS AND SPECIAL PROGRAMS. LRC STAFF HOSTED SPECIAL TOURS FOR VISITORS FROM THE SMITHSONIAN ADVISORY BOARD, BAINBRIDGE ISLAND MUSEUM OF ART, MUSEO NACIONAL DE ARTE DE CATALUA, THE DISTRICT OF COLUMBIA LIBRARY ASSOCIATION, AND GEORGE WASHINGTON UNIVERSITY, AMONG OTHERS. DURING THE REOPENING CELEBRATIONS, WOMEN WRITERS FROM ARS POETICA WROTE PERSONALIZED TYPEWRITER POEMS FOR ATTENDEES. PROGRAMS THROUGHOUT THE YEAR FEATURED HOLDING GROUND BOOK ARTISTS, AND A POP-UP COLLABORATION WITH BLACK ART LIBRARY WAS A HIGHLIGHT OF FEBRUARY'S NMWA NIGHTS EVENT.

LAYING IT ALL ONLINE

NMWA'S DIGITAL PLATFORMS AMPLIFIED OUR ART AND PROGRAMS TO AUDIENCES NEAR AND FAR. IN THE RECENT YEAR:

- THE WEBSITE RECEIVED 1.2 MILLION VISITS FROM 860,400 USERS, A MORE THAN 60% INCREASE FROM THE PREVIOUS YEAR.

- THE PERCENTAGE OF DIGITAL USERS FROM WASHINGTON, D.C., INCREASED BY 287% AS LOCAL AUDIENCES PLANNED THEIR VISITS.

- NMWA'S SOCIAL MEDIA POSTS RECEIVED 8.7 MILLION IMPRESSIONS ACROSS INSTAGRAM, FACEBOOK, AND X (FORMERLY TWITTER).

- NMWA'S INSTAGRAM ACCOUNT GAINED 18,451 FOLLOWERS, AND THE MUSEUM'S NEW TIKTOK ACCOUNT GARNERED 50,000 VIEWS ACROSS FIFTEEN VIDEOS.

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GUESTS AND PARTNER INSTITUTIONS ALIKE JOINED IN FOR A CELEBRATORY SOCIAL MEDIA CAMPAIGN, #NMTANOW. UPON THE MUSEUM'S REOPENING, NMWA HELD A PHOTO CONTEST INVITING VISITORS TO POST IMAGES USING THE HASHTAG, WHICH IS NOW AN EVERGREEN TAG FOR PATRONS TO SHARE THEIR VISITS. ADDITIONAL SOCIAL MEDIA COLLABORATIONS INCLUDED PARTNERSHIPS WITH THE NATIONAL GALLERY OF ART, LIFE MAGAZINE, METROPOLITAN MUSEUM OF ART, NEW-YORK HISTORICAL SOCIETY, AND INTERNATIONAL SPY MUSEUM.

MEANWHILE, THE MUSEUM'S POPULAR VIRTUAL PROGRAMS- REFINED IN RECENT YEARS AND BELOVED BY FAR-FLUNG NMWA FAN -CONTINUED TO WELCOME PARTICIPANTS FROM AROUND THE WORLD. HIGHLIGHTS INCLUDED PROGRAMS TAILORED TO EDUCATORS AS WELL AS BROAD AUDIENCES:

- IN JULY 2023, 265 EDUCATORS ATTENDED THE MUSEUM'S FOURTH ANNUAL VIRTUAL EDUCATOR SUMMER CAMP. CAMPERS REPRESENTED TWENTY-TWO STATES, WASHINGTON, D.C., AND SEVEN COUNTRIES INCLUDING AUSTRALIA, BAHRAIN, BERMUDA, CANADA, MEXICO, QATAR, AND SPAIN. ACROSS SIX SESSIONS, EDUCATORS AND GUEST ARTISTS INTRODUCED PARTICIPANTS TO HISTORICAL AND CONTEMPORARY WOMEN ARTISTS AND ENJOYED EXPERIMENTAL MAKING AND CLOSE LOOKING.

- AUDIENCES ADORED NMWA'S LONGSTANDING ART CHAT SERIES, WHICH HELD SEVENTEEN EVENTS WITH 470 TOTAL ATTENDEES.

IN 2024, NMWA'S #5WOMENARTISTS CAMPAIGN FOCUSED ON DISABILITY ACTIVISM AND ADVOCACY IN THE ARTS. THE MUSEUM'S SOCIAL MEDIA CHANNELS FEATURED LOCAL ORGANIZATIONS CENTERING ACCESSIBILITY, COLLECTION ARTISTS WHO HAVE EXPERIENCED A FORM OF DISABILITY, AND ARTISTS WHO ENGAGE IN DISABILITY ACTIVISM. LOCAL PHOTOGRAPHER SOPHIE LASHER TOOK OVER NMWA'S INSTAGRAM ACCOUNT TO TOUR THE MUSEUM FROM THE PERSPECTIVE OF A VISITOR

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WITH AUTISM AND ADHD. ON THE BLOG, ART HISTORIANS WHO RESEARCH ACCESSIBILITY IN ART HISTORY AND DESIGN SHARED THEIR WORK. THE 2024 #5WOMENARTISTS CAMPAIGN REACHED AN ESTIMATED 33 MILLION PEOPLE, WITH 626,000 INTERACTIONS AND 3,911 MENTIONS.

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

EDUCATION & PUBLIC PROGRAMS:

AFTER A TWO-YEAR, TOP-TO-BOTTOM RENOVATION, THE MUSEUM'S TRANSFORMED BUILDING OPENED TO THE PUBLIC ON SATURDAY, OCTOBER 21, 2023. TO RING IN THE OCCASION, THE OPEN-HOUSE WEEKEND FEATURED CELEBRATORY EVENTS INCLUDING POETRY, MUSIC, DANCE, AND ART-MAKING. OVER THE OPENING DAYS, OUR NEW VISITOR SERVICES TEAM GREETED MORE THAN 2,250 GUESTS-WHO WERE AWED BY THE REIMAGINED SPACE-AND THE WEEKEND'S ENERGY SET THE TONE FOR A LIVELY, BUSY YEAR OF ART AND PROGRAMS.

THE WOMEN, ARTS, AND SOCIAL CHANGE (WASC) PUBLIC PROGRAMS INITIATIVE ALSO DEBUTED NEW SERIES AND RESTARTED SIGNATURE FAVORITES, WELCOMING MORE THAN 3,320 AUDIENCE MEMBERS ACROSS EIGHTEEN EVENTS. CREATIVE'S KEYNOTE, A NEW GUEST-SPEAKER PROGRAM CELEBRATING HIGH-ACHIEVING ARTISTS AND CREATIVES, FEATURED BRITISH ART HISTORIAN KATY HESSEL IN NOVEMBER AND CURATOR CECILIA ALEMANI IN MARCH. ALEMANI TALKED ABOUT HER EXPERIENCE CURATING THE 2022 VENICE BIENNALE, WHICH INCLUDED AN UNPRECEDENTED NUMBER OF WOMEN AND NONBINARY ARTISTS. DISCUSSING RECENT STRIDES AND STRUGGLES IN EFFORTS TO ADVANCE GENDER EQUITY IN THE ARTS, SHE SAID, "WE SHOULD BE GRATEFUL FOR THE WORK THAT MUSEUMS [LIKE NMWA] DO FOR OUR SOCIETY." GUESTS ENJOYED THE PROGRAMS IN NMWA'S UPGRADED, COMPLETELY REFURBISHED MARS PERFORMANCE HALL, WHICH FEATURES PLUSH SEATS AND STATE-OF-THE-ART TECHNOLOGY.

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EXPENSES \$ 1,240,522. INCLUDING GRANTS OF \$ 0. REVENUE \$ 107,261.

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

WINTON HOLLADAY AND ELIZA HOLLADAY 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 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:

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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 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.

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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 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

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**PAYROLL.**

**THE LAST COMPENSATION REVIEW TOOK PLACE IN NOVEMBER 2023.**

**FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:**

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

**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.**