DLN: 93493076008181 OMB No. 1545-0047

Department of the

Return of Organization Exempt From Income Tax

2019

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.

Open to Public

Interna	l Reve	enue Service							Inspection
A F	or th	e 2019 c	alendar year, or tax year be	ginning 10-01-2019 , and ending	99-30-2 ر	2020			
B Che	ck if a	applicable:	C Name of organization Denver Art Museum				D Employer	· identif	ication number
☐ Ad	dress	change	Deliver Art Museum				84-60382	240	
□Na		-	Doing business as						
☐ Ini		turn n/terminated	_						
		n/terminated d return		if mail is not delivered to street address) R	Room/suite		E Telephone	number	
		on pending	100 W 14th Avenue Parkway	, , , , , , , , , , , , , , , , , , , ,	,		(720) 91:	3-0022	
			City or town, state or province,	country, and ZIP or foreign postal code			(1-1)1-1		
			Denver, CO 80204				G Gross rece	eipts \$ 5	2.982.129
			F Name and address of prine	cipal officer:		1(a) Io thio	a group retu		
			Christoph Heinrich		"		a group retu linates?	1111 101	□Yes ☑No
			100 W 14th Avenue Parkway Denver, CO 80204				inates? subordinate	s	
	V=0V0I	mpt status:	•			include			☐ Yes ☐No
1 10	A CACI	mpt status.	501(c)(3) 501(c)()	◀ (insert no.) 4947(a)(1) or				•	instructions)
J W	ebsit	te:► ww	w.denverartmuseum.org		"	1(C) Group	exemption n	ıumber	>
						V	ti 1007 I	M C+-+-	
K Forr	n of o	rganization	: 🗹 Corporation 🗌 Trust 🔲 /	Association ☐ Other ►	-	Year of format	Jon: 1897	M State	of legal domicile: CO
		C							
Pa	art I		ımary						
				on or most significant activities: luseum is to enrich the lives of presen	it and futu	ire deneratio	ons through t	the aco	uisition
				of art, supported by exemplary schola					
)C			s and to temporary exhibitions						
191	-								
le.	:								
Governance	_	Chock th	is boy • D if the organization	discontinued its operations or dispose	ad of mar	o than 2504	of its not as	coto	
ت ≽لا				rning body (Part VI, line 1a)			or its net ass	3	35
Activities &	l		-	s of the governing body (Part VI, line :				4	35
Ĕ	l			n calendar year 2019 (Part V, line 2a)	•			5	636
ੀ	l		, ,	necessary)				6	432
ď	l		·	**			•		
	l			Part VIII, column (C), line 12				7a	34,348
	b	Net unre	lated business taxable income	from Form 990-T, line 39	<u> </u>			7b	0
						Pric	or Year		Current Year
<u>Qı</u>	8	Contribu	tions and grants (Part VIII, line	1h)	•		53,955,78	30	35,282,859
Ravenue	9	Program	service revenue (Part VIII, line	2g)			6,308,70)1	11,934,356
ž	10	Investme	ent income (Part VIII, column (A	A), lines 3, 4, and 7d)			632,48	30	186,102
	11	Other re	venue (Part VIII, column (A), Iir	nes 5, 6d, 8c, 9c, 10c, and 11e)			2,065,57	71	3,316,685
	12	Total rev	enue—add lines 8 through 11 ((must equal Part VIII, column (A), line	12)		62,962,53	32	50,720,002
	13	Grants a	nd similar amounts paid (Part I	X, column (A), lines 1–3)				0	0
	14	Benefits	paid to or for members (Part IX	(, column (A), line 4)				0	0
(0	l		·	e benefits (Part IX, column (A), lines 5	(-10)		17,331,18	37	19,680,273
Expenses	l			olumn (A), line 11e)	•			0	0
હ			• • •	* * * * * * * * * * * * * * * * * * * *	•			+	
Ä	l		raising expenses (Part IX, column (· · · · · · · · · · · · · · · · · · ·	_		10.700.30	_	24 267 617
	l			nes 11a-11d, 11f-24e)			18,708,28		24,267,612
	l		,	equal Part IX, column (A), line 25)			36,039,46	_	43,947,885
	19	Revenue	less expenses. Subtract line 18	8 from line 12	•		26,923,06	54	6,772,117
Net Assets or Fund Balances						Beginning of	of Current Yea	ar	End of Year
sets Van	30	Total	cote (Bart V line 16)				200 227 61	14	220 422 004
Ass	l		sets (Part X, line 16)		•		200,237,61	_	220,132,884
₹ <u>₹</u>	l		oilities (Part X, line 26)		•		21,766,72	_	34,611,579
			ts or fund balances. Subtract li	ne 21 from line 20			178,470,89) 3	185,521,305
Pa			ature Block						
				camined this return, including accompa lete. Declaration of preparer (other tha					
any k			er, it is true, correct, and comp	icte. Declaration of preparer (earler and		, 15 basea of			Their preparer has
		1 k							
		*****	ture of officer			2021 Date	L-03-17		
Sign		Jagilat	ure of officer			Date			
Here	•		oph Heinrich Director						
		_ <i>T</i>	or print name and title						
			Print/Type preparer's name	Preparer's signature	Date	Chec		IN 141669	7
Paid	k	L				self-	employed	1007	
Pre	pare	er 📙	Firm's name	& Engle PC		Firm	's EIN ►		
Use		H	Firm's address > 475 Lincoln Street	Suite 200		Phor	ne no. (303) 53	34-5953	
		· [(555) 55	. 2233	
			Denver, CO 80203						
May t	he IR	RS discuss	this return with the preparer s	shown above? (see instructions) .				✓ Y	∕es □No

Cat. No. 11282Y

Form **990** (2019)

For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2019)					Page 2
Pa	rt III Statement	of Program Servi	ce Accomplis	hments		
	Check if Sch	edule O contains a resp	onse or note to a	any line in this Part III		🗹
1	Briefly describe the	organization's mission:				
See	description for Part I,	Line 1 on Schedule O.				
2	Did the organization	undertake any signific	ant program ser	vices during the year w	hich were not listed on	
	the prior Form 990 o	or 990-EZ?				. 🗌 Yes 🗹 No
	If "Yes," describe the	ese new services on Sc	hedule O.			
3	Did the organization	cease conducting, or r	nake significant	changes in how it cond	ucts, any program	
	services?					. □Yes ☑No
	If "Yes," describe the	ese changes on Schedu	le O.			
4	Section 501(c)(3) ar		ons are required	to report the amount of	largest program services, as of grants and allocations to ot	
4a	(Code:) (Expenses \$	18,117,655	including grants of \$) (Revenue \$	12,055,695)
	See Additional Data					
4b	(Code:) (Expenses \$	10,568,205	including grants of \$) (Revenue \$	721)
	See Additional Data					_
4c	(Code:) (Expenses \$	2,262,552	including grants of \$) (Revenue \$	59,066)
	See Additional Data					_
	(Code:) (Expenses \$	3,491,276	including grants of \$) (Revenue \$	2,907,532)
	Other program services overall museum experie		e the activities asso	ociated with the gift shop, i	restaurant, and other facilities des	igned to enhance the visitor's
4d	Other program serv	ices (Describe in Sched	ule O.)			
	(Expenses \$	3,491,276 inc	luding grants of	\$) (Revenue \$	2,907,532)

	990 (2019)			Page 3
Par	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)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	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 D	3		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	4	Yes	
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	5		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? <i>If "Yes," complete Schedule D</i> ,Part 2	6		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 🔰	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8	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	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 2	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🥦	11e	Yes	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
	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	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	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	14b		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	15		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	16		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)	17		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	18	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	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No

Form	990 (2019)			Page 4
Pai	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🔧	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		•	<u> </u>

 ${f c}$ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

1b

0

1c

Yes Form **990** (2019)

 ${\bf b}$ $\,$ Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable $\,$.

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Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	4a		No ——
5.5	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	5c 6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	90		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	7a	Yes	
a	provided to the payor?	, a	163	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No

Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "Na 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.	o" respo	onse to	lines
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		✓
Se	ection A. Governing Body and Management			
1.	Enter the number of voting members of the governing body at the end of the tax year 1a 35	. —	Yes	No
Ia	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or			
b	similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	-		
	officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	∍.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
	ection C. Disclosure			
17 18	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	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O) 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. State the name, address, and telephone number of the person who possesses the organization's books and records:			
20	► Curtis Woitte Deputy Dir & CFO 100 W 14th Avenue Parkway Denver, CO 80204 (720) 913-0022			

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. Isist all of the organization's current key employees, if any. See instructions for definition of "key employee." List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organizations. List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations. List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$100,000 of reportable compensation from the organizations. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) Name and title (B) Average hours per week (list any hours per week (list any hours per week (list any hours below dotted line) (C) Name and title (D) Reportable compensation from the organization and any officer and a director/trustee) (D) Reportable compensation from the organization of the organization of the organization from th	Form 990 (2019)											Pag	ge 7
As Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear. ■ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0 - in columns (D), (E), and (F) if no compensation was paid. ■ List all of the organization's current key employees, if any. See instructions for definition of "key employee." ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations for the order in which to list the persons above. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ (B) Name and title ■ (C) Position (do not check more than spendal properties of the organization of other organization of the organization o			Truste	es, I	Key	En	nploy	ees	, Highest Comp	ensated Employ	yees,		
La Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear. List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. List all of the organization's furrent key employees, if no. See instructions for definition of "key employee." List all of the organization's furrent key employees, if any. See instructions for definition of "key employee." List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 from the organization and any related organizations. List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organization and any related organization or any current officer, director, or trustee. (A) Name and title A Reportable compensation from the organization or any related organization or any new powers of the organization or any new powers or trustees or trustees that received, in the capacity as a former director, or trustee. (B) A Reportable compensation or trustee of the organization or trustee. (C) (B) A Reportable compensation or from the organization or end to the compensation organization organizat	Check if Schedule O contains a	response or no	te to an	y line	in t	his	Part VI	١.				. [
■ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. ■ List all of the organization's current key employees, if any. See instructions for definition of "key employee." ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization. ■ List all of the organization which to list the persons above. □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ (B) Average hours per week (list any hours for related organizations below dotted line) ■ (C) Reportable compensation from the organization organization organization organization organizations organi	Section A. Officers, Directors, Tru	istees, Key E	mploy	ees,	an	d H	lighe	st C	Compensated En	nployees			
■ List all of the organization's current key employees, if any. See instructions for definition of "key employee." ■ List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations. ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization. See instructions for the order in which to list the persons above. □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ Check this box if neither the organization nor any related organization organization from the organization of related organizations below dotted line) ■ Check this box if neither the organization below dotted line) ■ Check this box if neither the organization or any related organization of from the organization of from the organization or any related organization or any related organization of from the organization of from the organization of from the organization organi	year.		•						, ,		-	n's ta	Κ
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who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. ■ List all of the organization from the organization and any related organizations. ■ List all of the organization from the organization and any related organization, more than \$10,000 of reportable compensation from the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. ■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organizations. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ Check this box if neither the organization nor any related organization one box, unless person is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization nor any related organization nor any related organization nor any related organization nor any neither the organization nor any nei													
■ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) Name and title (B) Average hours per week (list any hours below dotted line) (C) (D) (E) Reportable compensation from the organization (do not check more than one box, unless person is both an officer and a director/trustee) (W-2/1099-MISC) MISC) (F) Estimated amount of other compensation from the organization organization organization and related organizations.													
Average hours per week (list any hours for related organizations) below dotted line) Continue to the person of the order in which to list the persons above. Continue to the order in which to list the persons above.	of reportable compensation from the organiz	ation and any re	elated o	rgani	zatio	ons.			. ,	·	·		
(A) Name and title (B) Average hours per week (list any hours for related organizations below dotted line) (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) (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (B) Average hours per week (list any hours for related organization (W-2/1099-MISC) (B) Reportable compensation from the organizations (W-2/1099-MISC) MISC) (F) Estimated amount of other compensation from the organization and related organizations organizations)	organization, more than \$10,000 of reportab	le compensatio	n from t								Э		
Name and title Average hours per week (list any hours for related organizations below dotted line) Name and title Average hours per week (list any hours for related organizations below dotted line) Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer	Check this box if neither the organizatio	n nor any relate	d organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee.			
it steed		Average hours per week (list any hours	than o is b	ne bo oth a direct	o no ox, u n of or/t	t che inles ficer	s pers	on	Reportable compensation from the organization	Reportable compensation from related organizations	Estir amount compe fror	n	
See Additional Data Table		organizations below dotted	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		` '	related	ated	
	See Additional Data Table												
													—
													—

Part	Section A. Officers, Direct	ors, Trustees	, Key l	Empl	oye	es,	and	High	nest Co	mpens	ate	d Employees	'conti	inued)	
	(A) Name and title	(B) Average hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee) Position (do not check more Reported to the position of th							(D) (E) ortable Reportable ensation compensation m the from related nization organizations 2/1099- (W-2/1099-		.	(F) Estimated amount of ot compensating from the organization		
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		ISC)		MISC)		relati organiza	ed
See A	Additional Data Table														
	ub-Total				•		>						Ė		
_	otal from continuation sheets to Pa otal (add lines 1b and 1c)	rt VII, Section			•		>		1,	445,042			0		301,925
2	Total number of individuals (including of reportable compensation from the o	but not limited	to thos			ove	e) who	rece	eived mo	re than	\$10	0,000			· ·
														Yes	No
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule J</i>						oyee, o		-	mpensa • •	ted (employee on	3		No
4	For any individual listed on line 1a, is organization and related organizations individual											the	4	Yes	
5	Did any person listed on line 1a receive services rendered to the organization?									tion or	indiv •	idual for	5	1.55	No
Se	ction B. Independent Contract	ors													_
1	Complete this table for your five higher from the organization. Report compen												npens	sation	
	· · · ·	(A)		year	Cild	9	***********	1 7710		٦		(B)		(C	
Fentre	ss Architects	nd business addre	:55							Architec		ption of services vices		Compen 1,	,097,515
	roadway														
	r, CO 80203 Cleaning LLC									Cleaning]				604,282
	Clermont St														
	erce City, CO 80022 y Construction Management & Consult									Owner's	Repr	esentative	+		336,781
	Rocking Horse Ct														
-	do Springs, CO 80921 MO Architecture PC									Exhibitio	n De	sign			135,000
	arick Street Suite 1328														
	ork, NY 10014 Architecture LLC									Architec	t Ser	vices	+		115,733
2546	15th St														•
	r, CO 80211 otal number of independent contractor:	s (includina but	not lim	ited t	o the	ose	listed	abov	/e) who	 receiver	mo	re than \$100.00	0 of		
	ompensation from the organization > 7				. •				.,						. (2012)
l														Form 996	u (2019)

Form 9										Page 9
Part	VIII						. lia a ia thia Dast VIII			
		Check if Sched	dule	O contains a	respo	onse or note to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	1 a	Federated campa	igns	s	1a			revenue		312 - 314
Contributions, Gifts, Grants and Other Similar Amounts	ı	b Membership dues	5.	. [1b	3,397,229				
Gra	(c Fundraising even	ts .	[1c	639,563				
ts, I	(d Related organizat	tions	5	1d	6,208,031				
Gif ilai		e Government grants		L.	1e	10,101,871				
ns,	۱,	F All other contributio	ns, g	L ifts, grants,		· · ·				
er S		and similar amounts above	s not	included	1f	14,936,165				
章	9	y Noncash contributio	ns in	cluded in						
Contributions, Gifts, and Other Similar A				L	1 g	756,167				
<u>ರ ಕ</u>		h Total. Add lines :	1a-1	f	•	•	35,282,859			
						Business Code	11.075.300	11 075 200		
a.	2a	Admissions & Prog Fe	es			900099	11,875,290	11,875,290		
E.	b	Learning & Engageme	ent			900099	59,066	59,066		
Ę.						900099				
- e3	c									
Program Service Revenue										
Ē	d									
ogra	е									
Ě										
		All other program								
		Total. Add lines 2				11,934,356	1		1	
		Investment income imilar amounts)			nas, i	nterest, and other	15/171/	1		154,714
	4	Income from invest	mer	nt of tax-exer	npt bo	ond proceeds	•			
	5	Royalties	_			•	•			
				(i) Rea	1	(ii) Personal				
	6a	Gross rents	6a	2	83,898	3				
	b	b Less: rental expenses 6b 90,21		90,219						
	С	Rental income								
		or (loss)	6 c		93,679	l .	193,679			102.670
	a	Net rental income	or	(i) Securi	tios		193,079	7		193,679
	7a	Gross amount from sales of assets other	7a		31,388	(ii) Other				
		than inventory					_			
	b	Less: cost or other basis and sales expenses	7b		0					
	c	Gain or (loss)	7c		31,388	3				
	d	Net gain or (loss)	•				31,388	3		31,388
Other Revenue	8a	Gross income from fu (not including \$ contributions reported	d on	639,563 of line 1c).						
ev.	_	See Part IV, line 18			8a	193,857 193,857				
a F		Less: direct expen Net income or (los			8b	· · · · · ·				
ŧ	·	The meanie of (103	J) 11	om ranaraisi	lig cv	ents •	1			
	9a	Gross income from See Part IV, line 19								
	h				9a 9b					
		Less: direct expen Net income or (los				ies				
	_	(***	-,	yy						
	10a	Gross sales of inve				4,802,051				
	h	Less: cost of good			10a 10b	1,978,051				
		Net income or (los					2,824,000	2,821,045	2,955	
•		Miscellaneo			IIIVCIIC	Business Code				
	11	a Collection items s	old			90009	9 180,405	180,405		
	b	Miscellaneous Rev	enu	e		90009	9 86,487	7 86,487		
	c	Parking				81293	0 31,393	3	31,393	
							<u> </u>			
	d	All other revenue	•				721	721		
	е	Total. Add lines 1	1a-:	11d		•	299,006	5		
	12	Total revenue. S	ee ir	nstructions .		• • • •	50,720,002	15,023,014	34,348	379,781
					_					Form 990 (2019)

Part IX	Statement of Functional Expenses				rage 10
Taitix	Section 501(c)(3) and 501(c)(4) organizations must c	complete all columns.	All other organizatio	ns must complete colu	ımn (A).
	Check if Schedule O contains a response or note to ar	•	-	·	. `.´ . 🗆
	ude amounts reported on lines 6b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	and other assistance to domestic organizations and c governments. See Part IV, line 21				
	and other assistance to domestic individuals. See				
governn	and other assistance to foreign organizations, foreign nents, and foreign individuals. See Part IV, lines 15				
4 Benefits	paid to or for members				
	sation of current officers, directors, trustees, and ployees	1,053,375	319,058	620,099	114,218
defined	sation not included above, to disqualified persons (as under section 4958(f)(1)) and persons described in 4958(c)(3)(B)				
7 Other sa	alaries and wages	18,626,898	13,524,680	4,039,151	1,063,067
	plan accruals and contributions (include section 401 403(b) employer contributions)				
9 Other e	nployee benefits				
	axes				
	services (non-employees):				
	ment				
b Legal	-				
-	 				
c Account					
	onal fundraising services. See Part IV, line 17			_	
	ent management fees				
	f line 11g amount exceeds 10% of line 25, column unt, list line 11g expenses on Schedule O)	1,541,307	862,958	664,167	14,182
12 Advertis	ing and promotion				
13 Office e	kpenses	138,441	35,227	100,813	2,401
14 Informa	tion technology				
15 Royaltie	s				
16 Occupar	ncy	1,702,856	1,644,647	58,209	
17 Travel		78,411	43,552	31,932	2,927
	ts of travel or entertainment expenses for any state, or local public officials				
19 Confere	nces, conventions, and meetings				
20 Interest					
21 Pavmen	ts to affiliates				
•	ation, depletion, and amortization	4,557,805	4,264,889	241,225	51,691
•	ce		, ,		<u> </u>
24 Other exmiscella exceeds	vpenses. Itemize expenses not covered above (List neous expenses in line 24e. If line 24e amount 10% of line 25, column (A) amount, list line 24e is on Schedule O.)				
a Exhibit	cions	5,976,080	5,976,080		
b Collect	ion Items Purcha	2,678,633	2,678,633		
c Repair	s and maintenance	2,229,805	1,882,380	347,425	
d Miscell	aneous	1,171,679	236,023	454,882	480,774
e All oth	er expenses	4,192,595	2,971,561	1,170,653	50,381
25 Total fu	inctional expenses. Add lines 1 through 24e	43,947,885	34,439,688	7,728,556	1,779,641
reported education	osts. Complete this line only if the organization I in column (B) joint costs from a combined onal campaign and fundraising solicitation.				
Check h	ere ▶ ☐ if following SOP 98-2 (ASC 958-720).				

Form 990 (2019)

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33

Fund Balances

ō 29

Assets 30

Liabilities 22 Intangible assets .

Grants payable .

1,052,400

8,429,805

862,749

21.264.728

4,054,297

34.611.579

145,743,259

39,778,046

185,521,305

220,132,884

Form 990 (2019)

220,132,884

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1,082,455

200,237,614

18,747,572

2,478,909

50.001

490,239

21.766.721

48,169,236

130,301,657

178,470,893

200,237,614

Page 11

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

Investments—program-related. See Part IV, line 11

Total assets. Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Organizations that follow FASB ASC 958, check here <a> \square and

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

	Beginning of year		End of year
Cash-non-interest-bearing	565,740	1	1,302
2 Savings and temporary cash investments		2	
		-	

-	Cash-hon-interest-bearing	000,, 10	_	
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net	42,590,809	κ	
4	Accounts receivable, net	660,989	4	
_	Languard other payables to any surrent or former officer director tructor			

3	Pledges and grants receivable, net	42,590,809	3	37,014,471
4	Accounts receivable, net	660,989	4	1,962,934
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	

	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	
S	7	Notes and loans receivable, net		7	
set	8	Inventories for sale or use	496,418	8	391,874

	6 Loans section 7 Notes 8 Invent 9 Prepai 10a Land,	entity or family member of any of these persons	•				<u> </u>
		Loans and other receivables from other disqualit section $4958(f)(1)$), and persons described in se				6	
S	7	Notes and loans receivable, net				7	
بە	8	Inventories for sale or use			496,418	8	391,874
A S:	9	Prepaid expenses and deferred charges			2,076,797	9	1,559,172
,	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	165,742,939			

		section 4958(f)(1)), and persons described in se	1958(C)(3)(B)		6		
S	7	Notes and loans receivable, net				7	
sets	8	Inventories for sale or use			496,418	8	391,874
Ass	9	Prepaid expenses and deferred charges			2,076,797	9	1,559,172
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	165,742,939			
	b	Less: accumulated depreciation	10b	18,423,315	129,378,774	10 c	147,319,624
	11	Investments—publicly traded securities .	19,935,792	11	25,774,417		
	12	Investments—other securities. See Part IV, line	3,449,840	12	3,755,158		

3h

Form 990 (2019)

Additional Data

Software ID:

Software Version:

EIN: 84-6038240

Name: Denver Art Museum

Form 990 (2019)

Form 990, Part III, Line 4a:

with art, regularly attracting more than 800,000 visitors annually. The Museum's approach to exhibitions celebrates the creativity of individual artists who have made an extraordinary impact, and ignites creativity through programs that provide engaging and interactive art experiences. Among the highlights in 2020:- The Denver Art Museum was the sole venue for Claude Monet: The Truth of Nature, which featured more than 120 paintings spanning the artist's entire career and celebrating his enduring relationship with nature and response to the varied and distinct places in which he worked. It was the most comprehensive U.S. exhibition on Monet in more than two decades. - Natural Forces: Winslow Homer and Frederic Remington featured 60 artworks that explored the connections between artistic themes and techniques used by the two acclaimed American artists. Born a generation apart, both artists succeeded in capturing the quintessential American spirit through works of art at the turn of the late-19th and early-20th centuries, an era of growing industrialization and notions of the closing of the American western frontier. - Norman Rockwell: Imagining Freedom presented how the artist and his contemporary illustrators became important storytellers who advanced important civic ideas through their creative advertising and imagery. The exhibition narrative highlighted Rockwell's war-era artworks that reinforced the positive approach of bringing Americans together for the common good. - Treasures of

Exhibitions and Collections - See Schedule OExhibitions and Collections: Each year, the Denver Art Museum (DAM) presents exhibitions that provide a variety of experiences

British Art: The Berger Collection (on view through December 6, 2020) showcases about 60 paintings gifted to the museum by the Berger Collection Educational Trust in 2018, which was the largest gift of European old masters to the DAM since the 1950s. The exhibition presents 500 years of British cultural history through the stories of its people. The Light Show (on view through March 7, 2021) explores physical and symbolic representations of light in art through a thought-provoking narrative. The exhibition features about 250 objects drawn from the DAM's nine curatorial departments and focuses on the guest by humanity and artists to understand physical light as well as metaphorical, spiritual, and divine representations of light. Other exhibitions offered in 2020 include: - Eves On: Erika Harrsch- Eves On: Jonathan Saiz- Shantell Martin: Words and Lines- Phantom Canyon: A Digital Circuit

Premises and Buildings - See Schedule OPremises & Buildings: These costs include all expenditures associated with the day-to-day operations of the Museum's facilities. Exhibition and permanent galleries displayed a variety of artwork for the public's enjoyment while the Museum's public spaces enable museum staff and volunteers to conduct frequent learning and engagement programs including tours, public talks, interpretive programs, art-making activities, and more. The premises and buildings

provide ample space for mission-driven programming aimed at enriching the lives of this and future generations, and for which the Museum has been internationally

Form 990, Part III, Line 4b:

recognized.

Form 990, Part III, Line 4c:

Learning and Engagement Programs - See Schedule OLearning and Engagement Programs: The Denver Art Museum (DAM) believes that art can make a difference in people's lives by celebrating and stimulating creativity and inspiring greater understanding of and connection with our world. To fulfill this vision, the DAM's Department of Learning and Engagement strives to make art relevant and enjoyable to people of all ages, abilities, and backgrounds. The Department of Learning and Engagement has taken a leading role both nationally and internationally in three areas: 1) research about what visitors need to make a museum visit meaningful; 2) creation of rich and innovative learning resources in collection installations and temporary exhibitions; and 3) interactive learning for young people in both school and family groups. The Department hosts over ten site visits a year from national and international museum colleagues, actively presents at national conferences, and has a strong track record of sharing findings and best practices with the museum field. (Reports are on the DAM website under 'Research & Reports.') Programs include: - In-Gallery Installations: The museum's in-gallery interpretive installations provide visitors with a variety of ways to explore temporary exhibitions and permanent collections on their own. Audio tours for adults and children, interactive gallery activities, bilingual wall text, Discovery Libraries, family guides, and more deepen visitors' experiences with art. - Family Programs: The DAM is committed to being a truly family-friendly institution, offering free general admission to all youth ages 18 and under through the Free for Kids program. In order to make the museum engaging for kids and their grown-ups, we take a two-pronged approach; 1) offering programs and activities at "peak family times" (weekends, school breaks, and summer) and 2) integrating family materials into installations, exhibitions, and public spaces so there's always a way for families to connect with art. Family activities are included with the cost of general admission. On weekends and school breaks, families can check out Family Backpacks, which are kid-sized packs filled with games and learning materials for families to use on their own in the galleries. Discovery Library costume areas, gallery games, and dedicated family spaces inspired by special exhibitions and permanent collections that feature hands-on activities are always available. Create Playdate targets 3-5 year olds and their families and Foxy and Shmoxy Art Detectives targets toddlers, helping grown-ups explore the museum with young children through storytelling, theater, and artmaking opportunities. In addition, The Studio is a dedicated workshop for hands-on projects and artist demonstrations inspired by exhibition themes. - Lifelong Learning and Accessibility: The DAM offers a wide range of opportunities for adults to discover, explore, and make personal connections to collections and exhibitions. Programs range from tours, studio classes, and art history courses to Insider Moments with curators and working artists in the galleries. Drop-in Drawing and Drop-in Writing, and Mindful Looking provide unique ways for visitors to slow down, engage with art on view, and explore their creativity. The DAM offers Creative Aging programs to support older adults at the DAM and in-community, including Create Caf. Sensory Garden installations. Art at Hand, and more, Intentionally designed access programs offer visitors with different abilities to have a rich. engaging experience at the museum. Low-Sensory Mornings offered quarterly provide adults and families with a quiet, less sensory stimulating environment during their visit, and Art & About is a monthly tour program designed for individuals with early Alzheimer's and their care partners. Tactile Tours and Verbal Description Tours support visitors who are blind or have low vision. -School and Teacher Programs: The hallmark of DAM's school tour program is its interactive touring approach. The introductory allmuseum tours. Perception Games and Imagination Games, have been featured at several national conferences, as have the touchable materials and activities developed for culture and architecture based tours. Creative Explorers, a tour for early childhood groups (ages 3-5), uses storytelling, artmaking, and movement to inspire young students to engage with art. Around 70,000 students visit the museum each year to explore topics related to visual arts, social studies, and language arts curricula. Creativity Resource, the museum's online resource for teachers, uses the creativity of artists to inspire creativity in teachers and students. Resources include downloadable art images, artist and artwork information, lesson plans and multi-media resources, and curated blogs on cultural and creativity topics. - Community Partnerships: The DAM values community partnerships and engages various nonprofits, community and business leaders, and government officials through standing advisory committees (e.g., Creative Aging Forum, Access Advisory Committee, Latino Audience Alliance). Other ad hoc committees support in-gallery interpretation and programs to help create inclusive experiences that represent a diverse range of voices (e.g., artists, curators, scholars, non-art experts, community members, and more), - Outreach and Community Programs: The Learning and Engagement Department is involved in several strategic collaborations designed to take art experiences into the community and encourage museum visitation by a broader audience. Family Art Social is an in-community program hosted at area schools, largely Title I, designed to show families that art can foster relationships and develop creativity and problem solving skills. The program is held in conjunction with school events (e.g., parent night) and feature a bilingual (English and Spanish) lead facilitator and two additional facilitators; materials that include recycled found objects; and food for participants. Students pick a "creative challenge" from a bucket to spark ideas for projects. Similarly, Art Lives Here/El Arte Vive Agu takes the DAM offsite to schools, often Title I, and community centers that have difficulty visiting the museum. The program provides an immersive experience for students, teachers, and families to engage with museum art objects--in essence, a traveling mini-museum. Three versions of the installation now travel to approximately twenty schools and community centers annually. The installations "live" in each school for one month, allowing students, teachers, and families to have multiple interactions with the objects. At the end of both programs, staff pass out free passes to adults to encourage them to visit the museum, Museum Connectors (MC), a program based on the promatoras model of community health, introduces the museum to families with young children from underserved communities. The MCs go through training and visits to the museum to increase their comfort and knowledge. They work with staff to learn about planning a visit online, transportation and parking options, museum programs, and other visitor resources. The MCs then lead a small cohort of young families back to the DAM, sharing what they learned and introducing the museum to new visitors. - Partnerships with the Creative Community: Over the past few years, the Department has increasingly focused on programming that seeks to connect visitors with the creativity of artists and to use our collections to inspire creativity in our visitors. Programming has ranged from collaborations with artists to creation of new "making and residency spaces throughout the campus including: 1) The Studio on the first floor of the Hamilton Building. 2) the Native Arts Artist-in-Residence studio in the American Indian galleries, 3) Thread Studio on the sixth floor of the Martin Building, and 4) a Latino Artist residency program in the Spanish Colonial and pre-Colombian galleries. The DAM's Creative-in-Residence program and Untitled series engages visitors with art and creativity through unconventional, participatory encounters with art and creativity. Overall, Learning and Engagement programs both onsite, in the community, and online serve more than 800,000 people annually.

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation

	any hours	and	a dir	ecto		ustee))	organization	organizations	from the
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
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Treasurer		X	Х		
Robert S Rich	1.00		\ \		ĺ
Secretary		X	Х		

and Independent Contractors

Dr Patricia Baca

Nancy Lake Benson

David Birnbaum

Mario Carrera

Trustee

Trustee

Trustee

Trustee

Trustee

Jana Bartlit

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	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Merle C Chambers Trustee	1.00	Х						0	0	0
David J Corkins Trustee	1.00	х						0	0	0
Pat Cortez Trustee	1.00	х						0	0	0
Joy L Dinsdale Trustee	1.00	Х						0	0	0
Michael Duncan Trustee	1.00	×						0	0	0

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Suzanne Farver

Cathey McClain Finlon

Charles P Gallagher

Arlene Hirschfeld

Trustee

Trustee

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Trustee

Baryn S Futa

and Independent Contractors

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	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compen	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
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James A Holmes Trustee	1.00	Х						0	0	0
Mariner Kemper Trustee	1.00	Х						0	0	0
Nancy Leprino Henry Trustee	1.00	Х						0	0	0
Kent Logan Trustee	1.00	Х						0	0	0
Lee McIntire Trustee	1.00	Х						0	0	0

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Trygve E Myhren

Robert C Newman

Kathryn A Paul

Thomas A Petrie

William B Pauls through 320

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and Independent Contractors

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

and Independent Contractors

Trustee

Director

Curtis Woitte

Andrea Fulton

Christoph Heinrich

Deputy Director/CFO

Dep. Dir./Chief Marketing

Melora McDermott-Lewis

Chief Learning & Ed. Offic

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Amanda Precourt Trustee	1.00	Х						0	0	0
Scott Reiman Trustee	1.00	Х						0	0	0
Richard L Robinson	1.00	х						0	0	0

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Emily Sturm	1.00						

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and Independent Contractors (A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Average Estimated than one box, unless amount of other hours per compensation compensation

person is both an officer

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compensation

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	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Arpie Chucovich Chief Development Officer	40.00					×		135,570	0	20,493	
Florence Muller Vejvoda Curator of Textile Art & F	40.00					×		126,978	0	15,819	
Timothy Standring Curator of Painting & Scul	40.00					×		129,590	0	16,634	

40.00

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Bryon Thornburgh

Director of Technology

efil	e GR/	APHIC prii	nt - DO NOT PROCESS	As Filed Data -					
SCI	1FD	ULE A	Public /	Charity Statu	s and Bul	blic Supp	ort	OMB No. 1545-0047	
(For	m 99			criarity Statu rganization is a sect				2019	
990I	EZ)			4947(a)(1) nonexe ▶ Attach to Form 9					
		the Treasury	► Go to <u>www.ir</u> s	s.gov/Form990 for in			ormation.	Open to Public Inspection	
Nam	e of th	nie Service ne organiza	tion				Employer identific		
Jenve	r Art M	useum					84-6038240		
	rt I		for Public Charity Stat				See instructions.		
The c	rganiz		a private foundation because	•					
1		A church, c	onvention of churches, or as	ssociation of churches	described in sec	tion 170(b)(1)	(A)(i).		
2		A school de	scribed in section 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	990 or 990-EZ).)			
3		A hospital o	or a cooperative hospital ser	vice organization descr	ribed in section	170(b)(1)(A)(iii).		
4		A medical r name, city,	esearch organization operat and state:	ed in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's	
5		-	ation operated for the benefi (iv). (Complete Part II.)	t of a college or univer	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170	
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	ı)(v).		
7	✓		ation that normally receives ('O(b)(1)(A)(vi). (Complete		s support from a	governmental u	nit or from the gener	al public described in	
8		A communi	ty trust described in sectio r	170(b)(1)(A)(vi).	(Complete Part I	I.)			
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		from activit investment	ation that normally receives: ties related to its exempt fur income and unrelated busin See section 509(a)(2). (Co	nctions—subject to cert ness taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross	
11			ation organized and operated		r public safety. S	See section 509	(a)(4).		
12		more public	ation organized and operated cly supported organizations of through 12d that describes	described in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a		
a		Type I. A so	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B	ated, supervised, or coappoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by		
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A	ervised or controlled in ation vested in the san					
С		Type III f	unctionally integrated. A sorganization(s) (see instruct	supporting organization				ted with, its	
d		Type III n functionally	on-functionally integrate integrated. The organizatio i). You must complete Pai	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar		
e		Check this	box if the organization receiver Type III non-functionally	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally	
f	Enter		of supported organizations		-		<u> </u>		
g	Provi	de the follow	ing information about the su	pported organization(s).				
	(i) N	Name of supp organization		(iii) Type of organization described on lines 1- 10 above (see instructions)) (iv) Is the organization lists in your governing document			(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
					Yes	No			
			1						
Tota									

Schedule A (Form 990 or 990-EZ) 2019

Page 2

If the organization failed to qualify under the tests listed below, please complete Part III.)

S	ection A. Public Support	' '		7.1	·			
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 20	19	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")	29,369,258	58,647,735	55,317,727	45,485,428	26,8	24,227	215,644,375
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	7,465,002	7,728,660	8,180,790	7,892,058	7,8	97,704	39,164,214
3	The value of services or facilities furnished by a governmental unit to the organization without charge	476,336	522,877	436,456	578,294	5	60,928	2,574,891
4	Total. Add lines 1 through 3	37,310,596	66,899,272	63,934,973	53,955,780	35,2	82,859	257,383,480
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).							30,471,597
6	Public support. Subtract line 5 from line 4.							226,911,883
S	ection B. Total Support	'	•	'	•		•	
	Calendar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 20	19	(f) Total
_	(or fiscal year beginning in) ▶	` '		` '				
7	Amounts from line 4.	37,310,596	66,899,272	63,934,973	53,955,780	35,2	82,859	257,383,480
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	888,150	887,384	832,801	892,845	4	38,612	3,939,792
9	Net income from unrelated business activities, whether or not the business is regularly carried on	13,126	12,709	23,643	19,544	-	19,389	49,633
10	other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).	416,631	348,291	305,906	367,255	4	20,749	1,858,832
11	Total support. Add lines 7 through 10							263,231,737
12	Gross receipts from related activities,	etc. (see instruction	ons)			12		54,087,951
13	First five years. If the Form 990 is for	or the organization	's first, second, th	ird. fourth, or fifth	n tax vear as a sec	tion 501(c)	(3) orga	nization.
	check this box and stop here	-			•		• •	
<u> </u>	ection C. Computation of Publi					<u></u>	<u> U</u>	
14	Public support percentage for 2019 (li			column (f))		14		86.200 %
15	Public support percentage for 2018 Sc					15		
							ا علما العام	84.660 %
16a	33 1/3% support test—2019. If the	e organization did	not check the box	on line 13, and lin	ie 14 is 33 1/3% Ol	more, cne	CK THIS D	oox

h 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

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

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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

Р	art III Support Schedule for						
	(Complete only if you cl						er Part II. If
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)		
30	Calendar year	() 2015	(1) 2016	() 2247	(1) 2010	() 2010	(O.T.)
	(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						
4	under section 513 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						
L	3 received from disqualified persons Amounts included on lines 2 and 3						
D	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.)						
Se	ection B. Total Support		1				Г
	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.						
С	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						
12	(Explain in Part VI.) Total support. (Add lines 9, 10c,						
13	11, and 12.).						
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>
	check this box and stop here						▶ ⊔
	ection C. Computation of Public S			! (6))		1 1	
15	Public support percentage for 2019 (lin		•			15	
16	Public support percentage from 2018 S	-	<u> </u>			16	
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17	
17 10	Investment income percentage for 201	-		-		17	
18 10-	331/3% support tests—2019. If the		•			18 33 1/3% and lin	e 17 is not
	more than 33 1/3%, check this box and s						
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the						
ט	not more than 33 1/3%, check this box	-			•		_
20	Private foundation. If the organization	-	-				
	Frivate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCGONS	. 📂 📖

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

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the organization had excess business holdings).

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? 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.	1

Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described

in section 509(a)(1) or (2). 2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.

3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. 3b

Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support

3с

10b

Schedule A (Form 990 or 990-EZ) 2019

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and 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

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported 5a amendment to the organizing document). 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

5c Substitutions only. Was the substitution the result of an event beyond the organization's control?

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a 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? If "Yes," provide detail in Part VI.

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

9b 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? If "Yes," provide detail in Part VI. 9c

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. 10a

	edule A (101111 330 01 330 E2) 2013			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
		11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		
S	ection 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? 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.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization.			
S	ection 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)? If "No," describe in Part VI how control or management of the	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations		v	
_			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?	1		
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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection 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 instruction)	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
•	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ı	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement.	2b		
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>	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.	3h		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV. See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (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 Yea (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		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
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		

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.	

7 Total annual distributions. Add lines 1 through 6.			
8 Distributions to attentive supported organizations to wh details in Part VI). See instructions	sive (provide		
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).			

8 Distributions to attentive supported organizations to wh 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			
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			

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

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.

instructions)

d Excess from 2018. e Excess from 2019.

\$

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.		

Schedule A (Form 990 or 990-EZ) (2019)

Additional Data

Software ID:

Software Version: EIN: 84-6038240

Name: Denver Art Museum

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).

instructions).

Facts And Circumstances Test

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

DLN: 93493076008181

Open to Public

Department of the Treasury Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

EZ)

SCHEDULE C (Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

f the S S S f the Prox	Section 527 organization answards organization answards organization answards organization answards Tax) (see separation forganization answards organization and organiza	ations: Complet wered "Yes" or ganizations that ganizations that wered "Yes" or ate instruction	n Form 990, Part IV, Line 4, or Forn t have filed Form 5768 (election unde t have NOT filed Form 5768 (election n Form 990, Part IV, Line 5 (Proxy s), then	n 990-EZ, Part VI, li er section 501(h)): Co under section 501(h	ne 47 (Lobbying Activities Omplete Part II-A. Do not co On)): Complete Part II-B. Do	omplete Part II-B. not complete Part	
	Section 501(c)(4), (5 me of the organization	,, , , ,	zations: Complete Part III.		Fmnlover iden	ntification numb	er
	ver Art Museum	011				remedicion manib	·•
Davi	t I-A Complete	a if the organ	nization is exempt under sec	tion EO1/s) or is	84-6038240	zation	
1	"political campaign	n activities")	ization's direct and indirect political		•	for definition of	
2			litures (see instructions)			\$	
3			aign activities (see instructions)				
	-		nization is exempt under sec				
1		•	ax incurred by the organization under			\$	
2		•	ax incurred by organization managers			\$	
3	If the organization	incurred a sect	tion 4955 tax, did it file Form 4720 fo	or this year?		☐ Yes	☐ No
4a	Was a correction n	nade?				☐ Yes	□ No
b	If "Yes," describe i			=047.	=0.()(2)		
	-		nization is exempt under sec				
1			ed by the filing organization for secti	•		\$	
2			anization's funds contributed to othe			\$	
3	Total exempt funct	tion expenditur	es. Add lines 1 and 2. Enter here and	d on Form 1120-POL,	line 17b ▶	\$	
4	Did the filing orgar	nization file For	m 1120-POL for this year?			☐ Yes	□ No
5	organization made of political contribu	payments. For utions received	employer identification number (EIN) each organization listed, enter the a that were promptly and directly deliv ee (PAC). If additional space is neede	amount paid from the vered to a separate p	e filing organization's funds political organization, such a	. Also enter the a	
	(a) Name		(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of contributions r and promptldirectly deliver separate polorganization. I enter -0	eceived y and red to a litical f none,
L							
2							
3							
1							_
5							
5							
or P	anerwork Reduction	Act Notice, see t	l the instructions for Form 990 or 990-F	7. Cat	No E00946 Schodule C (Earm 900 or 900-	7) 2010

124,248

250,000

250,000

250,000

250,000

Schedule C (Form 990 or 990-EZ) 2019

124,248

1,000,000

1.500.000

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Return Reference

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)	(b))
ctivi		Yes No		Amou	ınt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	76 H = 61				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), o	r secti	on	
	,	(5), o	r secti		. N
ar	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).		r secti	Yes	s N
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members?		r secti	Yes	i N
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?		E	Yes	s N
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?		 [Yes 1 2 3	
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	 (5), o	 r secti	Yes 1 2 3 on 501(
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? tiii-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part	 (5), o	 r secti	Yes 1 2 3 on 501(
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? **TIII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."	(5), o	 r secti	Yes 1 2 3 on 501(
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	(5), o III-A	 r secti	Yes 1 2 3 on 501(
ar ar b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	(5), o III-A 1 2a 2b	 r secti	Yes 1 2 3 on 501(
ar ar b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total	(5), o III-A 1 2a 2b 2c	 r secti	Yes 1 2 3 on 501(
ar ar b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	(5), o III-A 1 2a 2b	 r secti	Yes 1 2 3 on 501(
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? LIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	(5), o IIII-A 1 2a 2b 2c 3	 r secti	Yes 1 2 3 on 501(
ar ar b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does	(5), o III-A 1 2a 2b 2c	 r secti	Yes 1 2 3 on 501(

Explanation

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

As Filed Data -

DLN: 93493076008181

OMB No. 1545-0047

Supplemental Financial Statements

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

Open to Public

2019

Department of the Treasury

(Form 990)

Na	me of the organization					er identification	number
Der	iver Art Museum				84-603	8240	
Pa	Organizations Maintaining Donor Advis Complete if the organization answered "Yes				or Accou	ints.	
	Complete if the organization answered Te			sed funds	(b)) Funds and other	accounts
1	Total number at end of year					,	
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisor organization's property, subject to the organization's except to the organization's except to the organization organization.] Yes □ No
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?	or donor advisor,	or for	any other purpose		impermissible]Yes □ No
Pa	rt II Conservation Easements.						
	Complete if the organization answered "Yes						
1	Purpose(s) of conservation easements held by the organ		that ap				
	Preservation of land for public use (e.g., recreation	or education)		Preservation of ar			area
	Protection of natural habitat		Ш	Preservation of a	certified hi	istoric structure	
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	qualified conserva	tion co	ntribution in the fo		nservation Held at the End	of the Year
а	Total number of conservation easements				2a		
b	Total acreage restricted by conservation easements				2b		
c	Number of conservation easements on a certified historic		•	•	2c		
d	Number of conservation easements included in (c) acqui structure listed in the National Register	red after 7/25/06,	and n	ot on a historic	2d		
3	Number of conservation easements modified, transferred tax year	d, released, exting	guished	, or terminated by	the organ	ization during the	
4	Number of states where property subject to conservatio	n easement is loca	ated 🕨				
5	Does the organization have a written policy regarding th and enforcement of the conservation easements it holds	e periodic monito	ring, in 	spection, handling	of violatio	ns,	□ No
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of ι	riolatio	ns, and enforcing c	onservatio	n easements duri	ng the year
7	Amount of expenses incurred in monitoring, inspecting, \$ \\$	handling of violati	ons, ar	nd enforcing conser	vation eas	sements during th	e year
8	Does each conservation easement reported on line 2(d)	above satisfy the	require	ments of section 1	.70(h)(4)(l	B)(i)	
	and section $170(h)(4)(B)(ii)$?					Yes	□ No
9	In Part XIII, describe how the organization reports const balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement	footnote to the or					
Par	Organizations Maintaining Collections Complete if the organization answered "Yes	of Art, Histori			ner Simil	ar Assets.	
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finan	public exhibition,	educati	on, or research in			
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for publ following amounts relating to these items:						
(i) Revenue included on Form 990, Part VIII, line 1				•	> \$	
(i	i)Assets included in Form 990, Part X				•	▶ \$	
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS 1				ancial gain,	, provide the	
а	Revenue included on Form 990, Part VIII, line 1				1	> \$	
b	Assets included in Form 990, Part X					▶ \$	_
For	Paperwork Reduction Act Notice, see the Instruction						orm 990) 201

Par	t III	Organizations Maint	taining Collections o	f Art, Histor	ical T	reasu	res, or	· Other	Similar As	sets (cont	inued)	
3		the organization's acquisit (check all that apply):	cion, accession, and other	records, check	any of	the fol	lowing t	hat are	a significant u	ise of its col	lection	
а	✓	Public exhibition		d	\checkmark	Loan	or excha	ange pro	grams			
b	✓	Scholarly research		e		Other	·					
С	✓	Preservation for future ger	nerations									
4	Provide Part	de a description of the orga		explain how th	ey furt	her the	organiz	ation's e	exempt purpo	se in		
5		g the year, did the organiza s to be sold to raise funds r								☐ Yes	☑ N	lo.
Pa	rt IV	Escrow and Custodia Complete if the organi		' on Form 990). Part	IV, lir	ne 9. oi	r report	ed an amou			
		X, line 21.			,							
1a		e organization an agent, tru ded on Form 990, Part X? .								☐ Yes	□ N	lo
b	If "Y∈	es," explain the arrangemer	nt in Part XIII and comple	te the following	table:				A	mount		
С	Begin	ning balance						1c				_
d	_	ions during the year						1d				_
е		butions during the year					1	1e				_
f		ig balance					1	1 f				_
2a	Did th	ne organization include an a	amount on Form 990, Par	t X, line 21, for	escrov	v or cus	stodial a	ccount l	iability?	☐ Yes	□ N	lo
b	If "Ye	es," explain the arrangemer	nt in Part XIII. Check here	if the explanat	tion has	s been	provided	d in Part	XIII			
Pa	rt V	Endowment Funds.										
		Complete if the organi							(4) There are 1	11- (>	F	bt-
1a	Reginn	ing of year balance	(a) Currer	t year (b)	Prior yea	ar (c) Iwo y	ears back	(d) Three yea	ars back (e)	Four yea	irs back
	-	outions										
		/estment earnings, gains, a	and losses									
		or scholarships										
	Other 6	expenditures for facilities ograms										
f		istrative expenses										
g	End of	year balance										
2	Provi	de the estimated percentag	ge of the current year end	balance (line 1	.g, colu	mn (a)) held a	s:				
а	Board	d designated or quasi-endov	wment >									
b	Perm	anent endowment ►										
c	Temp	orarily restricted endowme										
	The p	ercentages on lines 2a, 2b,	, and 2c should equal 100	1%.								
3 a		here endowment funds not nization by:	in the possession of the o	organization tha	at are h	eld and	d admini	istered f	or the		Yes	No
	(i) ur	nrelated organizations .								3a(i)		
	. ,	elated organizations				•				3a(ii)		
		es" on 3a(ii), are the related				.?				3b		
4		ribe in Part XIII the intende		n s endowment	runas.							
Рa	rt VI	Land, Buildings, and Complete if the organi		' on Form 990). Part	TV. lir	ne 11a.	See Fo	rm 990. Pa	rt X. line 1	٥.	
	Descri	ption of property	(a) Cost or other basis (investment)	(b) Cost or other					depreciation		ook valu	e
1a	Land				6.5	98,325						5,598,325
	Buildin					84,938			13,648,629			5,736,309
		old improvements			230,3	,,,,,,,			15,5.0,025			
	Fauinn	· —			8.7	59.676			4.774.686		-	3.984.990

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

147,319,624

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, I	Part IV lir	ne 11h Sea	Form gan c	Part X. line 12
	(a) Description of security or category (including name of security)	(b) Book value		(c) Metho	d of valuation: -year market value
(1) Financia	ıl derivatives	value			
(2) Closely-	held equity interests				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	n (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, I	Part IV, lir	ne 11c. Se	e Form 990, I	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. (Colum	n (b) must equal Form 990, Part X, col.(B) line 13.)		•		
Part IX	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV, lin	e 11d. See	Form 990, Par	t X, line 15.
(1)	(a) Description				(b) Book value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9) ————					
	omn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities.				•
	Complete if the organization answered 'Yes' on Form 990, P	art IV, lin	e 11e or 1	1f.See Form	990, Part X, line 25. (b) Book
1. (1) Federal	(a) Description of liability income taxes				value
	compensation payable				771,797
(3) Refundal	ble advance				3,282,500
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
	on (b) must equal Form 990, Part X, col.(B) line 25.) or uncertain tax positions. In Part XIII, provide the text of the footnot	e to the or	ganization's		4,054,297 ments that reports the organiza
	x positions under FIN 48 (ASC 740). Check here if the text of the foot				

Part XI

2

b

3

4

b

C

Part XII

5

1

2

C

d

b

3 4

Schedule D (Form 990) 2019

Page 4

425,609

96,063

50,720,002

40,349,022

237,532

40,111,490

Schedule D (Form 990) 2019

50,623,939

Add lines **4a** and **4b**

Net unrealized gains (losses) on investments
Donated services and use of facilities
Recoveries of prior year grants
Other (Describe in Part XIII.)
Add lines 2a through 2d
Subtract line 2e from line 1

Amounts included on Form 990, Part VIII, line 12, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b .

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Donated services and use of facilities

Subtract line **2e** from line **1**

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Add lines 2a through 2d . .

Total expenses and losses per audited financial statements

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

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

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Add lines **4a** and **4b** 4c 3,836,395 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 43.947.885 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

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

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

2a

2b

2c

2d

4a

4b

2a

2b

2c

2d

4a

4b

278.295

147.314

5,876

90,187

147,314

90,218

5,876

3.830.519

2e

3

4c

2e

3

chedule D (Form 990) 2019	Page 5
Part XIII Supplemental Information (continued)	
Return Reference Explanation	

Schedule D (Form 990) 2019

Additional Data

Software ID:

Software Version:

EIN: 84-6038240

Name: Denver Art Museum

Supplemental Information

Return Reference	Explanation				
Part III, Line 1a:	The Museum's collections, which were acquired through contributions and purchases, are not recognized as assets on the statement of financial position. Purchases of collection item s are recorded as decreases in net assets without donor restrictions in the year in which the items are acquired. Contributed collection items are not reflected on the financial st atements. Proceeds from deaccessions or insurance recoveries are reflected as increases in the appropriate net asset classes. Museum policies require that such proceeds be used only to acquire additional art objects. All of the Museum's collection items are held for edu cational, research, exhibition, and curatorial purposes. Each of these collection items is cataloged, preserved, and cared for, and activities verifying their existence and assessing their condition are performed continuously.				

Supplemental Information					
Return Reference	Explanation				
Part III, Line 4:	The Denver Art Museum (DAM) is dedicated to the collection, preservation, and presentation of art for broadly diverse audiences. With more than 70,000 works of art in its care, the DAM holds the largest and most comprehensive collection of world art between Kansas City and the West Coast. The Museum is an accessible, quality destination, welcoming over 800,0 00 visitors annually. The Museum is committed to its role as a cultural resource providing shared experiences of art and culture to the Rocky Mountain region and beyond. Collection s are organized into nine curatorial departments: Architecture, Design & Graphics; Asian; Modern & Contemporary; Native Art (American Indian, African, and Oceanic); New World (pre-Columbian and Spanish Colonial); Painting & Sculpture; Textile Art; Western American; and Photography. The DAM strives to enrich the lives of present and future generations through the acquisition, presentation and preservation of works of art. The collections further the organization's exempt purpose by providing the sustenance necessary to educate visitors about the past, present and future, and inspire life-long learning.				

Supplemental Information	
Return Reference	Explanation
Part XI, Line 4b - Other Adjustments:	Rental Expense -90,218. Art Proceeds 180,405.

S

upplemental Information					
Return Reference	Explanation				
Part XII, Line 2d - Other Adjustments:	Rental Expense 90,218.				

S

Supplemental Information	
Return Reference	Explanation
Part XII, Line 4b - Other Adjustments:	Transfers to DAMF 1,151,886. Acquistions of Art 2,678,633.

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493076008181 OMB No. 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. **Employer identification number** Name of the organization Denver Art Museum 84-6038240 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants Internet and email solicitations ☐ Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 50083H Schedule G (Form 990 or 990-EZ) 2019

	edule G (Form 990 or 990-EZ) 2019 rt II Fundraising Events. Comple				
	than \$15,000 of fundraising e gross receipts greater than \$!		gross income on Form	n 990-EZ, lines 1 and 6	6b. List events with
	gross receipts greater than \$.	(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col. (a) through
		Collectors Choice (event type)	(event type)	(total number)	col. (c))
a \					
Revenue					
Rev					
	1 Gross receipts	833,420			833,420
	2 Less: Contributions	639,563			639,563
	3 Gross income (line 1 minus line 2)	193,857			193,857
	4 Cash prizes	,			,
s	5 Noncash prizes				
Direct Expenses	6 Rent/facility costs				
Ä.	7 Food and beverages	78,364			78,364
— ਰੂ	8 Entertainment	43,920			43,920
ā	9 Other direct expenses	71,573			71,573
	10 Direct expense summary. Add lines 4 t			•	193,857
-	11 Net income summary. Subtract line 10			•	0
261	Gaming. Complete if the org on Form 990-EZ, line 6a.	anization answered "Ye	s on Form 990, Part I	.v, line 19, or reported	i more than \$15,000
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Re	1 Gross revenue				
ses	2 Cash prizes				
benses	2 Cash prizes				
t Expenses	3 Noncash prizes				
Direct Expenses	3 Noncash prizes				
Direct Expenses	3 Noncash prizes	□ Voc 9/	□ Voc. 94	□ Voc 9/6	
Direct Expenses	3 Noncash prizes	☐ Yes %	☐ Yes%	☐ Yes %	
Direct Expenses	3 Noncash prizes	□ No	☐ Yes%	☐ Yes %. ☐ No	
Direct Expenses	3 Noncash prizes	□ No	_	l <u> </u>	
Direct Expenses	3 Noncash prizes	no No	□ No	□ No ►	
6 Direct Expenses	3 Noncash prizes	t line 7 from line 1, colum	No	□ No ▶ ▶	
	3 Noncash prizes	through 5 in column (d) t line 7 from line 1, colum ion conducts gaming activi	No n (d)	□ No ▶ ▶	Yes No
9 a	3 Noncash prizes	through 5 in column (d) t line 7 from line 1, colum ion conducts gaming activities in each of	No n (d)	No	
9 a	3 Noncash prizes	through 5 in column (d) t line 7 from line 1, colum ion conducts gaming activities in each of	No n (d)	No	
9 a b	3 Noncash prizes	through 5 in column (d) t line 7 from line 1, column ion conducts gaming activities in each of	No n (d)	No	

Sche	dule G (Form 990 or 990-EZ) 20	19				F	age 3
11	Does the organization conduct	gaming activities with nonmembers	5?		Yes	Пио	
12	Is the organization a grantor, be formed to administer charitable		member of a partnership or other entity		Yes		
13	Indicate the percentage of gam	ning activity conducted in:					
а	The organization's facility .			13a			%
b	An outside facility			13b			%
14	Enter the name and address of	the person who prepares the organ	nization's gaming/special events books and	records:			
	Name •						
	Address >						
15a			m the organization receives gaming		· Yes	Пио	
b	If "Yes," enter the amount of g	aming revenue received by the orgained by the third party $ ightharpoons$	anization 🕨 \$ and	the			
c	If "Yes," enter name and addre	ss of the third party:					
	Name •						
	Address ▶						
16	Gaming manager information:						
	Name 🟲						
	Gaming manager compensation	1 ▶ \$					
	Description of services provided	d ▶					
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions:						
а	<u>-</u>		stributions from the gaming proceeds to		□Yes	Пио	
b	Enter the amount of distributio	ns required under state law distribu	ited to other exempt organizations or spent	:	☐ 1e3		
		pt activities during the tax year					
Pai			ions required by Part I, line 2b, colum licable. Also provide any additional inf				s.
	Return Reference		Explanation				

efil	e GRAPHIC pi	int - DO NOT PROCESS	As Filed Data	a -	DLN: 93	49307	76008	181	
Sch	edule J	Cor	npensati	on Information	OI	ИВ No.	1545-0	0047	
(For	n 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest							
		► Complete if the organ		ited Employees ered "Yes" on Form 990, Part IV,	line 23.	2019			
D	▶ Attach to Form 990.						Open to Public		
•	tment of the Treasury al Revenue Service	V do to <u>www.ms.gov/</u>	101111990	mistractions and the latest miori		Insp	ectio	n	
	ne of the organiza ver Art Museum	ation			Employer identifica	tion nu	ımber		
					84-6038240				
Pa	rt I Questi	ons Regarding Compensation	on				l		
1 a				the following to or for a person listed			Yes	No	
		s or charter travel							
		companions	ä	Housing allowance or residence for prayments for business use of person					
	_	nification and gross-up payments	<u></u>	Health or social club dues or initiation					
	Discretion	nary spending account		Personal services (e.g., maid, chauf	feur, chef)				
L	Tf any of the hea	waa an Lina 1a aya ahaalkad did th		follow a written policy regarding payr					
b				ve? If "No," complete Part III to expla		1b	Yes		
2				or allowing expenses incurred by all	- 1-3	2	Yes		
	directors, truste	es, officers, including the CEO/Exe	ecutive Director	r, regarding the items checked on Lin	elar				
3		if any, of the following the filing or EO/Executive Director. Check all t		d to establish the compensation of th	ne				
				CEO/Executive Director, but explain in	n Part III.				
	☐ Compens	ation committee		Written employment contract					
	_ ·	ent compensation consultant	<u> </u>	Compensation survey or study					
	☐ Form 990	of other organizations	\checkmark	Approval by the board or compensati	tion committee				
4	During the year related organiza		0, Part VII, Se	ction A, line 1a, with respect to the fi	ling organization or a				
а	Receive a sever	ance payment or change-of-contro	ol payment? .			4a		No	
b	Participate in, o	r receive payment from, a supplen	nental nonquali	fied retirement plan?		4b	Yes		
С			'	nsation arrangement?		4c		No	
	ir res to any o	or lines 4a-c, list the persons and p	provide the app	licable amounts for each item in Part	1111.				
	Only 501(c)(3), 501(c)(4), and 501(c)(29) o	rganizations	must complete lines 5-9.					
5		ed on Form 990, Part VII, Section , ontingent on the revenues of:		the organization pay or accrue any					
а	The organization	1?				5a		No	
b		anization?				5b		No	
6		ed on Form 990, Part VII, Section , ontingent on the net earnings of:	A, line 1a, did t	the organization pay or accrue any					
а	-	1?				6a		No	
b						6b		No	
-	•	6a or 6b, describe in Part III.	A 10 # 11.1.1		1				
7				the organization provide any nonfixed rt III		7		No	
8	subject to the ir	nitial contract exception described	in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," de 					
9	If "Yes" on line	8, did the organization also follow	the rebuttable	presumption procedure described in	Regulations section	9		No	
For F	<u>``</u>	iction Act Notice, see the Instri			0053T Schedule J		1 990)	2019	

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

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

instructions, on row (ii). Note. The sum of colum	Do no ns (B	ot list any individuals tha)(i)-(iii) for each listed in	t are not listed on Form 9 dividual must equal the to	90, Part VII. otal amount of Form 990,	Part VII, Section A, line	1a, applicable column (D) and (E) amounts for tha	t individual.
(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported
		(i) Base compensation	(ii) Bonus & incentive compensation (iii) Other reportable compensation		compensation	belletits	(6)(1)-(0)	as deferred on prior Form 990
1 Christoph Heinrich Director	(i)	397,624	0	0	156,250	13,434	567,308	0
	(ii)	0	0	0	0	0	0	0
2 Curtis Woitte Deputy Director/CFO	(i)	185,968	0	0	9,770	9,792	205,530	0
,,	(ii)	0	0	0	0	0	0	0
3 Andrea Fulton Dep. Dir./Chief Marketing	(i)	210,965	0	0	10,097	13,236	234,298	0
	(ii)	0	0	0	0	0	0	0
4 Arpie Chucovich Chief Development Officer	(i)	135,570	0	0	7,059	13,434	156,063	0
	(ii)	0	0	0	0	0	0	0
5 Bryon Thornburgh Director of Technology	(i)	130,943	0	0	7,007	13,236	151,186	0
Sirector of realmology	(ii)	0	0	0	0	0	0	0
	- 1		· · · · · · · · · · · · · · · · · · ·				Schedule	J (Form 990) 2019

Schedule J (Form 990) 2019	Page 3			
Part III Supplemental Inform	nation			
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			
Part I, Line 1a	The Museum Director receives a taxable benefit for a health club membership as part of his employment agreement.			
·	The Museum Director participates in a non-qualified supplemental retirement plan. The Plan requires the Museum to make regular contributions to the Plan until the earlier of ten years or a distribution event occurs, as defined by the agreement. The Museum's obligation as of September 30, 2020 was \$771,797. There were no distributions from the Plan in 2020.			

Schedule 1 (Form 990) 2019

DLN: 93493076008181 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No. 1545-0047 Schedule K **Supplemental Information on Tax-Exempt Bonds** (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI. Open to Public ▶ Attach to Form 990. Department of the Treasury Internal Revenue Service ▶Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization **Employer identification number** Denver Art Museum 84-6038240 Part I **Bond Issues** (b) Issuer EIN (c) CUSIP # (d) Date issued (f) Description of purpose (g) Defeased (i) Pool (a) Issuer name (e) Issue price (h) On behalf of financing issuer Yes No Yes No Yes No Χ Colorado Educational and 84-0896727 02-21-2018 47,000,000 Construct a welcome center and Χ Cultural Facilities Authority renovate the North building **Proceeds** Part ${f II}$ C Α В D 2 3 21,545,519 5 6 7 8 9 10 21,545,519 11 12 13 Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue of tax-exempt 14 Χ bonds (or, if issued prior to 2018, a current refunding issue)? Were the bonds issued as part of an advance refunding issue of taxable 15 Χ 16 Χ Does the organization maintain adequate books and records to support the final allocation of 17 Χ Part 🏻 **Private Business Use** Α R C D Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned property Are there any lease arrangements that may result in private business use of bond-financed Schedule K (Form 990) 2019 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50193E

Private Business Use (Continued)

Schedule K (Form 990) 2019

Part III

b

C

d

6

8a

Part IV

а

b

C

Arbitrage

Yes

D

Schedule K (Form 990) 2019

No

Yes

C

No

Yes

C

No

Yes

В

No

Yes

Α

Nο

В

No

Yes

Yes

Α

No

Χ

Χ

Χ

Χ

Χ

Yes

Χ

Page **2**

counsel to review any management or service contracts relating to the financed property?	
Are there any research agreements that may result in private business use of bond-financed property?	
If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?	
Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	

Are there any management or service contracts that may result in private business use of

If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside

Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3)

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply?

Exception to rebate?

hedge with respect to the bond issue?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Term of hedge Was the hedge superintegrated? Was the hedge terminated?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Does the bond issue meet the private security or payment test? . . . Has there been a sale or disposition of any of the bond-financed property to a

	Yes	No
oss proceeds invested in a guaranteed investment contract		Х

Schedule K (Form 990) 2019

Part IV

(GIC)?

period?

Arbitrage (Continued)

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

Term of GIC

requirements of section 148? . . .

Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

No

No

Yes

No

Yes

Yes

No

Nο

Yes

Page 3

No

D

D

No

Yes

Yes Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493076008181 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶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. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** Denver Art Museum 84-6038240 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Χ 997 Art-Historical treasures Art—Fractional interests 4 Books and publications 5 Clothing and household goods Cars and other vehicles 7 Boats and planes . . 8 Intellectual property . . . Securities—Publicly traded . Χ 14 195,239 Published market value 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . Real estate—Other . . 18 Collectibles 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ► (City indirect) 560,928 Reported by City 26 Other ▶ (______) 27 Other ▶ (______) 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement 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 30a Nο **b** If "Yes," describe the arrangement in Part II. 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 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2019)	Page 2
	ation. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization umn (b), the number of contributions, the number of items received, or a combination of both. Also y additional information.
Return Reference	Explanation
,	Throughout the year, the Museum receives gifts of art which are accessioned into the collection. In accordance with generally accepted accounting principles, it is the Museum's policy not to capitalize collection items. In fiscal year 2020, the Museum received 997 gifts of art which were accessioned into the Museum's collection.
	Schedule M (Form 990) (2019)

efile GRAPH	IIC print - E	OO NOT PROCESS	As Filed Data -		DLN:	93493076008181
CCHEDIII	F 0					OMB No. 1545-0047
SCHEDUL (Form 990 or EZ)		Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.				2019
Department of the T	Treasury	► Go to <u>и</u>		n 990 or 990-EZ. <u>90</u> for the latest information.	•	Open to Public Inspection
Name l Bะthe เอริย Denver Art Museur					Employer identi 84-6038240	fication number
990 Schedul	e O, Supple	emental Information	n			
Return Reference			,	Explanation		
Form 990, Part VI, Section A, line 6		Art Museum has approx d of Trustees at the annu		pers who approve the trustees no nip meeting.	ominated	

Return **Explanation** Reference

Form 990. Denver Art Museum members approve the slate of trustees as nominated by the Board of Trustees. Part VI, Section A.

line 7a

990 Schedule O, Supplemental Information

Return Explanation
Reference

um Board Trustees prior to filing with the IRS.

Form 990.

Part VI,
Section B,
line 11b

ary for review. The Chief Financial Officer (CFO) provides the Form 990 to the Museum Boar
d's Finance/Audit Committee Chair for review. The Museum's CFO discusses any questions or
concerns with the Secretary and the Finance/Audit Committee Chair and necessary changes ar
e updated on the Form 990. Once the CFO is in agreement with the Secretary and the Finance
/Audit Committee Chair regarding the finished Form 990, it is signed and dated by the Dire
ctor and submitted to the IRS by the filing deadline. A copy is made available to all Muse

The IRS Form 990 is completed annually and a copy is provided to the Museum's Board Secret

Return Reference	Explanation
Form 990, Part VI, Section B, line 12c	The Museum's Conflict of Interest Policy is designed to protect the Museum by defining what is a conflict of interest or potential conflict of interest and providing procedures to identify and address conflicts of interest and potential conflicts of interest. Museum tru stees, members of committees with delegated powers from the Board of Trustees, officers (C hairman, Vice Chairman, Secretary, Treasurer), and specific employees including the Museum Director, Executive Assistant to Director, Deputy Directors, Chief Curator, Curator, Assi stant or Associate Curator, Department Director, or Department Associate Director (all "In terested Persons") are all covered under the policy. On an annual basis, each Interested Persons must complete a "Disclosure and Compliance" form. This form requests information con cerning all actual or potential conflicts of interest involving Interested Persons, their immediate family members and certain entities in which they or their immediate family members and certain entities in which they or their immediate family members and certain entities in which they or their immediate family members are appointed, new officers are elected, or new employees who are covered under the policy are appointed (if those individuals are not already Interested Persons by reason of holding another of these positions) such individuals are also required to complete the "Disclosure and Compliance" form. In case of an actual or potential conflict of interest, the Museum uses a process at the Executive Committee level to investigate actual or potential conflicts of interest. Following disclosure of an actual or potential conflict, the person or persons involved with the conflict are not permitted to participate in any disccussions relevant to determining if a conflict of interest exists. They may, however, be counted in determining the presence of a quorum at a meeting of the Executive Committee at which a conflict is being reviewed and may make a presentation to the Executive Committee to disclose the con

990 Schedule O, Supplemental Information

Return
Reference

Explanation

Form 990,	The Museum's procedures for determining executive compensation include reviewing comparabi
Part VI,	lity data, monitoring the competitive market place, and approval by the executive committe
Section B,	e of the Board of Trustees. Determining the compensation for the Museum's other officers a
line 15	nd employees follows the Museum's compensation policies and practices. This includes revie
	wing comparability data, considering the competitive market place, and the review and appr
	oval by the Museum's executive management

Return Explanation
Reference

line 19

Form 990,
Part VI,
Section C.

The Museum makes its governing documents, conflict of interest policy and financial statem ents available to the public upon reasonable request.

Return Explanation

Part XII, Line
2c
the Finance/Audit committee meets annually with the independent CPA firm to review the results of the current audit and internal control recommendations, if any. The Finance/Audit committee also assumes the annual responsibility of approving the selection of the audit firm. There have been no changes in these processes from the prior year.

SCHEDULE R
(Form 990)

As Filed Data Related

Department of the Treasury

Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

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

2019

DLN: 93493076008181OMB No. 1545-0047

Open to Public Inspection

Employer identification number

nver Art Museum				84-6038240			
Part I Identification of Disregarded Entities. Comple	ete if the organization answ	ered "Yes" on Form	990, Part IV, line	33.			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (stat or foreign country)		(e) End-of-year assets	(f) Direct controllingentity	g	
) Denver Art Museum Holdings LLC 10 W 14th Avenue enver, CO 80204 6038240	Hold Real Estate	СО		1,111,952	Denver Art Museum		=
D DAM Office LLC 0 W 14th Avenue enver, CO 80204 6038240	Hold Real Estate	СО		9,527,462	Denver Art Museum		
3) Denver Art Museum Garage LLC 00 W 14th Avenue enver, CO 80204 4-6038240	Hold Real Estate	СО		2,528,137	Denver Art Museum		
							=
							-
Part II Identification of Related Tax-Exempt Organiza related tax-exempt organizations during the tax years.		anization answered	"Yes" on Form 99	O, Part IV, line 34	 because it had one o	r more	_
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) cor enti	ntrolled
						Yes	No
1)Denver Art Museum Foundation 74-2496760	Support the activities of the Denver Art Museum	со	501(c)(3)	509(a)(1)	N/A		No
or Panerwork Peduction Act Notice, see the Instructions for Fo		Cat No. 50135	<u> </u>	1	Schedule P (Form	2 000) 20	110

(a) Name, address, and EIN o related organization	of	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	Disprop		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene		(k) Percenta ownersh
			\perp		,			Yes	No		Yes	No	
Identification of Related Organ because it had one or more related						zation ans	wered "Yes	s" on F	Form 9	990, Part IV	, line	34	
(a) Name, address, and EIN of	(b) Primary activity	L	(c) egal micile		(d) controlling Type entity (C co	(e) e of entity rp, S corp,	(f) Share of total income	Share	(g) of end- year	-of- Perce	ntage ership	Sec (13	(i) ction 5) conti entity
related organization		(state	or foreign untrv)			r trust)		a	assets			_	~~
related organization		(state	or foreign untry)			r trust)		ē	assets			Y	es
related organization		(state				r trust)		6	assets			Y	es
related organization		(state				r trust)		ē	assets			Y	es
related organization		(state				r trust)		2	assets			Y	es
related organization		(state				r trust)			assets			Y	es
related organization		(state				r trust)			assets			Y	es
related organization		(state				r trust)			assets			Y	es

Page **3**

Schedule R (Form 990) 2019

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	T		
	_		

1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1 b	Yes	
c	Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d	Loans or loan guarantees to or for related organization(s)	1 d		No
_	Loans or loan quarantees by related organization(s)	1e		No

а	Receipt of (1) interest, (11) annuales, (11) royaldes, or (10) rent from a controlled entity.	1-4		110
b	Gift, grant, or capital contribution to related organization(s)	1 b	Yes	
С	Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d	Loans or loan guarantees to or for related organization(s)	1d		No
е	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f	ĺ	No
g	Sale of assets to related organization(s)	1g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1i		No
i	Lease of facilities, equipment, or other assets to related organization(s)	1j		No

e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)	1 j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sharing of paid employees with related organization(s)	10	Yes	
p Reimbursement paid to related organization(s) for expenses	1 p		No
q Reimbursement paid by related organization(s) for expenses	-	Yes	

i Exchange of assets with related organization(s)				11	No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j	No
${f k}$ Lease of facilities, equipment, or other assets from related organization(s)				1k	No
I Performance of services or membership or fundraising solicitations for related organization(s)				11 Y	'es
m Performance of services or membership or fundraising solicitations by related organization(s)				1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	No
o Sharing of paid employees with related organization(s)				10 Y	'es
p Reimbursement paid to related organization(s) for expenses				1p	No
q Reimbursement paid by related organization(s) for expenses				1q Y	'es
f r Other transfer of cash or property to related organization(s)				1r	No
f s Other transfer of cash or property from related organization(s)				1s	No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this lin	ne, including covered r	relationships and tran	nsaction thresholds.		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining a	amount inv	olved
	1	1	1		

n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
	Sharing of paid employees with related organization(s)				10	Yes	
р	Reimbursement paid to related organization(s) for expenses				1 p		No
q	Reimbursement paid by related organization(s) for expenses				1 q	Yes	
r	Other transfer of cash or property to related organization(s)				1r		No
s	Other transfer of cash or property from related organization(s)				1 s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	including covered r	elationships and trar	saction thresholds.			
		(b)	(c)	(d)			
	(a) Name of related organization	Transaction type (a-s)	Amount involved	Method of determining am	ount ii	nvolved	
		Transaction			ount ii	nvolved	
		Transaction			ount ii	nvolved	
		Transaction			ount ii	nvolved	
		Transaction			ount ii	nvolved	

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Part VI Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships. (a) Name, address, and EIN of entity (b) (c) (d) (e) Are all partners (f) (g) (h) (i) Code V-UBI (j) **(k)** Percentage Primary activity Legal Predominant Share of Share of Disproprtionate General or allocations? ownership domicile income section total end-of-year amount in box managing (state or (related, 501(c)(3) income assets partner? unrelated, organizations? of Schedule foreign excluded from country) K-1 (Form 1065) tax under sections 512-514) Yes No Yes No Yes No

Schedule R (Form 990) 2019			Page 5
Part VII	Supplemental Info	emental Information	
	Provide additional information for responses to questions on Schedule R. (see instructions).		
Return Reference		Explanation	