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Form **990**

Check if applicable

Department of the Treasury Internal Revenue Service

A For the 2012 calendar year, or tax year beginning

C Name of organization

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)

OMB No 1545-0047 2012

Open to Public Inspection

benefit trust or private foundation)

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

OCT 1, 2012

and ending

SEP 30 2013

D Employer identification number

Address change The Denver Art Museum Foundation Name change 74-2496760 Doing Business As Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-2200 303-863-3056 1560 Broadway Amended Treturn 40,083,926. City, town, or post office, state, and ZIP code G Gross receipts \$ Applica-Denver, CO 80202 H(a) Is this a group return pendina F Name and address of principal officer Frederic C. Hamilton for affiliates? 1560 Broadway, Suite 2200, Denver, CO 80202 H(b) Are all affiliates included? Tax-exempt status. X 501(c)(3) 501(c) () < 4947(a)(1) or If "No," attach a list. (see instructions) (insert no.) J Website: ► N/A H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Association Other -Year of formation: 1988 M State of legal domicile: CO Part I Summary Briefly describe the organization's mission or most significant activities. See Part III, line 1. Activities & Governance Check this box | If the organization discontinued its operations or disposed of more than 25% of its net assets. 11 Number of voting members of the governing body (Part VI, line 1a) 11 Number of independent voting members of the governing body (Part VI, line 1b) 0 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 11 6 Total number of volunteers (estimate if necessary) 22,045, 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** RECEIVED 2,930,437 2,116,673. Contributions and grants (Part VIII, line 1h) 0 0. Program service revenue (Part VIII, line 2g) S S S Investment income (Part VIII, column (A), lines 4, and 6) 2 0 2014 1,338,503 3,791,318. 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue - add lines 8 through 11 (must equal Part VIII, column (A) 4,268,940 5,907,991. Grants and similar amounts paid (Part IX, column (A) IN ... 4.463.524 4,859,724, 0 0. Benefits paid to or for members (Part IX, column (A), line 4) 0 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 46,211 27,886. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 4,509,735 4 887 610. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,020,381. <240,795. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 118,631,844 126,780,059, 6,981,151 8,544,546. Total liabilities (Part X, line 26) 111,650,693. 118,235,513, Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, the stare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete the claration of the parer (other than officer) is based on all information of which preparer has any knowledge Sign Prederic C. Hamilton, President Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature 2/10/1 P01401000 Paid Julie D. Reusser, CPA self-employed Kundinger, Corder & Engle Preparer Firm's name Firm's EIN Firm's address 475 Lincoln Street #200 Use Only Denver, CO 80203 Phone no. 303-534-5953 X Yes May the IRS discuss this return with the preparer shown above? (see instructions) No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2012)

Form 990 (2012)

The Denver Art Mus
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	X	
2	is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		х
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		X_
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		х
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		х
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		<u> </u>
Ū	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		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	ļ
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		4	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		х
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	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			l v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
a	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		x
6	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
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	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
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 and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		 -
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
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 United States? If "Yes," complete Schedule F, Parts II and IV	15		х
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 United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
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	<u> </u>	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	990	

Form 990 (2012)

The Denver Art Museum Found
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
22	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		Х
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		
	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		х
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		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			v
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	07		х
00	of any of these persons? If "Yes," complete Schedule L, Part III	27		A
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
_	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	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 direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	х	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
þ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			_v
••	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	x	
	Note. All Form 990 filers are required to complete Schedule O		990	(2012)
			~~~	(4014)

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Form 990 (2012) The Denver Art Museum Foundation

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V							
-			Yes	No				
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable							
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0							
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming							
-	(gambling) winnings to prize winners?	1c						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return  2a							
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b						
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		<b>*</b>					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	х					
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	х					
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
financial account in a foreign country (such as a bank account, securities account, or other financial account)?								
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			۰				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	-	X				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х				
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c						
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			-				
	any contributions that were not tax deductible as charitable contributions?	6a		х				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).							
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		x				
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		х				
ď	If "Yes," indicate the number of Forms 8282 filed during the year							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		_x				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h						
8	Sponsoring organizations maintaining donor advised funds 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?	8						
9	Sponsoring organizations maintaining donor advised funds.							
	Did the organization make any taxable distributions under section 4966?	9a						
þ	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		~				
10	Section 501(c)(7) organizations. Enter:			*				
а	Initiation fees and capital contributions included on Part VIII, line 12							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			7				
11	Section 501(c)(12) organizations. Enter.							
а	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		-				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note. See the instructions for additional information the organization must report on Schedule O.							
þ	Enter the amount of reserves the organization is required to maintain by the states in which the							
_	organization is licensed to issue qualified health plans  Enter the amount of reserves on hand  13b		j					
		14-		х				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a						
đ	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000					

The Denver Art Museum Foundation Form 990 (2012) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response Part VI to line 8a. 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions х * Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 11 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors, or trustees, or key employees to a management company or other person? 3 х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? х 5 6 Did the organization have members or stockholders? Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or х more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a х b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O x Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No х 10a 10a Did the organization have local chapters, branches, or affiliates? 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 х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe x in Schedule O how this was done 12¢ х 13 Did the organization have a written whistleblower policy? 13 х 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official 15a x b Other officers or key employees of the organization 15b 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 16a X taxable entity during the year? 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Another's website ☐ Own website Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization.

The Hamilton Companies - 303-863-3056 1560 Broadway, Denver, CO 80202

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

`Check if Schedule O contains a response to any question in this Part VII

### 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. 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, and 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 organization n	or any related	orga	anıza	ation	ı cor	mpe	nsat	ed any current officer, director, or trustee					
(A) (B)					C)			(D)	(E)	(F)			
Name and Title	Average	(do	not c	heck	nore	than	one	Reportable	Reportable	Estimated			
	hours per	box	, unle	ss pe	erson directo	is bot or/trus	h an tee)	compensation	compensation	amount of			
	week	⊢—	officer and a directo			1 1		from	from related	other			
	(list any hours for	recto		ĺ	1	L		the organization	organizations (W-2/1099-MISC)	compensation from the			
	related	e or d	寶	ĺ		satec		(W-2/1099-MISC)	(***271033-141130)	organization			
	organizations	ruste	a trus		a,	m per		(11 27 1000 111100)		and related			
	below	Individual trustee or director	Institutional trustee	_	oldu	Highest compensated employee	ᡖ			organizations			
_	line)	Indiv	Instit	Officer	Key employee	E B	<b>F</b> ormer						
(1) Frederic C. Hamilton	5.00	Г	Ţ										
President/treasurer		х		х	辶			0.	0.	0.			
(2) Richard D. McCormick	0.30		1										
VP/Secretary		х		х	<u> </u>	╙		0.	0.	0.			
(3) Peter H. Coors	0.20												
Director	ļ	х		<u> </u>	╙	L	<u> </u>	0.	0.	0.			
(4) William J. Hybl	0.20							_	_	_			
Director		x_	_		⊢	<u> </u>	_	0.	0.	0.			
(5) Elisabeth W. Ireland	0.20												
Director		X	├	┡	⊢	⊢	<u> </u>	0.	0.	0.			
(6) Joy S. Johnson	0.20	ł	l							_			
Director		х	├	<u> </u>	├-	$\vdash$		0.	0.	0.			
(7) J. Landis Martin	0.20	<b>∤</b>			1					,			
Director		х	├—	⊢	₩	<del>-</del>	<u> </u>	0.	0,	0.			
(8) Jay Precourt Director	0.20	x	ļ	ļ	]	]	ļ	0.	0.	0.			
(9) Daniel L. Ritchie	0,20	^	<u> </u>	-	⊬	-		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	•			
Director	0.20	\x			1			0.	0.	0.			
(10) Lewis Sharp	0,20	۳	╁	┢	╁	$\vdash$	-		<u> </u>				
Director		x	ĺ					0.	0.	0.			
(11) Donald L. Sturm	0.20	十	$\vdash$		t	t	$\vdash$						
Director		x						0.	0.	0.			
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Pai	Section A. Officers, Directors, Trus	tees, Key Em	pioy	ees	, and	a Hi	gne	St C	ompensated Employe	es (continueu)				
	(A)	(B)			(0	<b>C)</b>			(D)	(E)			(F)	
	Name and title	Average	(40		Pos		) than	one	Reportable	Reportable		Es	timate	ed
		hours per	box	, unle	ss pe	rson	ıs bot	h an	compensation	compensatio	n	an	nount	of
	•	week	offi	cer an	d a d	irecto	or/trus	tee)	from	from related	l		other	
		(list any	actor	'					the	organization			pensa	
		hours for	ğ	۵.		ļ	ţĘ.		organization	(W-2/1099-MIS	SC)		om th	_
		related	stee (	ruste		_	Densa		(W-2/1099-MISC)			ı -	anizat	
		organizations below	ał tru	la la		loyee	E 8						d relat	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Богтег				orga	anizatı	צווט
		1110)	Ĕ	Ĕ	₽	ā	포함	요						
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		<del> </del>	┢	├			-	-				├		
			1											
1b	Sub-total	<u> </u>	1	·			┢		0.		0.			0.
	Total from continuation sheets to Part V	II. Section A					•		0.		0.			0.
	Total (add lines 1b and 1c)						•		0.		0.			0.
2	Total number of individuals (including but r	not limited to th	nose	liste	ed a	bov	e) wl	ho r	eceived more than \$100	0,000 of reportab	le			
	compensation from the organization													0
													Yes	No
3	Did the organization list any former officer			e, ke	ey er	mplo	oyee	, or	highest compensated e	mployee on		LUE BE	- Mil	erigì.
	line 1a? If "Yes," complete Schedule J for s								_			3		х
4	For any individual listed on line 1a, is the s									the organization				х
_	and related organizations greater than \$15									udu al far aan uaaa		4		<u> </u>
5	Did any person listed on line 1a receive or rendered to the organization? If "Yes," con							relat	ted organization or indiv	idual for services	i	5		х
Sec	tion B. Independent Contractors	ipiete Scriedui	E 0 1	01 3	ucn	per	3011						L	
1	Complete this table for your five highest co	ompensated in	dep	ende	ent c	ont	racto	ors 1	that received more than	\$100,000 of con	npens	sation	from	
•	the organization. Report compensation for													
	(A)				-				(B)				<b>C)</b>	
	Name and business	address	NO	NE					Description of s	services		Compe	nsatio	n
		··						_		_				
_														
_														
_		to the terms of the				<u> </u>			d abaua)ba ======= 4 :	noro than				
2	Total number of independent contractors (\$100,000 of compensation from the organ		10t	ımite	:a t0	inc	ose II O	sie(	abovej wno received r	nore trian				

Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (C) Unrelated (B) Revenue excluded from tax under sections 512, 513, or 514 Related or Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1a 1 a Federated campaigns 1b **b** Membership dues 1c Fundraising events 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and 2,116,673 similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ 2,116,673 h Total. Add lines 1a-1f **Business Code** Program Service f All other program service revenue q Total. Add lines 2a-2f Investment income (including dividends, interest, and 453,791. 8,941 444,850 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (II) Personal (ı) Real 6 a Gross rents b Less. rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other 37,513,462 assets other than inventory b Less: cost or other basis 34,175,935 and sales expenses 3,337,527 c Gain or (loss) 3,337,527 13,104 3,324,423. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less. direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue Total. Add lines 11a-11d 5,907,991 22,045. 3,769,273. Total revenue. See instructions.

# Form 990 (2012) The Denver Art Museu Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).										
	Check if Schedule O contains a respon-		Part IX	<b>(A)</b>						
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(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	4,859,724.	4,859,724.							
2	Grants and other assistance to individuals in									
	the United States. See Part IV, line 22									
3	Grants and other assistance to governments,									
	organizations, and individuals outside the									
	United States. See Part IV, lines 15 and 16				<u> </u>					
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees									
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									
8	Pension plan accruals and contributions (include	1		ļ						
	section 401(k) and 403(b) employer contributions)									
9	Other employee benefits				· · · · · · · · · · · · · · · · · · ·					
10	Payroll taxes									
11	Fees for services (non-employees).									
а	Management									
b	Legal									
С	Accounting									
d	Lobbying									
е	Professional fundraising services. See Part IV, line 17									
f	Investment management fees	27,886.		27,886.						
9	Other. (If line 11g amount exceeds 10% of line 25,									
	column (A) amount, list line 11g expenses on Sch O.)									
12	Advertising and promotion									
13	Office expenses									
14	Information technology									
15	Royalties									
16	Occupancy									
17	Travel									
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings									
20	Interest				· · · · · · · · · · · · · · · · · · ·					
21	Payments to affiliates									
22	Depreciation, depletion, and amortization		<del></del>		<del></del>					
23	Insurance Other expenses. Itemize expenses not covered									
24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)									
а										
b										
C										
d										
е	All other expenses				<del></del>					
25	Total functional expenses. Add lines 1 through 24e	4,887,610.	4,859,724.	27,886.	0.					
26	Joint costs. Complete this line only if the organization									
	reported in column (B) joint costs from a combined		]							
	educational campaign and fundraising solicitation.		İ							
	Check here ff following SOP 98-2 (ASC 958-720)									

74-2496760 The Denver Art Museum Foundation Page **11** Form 990 (2012) Part X Balance Sheet Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 176 176. 1 1 Cash - non-interest-bearing 132,033. 209,611. 2 Savings and temporary cash investments 2 8,332,876. 7,807,544. 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary 6 employees' beneficiary organizations (see instr). Complete Part II of Sch L 1,920,000 1,420,000. 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment, cost or other 10a basis. Complete Part VI of Schedule D 10c 10b b Less: accumulated depreciation 15,893,201 19,061,362. 11 11 Investments - publicly traded securities 90,642,558, 96,570,366. 12 12 Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 1,711,000. 1,711,000. 15 Other assets. See Part IV, line 11 15 118,631,844. 126,780,059. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 4,859,724. 4,487,190. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons. 22 Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 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 2,493,961. 3,684,822. 25 8,544,546. 6,981,151. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 1,649,189 1,717,976. 27 27 Unrestricted net assets 6,485,835. 6,001,690. 28 28 Temporarily restricted net assets 103,999,814, 110,031,702, 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here

> 126,780,059. Form 990 (2012)

118,235,513,

30

31

32

33

111,650,693.

118,631,844.

31

33

and complete lines 30 through 34.

Total net assets or fund balances

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

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

Retained earnings, endowment, accumulated income, or other funds

	1990 (2012) The Denver Art Museum Foundation	74-2496760		Pa	ge 12
Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				<u>Ц</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1			,991.
2	Total expenses (must equal Part IX, column (A), line 25)	2			,610.
3	Revenue less expenses. Subtract line 2 from line 1	3			381.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			,693.
5	Net unrealized gains (losses) on investments	5	5	,564	439.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	118	,235	513.
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990  Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a	દર		\$
	separate basis, consolidated basis, or both.		,		
	Separate basis Consolidated basis Both consolidated and separate basis		£		*
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,		Ì	
	consolidated basis, or both.				,
	Separate basis Consolidated basis Both consolidated and separate basis				1
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,		******	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche			×	§.79
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audıt	ľ l		J
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			ĺ
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2012)

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

Internal Revenue Service

Department of the Treasury

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

Inspection

Employer identification number Name of the organization 74-2496760 The Denver Art Museum Foundation Reason for Public Charity Status (All organizations must complete this part ) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h d Type III - Non-functionally integrated c Type III - Functionally integrated **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, No 11g(i) the governing body of the supported organization? (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (vi) Is the (iv) Is the organization (v) Did you notify the (vii) Amount of monetary (ii) EIN (iii) Type of organization (i) Name of supported ganizátion in col. in col. (i) listed in your organization in col. (described on lines 1-9 support organization (i) organized in the aovernina document? (i) of your support? above or IRC section (see instructions)) Yes Yes Yes No No No

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

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

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

Sec	tion A. Public Support				<u> </u>				
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
1	Gifts, grants, contributions, and				j	İ			
	membership fees received. (Do not								
	include any "unusual grants.")	2,758,216.	2,962,586.	2,797,787.	2,930,437.	2,116,673.	13,565,699.		
2	Tax revenues levied for the organ-								
	ızatıon's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3	2,758,216.	2,962,586.	2,797,787.	2,930,437.	2,116,673.	13,565,699.		
	The portion of total contributions				Y 18	, .			
_	by each person (other than a				l				
	governmental unit or publicly								
	supported organization) included					i			
	on line 1 that exceeds 2% of the					1			
	amount shown on line 11,		`i		, <b>%</b>	· >,			
	column (f)			, ×	/ 27		372,290.		
6	Public support. Subtract line 5 from line 4						13,193,409.		
	ction B. Total Support					<u></u>			
	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
	Amounts from line 4	2,758,216.	2,962,586.	2,797,787.	2,930,437.	2,116,673.	13,565,699.		
8	Gross income from interest,		• • •			· · · · · · · · · · · · · · · · · · ·			
0	dividends, payments received on			ļ					
	securities loans, rents, royalties								
	and income from similar sources	371,986.	721,525.	394,903.	247,462.	453,791.	2,189,667.		
_		312,3001							
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain			ŀ					
	or loss from the sale of capital		}						
	assets (Explain in Part IV.)			-	, ,		15,755,366.		
	Total support. Add lines 7 through 10					10	23,733,300.		
	Gross receipts from related activities,					12			
13	First five years. If the Form 990 is for		tirst, second, thir	a, tourth, or titth ta	x year as a section	11 50 1 (0)(3)	ightharpoonup		
6-	organization, check this box and stor ction C. Computation of Publ	here	rcentage						
$\overline{}$						14	83.74 %		
	Public support percentage for 2012 (			olumn (1))		15	80.86 %		
	Public support percentage from 2011				4 22 1/20/				
16a	a 33 1/3% support test - 2012. If the				4 IS 33 1/3% OF IT	iore, check this bo	x and x		
	stop here. The organization qualifies				l 45 00 4 /00/		•		
t	33 1/3% support test - 2011. If the				line 15 is 33 1/3%	or more, check tr	ils dox		
	and stop here. The organization qua				40.40405				
178	a 10% -facts-and-circumstances tes	t - <b>2012.</b> If the org	anization did not d	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,		
	and if the organization meets the "fac					t IV how the organ	nization		
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
•	o 10% -facts-and-circumstances tes	t - <b>2011.</b> If the org	anization did not d	check a box on line	13, 16a, 16b, or	17a, and line 15 is	10% or		
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the								
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b					
					Sche	edule A (Form 990	or 990-EZ) 2012		

### Part III | Support Schedule for Organizations Described in Section 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 audify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	low, piedoc com	pioto i die ii j	<del> </del>						
	endàr year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
	Gifts, grants, contributions, and		,,,=	,,	1	1,7,12				
	membership fees received. (Do not									
	include any "unusual grants.")									
2	Gross receipts from admissions,									
	merchandise sold or services per-									
	formed, or facilities furnished in any activity that is related to the									
	organization's tax-exempt purpose									
3	Gross receipts from activities that									
	are not an unrelated trade or bus-									
	iness under section 513									
4	Tax revenues levied for the organ-									
	ızatıon's benefit and either paid to									
	or expended on its behalf									
5	The value of services or facilities									
	furnished by a governmental unit to									
	the organization without charge									
6	Total. Add lines 1 through 5									
7	a Amounts included on lines 1, 2, and									
	3 received from disqualified persons									
١	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									
•	Add lines 7a and 7b									
	Public support (Subtract line 7c from line 6)		<u> </u>			*				
	ction B. Total Support		·							
	endar year (or fiscal year beginning in) 🖊	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
_	Amounts from line 6									
10:	a Gross income from interest, dividends, payments received on									
	securities loans, rents, royalties									
_	and income from similar sources				ļ					
,	Unrelated business taxable income									
	(less section 511 taxes) from businesses					-				
	acquired after June 30, 1975									
	Add lines 10a and 10b		ļ							
11	Net income from unrelated business activities not included in line 10b.									
	whether or not the business is									
12	regularly carried on Other income. Do not include gain		-		-	<del> </del> -				
12	or loss from the sale of capital									
40	assets (Explain in Part IV.)		<del> </del>		<del> </del>	-				
	Total support. (Add lines 9, 10c, 11, and 12)	<del></del>	<u> </u>	1.6.4.4.601.4	<u> </u>	504( )(0)				
14	First five years. If the Form 990 is for t	ine organization:	s tirst, secona, tnir	a, τουπη, or τιπη τ	ax year as a section	on 501(c)(3) organiz	ration,			
Sa	check this box and stop here ction C. Computation of Public	Support Pe	rcentage							
_	Public support percentage for 2012 (lir		<del></del>	column (fl)		15	%			
	Public support percentage from 2011		-	Column (1))		16				
	ction D. Computation of Invest					1 10 1	. 70			
	Investment income percentage for 201	<del></del>		ne 13. column (f))		17	%			
	Investment income percentage from 20					18	%			
	a 33 1/3% support tests - 2012. If the o			on line 14, and line	e 15 is more than :					
. •	more than 33 1/3%, check this box and	•					<b>&gt;</b>			
1	b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and									
	line 18 is not more than 33 1/3%, chec	•								
20	Private foundation. If the organization		_			_	<b>▶</b> □			

## **SCHEDULE D**

(Form 990)

Name of the organization

# **Supplemental Financial Statements**

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service ➤ Attach to Form 990. ➤ See separate instructions.

Inspection **Employer identification number** 

	The Denver Art Museum Found	ation	74-2496760
Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts.Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
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 advisors in	writing that the assets held in donor advise	d funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a		sed only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose c	onferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Pa	urt IV, line 7
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an histo	orically important land area
	Protection of natural habitat	Preservation of a certification	led historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form o	f a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structur	I I
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	· · · · · · · · · · · · · · · · · · ·	
5	Does the organization have a written policy regarding the per		<u></u>
	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		<del></del>
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(r	1)(4)(B)(I)  Yes No
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organiza	tion's imancial statements that describes the	ne organization's accounting for
Pa	t III   Organizations Maintaining Collections o	f Art. Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" to Form		
10	If the organization elected, as permitted under SFAS 116 (AS		ent and balance sheet works of art
Ia	historical treasures, or other similar assets held for public ext		
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS		and balance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, e		
	relating to these items:	F	<b>g</b>
	(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, historical tre	easures, or other similar assets for financial	gain, provide
_	the following amounts required to be reported under SFAS 1		-
а	Revenues included in Form 990, Part VIII, line 1	· · · · · · · · · · · · · · · · · · ·	▶ \$
	Assets included in Form 990, Part X		<b>\$</b>

Part III   Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets;continued		daio D (1 01111 000) E0 1E	Art Museum Foun	dation				74-24967	60	Pa	age 2
Check all that apply    a	Pai	t III Organizations Maintaining C	ollections of Ar	t, Historical Tre	easures, or	Other	Simil	ar Asse	<b>ts</b> (contin	ued)	
a Public exhibition   d   Loan or exchange programs   b   Scholarly research   e   Other	3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that a	are a sig	nıfıcant	use of its	collection	ı item:	s
b Scholarly research e		(check all that apply).									
c	а	Public exhibition	d	Loan or exch	nange program	ıs					
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII burns the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	b	Scholarly research	е	Other							
be During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X; line 21.  b If "Yes," explain the airrangement in Part XIII and complete the following table.  c Beginning balance  d Additions during the year  e Distributions during the year  f Ending balance  2 Distributions during the year  f Ending balance  2 Distributions during the year  f Endomwent Funds. Complete if the explanation has been provided in Part XIII  Yes No  b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  1a Beginning of year balance  1a Beginning of year balance  1b Contributions  1c Sq. 2, 642, 005, 6, 787, 964, 6, 728, 277, 5, 786, 5, 30, 235, 944, 182, 244, 24, 244, 24, 245, 244, 24, 245, 245	С	Preservation for future generations									
To be sold to raise funds rather than to be maintained as part of the organization's collection?	4							ose in Parl	t XIII		
Part IV   Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9.    I is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   I is the organization and agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   I if "Yes," explain the arrangement in Part XIII and complete the following table.   C Beginning balance   I d	5	During the year, did the organization solicit or	r receive donations of	of art, historical treas	sures, or other	sımılar a	assets		-		,
Teported an amount on Form 990, Part X, line 21.   Yes											No_
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990. Part X?	Pai	· · · · · · · · · · · · · · · · · · ·	•	te if the organization	n answered "Ye	es" to F	orm 990	, Part IV, I	ıne 9, or		
on Form 990, Part X7 b   f*Yes,* explain the arrangement in Part XIII and complete the following table.    Reginning balance											
b If "Yes," explain the arrangement in Part XIII and complete the following table.    Amount	1a	Is the organization an agent, trustee, custodi	an or other intermed	ary for contribution	s or other asse	ets not ir	ncluded		٦	_	7
C   Beginning balance     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C   C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C     C   C   C   C   C   C   C   C   C   C   C   C   C   C   C   C   C   C		,						L.	J Yes	Ц	] No
C   Beginning balance     1c     1d          1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d   1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d   1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d   1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d     1d   1d     1d   1d     1d   1d     1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d   1d	Ь	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table.							
Additions during the year   1d							-		Amount		
E   Distributions during the year   f   Ending balance   granuzation include an amount on Form 990, Part X, line 21?   Yes   No   If Yes,* explain the arrangement in Part XIII   Check here if the explanation has been provided in Part XIII   Check here if the explanation has been provided in Part XIII   Part Y   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    1a   Beginning of year balance   (a) Current year   (b) Prior year   (c) Two years   (d) Three years back   (d) Three							<del></del>				
1 Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21?  □ Ves." explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII □ Individual Part XIII Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  [a] Current year							<del></del>				
2a Did the organization include an amount on Form 990, Part X, line 21?  b     "Yes," explain the arrangement in Part XIII   Check here if the explanation has been provided in Part XIII   Check here if the explanation has been provided in Part XIII   Part Y   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    A   Courrent year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four year years	е	• ·					$\rightarrow$				
b   ft "Yes," explain the arrangement in Part XIII   Check here if the explanation has been provided in Part XIII   Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    1	f	_					11		T.,		т
Part V   Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.   Call   Current year   (b) Pror year   (c) Two years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years ba		•			5				J Yes	$\vdash$	JNO ]
1a Beginning of year balance   (a) Current year   (b) Pnor year   (c) Two years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Three years back   (d) Fach   (d) Three years back   (d) Fach   (d											<u> </u>
103,317,817, 93,593,316, 86,438,098, 78,986,216, 83,064,182.	rai	t V Endowment Funds. Complete in						oare back	(a) Four	waara	baok
Describe in Part XIII the intended uses of the organization's leading of the property   Land, Buildings, and Equipment   See Form 990, Part X, line 10.    Describe in Part XIII the intended uses of the organization's endowment funds.    Describe in Part XIII the intended uses of the organization's endowment funds.    Describe in Part XIII the intended uses of the organization's endowment to basis (investment)   Buildings   Caesaehold improvements   Caesae	٠.	D			<del></del>		<del></del>		<del></del>		
C Net investment earnings, gains, and losses d Grants or scholarships  d Grants or scholarships  e Other expenditures for facilities and programs  f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 1.50 %  b Permanent endowment ▶ 5.90 % C Temporarily restricted endowment ▶ 92.60 % The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations  b) If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Description of property  (a) Cost or other basis (investment)  Description of property  (a) Cost or other basis (investment)  Description of property  (a) Cost or other basis (investment)  Description of property  (b) Cost or other basis (other)  d Equipment  d Equipment  e Other  Other	1a	_ · · ·								<u> </u>	
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  110,427,969, 103,317,817, 93,593,316, 86,438,098, 78,986,216.  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 1.50 %  Permanent endowment ▶ 92.60 % The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  Description of property  (b) Cost or other depreciation  4 Equipment  5 Unification of property  (c) Accumulated depreciation  4 Equipment  6 Equipment  6 Equipment  6 Other  6 Other	D										
e Other expenditures for facilities and programs  f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	ت ام		· · · · · · · · · · · · · · · · · · ·								
and programs f Administrative expenses g End of year balance 110,427,969, 103,317,817, 93,593,316, 86,438,098, 78,986,216. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶ 1.50 %  b Permanent endowment ▶ 5.90 % The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations (ii) related organizations (iii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  depreciation  4 Equipment  6 Equipment  6 Other	u	· • • • • • • • • • • • • • • • • • • •		-,,	-,,				-,		
g End of year balance  110,427,969. 103,317,817. 93,593,316. 86,438,098. 78,986,216.  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment  1.50	-				19	884		50 000.		50	000.
g End of year balance 110,427,969. 103,317,817. 93,593,316. 86,438,098. 78,986,216.  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment	f	· -			·	-				<del></del>	
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶ 1.50 %  b Permanent endowment ▶ 5.90 %  The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  b Buildings  c Leasehold improvements  d Equipment  e Other	,	·	110,427,969,	103,317,817,	93,593,	316.	86.4	38,098.	78	986	216.
a Board designated or quasi-endowment ▶ 1.50							<u> </u>	•			
b Permanent endowment  92.60 % The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  b Buildings  c Leasehold improvements  d Equipment  e Other	-	_			,,,						
Temporarily restricted endowment ▶ 92.60 % The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations  (ii) related organizations  (iii) related organizations  (iii) related organizations  (iii) related organizations  (iii) related organizations  (iv) x  (iv) x  (iv) x  (iv) Accumulated depreciation  (iv) Accumulated depreciation  (iv) Accumulated depreciation  (iv) Accumulated depreciation  (iv) Book value	b	<del>-</del>	%								
The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations  (ii) related organizations  (iii) related organizations  (iv) restrict on 3a(ii) and in a control organization is endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (b) Cost or other depreciation  (d) Book value  (d) Book value  (d) Book value  Equipment  (e) Ceasehold improvements  (f) Equipment  (g) Cost or other depreciation  (h) Cost or other depreciation  (o) Accumulated depreciation  (o) Accumulated depreciation  (o) Book value  (o) Book value	С		92.60 %								
by:			ild equal 100%.								
(ii) unrelated organizations (iii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  b Buildings  c Leasehold improvements  d Equipment  e Other	За	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administere	d for the	e organiz	zation	_		
(ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  basis (other)  (c) Accumulated depreciation  1a Land  b Buildings  c Leasehold improvements  d Equipment  e Other										Yes	No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  b Buildings  c Leasehold improvements  d Equipment e Other		(i) unrelated organizations							3a(i)		х
4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  basis (other)  to Buildings  c Leasehold improvements d Equipment e Other		(ii) related organizations							3a(ii)		х
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  1a Land b Buildings c Leasehold improvements d Equipment e Other	b	If "Yes" to 3a(ıı), are the related organizations	s listed as required o	n Schedule R?					3b		
Description of property  (a) Cost or other basis (investment)  1a Land  b Buildings  c Leasehold improvements  d Equipment  e Other	_										
basis (investment) basis (other) depreciation  1a Land b Buildings c Leasehold improvements d Equipment e Other	Pa	t VI Land, Buildings, and Equipm	ent. See Form 990	, Part X, line 10.							
1a Land   b Buildings   c Leasehold improvements   d Equipment   e Other		Description of property	1 , ,	1 , ,	1	• •			(d) Book	c value	Э
b Buildings c Leasehold improvements d Equipment e Other			basis (investri	nent) basis (	(other)	depr	eciation				
c Leasehold improvements d Equipment e Other	1a	Land									
d Equipment e Other	b	Buildings									
e Other	С	Leasehold improvements				_					
		, ,				_					
	<u>e</u>		15	<u> </u>	26-11			<del></del>			<del></del>

Schedule D (Form 990) 2012

74-2496760

Part VII Investments - Other Securities. See	Form 990, Part X, line 12	2.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation Cost or en	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A) Emerging markets	3,789,662.	End-of-Year	Market Value	
(B) Global/macro	18,826,698.	End-of-Year	Market Value	
(C) Healthcare	8,648,444.	<del></del>	Market Value	
(D) Leveraged buy-out	2,587,052.	<del></del>	Market Value	
(E) Long/short equities	22,563,704.		Market Value	
(F) Long/short fixed income	16,424,324.		Market Value	
(G) Multi-strategy	13,554,976.	<del></del>	Market Value	
(H) Natural resources and energy	101,405.		Market Value	
(I) Private equity	4,636,300.	<del></del>		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	96,570,366.	<del></del>		· · · · · · · · · · · · · · · · · · ·
Part VIII Investments - Program Related. Se				
(a) Description of investment type	(b) Book value		aluation: Cost or en	d-of-year market value
(1)	(3) 23311 12113	(0)		a or your manner raids
(2)		<u> </u>		
	<del></del>			
(3)		·		
(4)				
(5)				
(6)				
(7)	·-			
(8)				
(9)	<del></del>		<del></del>	
(10)	<del></del>			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. See Form 990, Part X, line	16		<u></u>	
	Description	· · · · · · · · · · · · · · · · · · ·		(b) Book value
	Description			(b) Dook value
(1)				
(2)				
(3)		<del></del>		
(4)			<del></del>	<u> </u>
(5)				
	·			
(10)	451			
Total. (Column (b) must equal Form 990, Part X, col (B) line		<del></del>	<u></u> ▶	<u>.                                    </u>
Part X Other Liabilities. See Form 990, Part X, II		(h) Paek value	<u> </u>	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes		1 002 625		
(2) Investments held for related entity		1,993,635.		
(3) Investments held for Clyfford Still Mu	seum	1,691,187.		
(4)				
(5)				
(6)				
(8)				
(9)		<del></del>		
(10)				
(11)				
Total. (Column (b) must equal Form 990, Part X, col (B) line		3,684,822.	L	
2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the tex	t of the footnote to the or	ganization's financia	I statements that rep	ports the organization's

	edule D (Form 990) 2012 The Denver Art Museum Foundation	74-249676	0 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue per		11 144 544
1	Total revenue, gains, and other support per audited financial statements	1	11,444,544.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	,   -	
	Net unrealized gains on investments 2a 5,564,439	<u>'</u>	
	Donated services and use of facilities 2b	<b>-</b>	
С	Recoveries of prior year grants	_  -	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	5,564,439.
3	Subtract line 2e from line 1	3	5,880,105.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	'	
а	Investment expenses not included on Form 990, Part VIII, line 7b  4a 27,886	<u>.</u>	
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	27,886.
5		5	5,907,991.
Pa	irt XII Reconciliation of Expenses per Audited Financial Statements With Expenses pe	r Return	
1	Total expenses and losses per audited financial statements	1	4,859,724.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	Š	
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b	7:33	
С	Other losses 2c		
d	Other (Describe in Part XIII.)		
	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	4,859,724.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	8. (23)	
-	Investment expenses not included on Form 990, Part VIII, line 7b  4a 27,886	5.	
	Other (Describe in Part XIII.)		
	Add lines 4a and 4b	4c	27,886.
	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18)	5	4,887,610.
	irt XIII Supplemental Information		
	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines	1h and 2h Ba	at V line 4 Bort
	ne 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		irt v, iiile 4, Fait
	t V, line 4:	ation.	
	C V, 11nc 4.		
rhe	endowment funds are used for the educational, operational, and capital		
	, , , , , , , , , , , , , , , , , , , ,		
need	ds of the Denver Art Museum.		
art	t X, Line 2: Management is required to evaluate tax positions taken		
oy t	the Foundation and recognize a tax liability (or asset) if the		
		, ,	···· · · · ·
our	ndation has taken an uncertain position that more likely than not would		
ıot	be sustained upon examination by taxing authorities. Management has		
			·

Schedule D (Form 990) 2012 The Denver Art Museum Foundation	74-2496760	Page <b>5</b>
Part XIII Supplemental Information (continued)		
analyzed the tax positions taken or expected to be taken that would	<del></del>	
require recognition of a liability (or asset) or disclosure in the		
require recognition of a liability (or asset) of disclosure in the		
financial statements and determined there are none. The Foundation is		
subject to routine audits by taxing jurisdictions; however there are		
currently no audits for any tax periods in progress. Management believes		
the Foundation is no longer subject to income tax examinations for years	-	
prior to September 30, 2010.		
		-

Schedule D (Form 990)

The Denver Art Muser
Part XIII Supplemental Information (continued)

Part VII	Investments - Other Securities. See Form 990, Part X, line 12.		<del></del>
·	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Long only	equities	5,437,801.	FMV
dong only	edutcies	3,437,001.	FHV
	· · · · · · · · · · · · · · · · · · ·		
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		<del>                                     </del>	
<del></del>		<del></del>	

# SCHEDULE F (Form 990)

# **Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Open to Public Inspection Employer identification number

	•						
The	Denver Art Museum F	oundation?				74-2496760	
Pai	t I General Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organ	zation answered	"Yes"
	to Form 990, Part	t IV, line 14b.					
1	For grantmakers. Does	the organization	maintain record	is to substantiate the amount of its gra	ants and other	assistance,	_
	the grantees' eligibility fo	or the grants or a	issistance, and	the selection criteria used to award the	grants or assi	stance?	Yes No
2	For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of its	s grants and of	ther assistance ou	ıtsıde the
	United States.						
3	Activities per Region (Tr	ne following Part	I, line 3 table ca	n be duplicated if additional space is r	needed.)		
	(a) Region		(c) Number of	(d) Activities conducted in region		vity listed in (d)	(f) Total
		offices	employees, agents, and independent	(by type) (e.g., fundraising, program	-	gram service,	expenditures for and
		ın the region	independent contractors	services, investments, grants to		specific type	investments
			in region	recipients located in the region)	OI Servic	e(s) in region	in region
	•						İ
Cent	ral America and						
the	Carribbean	0	0	Passive investments			75,499,095.
					i		
							1
			1				
							ł
							+
		Ì					
		-					<del>                                     </del>
3 -	Sub-total		0				75,499,095.
-	Total from continuation	<u>-</u>	- <del>-</del> -				1,,
D	sheets to Part I	0	0				0.
^	Totals (add lines 3a				····		
·	and 3b)	0	0				75,499,095.

74-2496760

Page 2

Schedule F (Form 990) 2012 The Denvex Art Museum Foundation

74-2496760

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(I) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2012
(h) Description of non-cash assistance						Schedu
(g) Amount of non-cash assistance					cempt by	
(f) Manner of cash disbursement					recognized as tax-e	
(e) Amount of cash grant					foreign country,	
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	
(c) Region					is listed above that are rill has provided a section	r entities
(b) IRS code section and EIN (if applicable)	-				recipient organizatior the grantee or counse	otner organizations o
n (a) Name of organization						Enter total number of other organizations or entitles

Page 3

74-2496760

The Denver Art Museum Foundation

Schedule F (Form 990) 2012 The Denver Art Museum Poundation

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16

Part III can be duplicated if additional space is needed

(h) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2012
(g) Description of non-cash assistance						Schedul
(f) Amount of non-cash assistance						
(e) Manner of cash disbursement						
(d) Amount of cash grant		-				
(c) Number of recipients						<u> </u>
(b) Region					i	
(a) Type of grant or assistance						

chec	ule F (Form 990) 2012 The Denver Art Museum Foundation	74-2496760	Page 4
Par			
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	x Yes	□ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	🗀 Yes	x No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	□ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	X Yes	□ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	X Yes	□ No

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions

Schedule F (Form 990) 2012

Yes X No

for Form 5713)

Employer identification number Open to Public 74-2496760 X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant (c) IRC section if applicable The Denver Art Museum Foundation General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part II Part

ê [

OMB No 1545-0047

Inspection

Schedule I (Form 990) (2012) (h) Purpose of grant or assistance General support n/a 0.h/a 4,859,724, Enter total number of section 501(c)(3) and government organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501 (c) (3) Enter total number of other organizations listed in the line 1 table 84-6038240 100 W 14th Ave Pkwy Denver Art Museum Denver, CO 80204

232101 12-18-12

(f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant Schedule I, Part I, Line 2: Monitoring the funds is accomplished by an accountants, as well as attendance at Museum board meetings by several independent audit of the Museum done annually by certified public (b) Number of recipients (a) Type of grant or assistance directors of the Foundation. Part IV

Schedule I (Form 990) (2012)

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

# Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 **2012**Open to Public

Department of the Treasury Internal Revenue Service Attach to Form 990 or 990-EZ. Inspection Employer identification number Name of the organization 74-2496760 The Denver Art Museum Foundation Form 990, Part VI, Section A, line 2: Frederic C Hamilton and Elisabeth Ireland have a business relationship. Form 990, Part VI, Section A, line 8b: The question is not applicable to the foundation as there are no additional committees with authority to act on behalf of the governing body. Form 990, Part VI, Section B, line 11: The Board of Directors has delegated the responsibility to review the Form 990 before being filed to Mr. Hamilton who is President of the Board. Form 990, Part VI, Section B, Line 15: Form 990, Part VI, Section B, Lines 15a and 15b: This does not apply to the Foundation as the Foundation has no employees. Form 990, Part VI, Section C, Line 19: The foundation makes its documents available to the public upon request. Form 990, Part XI, Line 2c: The President of the Board assumes responsibility for the oversight of the audit. This process has not changed from prior years.

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

Name of the organization

Part

Related Organizations and Unrelated Partnerships

2012 Open to Public Inspection

OMB No 1545-0047

Employer identification number

74-2496760

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► See separate instructions. ▶ Attach to Form 990.

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

The Denver Art Museum Foundation

Direct controlling entity N/A End-of-year assets Total income € Legal domicile (state or foreign country) Colorado Primary activity Investments Name, address, and EIN (if applicable) of disregarded entity 1560 Broadway, #2200 CO 80202 DAMF LLC Denver,

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year) Part

יייי פער יייייי פער אייייי פער אייייי איייייי אייייייייייייייייייייי							
(a)	(q)	(0)	(p)	(e)	<b>(£)</b>	(6)	;
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)(13)	(£13)
of related organization		foreign country)		status (if section		entify?	
				501(c)(3))		Yes	%
Denver Art Museum - 84-6038240							
100 West 14th Avenue Parkway				170(b)(1)			
Denver, CO 80204-2788	Art museum	Colorado	501(c)(3)		n/a	×	
	•						

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2012

232161 12-10-12 LHA

Schedule R (Form 990) 2012 The Denver Art Museum Foundation

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year) Part III

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		(f) Share of total income	(g) Share of end-of-year assets		ortion- cations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or Ox managing Jes partner? (55) Yes No	al or Perc	(j) · (k) General or Percentage managing ownership partner? Ves No
												-	
Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year)	ganizations Taxable a rporation or trust during	us a Corporting the tax	ration or Trust (Co	omplete if the	e organization	answered "	res" to Form	990, Part IV	/, line 34	because it ha	d one or	more re	elated
(a) Name, address, and EIN of related organization	Z _C	Prim	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity		(e) Type of entity (C corp., S corp, or trust)	(f) Share of total income		(g) Share of end-of-year assets	(h) Percentage ownership		Section 5.12(b)(13) controlled entity?
232162 12-10-12										Schec	Schedule R (Form 990) 2012	orm 99	0) 2012

74-2496760

# Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36)

					Ī	
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	Ŷ
1 During the tax year, did the organization engage in any of the following transaction	ns with one or more re	transactions with one or more related organizations listed in Parts II-IV?	In Parts II-IV?			-
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				<u>a</u>		×
<b>b</b> Gift, grant, or capital contribution to related organization(s)				4	×	
c Gift, grant, or capital contribution from related organization(s)				1	×	
d Loans or loan guarantees to or for related organization(s)				19	×	
e Loans or loan guarantees by related organization(s)				<del>1</del>		×
				!		
f Dividends from related organization(s)				#		×
g Sale of assets to related organization(s)				19		×
h Purchase of assets from related organization(s)				ŧ		×
i Exchange of assets with related organization(s)				;=		×
j Lease of facilities, equipment, or other assets to related organization(s)				1)		×
k Lease of facilities, equipment, or other assets from related organization(s)				*		×
l Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			=		×
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			Ę		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			ţ		×
<ul> <li>Sharing of paid employees with related organization(s)</li> </ul>				9		×
				i i		
p Reimbursement paid to related organization(s) for expenses				đ		×
<ul> <li>Reimbursement paid by related organization(s) for expenses</li> </ul>				10	1	×
				<b>=</b>		× ;
,,				13	1	۲
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete the	ns line, including covered	relationships and transaction thresholds.			
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	nvolved		
(1)						
(2)						
(3)						
(4)						
(5)						
(9)						
232163 12-10-12			Schedule	Schedule R (Form 990) 2012	66	2012

74-2496760

Schedule R (Form 990) 2012 The Denver Art Museum Foundation

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

Code V-UBI Ceneral or Percentage amount in box 20 managing of Schedule K-1 partner? (Form 1065)	28				
Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			:		
Onsproportionate				 	
(g) Share of end-of-year assets					
(f) Share of total income					
(e) Are all Are all 501(c)(3) 0195 4)					
Predominant income parties sec (related, unrelated, 50195) excluded from tax under section 512-514) year No.					
(c) Legal domicile (state or foreign country)	1				
(b) Primary activity					
(a) Name, address, and EIN of entity					

Schedule R	R (Form 990) 2012	The Denver Art Museum Foundation	74-2496760	Page 5
Part VII	(Form 990) 2012 Supplemental Info	rmation		
	Complete this part to pro	ovide additional information for responses to questions on Schedule R (see instr	uctions)	
	·	Tride additional information for responded to questions on confedure in (000 inter-	40110/10/1	
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