	س	_		EXT	ENDED TO M	AY 1	7, 202	1				
	Form	990-T	Ε	Exempt Organ	nization Bus	sine	ss Inco	me Ta	ax Retu	ırn		OMB No 1545-0047
		_		(ar	nd proxy tax und	ler se	ction 6033	B(e))	1,00	φ		0040
	مرير	, سی	For cal	lendar year 2019 or other tax yea	beginning JUL 1,	20	19 and en	ding JUI	N 30, 2	020		2019
	-			► Go to www	irs gov/Form990T for i	nstructio	ns and the lat	est informa	ation			
		ment of the Treasury Revenue Service	•	Do not enter SSN number	•)(3)	5	pen to Public Inspection for 01(c)(3) Organizations Only
	A	Check box if	Name of accompanies (Check how the proceed and accompanies)								Employ	er identification number yees' trust, see
		address changed									instruc.	tions)
	B Ex	empt under section	Print	COLUMBUS MUS	SEUM OF ART					31	-4379447	
		501(c)(30B	or -	Number, street, and room	or suite no If a P O bo	ox. see in	structions					ed business activity code
		408(e) 220(e)	or Number, street, and room or suite no. If a P O. box, see instructions Type 480 EAST BROAD STREET								300 1112	su denona j
		408A 530(a)		City or town, state or province, country, and ZIP or foreign postal code								
	$\overline{\Box}$	529(a)	COLUMBUS, OH 43215 453									20
	C Bool	k value of all assets nd of year		F Group exemption numb	er (See instructions.)	<u> </u>						
	tir en	186,443,24	42.	G Check organization type	: ► X 501(c) coi	rporation	50	I(c) trust	4	01(a) tru	ıst	Other trust
	H Ent	er the number of the c	rganiza	tion's unrelated trades or b	usinesses >	1		Describe	the only (or firs	t) unrela	ated	
	trad	le or business here 🕨	• S	EE STATEMENT	1			f only one,	complete Parts	I-V. II r	nore t	han one,
				ce at the end of the previou		arts I an	d II, complete	Schedule	M for each add	litional t	rade c)r
	bus	iness, then complete f	Parts III	-V.								
	Dur	ing the tax year, was	he corp	oration a subsidiary in an a	ffiliated group or a pare	nt-subsi	diary controlle	d group?		▶ □] Yes	X No
_	<u>)</u> ir "Y	es," enter the name a	nd ident	lifying number of the paren	t corporation							
L	The			KIMBERLY AUFI				Telepho	ne number 🕨	<u>61</u>	<u>4 - 2</u>	21-6801
	Par	t I Unrelated	Trac	de or Business Inc	ome		(A) Inco	ome	(B) Expe	nses	-	(C) Net
	1 a	Gross receipts or sale:	S	990,093.					. '			,
	Ы	Less returns and allow	vances		c Balance	1c		093.	*		4	····
		Cost of goods sold (S		•		2		383.	· · · · · · · · · · · · · · · · · · ·	<i>/</i>		200 510
		Gross profit Subtract				3	309	710.	$-\!$		\dashv	309,710.
		Capital gain net incom		•		4a			/			
				art II, line 17) (attach Form	4/9/)	4b			/		. 	
		Capital loss deduction			tach statement)	4c 5	-	-/1	•		-	
		Rent income (Schedul		ship or an S corporation (at	iacii statement)	6	•	/				
		Unrelated debt-finance	•	ne (Schedule F)		7						·····
7		. 1		nd rents from a controlled o	rganization (Schedule F)						\neg	
7707				on 501(c)(7), (9), or (17) or							一	-
5		Exploited exempt activ			,	10,	/					
>		Advertising income (S	-			11						
_	12	Other income (See ins	truction	is, attach schedule)		12						
N A	13	Total. Combine lines	3 throu	gh 12		13	_309	710.				309,710.
_	Par	t II Deduction	ns No	ot Taken Elsewhere	e (See instructions f	or limita	itions on dec	nemoust.	IVED	7		
i		(Deductions	must b	be directly connected wi	th the unrelated busi	ness inc	.one)			\cdot		
•	14	Compensation of offi	cers, di	rectors, and trustees (Sche	dule K)		12			\sim 1 \vdash	14	
	15	Salaries and wages					S A	APR 22	2 2021		15	545,408.
	16	Repairs and mainten	ance							<u>≃ا</u> ا≝	16	4,856.
	17	Bad debts						GDEI	V, UT		17	203.
	18	Interest (attach sche	dule) (s	ee instructions)			<u> </u>			_	18	40 440
	19	Taxes and licenses	F 41				1	00	26,55	<u> </u>	19	49,449.
	20	Depreciation (attach					r	20	20,33		<u> </u>	26,554.
	21		ımea or	n Schedule A and elsewhere	on return		Ĺ	21a			21b	20,334.
	22	Depletion Contributions to defe	rrad aa	mnoncationalana	•						23	9.
	23			itipensation plans						_	24	65,544.
	24 25	Excess exempt exper		chedule I)							25	03,344,
	26 26	Excess readership co							•	_	26	
	27	Other deductions (at		,			SEE	STAT	EMENT 2		27	61,848.
	28	Total deductions Ad				•			-	_	28	753,871.
	29			ncome before net operating	loss deduction. Subtra	ct line 28	3 from line 13				29	-444,161.
	30		,	loss arising in tax years beg	•					Γ	十	<u> </u>
		(see instructions)		.,	· 1			STAT	EMENT 3	;] ;	30	0.
	31	,	a <mark>x</mark> able ii	ncome Subtract line 30 fro	m line 29						31	-444,161.
	923701			work Reduction Act Notice								Form 990-T (2019)

	,)				
	p-T(2019) COLUMBUS MUSEUM OF ART	31.	-43794 ₋	47	Page 2
Part		13.1	4 4 4	1 /	- 1
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	38	-444	, 10	<u>, , , , , , , , , , , , , , , , , , , </u>
33 34	Amounts paid for disallowed fringes Charitable contributions (see instructions for limitation rules)	33	 		0.
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction Subtract line 34 from the sum of lines 32 and 33		-444	. 1 6	
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) STMT 4_	36		<u>, </u>	0.
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	7 37	-444	, 16	
38	·	8 38			00.
39	Unrelated business taxable income Subtract line 38 from line 37 If line 38 is greater than line 37,				
	enter the smaller of zero or line 37	39	-444	,16	51.
Part	IV Tax Computation				
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40			<u>0.</u>
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from				
	Tax rate schedule or Schedule D (Form 1041)	41			
42	Proxy tax See instructions	42			
43	Alternative minimum tax (trusts only)	43			
44	Tax on Noncompliant Facility Income See instructions	44			
Part	Total Add lines 42, 43, and 44 to line 40 or 41, whichever applies V Tax and Payments	45			0.
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 46a				
	Other credits (see instructions) 46b	-			
	General business credit Attach Form 3800 46c	┦			
	Credit for prior year minimum tax (attach Form 8801 or 8827) 46d	7			
	Total credits Add lines 46a through 46d	46e			
47	Subtract line 46e from line 45	47			0.
48	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (ettach schedule)	48			
49	Total tax Add lines 47 and 48 (see instructions)	49			0.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	· · · · · · · · · · · · · · · · · · ·		0.
51 a	Payments A 2018 overpayment credited to 2019	4			
b	2019 estimated tax payments	4 1			
	Tax deposited with Form 8868	-			
	Foreign organizations Tax paid or withheld at source (see instructions) 51d	-			
_	Backup withholding (see instructions) 51e	-			
	Credit for small employer health insurance premiums (attach Form 8941) Other credits, adjustments, and payments Form 2439	-			
9	Other credits, adjustments, and payments Form 2439 Total Form 4136 Other Total Form 51g				
52	Total payments Add lines 51a through 51g	52			
53	Estimated tax penalty (see instructions) Check if Form 2220 is attached	53			
54	Tax due If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54			
55	Overpayment If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55			
56	Enter the amount of line 55 you want Credited to 2020 estimated tax	56			
Part	VI Statements Regarding Certain Activities and Other Information (see instructions)				
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority		Y	es	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file		;		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign country				
	here •		—– ⊢	-	<u> </u>
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?			-	<u> </u>
50	If "Yes," see instructions for other forms the organization may have to file.				
59	Enter the amount of tax-exempt interest received or accrued during the tax year \$ \[\begin{align*} al	ledge and hi	alief it is true		
Sıgn	Under penalties of perjury I declare that I have examined this return including accompanying schedules and statements, and to the best of my know correct and complete Pectaration of peparer (other than axpayer) is based on all information of which preparer has any knowledge	oogo una s	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Here	- N	•	discuss this reti shown below (s		th
			7 X Yes] No
	Print/Type preparer's name Preparer's signature Date Check	if PTIN			لــــــــــــــــــــــــــــــــــــــ
Paid					
	parer T.J. CONGER, CPA T.J. CONGER, CPA 03/23/21		006814	10	
	Only Firm's name ► JOHN GERLACH & COMPANY LLP Firm's EIN ■	31	-44193	361	
	37 W. BROAD ST., STE. 530				
		614-2	24-216		
923711	01-27-20		Form 990	-T (2	2019)

Schedule A - Cost of Goods	Sold. Enter m	ethod of invento	ory val	uation 🕨 N	/A				
1 Inventory at beginning of year	1	0.	6	inventory at end of	year		6		0.
2 Purchases	2 6	80,383.	7	Cost of goods sold	Subtract	line 6	'		
3 Cost of labor	3			from line 5. Enter h	ere and in l	Part I,			
4 a Additional section 263A costs				ine 2			7	680,3	83.
(attach schedule)	4a		8	Do the rules of sec	tion 263A (with respect to	-	Yes	No
b Other costs (attach schedule)	4b			property produced	or acquired	for resale) apply to			
5 Total Add lines 1 through 4b	5 6	80,383.		the organization?				ľ	X
Schedule C - Rent Income (From Real Pr	operty and	Pers	onal Propert	y Lease	d With Real Prop	erty)		
(see instructions)									
1 Description of property									
(1)									
(2)									
(3)									
(4)									
	Rent received	or accrued							
(a) From personal property (if the perconent for personal property is more 10% but not more than 50%)	centage of than	of rent for per	rsonal p	al property (if the perc operty exceeds 50% o on profit or income)	entage or if	3(a) Deductions directly columns 2(a) a	r connect nd 2(b) (a	ed with the income in ttach schedule)	ı
(1)								•	
(2)									
(3)									
(4)									
Total	٥. ٦	otal			0.			•	
(c) Total income Add totals of columns 2 here and on page 1, Part I, line 6, column		>			0.	(b) Total deductions Enter here and on page 1 Part I line 6, column (B)	•		0.
Schedule E - Unrelated Deb	t-Financed Ir	ncome (see in	nstruc	tions)		•			
				Gross income from		3 Deductions directly con to debt-finance			
1 Description of debt-fin	anced property		c	r allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	s
(1)								•	
(2)									
(3)									
(4)									
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average ad of or allo debt-finance (attach so	d property	6	Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)	(0	8 Allocable deduction of x total of column 6 x total of column 3(a) and 3(b))	
(1)					%				
(2)	-			d	%				
(3)				0	%				
(4)					%				
						inter here and on page 1 Part I, line 7, column (A)		nter here and on page Part I line 7, column (I	
Totals						0	.		0.
•									
Total dividends-received deductions in-	cluded in column 8					<u> </u>	•	-	0.

Schedule F - Interest, F					Controlled O					structions	<u>.</u>
1 Name of controlled organization		2. Emp identific numb	ation	3. Net unre (loss) (see	unrelated income 4. To see instructions) pay.		al of specified ments made	includ	5. Part of column 4 that is included in the controlling organization's gross income		6 Deductions directly connected with income in column 5
(1)					-			1	-		
(2)											
(3)								1			
(4)											
Nonexempt Controlled Organia	zations										
7 Taxable Income		nrelated incom	e (loss)	Q Total c	of specified payr	nents	10. Part of co	lumn 9 the	it is included	11 Dec	ductions directly connected
,		ee instructions		•	made		in the contri	olling orga oss income	nization's		income in column 10
(1)				_							
(2)											
(3)											
(4)			1								
							Enter here a	umns 5 en nd on pag 3, column (e 1, Part I (A)	Enter h	d columns 8 and 11 ere and on page 1 Part I, line 8 column (B)
Totals			_						0.		0
Schedule G - Investme (see instr		ne of a S	ection (501(c)(7)), (9), or (17) Org	ganization	ו			
1 Desc	option of incor	me			2. Amount of	ıncome	 Deduction Deduction	nected	4. Set- (ettach s	asides schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)		,-									
(2)											
(3)									<u> </u>		
(4)											
					Enter here and o Part I, line 9 co	lumn (A)	1				Enter here and on page Part I line 9 column (B)
Totals				▶		0.	٠.,		<u>.</u>	•	0
Schedule I - Exploited (see instru	-	Activity	Income	, Other	Than Adv	ertisir	g Income)			
1 Description of exploited activity	2 G unretated incomi trade or t	e from	3 Exp directly co with pro- of unre- business	onnected duction plated	4 Net incom from unrelated business (co minus columi gain compute through	trade or lumn 2 n 3) If a e cols 5	5 Gross in from activit is not unre business in	y that lated	6 Exp attribut colui	able to	7 Excess exempt expenses (column 6 minus column 5 but not more then column 4)
(1)											
(2)											
(3)											
(4)		1									
	Enter her page 1, line 10	col (A)	Enter here page 1, fine 10, c	Parti, col (B)		, ,-	₹ [†] *	,, ~	7		Enter here and on page 1, Part II, line 25
Totals •		0.		0.					*		0
Schedule J - Advertisir Part I Income From I					olidated	Basis	•				
1 Name of periodical		2 Gross advertising income		Orrect rtising costs	4 Advert or (loss) (co col 3) If a gr cols 5 th	ol 2 minus ain comput	5 Circu		6. Read		7 Excess readership costs (column 6 minus column 5 but not more than column 4)
(1) (2)					1.		-				
(3) (4)			-		- -	•					
Totals (carry to Part II, line (5))	_).	0							0
Totals (carry to rait ii, mic (3))			· · I		- 1						Form 990-T (201

Form 990-T (2019) COLUMBUS MUSEUM OF ART 31-43794 Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1 Name of periodical		2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain compute cols 5 through 7	5. Circulation income	6 Readership costs	7 Excess readership costs (column θ minus column 5 but not more than column 4)
(1)							
(2)							
(3)		_					
(4)							
Totals from Part I	•	0.	0.	**	· + .		0
		Enter here and on page 1, Part I line 11, col (A)	Enter here and on page 1, Part I line 11, col (B)		A PART OF		Enter here and on page 1 Part II line 26
Totals, Part II (lines 1-5)	▶	0.	0.	•	• •		0

Schedule K -	 Compensation of Officers, 	Directors, and Trustees	(see instructions)

1 Name	2 Title	3. Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14		•	0.

Form 990-T (2019)

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1
BUSINESS ACTIVITY

SPECIAL EVENTS AND COMMISSIONS FOR ON-SITE FACILITY USE AND MUSEUM SHOP SALES.

TO FORM 990-T, PAGE 1

FORM 990-T		OTHER	DEDUCTI	ONS	STATEMENT 2
DESCRIPTIO	N				AMOUNT
ADVERTISING OFFICE EXPI UTILITIES SUPPLIES INSURANCE MISCELLANEG PROFESSION BANK & CRE	5,809 7,853 4,880 3,005 2,041 5,216 1,846 28,999 972				
INTEREST EXEQUIPMENT					1,227
EQUIPMENT I		LINE 27			61,848
EQUIPMENT 1	RENTAL ORM 990-T, PAGE 1,		T LOGG D	PDUCTION	61,848
EQUIPMENT I	RENTAL ORM 990-T, PAGE 1,	OPERATING		EDUCTION	
EQUIPMENT 1	RENTAL ORM 990-T, PAGE 1,		S JSLY	EDUCTION LOSS REMAINING	61,848
EQUIPMENT I	RENTAL ORM 990-T, PAGE 1, NET	OPERATING LOSS PREVIOU	S JSLY	LOSS	61,848 STATEMENT 3 AVAILABLE

FORM 990-T	NET	OPERATING LOSS I	DEDUCTION	STATEMENT 4
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/99	97,851.	0.	97,851.	97,851.
12/31/00	186,080.	0.	186,080.	186,080.
12/31/01	206,134.	0.	206,134.	206,134.
12/31/02	192,559.	0.	192,559.	192,559.
12/31/03	203,180.	0.	203,180.	203,180.
06/30/16	274,746.	0.	274,746.	274,746.
06/30/17	160,950.	0.	160,950.	160,950.
06/30/18	300,281.	0.	300,281.	300,281.
NOL CARRYO	VER AVAILABLE THIS	YEAR	1,621,781.	1,621,781.