

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047
2019
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 05-01-2019, and ending 04-30-2020

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
NATIONAL MUSEUM OF WILDLIFE ART
OF THE UNITED STATES

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
PO BOX 6825

City or town, state or province, country, and ZIP or foreign postal code
JACKSON, WY 830026825

D Employer identification number
74-2431071

E Telephone number
(307) 733-5771

G Gross receipts \$ 21,897,099

F Name and address of principal officer:
STEVE SEAMONS
PO BOX 6825
JACKSON, WY 830026825

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.WILDLIFEART.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1986

M State of legal domicile: WY

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
IMPART KNOWLEDGE AND APPRECIATION OF HUMANITY'S RELATIONSHIP WITH WILDLIFE THROUGH ART.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	27
4 Number of independent voting members of the governing body (Part VI, line 1b)	27
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	39
6 Total number of volunteers (estimate if necessary)	81
7a Total unrelated business revenue from Part VIII, column (C), line 12	40,115
7b Net unrelated business taxable income from Form 990-T, line 39	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	3,858,598	6,357,723
9 Program service revenue (Part VIII, line 2g)	852,604	740,221
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	40,460	568,955
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	241,086	152,260
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,992,748	7,819,159

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2,089,721	2,062,301
16a Professional fundraising fees (Part IX, column (A), line 11e)	11,393	5,666
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 395,505		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,872,340	2,593,938
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	4,973,454	4,661,905
19 Revenue less expenses. Subtract line 18 from line 12	19,294	3,157,254

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	37,491,328	39,770,530
21 Total liabilities (Part X, line 26)	338,412	598,740
22 Net assets or fund balances. Subtract line 21 from line 20	37,152,916	39,171,790

Part II Signature Block

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

Sign Here
Signature of officer: *****
Date: 2021-03-03
STEVE SEAMONS MUSEUM DIRECTOR
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name: Preparer's signature: Date: 2021-03-03
Check if self-employed PTIN: P00645252
Firm's name ▶ PLANTE & MORAN PLLC Firm's EIN ▶ 38-1357951
Firm's address ▶ 8181 E TUFTS AVE SUITE 600 DENVER, CO 802372579 Phone no. (303) 740-9400

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

SEE SCHEDULE O.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

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

4a	(Code:)	(Expenses \$	281,770	including grants of \$	(Revenue \$	660,195)
	See Additional Data					

4b	(Code:)	(Expenses \$	1,923,005	including grants of \$	(Revenue \$	70,865)
	See Additional Data					

4c	(Code:)	(Expenses \$	589,914	including grants of \$	(Revenue \$	9,206)
	See Additional Data					

	(Code:)	(Expenses \$	288,426	including grants of \$	(Revenue \$	20,700)
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4d Other program services (Describe in Schedule O.)
 (Expenses \$ 288,426 including grants of \$) (Revenue \$ 20,700)

4e Total program service expenses ▶ 3,083,115

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

Table with 3 main columns: Question/Description, Yes, No. Rows 22-38 covering various organizational requirements and reporting obligations.

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 main columns: Question/Description, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Form with multiple sections (2a-16) containing questions about employee reporting, tax returns, foreign accounts, prohibited transactions, and charitable contributions. Includes sub-sections like 'Organizations that may receive deductible contributions under section 170(c)' and 'Sponsoring organizations maintaining donor advised funds'.

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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (27), 1b (27), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records:

Part VIII Statement of Revenue

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

Table with 5 columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 1a Federated campaigns, 1b Membership dues, 1c Fundraising events (13,000), 1d Related organizations, 1e Government grants, 1f All other contributions (6,344,723), 1g Noncash contributions (1,104,608), and 1h Total (6,357,723).

Table for Program Service Revenue with 5 columns. Rows include 2a ADMISSIONS (454,189), 2b MEMBERSHIP DUES (194,253), 2c PROGRAM TICKETS (91,050), 2d EDUCATIONAL PROGRAMS (729), and 2g Total (740,221).

Table for Other Revenue with 5 columns. Rows include 3 Investment income (757,311), 4 Income from investment of tax-exempt bond proceeds, 5 Royalties (221), 6a-6c Rental income (39,455), 7a-7c Net gain or loss from sales of assets (-188,356), 8a-8c Net income from fundraising events (9,839), 9a-9b Net income from gaming activities, 10a-10b Net income from sales of inventory (47,498), 11a-11d Miscellaneous Revenue (55,247), and 12 Total revenue (7,819,159).

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	172,979	43,233	108,130	21,616
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,537,470	932,320	385,693	219,457
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	58,172	34,756	19,121	4,295
9 Other employee benefits	160,807	87,057	51,530	22,220
10 Payroll taxes	132,873	79,640	32,928	20,305
11 Fees for services (non-employees):				
a Management				
b Legal	9,533	4,920	4,613	
c Accounting	41,144		41,144	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	5,666			5,666
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	526,817	357,474	144,268	25,075
12 Advertising and promotion	154,280	18,473	135,344	463
13 Office expenses	189,489	123,254	38,178	28,057
14 Information technology	79,151	52,479	22,773	3,899
15 Royalties				
16 Occupancy	130,576	107,707	18,853	4,016
17 Travel	50,389	23,505	25,175	1,709
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	8,907	1,562	4,749	2,596
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	846,915	719,878	127,037	
23 Insurance	67,600	58,406	9,194	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a ACCESSION OF ART	231,602	231,602		
b WESTERN VISION EXPENSES	116,675	116,675		
c ENTERTAINMENT	101,683	53,205	12,347	36,131
d LICENSES & FEES	20,743	20,716	27	
e All other expenses	18,434	16,253	2,181	
25 Total functional expenses. Add lines 1 through 24e	4,661,905	3,083,115	1,183,285	395,505
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).	25,022	14,298	0	10,724

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	4,875	1	4,975
	2 Savings and temporary cash investments	2,559,671	2	2,537,098
	3 Pledges and grants receivable, net		3	2,648,810
	4 Accounts receivable, net	35,470	4	3,747
	5 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		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	127,734	8	136,383
	9 Prepaid expenses and deferred charges	47,906	9	29,255
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 23,127,882		
	b Less: accumulated depreciation	10b 11,435,149	11,665,796	10c 11,692,733
	11 Investments—publicly traded securities	21,323,109	11	20,918,558
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1,726,767	15	1,798,971
16 Total assets. Add lines 1 through 15 (must equal line 34)	37,491,328	16	39,770,530	
Liabilities	17 Accounts payable and accrued expenses	338,412	17	187,726
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	0	25	411,014
	26 Total liabilities. Add lines 17 through 25	338,412	26	598,740
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	16,043,808	27	16,011,108
	28 Net assets with donor restrictions	21,109,108	28	23,160,682
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	37,152,916	32	39,171,790	
33 Total liabilities and net assets/fund balances	37,491,328	33	39,770,530	

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	7,819,159
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,661,905
3	Revenue less expenses. Subtract line 2 from line 1	3	3,157,254
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	37,152,916
5	Net unrealized gains (losses) on investments	5	-1,210,584
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	72,204
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	39,171,790

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 in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- 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 in 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 Single Audit Act and OMB Circular A-133?
- 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 in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 74-2431071

Name: NATIONAL MUSEUM OF WILDLIFE ART
OF THE UNITED STATES

Form 990 (2019)

Form 990, Part III, Line 4a:

MUSEUM MEMBERSHIP - SEE SCHEDULE O

Form 990, Part III, Line 4b:

2019-2020 EXHIBITS - SEE SCHEDULE O

Form 990, Part III, Line 4c:

EDUCATION PROGRAMS FOR CHILDREN - SEE SCHEDULE O

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RICHARD BECK CHAIRMAN	20.00	X		X				0	0	0
LAURENT ROUX VICE CHAIRMAN	10.00	X		X				0	0	0
WILLIAM KERR CHAIRMAN EMERITUS	10.00	X		X				0	0	0
NADA JAIN TREASURER	10.00	X		X				0	0	0
LINDY SAYERS SECRETARY	10.00	X		X				0	0	0
JAN BENZ TRUSTEE	3.00	X						0	0	0
LISA CARLIN TRUSTEE	3.00	X						0	0	0
BARBARA CARLSBERG TRUSTEE	3.00	X						0	0	0
TASSO COIN TRUSTEE	3.00	X						0	0	0
LYNN FRIESS TRUSTEE	3.00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SUE SIMPSON GALLAGHER TRUSTEE	5.00	X						0	0	0
JIM GERSACK TRUSTEE	3.00	X						0	0	0
GIGI HALLORAN TRUSTEE	3.00	X						0	0	0
MARY JANE HUNT TRUSTEE	3.00	X						0	0	0
DES JENNINGS TRUSTEE	3.00	X						0	0	0
LISA JENNINGS TRUSTEE	3.00	X						0	0	0
AVI KANTOR TRUSTEE	3.00	X						0	0	0
SCOTT KIRKPATRICK TRUSTEE	3.00	X						0	0	0
CAROL LINTON TRUSTEE	3.00	X						0	0	0
PAM NINER TRUSTEE	3.00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PETER SAFIR TRUSTEE	3.00	X						0	0	0
CHARLOTTE STIFEL TRUSTEE	3.00	X						0	0	0
CAROLINE TAYLOR TRUSTEE	3.00	X						0	0	0
MARCIA TAYLOR TRUSTEE	3.00	X						0	0	0
GEORGENE TOZZI TRUSTEE	3.00	X						0	0	0
SUZANNE WHITMORE TRUSTEE	3.00	X						0	0	0
BETTINA WHYTE TRUSTEE	3.00	X						0	0	0
STEVEN SEAMONS MUSEUM DIRECTOR	50.00			X				169,877	0	6,843
ADAM HARRIS CURATOR OF ART	40.00					X		102,145	0	4,134
MICHAEL HOFHIENS DIR OF OPERATIONS	40.00					X		116,094	0	29,306

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
NATIONAL MUSEUM OF WILDLIFE ART
OF THE UNITED STATES

Employer identification number
74-2431071

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
- g Provide the following information about the supported organization(s).

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	3,048,696	3,641,162	9,907,241	3,858,598	6,357,723	26,813,420
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . . .						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 Total. Add lines 1 through 3	3,048,696	3,641,162	9,907,241	3,858,598	6,357,723	26,813,420
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . .						11,399,112
6 Public support. Subtract line 5 from line 4.						15,414,308

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4. . .	3,048,696	3,641,162	9,907,241	3,858,598	6,357,723	26,813,420
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .	648,334	531,910	677,823	562,318	893,367	3,313,752
9 Net income from unrelated business activities, whether or not the business is regularly carried on. . .	8,598	15,710		26,524	9,839	60,671
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .						
11 Total support. Add lines 7 through 10						30,187,843
12 Gross receipts from related activities, etc. (see instructions)					12	9,131,093

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	51.060 %
15 Public support percentage for 2018 Schedule A, Part II, line 14	15	55.290 %

- 16a 33 1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% support test—2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a 10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- b 10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
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.						
c	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6.						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c	Add lines 10a and 10b.						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. 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—2018. 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 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <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 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>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <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>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <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>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (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?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <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	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <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>		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
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>		

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	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Additional Data

Software ID:

Software Version:

EIN: 74-2431071

Name: NATIONAL MUSEUM OF WILDLIFE ART
OF THE UNITED STATES

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

Facts And Circumstances Test

SCHEDULE D (Form 990) Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047 2019 Open to Public Inspection

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.

Name of the organization NATIONAL MUSEUM OF WILDLIFE ART OF THE UNITED STATES

Employer identification number 74-2431071

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 2 columns: (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 notification.

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

Form for Part II Conservation Easements. Includes checkboxes for types of easements, a table for conservation details (2a-2d), and questions about monitoring and expenses.

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.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting and amounts for art and historical treasures.

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" 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 |
|---|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 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	22,468,163	20,479,973	13,447,192	12,025,636	12,130,381
b Contributions	1,004,105	1,600,000	6,500,000	507,282	541,500
c Net investment earnings, gains, and losses	-564,706	868,190	832,781	1,345,520	-286,246
d Grants or scholarships					
e Other expenditures for facilities and programs	734,000	480,000	300,000	431,246	359,999
f Administrative expenses					
g End of year balance	22,173,562	22,468,163	20,479,973	13,447,192	12,025,636

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 14.040 %
 - b** Permanent endowment ▶ 80.430 %
 - c** Temporarily restricted endowment ▶ 5.530 %
- 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 | 3a(i) | No |
| (ii) related organizations | 3a(ii) | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 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		509,930		509,930
b Buildings		9,904,498	5,111,809	4,792,689
c Leasehold improvements		11,391,300	5,370,275	6,021,025
d Equipment		1,278,925	909,836	369,089
e Other		43,229	43,229	0
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				11,692,733

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)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments—Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(1) PAYCHECK PROTECTION PROGAM LOAN	411,014
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	411,014

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	7,611,559
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-1,210,584	
b	Donated services and use of facilities	2b	14,000	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	988,984	
e	Add lines 2a through 2d			2e -207,600
3	Subtract line 2e from line 1			3 7,819,159
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b			4c 0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)			5 7,819,159

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.

1	Total expenses and losses per audited financial statements		1	5,592,685
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	14,000	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	916,780	
e	Add lines 2a through 2d			2e 930,780
3	Subtract line 2e from line 1			3 4,661,905
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b			4c 0
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)			5 4,661,905

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Additional Data

Software ID:

Software Version:

EIN: 74-2431071

Name: NATIONAL MUSEUM OF WILDLIFE ART
OF THE UNITED STATES

Supplemental Information

Return Reference	Explanation
PART III, LINE 1A:	IN CONFORMITY WITH THE PRACTICE FOLLOWED BY MANY MUSEUMS, THE MUSEUM'S ART COLLECTION, WHICH HAS BEEN ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS SINCE INCEPTION, IS NOT RECOGNIZED AS AN ASSET ON THE STATEMENT OF FINANCIAL POSITION. PROCEEDS FROM THE SALES OF COLLECTION ITEMS ARE USED TO ACQUIRE OTHER ITEMS FOR THE COLLECTION. STEWARDSHIP POLICIES INCLUDE WRITTEN PROCEDURES FOR ACCESSION OF ART, DEACCESSION OF ART, ART ON LOAN TO THE MUSEUM, AND ART ON LOAN FROM THE MUSEUM. THE POLICIES ALSO INCLUDE PROCEDURES FOR THE CARE OF THE COLLECTION, SUCH AS PRESERVATION, SAFETY AND SECURITY, INSTALLATION, AND PACKAGING AND SHIPPING. THE POLICIES DETAIL THE PROCEDURES FOR INVENTORYING THE COLLECTION, INCLUDING LABELING, MONITORING, RECORDKEEPING AND RECORD RECONCILIATION, ACCESS REPRODUCTION, AND INSURANCE. THE MUSEUM TRACKS THE COLLECTION AT ORIGINAL PURCHASED OR DONATED VALUE AND USES A MUTUALLY AGREED-UPON VALUE FOR LOANED ITEMS AS A WHOLE FOR PURPOSES OF ADEQUATE INSURANCE COVERAGE. IN ADDITION, THE MUSEUM'S FACILITY IS SPECIFICALLY DESIGNED TO PROTECT THE COLLECTION FROM DAMAGE.

Supplemental Information

Return Reference	Explanation
PART III, LINE 4:	THE MUSEUM'S COLLECTION CONTAINS OVER 4,570 CATALOGUED ITEMS INCLUDING PAINTINGS, SCULPTURES, PRINTS, SKETCHES, AND ARCHIVAL MATERIAL RELATED TO WILDLIFE AND HUMANITY'S RELATIONSHIP WITH NATURE. THE COLLECTION IS USED TO EDUCATE EVERYONE FROM GENERAL MUSEUM VISITORS TO RESEARCHERS INTERESTED IN SPECIFIC TOPICS RELATED TO WILDLIFE AND NATURE. PART III, LINE 5 : THE MUSEUM DID SOLICIT GIFTS FOR ARTWORK TO BE SOLD. THE SOLICITATIONS WERE MADE ONLY TO ARTISTS FOR DONATIONS OF THEIR OWN ARTWORK.

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	<p>THE MUSEUM HAS AN ENDOWMENT PORTFOLIO WHOSE PRIMARY OBJECTIVE IS TO PROVIDE A LONG-TERM SOURCE OF INCOME (DEFINED AS APPRECIATION AND/OR INCOME) TO BE DISTRIBUTED ANNUALLY IN SUPPORT OF THE MUSEUM'S MISSION AND GOALS. AS A SECONDARY OBJECTIVE, THE MUSEUM'S ENDOWMENT ASSETS AND/OR RESERVE FUNDS. AS REQUIRED BY ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS, INCLUDING FUNDS DESIGNATED BY THE BOARD OF TRUSTEES (THE "BOARD") TO FUNCTION AS ENDOWMENTS, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR IMPOSED RESTRICTIONS.</p>

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	THE MUSEUM IS A NOT-FOR-PROFIT CORPORATION AND IS EXEMPT FROM TAX UNDER THE PROVISIONS OF INTERNAL REVENUE CODE SECTION 501(C)(3). THE MUSEUM ALSO HAS BEEN DETERMINED NOT TO BE A PRIVATE FOUNDATION UNDER SECTION 509(A)(1) OF THE IRC, BUT IT IS A PUBLIC CHARITY. ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE MUSEUM AND RECOGNIZE A TAX LIABILITY IF THE MUSEUM HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY THE IRS OR OTHER APPLICABLE TAXING AUTHORITIES. MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN BY THE MUSEUM AND HAS CONCLUDED THAT, AS OF APRIL 30, 2020, THERE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	RENTAL EXPENSES 96,380. SPECIAL EVENT EXPENSES 18,186. COST OF GOODS SOLD 802,214. CHANGE IN NPV OF SPLIT-INTEREST INVESTMENT 72,204.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	COST OF GOODS SOLD 802,214. RENTAL EXPENSES 96,380. SPECIAL EVENT EXPENSES 18,186.

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

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		PLEIN AIR FESTIVAL (event type)	(event type)	(total number)	(add col. (a) through col. (c))
1	Gross receipts	41,025			41,025
2	Less: Contributions	13,000			13,000
3	Gross income (line 1 minus line 2)	28,025			28,025
Direct Expenses	4	Cash prizes	14,013		14,013
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages	822		822
	8	Entertainment	1,000		1,000
	9	Other direct expenses	2,351		2,351
10	Direct expense summary. Add lines 4 through 9 in column (d) ▶				18,186
11	Net income summary. Subtract line 10 from line 3, column (d) ▶				9,839

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

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

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11** Does the organization conduct gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity conducted in:

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 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.

Return Reference	Explanation
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Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047

2019

Open to Public Inspection

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 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
NATIONAL MUSEUM OF WILDLIFE ART
OF THE UNITED STATES

Employer identification number
74-2431071

Part I Questions Regarding Compensation

	Yes	No								
<p>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.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax idemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<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 idemnification 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 (e.g., maid, chauffeur, chef)		
<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 idemnification 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 (e.g., maid, chauffeur, chef)									
<p>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</p>	1b									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?</p>	2									
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input 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 type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input 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 type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>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:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a	No								
	4b	No								
	4c	No								
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>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:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>	5a	No								
	5b	No								
<p>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:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>	6a	No								
	6b	No								
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>	7	No								
<p>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.</p>	8	No								
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

Part III **Supplemental Information**

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

Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NATIONAL MUSEUM OF WILDLIFE ART
OF THE UNITED STATES

Employer identification number
74-2431071

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	74		DONOR ESTIMATE
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X			DONOR ESTIMATE
5 Clothing and household goods	X			DONOR ESTIMATE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	10	1,094,808	AVG HI/LOW FOR DATE
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	X	1	3,000	DONOR ESTIMATE
18 Collectibles				
19 Food inventory	X	1	500	DONOR ESTIMATE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (OTHER)	X	1	5,000	DONOR ESTIMATE
EVENT	X	1	1,300	DONOR ESTIMATE
26 Other ▶ (FLORAL)				
27 Other ▶ ()				
28 Other ▶ ()				

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

29 2

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

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

Return Reference	Explanation
PART I, LINE 32B:	THIRD PARTY - UBS & MERRILL LYNCH RECEIVES OUR STOCK DONATIONS INTO OUR ACCOUNT AND SELLS THEM UPON NOTIFICATION FROM AUTHORIZED STAFF.
PART I, LINE 33:	DONATED ART IS FOR THE PUBLIC EXHIBIT, RESEARCH AND PRESERVATION AND NOT REPORTED AS REVENUE UNDER SFAS 116.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2019

Open to Public Inspection

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

▶ Attach to Form 990 or 990-EZ.

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

Department of the Treasury

Name of the organization

NATIONAL MUSEUM OF WILDLIFE ART
OF THE UNITED STATES

Employer identification number

74-2431071

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 1	THE MISSION OF THE NATIONAL MUSEUM OF WILDLIFE ART IS TO IMPART KNOWLEDGE AND INSPIRE APPRECIATION OF HUMANITY'S RELATIONSHIP WITH WILDLIFE AND NATURE THROUGH ART AND EDUCATION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A	<p>MUSEUM MEMBERSHIP APPROX. 1,193: VISITATION WAS APPROX. 57,924 ANNUALLY - THE MUSEUM'S ART COLLECTION CONSISTS OF ALMOST 5,000 CATALOGUED WORKS BY APPROXIMATELY 600 ARTISTS. THE WORK OF THESE ARTISTS REPRESENTS HISTORIC IMAGES AND STYLES WHICH HAVE SHAPED PUBLIC PERCEPTION OF WILDERNESS, WILDLIFE AND THE AMERICAN WEST. ARTISTS REPRESENTED INCLUDE CARL RUNGUIS, GEORGE CATLIN, ARTHUR FITZWILLIAM TAIT, C.M. RUSSELL, ALBERT BIERSTADT, CONRAD SCHWIERING, JOHN CLYMER, BOB KUHN, JOHN JAMES AUDUBON AND GEORGIA O'KEEFE. CAPITALIZING ON THE MUSEUM'S SETTING NEAR THE BIG GAME HABITATS OF GRAND TETON AND YELLOWSTONE NATIONAL PARKS, THE NMWA COLLECTION IS UTILIZED IN A VARIETY OF EDUCATIONAL PROGRAMS. OVER 93 VOLUNTEERS, RANGING IN AGE FROM TEENS TO SENIOR CITIZENS, ASSIST THE MUSEUM STAFF IN ALL FACETS OF THE MUSEUM'S OPERATION. THE "FIRST SUNDAYS" PROGRAM OFFERS FREE ADMISSION TO LOCALS ON THE FIRST SUNDAY OF EVERY MONTH. DURING THE WINTER MONTHS, A FREE COMMUNITY PERFORMANCE SERIES IS OFFERED ON THESE DAYS, AS WELL AS HANDS-ON ART PROJECTS FOR CHILDREN IN THE MUSEUM CLASSROOMS.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4B	2019-2020 EXHIBITS DAY TO NIGHT: IN THE FIELD WITH STEVEN WILKES MAY 24, 2019 - AUGUST 18, 2019 SNEAK PEAK - MAY 23, 2019 LECTURE WITH PHOTOGRAPHER MAY 23, 2019 RUNGIUS SESQUICENTENNIAL: RARELY SEEN RUNGIUS MAY 4, 2019 - AUGUST 25, 2019 RUNGIUS SESQUICENTENNIAL: RUNGIUS REUNITED MAY 4, 2019 - OCTOBER 13, 2019 RUNGIUS PAINTINGS THAT ONCE HUNG TOGETHER AT JACKSON LAKE LODGE SNEAK PEAK - MAY 3, 2019 SPIRIT TOTEMS: SCULPTURES BY HERB ALPERT JUNE 20, 2019 - SEPTEMBER 29, 2019 SOMOS DE AQUI MAY 4 - AUGUST 18, 2019 WESTERN VISIONS SHOW AND SALE SEPTEMBER 7, 2019 - OCTOBER 6, 2019 PALETTES AND PALATES, SEPTEMBER 6, 2019 ARTISTS' PARTY, SEPTEMBER 7, 2019 SHOW AND SALE, SEPTEMBER 7, 2019 WILD WONDERS OF CHINA: PHOTOGRAPHY BY STAFFAN WIDSTRAND AND MAGNUS LUNDGREN OCTOBER 20, 2018 - MAY 5, 2019 LIVING LEGENDS II WITH A SPECIAL TRIBUTE TO BOB KHUN DECEMBER 14, 2019 - AUGUST 30 2020 JHHS STUDENT CURATED SHOW JACKSON HOLE HIGH SCHOOL STUDENT-CURATED EXHIBIT JANUARY 19, 2020 - MARCH 8, 2020 STATE OF THE ART: STUDENT ART SHOW MARCH 14, 2020 - AUGUST 31, 2020

990 Schedule O, Optional Information

Return Reference	Explanation
FORM 990, PART III, LINE 4C	<p>EDUCATIONAL PROGRAMS FOR CHILDREN - NMWA TYPICALLY SERVES APPROXIMATELY 5,795 CHILDREN THROUGHOUT THE REGION ANNUALLY, RANGING IN AGE FROM PRE-K TO GRADE 12. IN PERSON VISITATION DURING LATE MARCH AND THROUGH APRIL 2020 WAS LOWER THAN USUAL DUE TO COVID RESTRICTIONS AND SCHOOL CLOSURES. WE QUICKLY ADDED ON-LINE EXHIBITS AND WEBINARS TO COMPENSATE. WE USE OUR COLLECTION OF FINE ART TO TEACH A WIDE RANGE OF SUBJECT AREAS COMPATIBLE WITH SCHOOL CURRICULA. PROGRAMS FOR PRE-K THROUGH HIGH SCHOOL AGE CHILDREN ARE FREE, OCCUR THROUGHOUT THE YEAR, AND ARE OUTLINED ON OUR WEBSITE: HTTPS://WWW.WILDLIFEART.ORG/LEARN/SCHOOL-PROGRAMS/ FOR A FOURTH YEAR, LOCAL MIDDLE AND HIGH SCHOOL STUDENTS PARTICIPATED IN THE STUDIO PROJECT, COLLABORATION BETWEEN THE NATIONAL MUSEUM OF WILDLIFE ART AND THE ART ASSOCIATION OF JACKSON HOLE. STUDENTS MET EVERY MONDAY NIGHT FROM FEBRUARY TO MID-MARCH (PROGRAM WAS CUT SHORT DUE TO COVID RESTRICTIONS). STUDENTS LEARNED THE FUNDAMENTALS OF PHOTOGRAPHY AND WORKED ON BUILDING PROFESSIONAL ARTIST PORTFOLIOS. PARTICIPANTS VISITED THE MUSEUM ON TWO SEPARATE EVENINGS TO VIEW THE WILD WONDERS OF CHINA EXHIBIT AND GET INSPIRED BY STORIES ABOUT THE ANIMALS AND THE ARTISTS. MUSEUM EDUCATORS WERE GUEST PRESENTERS TEACHING SPECIFIC DARKROOM DEVELOPING AND PRINTING TECHNIQUES. STUDENT WORK WAS EXHIBITED VIA AN ONLINE EXHIBITION ON THE MUSEUM'S WEBSITE RATHER THAN IN PERSON DUE TO COVID CLOSURES. A PRE-K STORYTELLING AND ART MAKING PROGRAM, "FABLES, FEATHERS, AND FUR (FFF)," TAKES PLACE EVERY FRIDAY, DURING SUMMER MONTHS AND THE FIRST AND THIRD FRIDAY DURING WINTER MONTHS, SERVING YOUNG CHILDREN AND THEIR FAMILIES. IN JAN., FEB, AND MARCH, WE PARTNERED WITH THE TETON LITERACY CENTER TO HOST A SERIES OF 3 FAMILY LITERACY NIGHTS THAT INCLUDED IN-GALLERY ACTIVITIES AND FAMILY ART MAKING PROJECTS INSPIRED BY THE CURRENT EXHIBITIONS. WE ENGAGED IN COLLABORATIONS WITH TETON SCIENCE SCHOOL (TSS) DURING THE SCHOOL YEAR TO PROVIDE "ART AND LITERATURE" THEMATIC TOURS, AND "MUSEUM TOOL BOX TRAINING" FOR TSS'S AMERICORPS AND GRADUATE-LEVEL FIELD STAFF. PERFORMANCES AND ART MAKING ACTIVITIES FOR CHILDREN TAKE PLACE ON THE FIRST SUNDAY OF EACH MONTH FROM NOVEMBER THROUGH MARCH. OUTREACH PROGRAMS ARE AVAILABLE IN LOCAL SCHOOL CLASSROOMS; AND VIA OUR ON-LINE CURRICULUM LESSONS AND EDUCATIONAL GAMES. A NEW ONLINE OUTREACH PROGRAM CALLED BISONCAST FOR TEENS THROUGH ADULTS LAUNCHED IN THE SPRING. THREE EDUCATIONAL VIDEOS FEATURE ART FROM OUR PERMANENT COLLECTION PAIRED WITH RELEVANT EXPLORATIONS INTO THE GREATER YELLOWSTONE ECOSYSTEM. OUR ON-SITE CHILDREN'S GALLERY PROVIDES HANDS-ON INTERACTIVE EXHIBITS FOR CHILDREN. A RANGE OF IN-GALLERY TECHNOLOGY-DRIVEN INTERACTIVES WERE OFFERED INCLUDING AN INTERACTIVE TOUCH-SCREEN INFORMING VISITORS ABOUT STEVE KESTREL'S BRONZE SCULPTURE SILENT MESSENGER, AND A ROBERT KUHN ACRYLIC PAINTING VIDEO DEMONSTRATION, AND AN ANCIENT ART INTERACTIVE TOUCH-SCREEN. NEW AUDIO TOUR STOPS WERE ADDED INCLUDING SOME TRANSLATED INTO SPANISH.</p>

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Return Reference	Explanation
FORM 990, PART III, LINE 4C	LANGUAGE. EDUCATIONAL PROGRAMS FOR ADULTS - WE SERVE APPROXIMATELY 3,850 ADULTS ANNUALLY WITH OUR "SNEAK PEEK" BEHIND THE SCENES GALLERY TALKS, OUR FILMS, AND STUDIO CLASSES. WE ALSO HAVE A RICH ROSTER OF COMMUNITY PROGRAMS ON THE OUTDOOR SCULPTURE TRAIL SUCH AS "YOGA ON THE TRAIL AND FIVE FREE MOBILE TOURS INCLUDING EXPLORING WILDLIFE ART, RUNGUIS LETTERS, SAVING A SPECIES, SCULPTURE TRAIL, AND THE STUDIO PROJECT. A PROGRAM FOR YOUNG ADULTS CALLED "MIX'D MEDIA" PROVIDES EVENING ACCESS TO THE MUSEUM'S ART, AND OFFERS MUSIC, ART MAKING, ARTIST INTERACTIONS, ALONG WITH EXHIBIT THEMED FOOD & DRINK TO THE PUBLIC. THIS YEAR, WE OFFERED ANOTHER SENIOR PAINTING CLASS (TWO SESSIONS), TO ENGAGE LOCAL SENIOR CITIZENS IN DISCUSSIONS ABOUT ART, ARTISTS, AND PROVIDE SEQUENTIAL INSTRUCTION IN ACRYLIC WILDLIFE PAINTING. THIS PROGRAM TOOK PLACE IN OUR MUSEUM ART GALLERIES AND IN OUR CLASSROOM. BISONCAST (MENTIONED ABOVE) AND 3 WEBINARS WITH CURATORS AND YELLOWSTONE TO YUKON PARTNERS ADDED MUCH TO OUR ADULT OFFERING DURING COVID RESTRICTIONS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4D	THE MUSEUM'S COLLECTION EMBODIES THE BEST EFFORTS OF HISTORIC AND CONTEMPORARY ARTISTS TO DEPICT WILDLIFE, INCLUDING OVER 5,000 CATALOGED ITEMS SPANNING 4,000 YEARS BY APPROXIMATELY 600 ARTISTS. AS A NATIONAL COLLECTION, IT EMPHASIZES PRIME EXAMPLES OF WORK PRODUCED BY ARTISTS FROM THE NATION ITSELF, WITH A REPRESENTATIVE SELECTION OF SUBJECTS, FORMS, STYLES, MATERIALS, AND MEDIA, SPANNING THE DIVERSITY OF THE NATION'S ARTISTS, THEIR ANTECEDENTS, AND THE TIMES AND PLACES IMPORTANT TO THEIR WORK. THE PRIMARY COLLECTING GOAL FOR THE NATIONAL MUSEUM OF WILDLIFE ART IS THE ENHANCEMENT OF THE PERMANENT COLLECTION THROUGH STRATEGIC ACQUISITIONS RANGING FROM MAJOR ARTWORKS TO SUPPLEMENTAL PIECES, WHICH WILL ENHANCE THE OVERALL QUALITY AS WELL AS DIVERSITY OF THE COLLECTION WHILE ADDING THEMATIC DEPTH AND BREADTH.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE EXECUTIVE COMMITTEE CONSISTS OF THE CHAIRMAN, CHAIRMAN EMERITUS, VICE-CHAIRMAN, TREASURER & FINANCE COMMITTEE CHAIRMAN, DEVELOPMENT CHAIRMAN, COLLECTIONS COMMITTEE CHAIRMAN, FACILITY & GROUNDS COMMITTEE CHAIR, COMMUNITY FOCUS COMMITTEE CHAIRMAN, NOMINATING COMMITTEE CHAIRMAN, AND STRATEGIC PLANNING CHAIRMAN. ALL ARE MEMBERS OF THE BOARD. THE EXECUTIVE COMMITTEE IS EMPOWERED TO ACT WHEN THE FULL BOARD HAS NOT CONVENED. IF EITHER THE BOARD DELEGATES AN ITEM TO THE EXECUTIVE COMMITTEE, OR THE MUSEUM DIRECTOR BRINGS AN ITEM TO THE EXECUTIVE COMMITTEE WHICH NEEDS ACTION, THEY CAN ACT. IF THEY DO ACT, THE FULL BOARD STILL HEARS THE ISSUE AND COULD OVERTURN THE EXECUTIVE COMMITTEE, THOUGH THAT IS NOT ANTICIPATED.

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Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	ALL TRUSTEES ARE PROVIDED WITH A COPY OF THE FORM 990 PRIOR TO FILING. THE DETAIL REVIEW HAS BEEN DELEGATED BY THE GOVERNING BODY TO THE AUDIT COMMITTEE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	AN ANNUAL QUESTIONNAIRE IS SENT TO EACH TRUSTEE. THE CHIEF FINANCIAL OFFICER REVIEWS THE RESPONSES TO DETERMINE IF ANY CONFLICTS EXIST. NO CONFLICTS HAVE BEEN NOTED.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	PRIOR TO THE CLOSE OF EACH FISCAL YEAR, THE CHAIRMAN AND VICE CHAIRMAN ASSESS IN WRITING THE PERFORMANCE OF THE MUSEUM DIRECTOR IN LIGHT OF STATED GOALS AND OBJECTIVES. IN KEEPING WITH THE TERMS AND CONDITIONS OF ANY RELEVANT EMPLOYMENT CONTRACT, A RECOMMENDATION IS THEN MADE TO THE EXECUTIVE COMMITTEE REGARDING COMPENSATION FOR THE UPCOMING YEAR, WHICH REVIEWS AND APPROVES THE MUSEUM DIRECTOR'S COMPENSATION. AN INDEPENDENT SALARY REVIEW IS PERFORMED EVERY THREE YEARS. THE ORGANIZATION MAINTAINS THE APPROPRIATE DOCUMENTATION OF THE COMPENSATION AGREEMENT.

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Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	PROFESSIONAL FEES: PROGRAM SERVICE EXPENSES 357,474. MANAGEMENT AND GENERAL EXPENSES 144,268. FUNDRAISING EXPENSES 25,075. TOTAL EXPENSES 526,817.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	CHANGE IN NPV OF SPLIT-INTEREST INVESTMENT 72,204.