Form 990-T	1 E	Exempt Organization Bus	sine	ess Income T	ax Returr		OMB No 1545-0047
and the second		(and proxy tax und			× 20 202	ا ۱	2019
	For ca	lendar year 2019 or other tax year beginning JUL 1				<u> </u>	2013
Department of the Treasury Internal Revenue Service	▶	Go to www irs gov/Form990T for in Do not enter SSN numbers on this form as it may	y be m	ade public if your organiz			Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if address changed		Name of organization (L Check box if name of	change	d and see instructions)		(Emp	loyer identification number ployees' trust, see uctions)
B Exempt under section	Print	PORTLAND ART MUSEUM					3-0391604
X 501(c() (3)	or	Number, street, and room or suite no. If a P.O bo	x, see	nstructions.			lated business activity code instructions)
408(e)220(e)	Type	1219 S.W. PARK AVENUE]	
408A 530(a) 529(a)		City or town, state or province, country, and ZIP of PORTLAND, OR 97205-24		gn postal code		531	.190
C Book value of all assets	J	E O					
150,113,6	596.	G Check organization type X 501(c) cor	poratio	n 501(c) trust	401(a)	trust	Other trust
H Enter the number of the	organiza	ition's unrelated trades or businesses.	3	Describe	the only (or first) un	related	ļ
trade or business here	► _SI	EE STATEMENT 1		If only one,	complete Parts I-V.	If more	e than one,
describe the first in the l	blank spa	ce at the end of the previous sentence, complete Pa	arts I a	nd II, complete a Schedule	M for each addition	ial trad	e or
_business, then complete							
		oration a subsidiary in an affiliated group or a pare	nt-subs	sidiary controlled group?	▶ [Y	es X No
		tifying number of the parent corporation.	_				
		ARETH NEVITT				<u>503</u>	
	d Trac	de or Business Income	_	(A) Income	(B) Expenses	3	(C) Net
a Gross receipts or sal]			
b Less returns and allo		c Balance	1c				
Cost of goods sold (2				<u>'</u>
Cost of goods sold (Capital gain net incor			3				/
a Capital gain net incoi	•	•	4a	[
Net gain (loss) (Form		art II, line 17) (attach Form 4797)	4b				
Capital loss deductio			4c				
4		thip or an S corporation (attach statement)	5	1 056 000	047.7	<u> </u>	100 257
Rent income (Schedi		(0.1.1.1.5)	6	1,056,092.	947,7	35.	108,357.
		•	7				
	-	nd rents from a controlled organization (Schedule F)	8		-		
		on 501(c)(7), (9), or (17) organization (Schedule G)					
10 Exploited exempt act11 Advertising income (-	·	10				
11 Advertising income (12 Other income (See in		·	11				
13 Total. Combine lines		· · · · · · · · · · · · · · · · · · ·	13	1,056,092.	947,7	35	108,357.
Part II Deduction	ons No	ot Taken Elsewhere (See instructions for		ations on deductions)		<u> </u>	100,337.
(Deductions	s must b	e directly connected with the unrelated busin	ness ir	ncome)			
	ficers, di	ectors, and trustees (Schedule K)				14	
15 Salaries and wages						_15	
16 Repairs and mainter	nance					16	
17 Bad debts		RECEIVE	<u>D</u>			17	
18 Interest (attach scho	edule) (se		ł	00		18	10 105
19 Taxes and licenses	- 45	62) Q MAY 1 8 202	21	SO 20 210		19	12,105.
20 Depreciation (attach		(b2)		20 21a			
	laimed or	Schedule A and elsewhere on return		21a		21b	
22 Depletion	/ forred on	OGDEN, L	-			22_	
23 Contributions to def		npensauon pians				23_	
24 Employee benefit pr25 Excess exempt expe	-	hadula I\				24 25	
26 Excess readership of						26	
27 Other deductions (a						27	
28 Total deductions. A		•				28	12,105.
<i>'</i>		re tillough 27 Icome before net operating loss deduction. Subtrac	t line 9	8 from line 13		29	96,252.
,		oss arising in tax years beginning on or after Janua				23	70,232.
(see instructions)	, stating I	and another than your obogithing on or after dallua	اع وا تر.			30	0.
<i>1</i>	taxable in	come. Subtract line 30 from line 29				31	96,252.
,		work Reduction Act Notice, see instructions.	_		017	· -	Form 990-T (2019)

Form 990	`)-T (2019	PORTLAND ART MUSEUM	93-0	0391604 Page 2
		Total Unrelated Business Taxable Income		
32/	Total of	of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32	104,208.
		nts paid for disallowed fringes	33	
		able contributions (see instructions for limitation rules)	34	0.
		Inrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 38	35	104,208.
		tion for net operating loss arising in tax years beginning before January 1, 20 8 (see instructions)	36	
		of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	104,208.
		ic deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	1,000.
			30	1,000.
1 1		ted business taxable income Subtract line 38 from line 37. If line 38 is greater than line 37, the smaller of zero or line 37		103,208.
		Tax Computation	39	103,200.
	/		26	21 674
		izations Taxable as Corporations Multiply line 39 by 21% (0.21)	46	21,674.
41	$\overline{}$	Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:		
40		ax rate schedule or Schedule D (Form 1041)	41	
	-	tax See instructions	42	 _
1		ative minimum tax (trusts only)	43	
		Noncompliant Facility Income See instructions	44	01 654
		Add lines 42, 43, and 44 to line 40 or 41, whichever applies	450	21,674.
Part		Tax and Payments	-	
		n tax credit (corporations attach Form 1118, trusts attach Form 1116)	.	
		credits (see instructions)		
_		il business credit. Attach Form 3800		
ď	Credit f	for prior year minimum tax (attach Form 8801 or 8827)	· •	
e	Total c	redits Add lines 46a through 46d	46e	
		ct line 46e from line 45	47	21,674.
48	Other ta	axes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	48	
49	Total ta	ax Add lines 47 and 48 (see instructions)	49	21,674.
50	2019 ne	et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	0.
51 a	Paymer	nts: A 2018 overpayment credited to 2019	'	
b ?	2019 es	stimated tax payments 22,623.	ĺ	
c ·	Tax dep	posited with Form 8868 51c		
d I	Foreign	n organizations; Tax paid or withheld at source (see instructions) 51d		
e l	Backup	withholding (see instructions) 51e		
f (Credit f	for small employer health insurance premiums (attach Form 8941) 51f		
g (Other c	credits, adjustments, and payments: Form 2439		
(Fo	orm 4136 Other Total ▶ 51g		•
52	Total pa	ayments. Add lines 51a through 51g	52	22,623.
53 I	Estimat	ted tax penalty (see instructions) Check if Form 2220 is attached 🕨 🔲	52 53	
54	Tax due	e. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	
55 (Overpay	lyment If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	949.
56 i	Enter th	ne amount of line 55 you want: Credited to 2020 estimated tax	56	949.
Part	VI S	Statements Regarding Certain Activities and Other Information (see instructions)	1	
57	At any t	time during the 2019 calendar year, did the organization have an interest in or a signature or other authority		Yes No
	-	financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file		
		Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country		
	here	>		X
		the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		X
	_	see instructions for other forms the organization may have to file.		
	_	ne amount of tax-exempt interest received or accrued during the tax year > \$;
	Un	nder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my know	ledge and b	elief, it is true,
Sign	CO	orrect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge		
Here				scuss this return with own below (see
			ructions)?	X Yes No
		Print/Type preparer's name Preparer's signature Date Check if	PTIN	
		self- employed	' ' ' ' ' '	
Paid		GARY MCGEE S/13/21 Self-employed	חחם	743279
Prepa				123413
Use (Only			
			5031	222-2515
	1 07 55			orm 990-T (2019)
923711 0	1-47-20		F(лип ээс- і (2019)

Schedule A - Cost of Good	ls Sold. Enter	method of inve	ntory valuation N/A		
1 Inventory at beginning of year	1		6 Inventory at end of year	ar	6
2 Purchases	2		7 Cost of goods sold S	ubtract line 6	
3 Cost of labor	3		from line 5. Enter here	and in Part I,	
4a Additional section 263A costs			line 2		7
(attach schedule)	4a		8 Do the rules of section	263A (with respect to	Yes No
b Other costs (attach schedule)	4b		property produced or a	acquired for resale) apply to	
5 Total Add lines 1 through 4b	5		the organization?		
Schedule C - Rent Income (see instructions)	(From Real	Property an	d Personal Property	Leased With Real P	roperty)
1 Description of property					
(1) MUSEUM FACILITIE					
(2)				 	
(3)					
(4)				-	
	2 Rent receiv	ed or accrued		T	
(a) From personal property (if the personal property is more 10% but not more than 50%	e than	of rent for	and personal property (if the percent personal property exceeds 50% or if int is based on profit or income)	age columns 2(a	ectly connected with the income in a) and 2(b) (attach schedule) ATEMENT 2
(1)			1,056,0		947,735.
(2)	- 				
(3)					
(4)					
Total	0.	Total	1,056,0	92.	
(c) Total income Add totals of columns here and on page 1, Part I, line 6, colum		ter -	1,056,0	(b) Total deductions Enter here and on page Part I, line 6, column (8)	1
Schedule E - Unrelated De	bt-Financed	Income (see	instructions)		
			Gross income from or allocable to debt-	to debt-fin	connected with or allocable nanced property
1 Description of debt-f	inanced property		financed property	(a) Straight line depreciation (attach schedule)	(D) Other deductions (attach schedule)
(1)	-				
(2)					
(3)					
(4)					
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	of or a debt-fina	adjusted basis allocable to nced property a schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)			%		
(2)			%		
(3)			%		
(4)	<u> </u>		%		
				Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Totals			•		00.
Total dividends-received deductions in	ncluded in column	. 8			0.

93-0391604

Page 4

Form 990-T (2019) PORTLAND ART MUSEUM

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

00.010 = 11	ough, c	a mio by mio bacio	,			_	•
1 Name of periodi	ıcal	2 Gross advertising income	3 Direct advertising costs	Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols. 5 through 7	5 Circulation income	6. Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)	<u>-</u>						
(2)	-					_ 	
(3)				1			
(4)							
Totals from Part I		0.	0.				0,
		Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)		* * * * * * * * * * * * * * * * * * * *	,	Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1-5)	>	0.	0.	,	*		0.

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

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

Form 990-T (2019)

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

RENTAL OF THE MUSEUM FACILITIES INCLUDING AUDIO VISUAL EQUIPMENT

TO FORM 990-T, PAGE 1

FORM 990-T	DEDUCTIONS	CONNECTED	WITH RENTAL	INCOME	STATEMENT	2
DESCRIPTION			ACTIVITY NUMBER	AMOUNT	TOTAL	
PAYROLL AND REICONTRACTED SERVOFFICE EXPENSES MAINTENANCE DEPRECIATION OTHER MISCELLAI ADMINISTRATION	VICES S	S - SUBTOTA	 1	536,859. 4,142. 31,713. 124,709. 119,868. 42,264. 88,180.	947,73	35.
TOTAL TO FORM	990-T, SCHEDUI	LE C, COLUI	1 N 3		947,73	

Employer identification number

SCHEDULE.M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

For calendar year 2019 or other tax year beginning JUL 1, 2019, and ending JUN 30, 2020

► Go to www.irs.gov/Form990T for instructions and the latest information. ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

PORTLAND ART MUSEUM 93-0391604 Unrelated Business Activity Code (see instructions) 453220 ▶ MUSEUM GIFT STORE SALES Describe the unrelated trade or business Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 270,331. 1a Gross receipts or sales 270,331. b Less returns and allowances c Balance 1c 155,699. Cost of goods sold (Schedule A, line 7) 2 114,632 114.632. Gross profit Subtract line 2 from line 1c 3 3 4a Capital gain net income (attach Schedule D) 4a b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach statement) 5 Rent income (Schedule C) 6 Unrelated debt-financed income (Schedule E) 7 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 8 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 10 Exploited exempt activity income (Schedule I) 10 Advertising income (Schedule J) 11 11 Other income (See instructions, attach schedule) 12 114,632. 114,632. Total. Combine lines 3 through 12 13 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	90,386.
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	
20	Depreciation (attach Form 4562)		
21	Less depreciation claimed on Schedule A and elsewhere on return	21b	
22	Depletion	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)	26	
27	Other deductions (attach schedule) SEE STATEMENT 3	27	49,582.
28	Total deductions. Add lines 14 through 27	28	139,968.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-25,336.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	30	0.
31 _	Unrelated business taxable income Subtract line 30 from line 29	31	-25,336.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

FORM 990-T (M)	OTHER DEDUCTIONS	STATEMENT 3
DESCRIPTION	•	AMOUNT
BANK FEES OTHER MISCELLANEOUS INDIRECT COSTS		7,922. 6,104. 35,556.
TOTAL TO SCHEDULE M, PART I	I, LINE 27	49,582.

Form 990-T (2019)							Page
PORTLAND	ART MUS	EUM				<u>93-0391</u>	L604
Schedule A - Cost of Good	Is Sold. Ente			aluation N/A			
 Inventory at beginning of year 	1	<u>113,618.</u>	7			_	6 106,447.
2 Purchases	2	<u> 148,528.</u>	7	Cost of goods sold St	ubtract l	ine 6	
3 Cost of labor	3	-]	from line 5. Enter here	and in I	Part I,	
4a Additional section 263A costs				line 2		L	<u>7 155,699.</u>
(attach schedule)	4a		8	Do the rules of section	263A (with respect to	Yes No
 Other costs (attach schedule) 	4b		J	property produced or a	acquired	t for resale) apply to	
5 Total. Add lines 1 through 4b	5	262,146.		the organization?			X
Schedule C - Rent Income (see instructions) 1. Description of property	(From Real	Property and	l Pe	rsonal Property	Leas	ed With Real Prop	perty)
(1)							
(2)							
(3)							
(4)	<u> </u>						
	2 Rent receiv	/ed or accrued					
(a) From personal property (if the personal property is more 10% but not more than 50%	rcentage of e than	(b) From real ar	ersonal	conal property (if the percental property exceeds 50% or if ed on profit or income)	age		connected with the income in d 2(b) (attach schedule)
(1)		-					
(2)	 -						
(3)						<u> </u>	
(4)					_	1	
Total	0.	Total			0.	†	
c) Total income Add totals of columns here and on page 1, Part I, line 6, column	2(a) and 2(b). Er	nter			0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	> 0.
Schedule E - Unrelated Del	ot-Finance	Income (see i	nstru	ctions)			<u>-</u>
		•	2	. Gross income from		3 Deductions directly connuto debt-finance	ected with or allocable d property
1 Description of debt-fi	nanced property		}	or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)							
(2)							
(3)			_				
(4)							
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or debt-fina	e adjusted basis allocable to unced property h schedule)	6	Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)				%			
(2)				%			
(3)				%	_		
(4)		-		%			
						nter here and on page 1,	Enter here and on page 1,

0.

Totais

Total dividends-received deductions included in column 8

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning JUL 1, 2019, and ending JUN 30, 2020

2019

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Name	of the organization		Employer identification number 93-0391604			
—	PORTLAND ART MUSEUM			33-033	1004	<u></u>
	Unrelated Business Activity Code (see instructions) ► 90009 Sescribe the unrelated trade or business ► INCOME FR		INVESTMENT IN	N PARTNERS	нтрс	ł
Pa		COI1_	(A) Income	(B) Expenses		(C) Net
1 a	Gross receipts or sales					
b	Less returns and allowances c Balance ▶	1c				·
2	Cost of goods sold (Schedule A, line 7)	2				
3	Gross profit Subtract line 2 from line 1c	3				
4 a	Capital gain net income (attach Schedule D)	4a_	43,425.			43,425.
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				
С	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach					
	statement) STATEMENT 4	5	-35,469.			<u>-35,469.</u>
6	Rent income (Schedule C)	6_				
7	Unrelated debt-financed income (Schedule E)	7				
8	Interest, annuities, royalties, and rents from a controlled				1	
	organization (Schedule F)	8				
9	Investment income of a section 501(c)(7), (9), or (17)					
	organization (Schedule G)	9				
10	Exploited exempt activity income (Schedule I)	10				
11	Advertising income (Schedule J)	11				
12	Other income (See instructions, attach schedule)	12				
13	Total. Combine lines 3 through 12	13	7,956.			7,956.
Pai	Deductions Not Taken Elsewhere (See Instruct directly connected with the unrelated business in the connected with the conne			ductions.) (Ded	uction	s must be
14	Compensation of officers, directors, and trustees (Schedule K)			_	14	
15	Salaries and wages			<u> -</u> :	15	
16	Repairs and maintenance			-	16	
17	Bad debts			 -	17	
18	Interest (attach schedule) (see instructions)			<u> </u>	18	
19	Taxes and licenses		1 1	<u> </u> -	19	
20	Depreciation (attach Form 4562)		20			
21	Less depreciation claimed on Schedule A and elsewhere on return	1	21a		1b	
22	Depletion			<u> </u>	22	
23	Contributions to deferred compensation plans			_2	23	
24	Employee benefit programs			_2	24	
25	Excess exempt expenses (Schedule I)			_2	25	
26	Excess readership costs (Schedule J)				26	
27	Other deductions (attach schedule)				27	
28	Total deductions. Add lines 14 through 27				28	0.
29	Unrelated business taxable income before net operating loss dedu			13	29	7,956.
30	Deduction for net operating loss arising in tax years beginning on o	or afte	r January 1, 2018 (see	- Marie		_
	instructions)			و ا	30	0.

LHA For Paperwork Reduction Act Notice, see instructions.

31 Unrelated business taxable income Subtract line 30 from line 29

Schedule M (Form 990-T) 2019

FORM 990-T (M) INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT
DESCRIPTION	NET INCOME OR (LOSS)
ENDEAVOUR CAPITAL FUND V, LP - ORDINARY BUSINESS INCOME (LOSS)	-32,063
ENDEAVOUR CAPITAL FUND V, LP - OTHER INCOME (LOSS) ENDEAVOUR CAPITAL FUND V AIV, LP - ORDINARY BUSINESS INCOME (LOSS)	1,052 2,015
ENDEAVOUR CAPITAL FUND VII, LP - ORDINARY BUSINESS INCOME (LOSS) AUDAX PRIVATE EQUITY FUND VI-A, L.P ORDINARY BUSINESS	-3,394
INCOME (LOSS) HARVEST MLP INCOME FUND II LLC - ORDINARY BUSINESS INCOME (LOSS)	~3,075 -4
TOTAL INCLUDED ON SCHEDULE M, PART I, LINE 5	-35,469