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DLN: 93493129016602

## Form 990

Department of the Treasury Internal Revenue Service

#### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2011

OMB No 1545-0047

**Z**U I I

► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

Δ Fc	or the i	2011 ca	lendar year, or tax year beginning 01	-01-2011 and ending 12-31-201	11				
			C Name of organization	-01-2011 and ending 12-31-201		D Employer i	identification number		
_	eck if a <sub>l</sub> dress ch	pplicable nange	American Association of Museums			53-0205	889		
_		-	Doing Business As			E Telephone			
_	me cha	-				(202) 289	9-1818		
Inr	tıal retu	m	Number and street (or P O box if mail is	not delivered to street address) Room/s	uite		ots \$ 11,104,265		
Te	rmınate	d	1575 Eye Street NW No 400			d dioss receip	11,104,203		
– <sub>Am</sub>	nended	return	City or town, state or country, and ZIP +	4					
— <sub>Ар</sub>	plication	n pending	Washington, DC 200051105						
		, ,	<b>F</b> Name and address of principa	Lofficer	11/-> 7 11				
			Ford Bell	Tomcer	H(a) Is the	s a group reti	urn for		
			1575 Eye Street NW No 400				,,		
			Washington, DC 200051105		H(b) Are al	l affiliates incl	uded?		
					If "No	o," attach a lı	st (see instructions)		
[ Ia	ix-exem	npt status	▼ 501(c)(3)	no )   4947(a)(1) or   527	H(c) Grou	p exemption	number 🟲		
J W	ebsite	e: 🕨 ww	w aam-us org						
<b>€</b> For	m of ord	nanization	Corporation Trust Association	Other 🕨	L Year of for	mation 1906	<b>M</b> State of legal domicile DC		
	rt I		mary	Stile! P	E rear or io	iniation 1900	11 State of legal dofficie. De		
ır e									
			escribe the organization's mission or nce the value of museums to their coi		vocacy, and se	rvice			
2	-	r o ciiiiai	tee the value of maseams to their con	mamares through reductship, ad	vocacy, and se				
Ě									
Governance	-								
5	2 (	Check th	nis box 🔭 if the organization discon	tinued its operations or disposed	of more than 2	5% of its net	assets		
	1 E	Number	of voting members of the governing b	ody (Part VI, line 1a)		з	24		
ජ ර	4 1	Number	of independent voting members of the	e governing body (Part VI, line 1b	))	4	24		
ë			mber of individuals employed in caler			5	56		
Activities &	1		mber of volunteers (estimate if neces			6	0		
ဍ			related business revenue from Part V		7a				
	1		elated business taxable income from F			76 7b			
	B'	ivet unie	Tated business taxable income nom	01111 9 90 - 1 , IIII e 3 4	Duit-				
a)				Prio	r Year	Current Year			
	8		butions and grants (Part VIII, line 11	·	2,512,422				
anue	9	_	am service revenue (Part VIII, line 2	•	7,101,536 7,198,78				
Reven	10		tment income (Part VIII, column (A),		111,284 56				
Ξ.	11		revenue (Part VIII, column (A), lines		734,540 741				
	12		revenue—add lines 8 through 11 (mus		ne	10,459,782	10,421,416		
	42								
	13		s and similar amounts paid (Part IX, o			641,770			
	14		ts paid to or for members (Part IX, co			0			
SŞ.	15	Salarie 5-10)	es, other compensation, employee be	nefits (Part IX, column (A), lines		4,440,375 4,404			
136	16a	,	, ssional fundraising fees (Part IX, colu	mn (A ) line 11e)		0			
Expenses						0 0			
Ä	b		indraising expenses (Part IX, column (D), line	-					
	17		expenses (Part IX, column (A), lines		•	5,659,852			
	18		expenses Add lines 13–17 (must eq			10,741,997			
	19	Reven	ue less expenses Subtract line 18 fr	om line 12		-282,215	-212,411		
Net Assets or Fund Balances						of Current	End of Year		
9.4					<b>Y</b>	ear			
8. B	20		assets (Part X, line 16)			4,981,907	_		
<u> </u>	21		liabilities (Part X, line 26)			4,432,630			
	22		ssets or fund balances Subtract line :	21 from line 20		549,277	261,081		
	rt II		ature Block						
know			erjury, I declare that I have examined th f, it is true, correct, and complete. Decla						
		****	**		20	12-05-04			
Sign Here		Signa	ature of officer		ite				
		Ford	Bell President						
			or print name and title						
		Drows		Date	Check If	Preparer's tax	payer identification number		
ריים		Preparer signatur		2012-05-08	self-	self- (see instructions)			
Paid	- u- ul -		<b>,</b>		employed 🕨 🦳	P00639053			
	arer's	1	ame (or yours Raffa PC		EIN > 52-151	.1275			
JSE	Only		, and ZIP + 4 1899 L Street NW Suite 90	0		-			
			Washington, DC 20036			Phone no 🕨	(202) 822-5000		
			vvasimiaion, DC 20030						

May the IRS discuss this return with the preparer shown above? (see instructions) . . . .

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Dart TTT	Statement of	Drogram	Sarvica	Accomi	lichmante
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Check if Schedule O contains a response to any question in this Part III . . . . . . .

Briefly describe the organization's mission

Total program service expenses►\$

The American Association of Museums (the Association) is dedicated to promoting excellence within the museum community. The Association supports museum staff, boards and volunteers across the country in better serving the public. The Association will support opportunities for sound professional preparation, provide outlets for professional research and publication as well as foster the continued improvement of the museum profession through the development and observance of high standards of ethics. In promoting its purposes, the Association will use meetings, reports, papers, discussions, publications, and other media of publicity and communication so as to increase and diffuse knowledge of all matters pertaining to museums and encourage cooperation among museums, museum professionals, museum users, and the general public

2	Did the organization the prior Form 990 o		ant program se		r which were not listed on	Yes 🔽 No
	If "Yes," describe the	se new services on S	chedule O			
3	<del>-</del>	cease conducting, or	_	nt changes in how it co		⊤Yes 🔽 No
	If "Yes," describe the	se changes on Sched	ule O			
4	expenses Section 50	01(c)(3) and 501(c)(4	) organization:	s and section 4947(a)	rree largest program services, )(1) trusts are required to repo ch program service reported	
4a	(Code	) (Expenses \$	2,929,019	including grants of \$	9,311 ) (Revenue \$	2,494,147 )
	discussions, and museur				annual meeting with more than 150 services Additional educational oppo	
	(Code	) (Expenses \$	2,577,097	ıncludıng grants of \$	835,814 ) (Revenue \$	419,308 )
	Program Accreditation is promoting ethical and procommunity Collaboration museums' communities people abroad. The Mus confidential, consultative	s a widely recognized seal ofessional standards, recogns Abroad (MCCA) is a fed play a leading role in stren eum Assessment Program	of approval that b gnizing excellence erally funded grar gthening connection (MAP) is also a fe- ource allocation, d	rings national recognition to and serving as the field's p it program designed to fost ons between museums and derally funded program he	m and community collaborations and of American museums thereby strengt orimary vehicle for quality assurance atter museum-based international exchild their communities as well as the corliping to maintain and improve operatione funding requests, meeting and escape in the corresponding requests, meeting and escape funding requests, meeting and escape in the corresponding requests.	hening individual museums, and self-regulation Museums & anges in which members of the inections of US citizens and ions in museums through a
	(Code	) (Expenses \$	1,471,518	ıncludıng grants of \$	31,435 ) (Revenue \$	3,742,498 )
	Membership The Associ Association provides mu	ation represents more than	n 17,000 individua ssionals with netwo	l museum professionals and orking opportunities, publications	d volunteers, 2,500 institutions, and 2 ations, seminars, money-saving prog	250 corporate members The
	(Code	) (Expenses \$	761,621	ıncludıng grants of \$	) (Revenue \$	24,976 )
	Publications	) (Expenses ¢	701,021	medaling grants of \$	/ (Revenue \$	21,370 )
	(Code	) (Expenses \$	573,901	ıncludıng grants of \$	232 ) (Revenue \$	)
	Advocacy					
	(Code	) (Expenses \$	425,958	ıncludıng grants of \$	5,000 ) (Revenue \$	)
	Center for Future Museu	ms				
	(Code	) (Expenses \$	288,774	ıncludıng grants of \$	) (Revenue \$	)
	Business Enterprises					
4d	Other program serv (Expenses \$	ices (Describe in Sch 2,050,254 inc	nedule O )	of ¢ 5	,232 ) (Revenue \$	24,976 )
	(ryhelises à	2,030,234 IIIC	induling grants (	و بر	,232 ) (Nevenue à	24,370)

9,027,888

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	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	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? If "Yes," complete Schedule D, Part I	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? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, 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	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	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.	11b		No
C	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
	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
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	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, XII, and XIII 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
b	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, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part 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 assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part 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? <i>If</i> "Yes," complete Schedule G, Part I	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? <i>If</i> "Yes," complete Schedule G, Part II	18		N o
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		N o
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

	550 (2011)			Page -
Par	t IV Checklist of Required Schedules (continued)		1	
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) 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? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28 a	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)  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	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? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	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		No
36	<b>Section 501(c)(3) organizations.</b> 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 11 and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•	.1	
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	<b>1a</b> 117			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
a	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		100	
h	return			
ט	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
а	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	За	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
a	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 or securities account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
a	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?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	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
	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		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
	Sponsoring organizations maintaining donor advised funds.	8		
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
	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 )			
	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			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the aggregate amount of reserves on hand			
4-		14-		N.o.
+đ	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No

Form 990 (2011) Page **6** Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for Part VI a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax **1a** 24 Enter the number of voting members included in line 1a, above, who are 24 **1**b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo 3 Did the organization delegate control over management duties customarily performed by or under the direct 3 Νo supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Nο filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Νo 6 Did the organization have members or stockholders? . . . . . . . . 6 Yes 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a Yes Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, 7b Yes b or persons other than the governing body? . . . . . . . . . . . . Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? . Yes 8b Each committee with authority to act on behalf of the governing body? . Yes Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the 9 organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . . Nο Section B. Policies (This Section B requests information about policies not required by the Internal Revenue 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 the 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		Νo
	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		
	ostion C. Biodosuus			

- List the States with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CT, FL, IL, KS, KY, ME, MD, MA, MN,  $\ensuremath{\mathsf{MS}}\xspace$  ,  $\ensuremath{\mathsf{NH}}\xspace$  ,  $\ensuremath{\mathsf{NM}}\xspace$  ,  $\ensuremath{\mathsf{NM}}\xspace$  ,  $\ensuremath{\mathsf{ND}}\xspace$  ,  $\ensuremath{\mathsf{ND}}\xspace$  ,  $\ensuremath{\mathsf{OK}}\xspace$  ,  $\ensuremath{\mathsf{ND}}\xspace$  , and  $\ensuremat$ SC, TN, UT, VA, WA, WV, WI
- Section 6104 requires an organization to make its Form 1023 (or 1024 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

☐ Own website ☐ Another's website ☐ Upon request

- 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. See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization

1575 Eye Street NW Suite 400 Washington, DC 200051105

(202) 289-1818

### Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees 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 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 persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
<b>(A)</b> Name and Title	(B) A verage hours per week (describe	A verage Position hours more t unless per week an of						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Additional Data Table										
				$\vdash$			_			

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title		(B) Average hours per week (describe	Average hours more than one box, per unless person is both week an officer and a director/trustee) hours director/trustee) hours more than one box, compensation compensation from the organization (W- organization (W- 2/1099-MISC)						Reportable compensation from related organizations (W- 2/1099-	compensation from the			
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Keş emploşee	Highest compensated employee	Former			MISC	organiza	
See A	ddıtıonal Data Table												
<u>1b</u> с	Sub-Total	to Part VII. Sec	tion A		•	•		<b>*</b>					
d					•	•		<b>P</b>		761,464	0		72,923
2	Total number of individuals (inc \$100,000 of reportable compe	-				ted	above	) who	receive	d more tha	n		
												Yes	No
3	Did the organization list any <b>for</b> on line 1a? <i>If</i> "Yes," complete Sc				e, k • •	ey e •	mploy •	ee, c	or highes	t compens • •		3	No
4	For any individual listed on line organization and related organization										n from the	<b>4</b> Yes	
5	Did any person listed on line 1a	receive or accru	ıe comp	oensa	ition	fror	n any	unre	lated org	anızatıon d		1 163	
	services rendered to the organi	zatıon? <i>If "Yes," (</i>	complet	e Sch	edul	e J fo	or suci	h per	son .			5	No
Se	ection B. Independent Cor	ntractors											
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax	n the organizatio											
	Na	(A) me and business add	dress							Desci	(B) ription of services	Compe	
7900 Tyson	Corporation Westpark Dr 5th Fl is Corner, VA 22102									Software de	velopment		142,325
2 Wis	ownsend Group consin Circle Suite 900 y Chase, MD 20815									Exhibit and a	advertising		141,712
BDO 7101	Wisconsin Avenue Suite 800									Accounting			114,054
bethe	sda, MD 208144827												
	Total number of independent con \$100,000 of compensation from			ot lır	nıted	to	those	liste	d above)	who receiv	ved more than		

Form 99								Page <b>9</b>
Part	<b>/1111</b>	Statement o	of Revenue		<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
nts ots	1a	Federated cam	paigns 1a					
Z a	Ь	Membership du	es <b>1b</b>					
% ⊞	c	Fundraising eve	ents <b>1</b> c					
<u>≅</u> ,ਰ	d		zations 1d					
a Si⊞	e	Government grants						
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no	butions included in	977,954				
ang	h		s 1a-1f	▶	2,424,939			
				Business Code				
Program Service Revenue	2a	Membership dues		900099	3,742,498	3,742,498		
es Se	ь	Exhibit fees		900099	1,280,275	1,280,275		
93	c	Registrations		900099	1,213,872	1,213,872		
er Y	d	Advertising income	2	541800	734,989	24,976	710,013	
Ø E	e	Accreditation fees		900099	227,150	227,150		
_rar	f	All other progra	am service revenue					
Š	   g	Total Add lines	s 2a-2f	<b>-</b>	7,198,784			
	3		ome (including dividen		7,130,701			
			aramounts)	_ ·	52,473			52,473
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨				
	5	Royalties		▶	342,800			342,800
			(ı) Real	(II) Personal				
	6a	Gross rents Less rental						
	b	expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
		(1) Securities 7a Gross amount 576,796		(II) Other				
	7a	from sales of assets other than inventory	·					
	b	Less cost or other basis and	572,688					
	l c	sales expenses Gaın or (loss)	4,108					
	d	Net gain or (los	(SS)		4,108			4,108
ë	8a	Gross income f events (not inc	rom fundraising					
Other Revenue		\$ of contributions See Part IV , lin						
<u>.</u>			a					
	b c		penses <b>b</b> (loss) from fundraising	events 🟲				
	9a		rom gaming activities					
	b c		penses <b>b</b>	vities				
	10a	Gross sales of returns and allo	inventory, less owances .	-				
	Ь	less costof=	a oods sold b	302,319				
	c		oods sold <b>b</b>   (loss) from sales of inve	110,161 entory ►	192,158	192,158		
		Miscellaneous		Business Code		·		
	11a	Sublease incon	ne	900099	163,620			163,620
	ь	Other		900099	24,382			24,382
	С	Subscriptions		900099	18,152			18,152
	d	All other reven	ue					
	е	Total. Add lines	s 11a-11d		206,154			
	12	Total revenue.	See Instructions .	. •				
					10,421,416	6,680,929	710,013	605,535

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

c	heck if Schedule O contains a response to any question in this Part IX	<u> </u>		<u>l .</u>	
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	( <b>B</b> ) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	835,814	835,814		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	46,978	46,978		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	447,591		412,042	35,549
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	3,276,174	1,984,030	1,182,942	109,202
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	163,348		163,348	
9	Other employee benefits	267,578	251,369	3,704	12,505
10	Payroll taxes	249,964	146,874	90,043	13,047
11	Fees for services (non-employees)				
а	Management				
b	Legal	36,240	9,013	11,111	16,116
c	Accounting	163,752	,	163,752	<u> </u>
d	Lobbying				
e	Professional fundraising See Part IV, line 17				_
f	Investment management fees	20,105		20,105	
g g	Other	1,214,852	1,097,110	24,222	93,520
12	Advertising and promotion	1,214,632	1,097,110	24,222	93,320
13	Office expenses	1 207 010	020 274	265.062	4 492
	·	1,297,919	928,374	365,062	4,483
14	Information technology	249,549	90,407	146,405	12,737
15	Royalties				
16	Occupancy	869,587	1,856	867,731	
17	Travel	504,346	455,789	35,629	12,928
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	639,726	614,478	18,395	6,853
20	Interest	13,028		13,028	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	151,180		151,180	
23	Insurance	26,862	12,460	14,402	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O )				
а	UBI taxes	66,668		66,668	
b	Professional dev	63,580	30,526	30,152	2,902
С	Other	28,986	4,594	23,392	1,000
d	Overhead expenses	0	2,518,216	-2,640,521	122,305
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	10,633,827	9,027,888	1,162,792	443,147
26	Joint costs. Check here ► ☐ If following  SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	,,	,,	,,	.,
					rm <b>990</b> (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 300 300 1 1 554.624 750.415 2 2 3 248,344 320,434 3 156,140 4 133.049 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . . . . . . . . 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 Schedule L . . . . . 7 339.345 8 296.031 9 281.066 9 391.066 Prepaid expenses and deferred charges . . . . 3.560.041 Land, buildings, and equipment cost or other basis Complete 10a Part VI of Schedule D 10a 10b 2,903,477 b Less accumulated depreciation . . . . 721,589 10c 656,564 2,680,499 2,448,131 11 11 12 12 Investments—other securities See Part IV, line 11 . . . . . . 13 13 Investments—program-related See Part IV, line 11 . . 14 14 15 15 4,981,907 16 16 4,995,990 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 672,442 1,065,707 17 17 Accounts payable and accrued expenses . 18 18 19 2,632,248 19 2,877,979 20 20 21 140,125 21 40,500 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . . 250,000 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 737,815 25 750,723 D . . . . . 26 4,432,630 26 4,734,909 **Total liabilities.** Add lines 17 through 25 . . . . . Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 -497,057 -580,866 Unrestricted net assets . . . . 776,114 28 571,502 28 Temporarily restricted net assets . . . . . Fund 29 270,220 29 270,445 Permanently restricted net assets . . . . Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds . . . . . 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances . . . . . 549.277 33 261.081 34 Total liabilities and net assets/fund balances . . . . . 4.981.907 4.995.990 34

4.	Check if Schedule O contains a response to any question in this Part XI				. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)		1		104	121,41
2	Total expenses (must equal Part IX, column (A), line 25)	T	2			533,82
3	Revenue less expenses Subtract line 2 from line 1		3		- 2	212,41
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) $oldsymbol{.}$		4	549,2		
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-75,78			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33 (B))	6	261,08			
Par	Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII				୮	
					Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," expla  Schedule O	ın ın				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant	?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		[	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for over audit, review, or compilation of its financial statements and selection of an independent accounted If the organization changed either its oversight process or selection process during the tax year Schedule O	ant?		2c	Yes	
d	I If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the y on a separate basis, consolidated basis, or both	ear were is	sued			
	▼ Separate basis					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set Single Audit Act and OMB Circular A-133?	forth in the		3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ergo the re	quired	3b	Yes	

#### OMB No 1545-0047

Inspection

#### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

American Association of Museums

### Complete if the organization is a section 501(c)(3) organization or a section

**Public Charity Status and Public Support** 

4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

**Employer identification number** 

									53-0205	889		
Pai	t I	Reas	on for Pu	blic Charity Sta	<b>tus</b> (All org	ganızatıons	must com	plete this i	part.) See	ınstructıor	าร	
The o	rganız	zatıon ıs	not a privat	te foundation becaus	eitis (Forl	ınes 1 throu	igh 11, check	conly one b	ox)			
1	Γ	A churc	ch, convent	on of churches, or a	ssociation of	churches <b>s</b>	ection 170(b	)(1)(A)(i).				
2	$\sqcap$	A scho	ol described	in <b>section 170(b)(</b> 1	L <b>)(A)(ii).</b> (At	tach Schedi	ule E)					
3	$\Gamma$	A hosp	ital or a coo	perative hospital se	rvice organiz	ation descri	ıbed ın <b>sectio</b>	n 170(b)(1	)(A)(iii).			
4	Γ			h organization opera ity, and state	ted ın conjun	ction with a	hospital desc	cribed in <b>se</b>	ction 170(b)	(1)(A)(iii)	.Enter th	е
5	Г	_	· ·	erated for the benefi	_	or universi	ty owned or o	perated by	a governmer	ntal unit de	scribed ii	า
	_			(A)(iv). (Complete P	•							
6	<u>_</u>			local government o								
7	굣	describ	oed in	at normally receives (A)(vi) (Complete P		al part of its	support from	a governm	ental unit or	from the ge	neral pul	olic
8	$\Gamma$	A comr	munity trust	described in <b>section</b>	170(b)(1)(	A)(vi) (Con	nplete Part II	I )				
9	$\Gamma$	Anorga	anization th	at normally receives	(1) more th	an 331/3%	of its support	from contr	ıbutıons, mei	mbership fe	es, and g	gross
10 11		acquire An orga An orga one or i the box a By chee	port from gred by the organization organizat	ities related to its exposs investment incoganization after June ganized and operated ganized and operated by supported organizates the type of suppox, I certify that the	me and unrel 30,1975 S d exclusively d exclusively ations descri orting organi I c organization	lated busine see section set to test for performing the bending section and control of the bending section and control of the section and control of the section and control of the section se	ss taxable in 509(a)(2). (Coublic safety efit of, to perform 509(a)(1) complete line 5 - Functional rolled directly	orme (less omplete Pa See <b>section</b> form the fun ) or section is 11e throully integrate or indirect	section 511 rt III ) n 509(a)(4). ctions of, or 509(a)(2) S igh 11h id	to carry ou to carry ou See <b>section</b> <b>d</b> Ty more disqu	t the pur i <b>509(a)(</b> pe III - ( alified pe	poses of  3). Check  Other  ersons
f g		section If the o check t Since A	n 509(a)(2) organization this box August 17,2	on managers and ot received a written d 2006, has the organ	etermination	from the IR	S that it is a	Туре I, Тур	e II or Type			
			ng persons?	rectly or indirectly c	antrols aith	eralone ort	ogether with	nercons de	scribed in (ii	`	Y	es No
				governing body of th			_	persons de	scribed iii (ii		1g(i)	25 140
				er of a person descri			acion.				lg(ii)	<del></del>
				•			.houra?					
L				lled entity of a perso						[11	.g(iii)	
h		Provide	e the following	ng information about	the supporte	eu organizat	1011(5)					
s	(i) Name of supported organization		ced EIN lines 1		(iv) Is the organizati col (i) list your gove docume	on in ced in rning	organizati col (i) of	(v) Did you notify the organization in col (i) of your support?		he ition in ganized J S ?	(vii) A mount of support?	
				(see instructions))	Yes	No	Yes	No	Yes	No	<b>o</b>	
									†	<del>                                     </del>		
									1	1		
									1			
									1			
									1	1		
Total									1	1		

instructions

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

_	ection A. Public Support	organization f	alls to qualify u	naer the tests I	istea pelow, ple	ease complete i	art III.)
	endar year (or fiscal year beginning	<b>(a)</b> 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	<b>(e)</b> 2011	<b>(f)</b> Total
1	in) Gifts, grants, contributions, and membership fees received (Do not include any "unusual	1,338,61		1,733,844	2,487,422	2,424,939	8,589,127
2	grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4 5	<b>Total.</b> Add lines 1 through 3 The portion of total contributions	1,338,61	604,307	1,733,844	2,487,422	2,424,939	8,589,127
	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						136,815
6	(f) <b>Public Support.</b> Subtract line 5 from line 4						8,452,312
	ection B. Total Support						
Cal	endar year (or fiscal year beginning in)	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	<b>(d)</b> 2010	(e) 2011	<b>(f)</b> Total
7	A mounts from line 4	1,338,615	604,307	1,733,844	2,487,422	2,424,939	8,589,127
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	460,594	189,134	398,153	431,328	558,893	2,038,102
9	Net income from unrelated business activities, whether or not the business is regularly carried on		33,115	213,217	197,483	289,613	733,428
LO	Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets		1,271	30,587	84,678	42,534	159,070
L1	Total support (Add lines 7 through 10)						11,519,727
12	Gross receipts from related activities	es, etc (See ınst	ructions )	•	•	12	32,651,049
13	First Five Years If the Form 990 is to check this box and stop here	_		thırd, fourth, or fı	fth tax year as a	501(c)(3) organiz	
	ection C. Computation of Pub						
L4 . E	Public Support Percentage for 2011	•	,	11 column (f))		14	73 370 %
L5 	Public Support Percentage for 2010	•	•			15	74 110 %
b	33 1/3% support test—2011. If the and stop here. The organization qua 33 1/3% support test—2010. If the box and stop here. The organization 10%-facts-and-circumstances test-is 10% or more, and if the organization Part IV how the organization mee	lifies as a public organization did n qualifies as a pi – <b>2011.</b> If the org tion meets the "f	ly supported orgainot check the box ublicly supported of anization did not c acts and circumst	nization on line 13 or 16 organization heck a box on lin ances" test, chec	a, and line 15 is 3 e 13, 16a, or 16b ck this box and <b>st</b>	33 1/3% or more, and line 14 op here. Explain	►/ check this ►/
	organization  10%-facts-and-circumstances test- 15 is 10% or more, and if the organization  Explain in Part IV how the organization  Private Foundation If the organization	iization meets the tion meets the "f	e "facts and cırcuı acts and cırcumst	mstances" test, c ances" test The	check this box and organization qual	d <b>stop here.</b> Ifies as a publicly	<b>▶</b> □

▶□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

**▶**[

Page **4** 

Part IV	<b>Supplemental Information.</b> Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation
Schedule A, Pa	rt II, Line 10, Explanation of Other Income Other income Subscriptions

Schedule A (Form 990 or 990-EZ) 2011

#### **Additional Data**

Software ID: Software Version:

**EIN:** 53-0205889

Name: American Association of Museums

#### Form 990, Special Condition Description:

#### **Special Condition Description**

#### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code	) (Expenses \$	761,621	including grants of \$	) (Revenue \$	24,976 )
Publications					
(Code	) (Expenses \$	573,901	ıncludıng grants of \$	232 ) (Revenue \$	)
Advocacy					
(Code	) (Expenses \$	425,958	ıncludıng grants of \$	5,000 ) (Revenue \$	)
Center for Future Mu	iseums				
(Code	) (Expenses \$	288,774	including grants of \$	) (Revenue \$	1

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per	Posi t	tion ( that a		/)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Douglas G Myers Chair	2 00	Х		Х				О	О	0
Lyndel King Vice Chair and Sec - until 5/2011	2 00	Х		Х				0	0	0
Meme O mogbai Vice Chair and Secretary	2 00	Х		Х				0	0	0
Carl R Nold Immediate Past Chair	2 00	Х		Х				0	0	0
John Wetenhall Treasurer	2 00	Х		Х				0	0	0
Ted Beattie Director	2 00	×						0	0	0
Ellen Charles Dırector	2 00	Х						0	0	0
Melissa Chiu Director	2 00	Х						0	0	0
Kıppen de Alba Chu Dırector	2 00	Х						0	0	0
Bobbie Conner Director	2 00	Х						0	0	0
Kınshasha Holman Conwill Dırector	2 00	Х						0	0	0
David Ellis Director	2 00	Х						0	0	0
Kaywın Feldman Dırector	2 00	Х						0	0	0
Laura H Foster Director	2 00	Х						0	0	0
William T Harris Director	2 00	Х						0	0	0
Joel Hoffman Director	2 00	Х						0	0	0
Nık Honeysett Dırector	2 00	Х						0	0	0
Allyn Lord Director - until 05/2011	2 00	Х						0	0	0
Laurie Norton Moffatt Director	2 00	Х						0	0	0
Juanita Moore Director	2 00	Х						0	0	0
Tey Marianna Nunn Director	2 00	Х						0	0	0
Patty Ortiz Director	2 00	Х						0	0	0
Van A Romans Director	2 00	Х						0	0	0
Cristian Samper Director	2 00	Х						0	0	0
Silvia Singer Director	2 00	х						0	0	0

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

(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	<b>(F)</b> Estimated amount of other
	per week	Individual trustie or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Nancy Stueber Director - until 05/2011	2 00	х						0	0	0
Howard Taylor Director - until 05/2011	2 00	х						0	0	0
Marshall Turner Director	2 00	х						0	0	0
Ford Bell President	40 00			Х				262,228	0	26,876
Laura Lott COO	40 00			Х				149,949	0	8,538
Kathryn Igoe Ex Vice President - until 11/2011	40 00					Х		144,870	0	18,451
Elizabeth Merritt Director, CFM	40 00					Х		103,466	0	14,625
Gail Ravnitzky Silberglied Director of Government Rel	40 00					Х		100,951	0	4,433

DLN: 93493129016602

OMB No 1545-0047

#### SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities).

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name	of the	organi	zatıon
America	n Assoc	cation of	Museum

Employer identification number

☐ Yes

Yes

53-0205889

Part I-A	Complete if the or	ganization is exem	pt under section 501(c	c) or is a	section 527 or	ganization.
----------	--------------------	--------------------	------------------------	------------	----------------	-------------

- Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV
- Political expenditures
- 3 Volunteer hours

art I-B	Comp	<u>lete if</u>	the or	ganizatio	<u>n is</u>	exemp	<u>rt under</u>	section	501(	c)(	<u>3).</u>	

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
- Enter the amount of any excise tax incurred by organization managers under section 4955
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
- Was a correction made?
- b If "Yes," describe in Part IV

#### Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- Did the filing organization file Form 1120-POL for this year?

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	( <b>b)</b> Address	<b>(c)</b> EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-

encadic e (i	01111 330 01 330 12/2011	ı agı
Part II-A	Complete if the organization is exempt under section 501(c)(3) and filed Form 5768	(election
	under section 501(h)).	

Α	Check	If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,
		expenses, and share of excess lobbying expenditures)

<u> </u>	Check   If the filing organization checked box	A and "limited control" provisions apply			
	Limits on Lobbying E (The term "expenditures" means ar	•		<b>(a)</b> Filing Organization's Totals	<b>(b)</b> Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lobbyıng)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)		105,337	
c	Total lobbying expenditures (add lines 1a and 1b	o)		105,337	
d	<b>d</b> Other exempt purpose expenditures				
е	e Total exempt purpose expenditures (add lines 1c and 1d)				
f	f Lobbying nontaxable amount Enter the amount from the following table in both columns				
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$17,000,000  Over \$17,000,000	The lobbying nontaxable amount is: 20% of the amount on line 1e \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000			
	Grassroots nontaxable amount (enter 25% of lin	e 1f)		170,423	
h	Subtract line 1g from line 1a If zero or less, ento	er -0-		0	

i Subtract line 1f from line 1c If zero or less, enter -0 j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

_	Vac	$\overline{}$	N
	165		IMC

# 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expenditures During 4-Year Averaging Period					
	Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	(e) Total
2a	Lobbying non-taxable amount	329,103	678,815	691,053	681,691	2,380,662
b	Lobbying ceiling amount (150% of line 2a, column(e))					3,570,993
c	Total lobbying expenditures	35,338	113,161	104,071	105,337	357,907
d	Grassroots non-taxable amount	82,276	169,704	172,763	170,423	595,166
е 	Grassroots ceiling amount (150% of line 2d, column (e))					892,749
f	Grassroots lobbying expenditures					

_	edule C (Form 990 or 990-EZ) 2011				Page <b>3</b>
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	NOT f	iled Fo	orm 57	768 
		(a)		(	b)
		Yes	No	Am	ount
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)?				
C	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	O ther activities? If "Yes," describe in Part IV				
j	Total lines 1c through 1i		_		
2a	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				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c	)(5), d	or sect	tion
			_	Y	es No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				tion
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
C	Total	2c			
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues	3			
4	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 expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			

#### Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier | Return Reference | Explanation

DLN: 93493129016602

OMB No 1545-0047

Open to Public Inspection

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

**Supplemental Financial Statements** ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Name of the organization

Employer identification number

Ame	erican Association of Museums			<b>,</b>		
				205889		
Pa	organizations Maintaining Donor Ad		Funds	or Accounts.	Complet	te if the
	organization answered "Yes" to Form 99	(a) Donor advised funds	1 (	<b>b)</b> Funds and ot	ner accou	nte
1	Total number at end of year	(a) Donor advised failes	+ '	b) i dilas alia oci	iei accou	1103
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advifunds are the organization's property, subject to the		onor advı	sed	┌ Yes	┌ No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit				┌ Yes	┌ No
Pai	t III Conservation Easements. Complete	ıf the organization answered "Yes"	to Forn	າ 990, Part IV,	lıne 7.	
1 2	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreating Protection of natural habitat  Preservation of open space  Complete lines 2a-2d if the organization held a quality	on or pleasure)  Preservation of a	a certified	d historic structi		a
_	easement on the last day of the tax year					
				Held at the E	nd 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 his	toric structure included in (a)	2c			
d	Number of conservation easements included in (c) a	cquired after 8/17/06	2d			
3	Number of conservation easements modified, transfethe taxable year -	erred, released, extinguished, or termina	ted by th	e organızatıon d	uring	
4	Number of states where property subject to conserva	ation easement is located 🕨				
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds	the periodic monitoring, inspection, ha		violations, and	┌ Yes	┌ No
6	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation ease	ements di	uring the year 🕨		
7	A mount of expenses incurred in monitoring, inspecting.					
В	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of s	ection		┌ Yes	┌ No
9	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easen	the footnote to the organization's financi				
Par	Organizations Maintaining Collection Complete if the organization answered	ons of Art, Historical Treasures	, or Otl	ner Similar A	ssets.	
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	116, not to report in its revenue stater for public exhibition, education or resea	arch in fu			2,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research			•	
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$		
	(ii) Assets included in Form 990, Part X					
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA		for finan	· ·		
а	Revenues included in Form 990, Part VIII, line 1			<b>▶</b> \$		

**b** Assets included in Form 990, Part X

لتلكن	Organizations Maintaining Co	HECHOIIS OF ALL	, nis	יווטו	cui ii	Cusu				,	(continued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne foll	lowing t	hat are	e a significa	nt us	e of its collect	ion	
а	Public exhibition		d	Γ	Loan	or exch	nange progr	ams			
b	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ain hov	v the	y furthe	r the o	rganızatıon	's exe	empt purpose ı	า	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than to									– Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar						answere	d "Y∈	es" to Form 9	90,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	ıan or other ınterm	ediary	for c	ontribut	tions o	or other ass	ets n		_ Yes	√ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	ıng ta	able		Г		Δm	ount	
С	Beginning balance							1c	All	Ounc	
d	<del>[-</del>					1d					
e	Distributions during the year							1e			
f	Ending balance						F	1f			
2a	Did the organization include an amount on Fo	orm 990. Part X. lin	e 21?				L			✓ Yes	□ No
	If "Yes," explain the arrangement in Part XI\								,		,
Par			n ans	were	ed "Yes	s" to F	Form 990.	Part	TV. line 10.		
	zina wili circi aliabi complete	(a)Current Year		Prior Y			o Years Back		hree Years Back	(e)Fou	r Years Back
1a	Beginning of year balance	461,240			408,820		336,447	7	386,763		
b	Contributions	225			150		100		17,490		
c	Investment earnings or losses	-10,344			52,270		77,27	3	-62,048		
d	Grants or scholarships										
e	Other expenditures for facilities and programs						5,000		5,758		
f	Administrative expenses										
g	End of year balance	450,896			461,240		408,820		336,447		
2	Provide the estimated percentage of the year	r end balance held	as								
а	Board designated or quasi-endowment 🕨	16 600 %									
b	Permanent endowment 🕨 59 980 %										
c	Term endowment ► 23 420 %										
3a	Are there endowment funds not in the posse	ssion of the organiz	ation	that a	are held	and a	dministered	d for t	:he		
	organization by									Ye	
	(i) unrelated organizations			•				•	3a(		No
	(ii) related organizations								3a(i		No
	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the	•						•	3b		
	Describe in Fait AIV the intellued uses of th		uowille	ziit iu	IIIus						
4					lino 1	^					
	t VI Land, Buildings, and Equipme			rt X							
				rt X	, line 1 ) Cost or is (invest	other	( <b>b)</b> Cost or o		(c) Accumulated depreciation	l (d)	) Book value
Par	t VI Land, Buildings, and Equipme			rt X	) Cost or	other				(d)	) Book value
Par	Description of property			rt X	) Cost or	other				(d)	) Book value
Pari	Description of property			rt X	) Cost or	other	basis (oth			(a)	) Book value 394,863
Partial Lands E	Description of property  Land			rt X	) Cost or	other	basis (other	er)	depreciation	29	
Part  la L  b E  c L  d E	Description of property  and	ent. See Form 99	90, Pa	(a)	) Cost or	other ment)	74.	er) 2,992	depreciation  348,1	29	394,863

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	. ,	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Cost of end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )		
Part IX Other Assets. See Form 990, Part X, lin		1
(a) Descrip	tion	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)	
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
Deferred rent and leasehold incentive liability	750,723	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 )	750,723	
2 Fin 48 (ASC 740) Footnote In Part VIV provide the toy		

-75,785 -288,196 0,435,687
-212,411 -75,785 -75,785 -288,196
-75,785 -75,785 -288,196 0,435,687
-75,785 -288,196 0,435,687
-288,196 0,435,687
0,435,687
34,376
,401,311
20,105
0,421,416
0,723,883
110,161
0,613,722
20,105
C

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

#### Part XIV Supplemental Information

Complete this part to 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 XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
	Part IV , Line 2b	The Association is involved in an agency transaction whereby it receives foreign dues on behalf of the International Council of Museums (ICOM) Accordingly, these dues are recorded as funds held on behalf of others in the accompanying statement of financial position until such time that the dues are forwarded to ICOM
Description of Intended Use of Endowment Funds	Part V, Line 4	The Association's endowment consists of donor-restricted funds and board-designated matching funds contributed to the Association in support of its accreditation program and other professional standards initiatives
Description of Uncertain Tax Positions Under FIN 48	Part X	The Association performed an evaluation of uncertain tax positions for the year ended December 31, 2011, and determined that there were no matters that would require recognition in the financial statements or that may have any effect on its tax-exempt status
Part XII, Line 2d - Other Adjustments		Cost of goods sold 110,161
Part XIII, Line 2d - Other Adjustments		Cost of goods sold 110,161

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

OMB No 1545-0047

DLN: 93493129016602

**Grants and Other Assistance to Organizations,** Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

► Attach to Form 990

Inspection

Name of the organization						Employer identification	on number
American Association of Museums						53-0205889	
Part I General Informatio	n on Grants and	l Assistance				<b>'</b>	
<ol> <li>Does the organization maintain the selection criteria used to aw</li> <li>Describe in Part IV the organization</li> <li>Part II Grants and Other A</li> </ol>	ward the grants or ass ation's procedures fo	sistance? r monitoring the use o	f grant funds in the Unite	d States			<b>▽ Yes</b> □
Form 990, Part IV, line Part IV and Schedule	e 21 for any recip	ient that received n	nore than \$5,000. Che	eck this box if no one	recipient receive	d more than \$5,000.	Use
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
<ul><li>2 Enter total number of section 50</li><li>3 Enter total number of other orga</li></ul>		=				<b>.</b> _	14

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Pa	art IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b)Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Grants to individuals	55	46,978			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S		Schedule I, Part I, Line 2 The Association receives a signed implementation agreement stating the subrecipient will keep auditable records of all grant proceeds. The Association receives signed financial statements quarterly of both grant and cost-share funds and reviews to ensure compliance with the grant agreement. The Association disburses funds quarterly based on the recipient's cash needs. The Association receives a signed final financial report at the close of the grant.

or government

Software ID: **Software Version:** 

**EIN:** 53-0205889 **Name:** American Association of Museums

appraisal,

other)

assistance

Youth from

Alabama and South Africa explore the parallels between

(c) IRC Code **(b)** EIN (d) A mount of (e) A mount of **(f)** Method of **(g)** Description (h) Purpose of grant (a) Name and section if applicable address of valuation cash grant non-cash or assistance (book, FMV, assistance organızatıon non-cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

Birmingham Civil Rights Institute520 16th St N Birmingham, AL 35203	58- 1892067	501(C)(3)	109,525	Africa explore the parallels between the civil rights movement in Birmingham and the anti-apartheid struggle in Soweto, the role of youth in promoting social change, and the implications of their societies' past on contemporary life
International Museum of Women 235 Montgomery St 12th Floor San Francisco, CA 94104	77- 0007240	501(C)(3)	95,250	Young women from four countries use social media and online applications to discuss their perspectives on everything from careers and worklife balance to weathering financial hardship and combating gender discrimination
International Coalition333 Seventh Ave 14th Floor New York, NY 10001	20- 4874389	501(C)(3)	87,388	Members of three immigrant communities share their experiences of identity, assimilation, and discrimination through dialogue and public programs while an interactive installation at each museum collects visitors' personal reflections and opinions on
Cincinnati Museum Center1301 Western Ave Cincinnati, OH 45203	31- 1212634	501(C)(3)	75,000	Immigration  With the help of museums and local community members, children in Cincinnati and Lamu learn to document oral histories and traditions with digital and virtual tools. As they discover more about their own cultural heritage, they share their stories and learn from those of their peers abroad
The Wild Center45 Museum Dr Tupper Lake, NY 12986	14- 1811534	501(C)(3)	61,657	Responding to a shared concern about the affects of climate change on their winter cultures, lifestyles, and economies, museums and communities in the Adirondacks and Finland joined forces to increase awareness and explore how they can work to limit the impact of this trend
Lincoln Park Zoo 2001 N Clark Chciago,IL 60614	36- 2512404	501(C)(3)	59,250	Community of Conservation Research Exchange Experience for
The Discovery Museums177 Main St Acton,MA 01720	04- 2741645	501(C)(3)	54,507	Global Youth  Using art, autobiographies, and video conferencing, third and fourth graders in San Salvador and El Salvador learn about one another's cultures and traditions, explore the biodiversity of their regions, and expand their knowledge of the environmental concerns in their
Lousiana Science Center820 Clyde Fant Pkwy Shreveport, LA 71101	72- 1136273	501(C)(3)	52,520	Not Just Another Brick in the Wall Engaging Italian and American Teens harnessed the creativity of gifted high school students in conjunction with Parco Astronomico Infinito in Pino Torinese, Italy and Sci-Port Louisiana's Science Center in Shreveport, LA to create a new planetarium rock opera via web- based media and face-to-face exchanges
Museum of History and Holocaust Education1000 Chastain Rd Kennesaw, GA 30144	58- 0965786	501(C)(3)	49,432	Citizens of Georgia and Casablance explore what it means to be Muslim in the US and Morocco by collecting oral histories and sharing their findings with members of their own communities and with their partners abroad in hopes of moving beyond stereotypes and judgment
Art Museum of the Americas1819 F St NW Washington, DC 20006	52- 1336484	501(C)(3)	48,228	Youth in El Salvador and Salvadoran- American youth use art as a means to communicate about themes such as self, family, tradition, community and migration while creating awareness of their personal and collective identities and cultural heritage High school
University of Colorado Museum 1800 Grant St Denver, CO 80203	84- 6000555	501(C)(3)	45,500	students from local majority and minority ethnic groups created visual, oral, and literary components representing their personal experiences with stereotyping and prejudice for a multimedia art exhibition that traveled to all
A rab A merican National Museum 2651 Saulino Court Dearborn, MI 48120	23- 7444497	501(C)(3)	40,000	To call attention to the worldwide dilemma of increasing waste production and foster solutions, middle school students act as amateur archaeologists, photographing, filming and describing their own families' garbage and researching how the approach to waste has changed over generations
National Constitution Center 525 Arch St Philadelphia, PA 19106	23- 2434447	501(C)(3)	32,222	A diverse group of high school students from Philadelphia and Afghanistan captured images reflecting their interpretations of concepts such as dissent, freedom, and democracy in their countries. The photos turned into an exhibition that highlighted the amazing similarities the students found between citizens of these two very different multi-
World Awareness Children's Museum 89 Warren St Glens Falls, NY 12801	14- 1783303	501(C)(3)	25,335	ethnic societies  Middle schoolers in New York and Ecuador use art and video conferencing to explore the challenges faced by their communities and their own role in addressing them The partners will develop traveling culture kits filled with art, videos, and an associated curriculum to be exchanged and used for the museums' outreach programs in other middle schools

DLN: 93493129016602

OMB No 1545-0047

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#### **Schedule J** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

American Association of Museums

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

**Compensation Information** 

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

**Employer identification number** 

53-0205889

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	Compensation committee Written employment contract			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
ь	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	_		
		8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in 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

Note. The sum of columns (B)(1)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name	(B) Breakdown of  (i) Base compensation	W-2 and/or 1099-MI (ii) Bonus & Incentive compensation	SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	<b>(F)</b> Compensation reported in prior Form 990 or Form 990-EZ
(1) Ford Bell (I)	262,228	0	0	9,860 0	17,016 0	289,104 0	0
(2) Laura Lott	149,949 0	0	0	1,900	6,638 0	158,487 0	0
(3) Kathryn Igoe (I)	119,870 0	0 0	25,000 0	10,000	8,451 0	163,321 0	0
	_						

#### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

<b>Identifier</b>	Return Reference	Explanation
	Part I, Line 4a	Kathryn Igoe, Executive Vice President, received \$25,000 in severance payments

Schedule J (Form 990) 2011

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As Filed Data -

DLN: 93493129016602

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public

Inspection

Name of the organization American Association of Museums	Employer identifi	cation number
	53-0205889	

ldentifier	Return Reference	Explanation
	Form 990, Part VI, Section A, line 6	Individual membership shall be open to museum staff, non-profit organization staff, students, non-paid museum staff, retired museum staff, independent professionals, museum trustees, and such other categories of individual membership as the Board of Directors may establish from time to time. All individual members of the Association in good standing are entitled to vote at meetings of the Association and are eligible for election as officers and board members-at-large, provided they meet the additional requirements outlined in articles IV and V of the Constitution Institutional membership shall be open to museums, non-profit organizations that operate museums, other museum-related non-profit organizations, libraries, universities, government agencies, and such other categories of institutional membership as the Board of Directors may establish from time to time. All institutional members of the Association in good standing are entitled to vote at meetings of the Association, but are not eligible for election as officers or board members-at-large. Honorary or lifetime membership may be granted to individuals and institutions at the discretion of the Board of Directors and in recognition of exemplary and selfless service to the Association of the field. Honorary members and lifetime members may not vote at meetings of the Association and are not eligible for election as officers or board members-at-large. A nominating committee, which shall consist of the immediate past chair, one regional president, one standing professional committee chair, three members of the Board of Directors and one individual member to be selected by the Board of Directors, is responsible for electing members of the governing body.

ldentifier F	Return Reference	Explanation
Pa S	Form 990, Part VI, Section A, ne 7a	Individual membership shall be open to museum staff, non-profit organization staff, students, non-paid museum staff, retired museum staff, independent professionals, museum trustees, and such other categories of individual membership as the Board of Directors may establish from time to time. All individual members of the Association in good standing are entitled to vote at meetings of the Association and are eligible for election as officers and board members-at-large, provided they meet the additional requirements outlined in articles IV and V of the Constitution Institutional membership shall be open to museums, non-profit organizations that operate museums, other museum-related non-profit organizations, libraries, universities, government agencies, and such other categories of institutional membership as the Board of Directors may establish from time to time. All institutional members of the Association in good standing are entitled to vote at meetings of the Association, but are not eligible for election as officers or board members-at-large. Honorary or lifetime membership may be granted to individuals and institutions at the discretion of the Board of Directors and in recognition of exemplary and selfless service to the Association of the field. Honorary members and lifetime members may not vote at meetings of the Association and are not eligible for election as officers or board members-at-large. A nominating committee, which shall consist of the immediate past chair, one regional president, one standing professional committee chair, three members of the Board of Directors and one individual member to be selected by the Board of Directors, is responsible for electing members of the governing body.

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section A, line 7b	Certain changes in the Association's governing documents require approval by the members

Identifi	er Return Reference	Explanation	
	Form 990, Part VI, Section B, line 11	The information for the Form 990 is prepared by the accounting staff. Once the accounting firm delivers the draft, the Audit Committee reviews it, and it is then forwarded on to the entire Board of Directors for their review and approval. The President also reviews the Form 990 prior to signing.	

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section B, line 12c	The Association staff, board members, and volunteers act in the best interest of the Association rather than in furtherance of personal interests or the interests of third parties, such as friends and family. Decisions about the Association and the use or disposition of its assets are made solely in terms of the benefits to the Association and are neither influenced nor appear to be influenced, by any private profit, personal gain, or outside benefit for staff, board members, and volunteers, their friends and family members, or any organization or company with which they are affiliated. On an annual basis, all officers, directors, and key employees shall be provided with a copy of the conflict of interest policy and required to complete and sign an acknowledgement and disclosure form prepared by the Board of Directors. If a conflict arises in regards to a board member, the member immediately notifies the Chair. That member will then recluse himself or herself from any voting on a related issue, and will also not be counted towards a quorum on a related issue. For officers and key employees, a conflict would immediately be reported to management and appropriate action would be taken depending on the individual issue.

Identifier	Return Reference	Explanation	
	Form 990, Part VI, Section B, line 15a	The Board of Directors has the responsibility for reviewing and setting the President's compensation package. The Board reviews market data along with the President's performance in determining what an equitable compensation package should be in turn, the President is charged with preparing evaluations for the Association's senior management team based on each individual's performance during the current year. This data is then used by the President in setting compensation packages for the senior management team.	

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section C, line 19	The Association's annual report is available on its website. The Association's governing documents and conflict of interest policy are made available on a per request basis.

ldentifier	Return Reference	Explanation
Changes in Net Assets or Fund Balances	Form 990, Part XI, line 5	Net unrealized losses on investments -75,785