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Extended to May 15, 2017

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

OMB No 1545-0047

	tment of th of Revenue		www.irs.	aov/form990.	Inspection
				P 30 2016	
B c	heck if	C Name of organization		D Employer identific	ation number
T T	Address change	The Denver Art Museum Foundation			
X	Name			74-2496	760
\vdash	jchange Initial	Doing business as	m/ourto		700
\vdash	return Final	Number and street (or P.O. box if mail is not delivered to street address) Rooi Rooi Number and street (or P.O. box if mail is not delivered to street address)	om/suite	E Telephone number 720-913	_0022
Ь	Jreturn/ term:n-				68,165,868.
	ated]Amended	City or town, state or province, country, and ZIP or foreign postal code Denver CO 80204	ŀ	G Gross receipts \$	
-	Jretum Applica-	·		H(a) Is this a group ret	
Ь	Jtion pending	F Name and address of principal officer J. Landis Martin 1560 Broadway, Suite 2200, Denver, CO 80202		for subordinates?	
			527	H(b) Are all subordinates inc	
		ot status <u>X</u> 501(c)(3) <u>501(c) (</u>) ((insert no.) <u>4947(a)(1) or </u>	=		ist (see instructions)
	/ebsite:			f formation: 1988 M	State of legal domicile: CO
Pa		ummary	IL TEAL O	TOTALION. 1900 N	State of legal dofficile, CO
Га		efly describe the organization's mission or most significant activities. See Part 1	TTT 1:	ine 1	
ğ	1 Br	eny describe the organization's mission of most significant activities			
Activities & Governance	•	eck this box if the organization discontinued its operations or disposed in	of more	than 25% of to not so	note.
Ver					10
ဗ္ဗ		mber of voting members of the governing body (Part VI, line 1a) mber of independent voting members of the governing body (Part VI, line 1b)			10
∞ 5		tol number of reductively completed to colonidar upon 2015 (Port V. Inc. 20		ا دیا	0
ij		tal number of volunteers (estimate if necessary)	PR 14	2017	10
≩		tal unrelated business revenue from Part VIII, column (C), line 12		7a	61,310.
₹		t unrelated business taxable income from Form 990-T, line 34	GDF		0.
\dashv	DINE	t difference business taxable income from 1 offit 350-1, inte 34		Prior-Year	Current Year
ا ۽	8 Cc	ntributions and grants (Part VIII, line 1h)	<u> </u>	3,302,308.	5,031,965.
Revenue		ogram service revenue (Part VIII, line 2g)		0.	0.
Š		restment income (Part VIII, column (A), lines 3, 4, and 7d)		10,073,954.	4,350,226.
<u> </u>		her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
l		tal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		13,376,262.	9,382,191.
\dashv		ants and similar amounts paid (Part IX, column (A), lines 1-3)		5,540,841.	5,762,521.
		nefits paid to or for members (Part IX, column (A), line 4)	-	0.	0.
ر ا		laries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Expenses		ofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ē			٥. 🗀		
ω̈		her expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		29,990.	65,511.
		tal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		5,570,831.	5,828,032.
		venue less expenses Subtract line 18 from line 12		7,805,431.	3,554,159.
58			Bed	inning of Current Year	End of Year
Net Assets or Fund Balances	20 To	tal assets (Part X, line 16)		152,655,126.	153,350,266.
Ass		tal liabilities (Part X, line 26)		27,070,888.	29,001,694.
텖		t assets or fund balances Subtract line 21 from line 20		125,584,238.	124,348,572.
		Signature Block			
Unde	er penaltie	s of perjury, I declare that I have examined this return, including accompanying schedules and	nd stateme	ents, and to the best of my	knowledge and belief, it is
true,	correct, a	nd complete ₃ Declaration of preparer (other than officer) is based on all information of which p	preparer l	has any knowledge.	
		How de Mark			4-17
Sign	, J	Signature of officer		Date	
Here	- 1.	J. Landis Martin, President			
		Type or print name and title	_		
	P	rint/Type preparer's name Preparer's signature		ate Check	PTIN
Paid	1	urie Anderson Raurie Anderson	. 3	3 - 30 - 17 if self-employer	P01416697
Prep	arer F	rm's name Kundinger, Corder & Engle, P.C.		Firm's EIN ▶	
Use		rm's address 475 Lincoln Street #200	·		<u> </u>

Form 990 (2015)

X Yes

Phone no.303-534-5953

Denver, CO 80203

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

Form 990 (2015)

•			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_	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	Х	
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		х
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		Х
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			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
40	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	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable			
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
þ	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	
	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	_	х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			х
	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	ı ie	-	
•	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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, 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 other assistance to or for any	170		
	foreign organization? 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 other assistance to			
-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
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		х
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		X
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	000	(2015)

Form 990 (2015) The Denver Art Museum Found
Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		x
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			$\overline{}$
	domestic government 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 or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	270		
Ŭ	any tax-exempt bonds?	24c		ĺ
а	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	_	
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	<u> 23a</u>		
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	1		
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	230		 -
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	ļ		}
	complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	-20		
~,	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	-21		
20	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	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,	200	<u> </u>	
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u> </u>	х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	<u> </u>		
50	contributions? If "Yes," complete Schedule M	30	ì	x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			-
٥.	If "Yes," complete Schedule N. Part I	31	ľ	x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		<u> </u>	<u> </u>
	Schedule N, Part II	32	}	x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>	-	
-	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	x	
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	x	Ì
352	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	 33	 	
Ų	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	-	330	 	
30	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	26		x
27		36	ļ	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		x
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
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			(2015)
		ronn		(2013)

Form 990 (2015) The Denver Art Museum Foundation Part V Statements Regarding Other IRS Filings and Tax Compliance

Enter the number reported in Box 3 of Form 1086 Enter 0- if not applicable 1a 0 0 1b 1c 0 0 1c 1c 0 0 0 0 0 0 0 0 0	•	Check if Schedule O contains a response or note to any line in this Part V	,			
b Enter the number of Forms W2G included in line 1 a Enter of 4 not applicable OI bit the organization comby with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) without programments of the payments to vendors and reportable gaming (gambling) without programments of the payments to vendors and reportable gaming (gambling) without programments of the payments of the payments of the payments of the payments to vendors and reportable gaming (gambling) without programments of the payments of the					Yes	No
c Dit the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2. Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, lied for the catendar year ending with or within the year covered by this return. 3. If the sum of lines is a and 2 as in greater than 250, you may be required to e-file (see instructions). 3. Did the organization have unrelated business gross income of \$1,000 or more dumpt the year? 3. If Yes, *Insist filed a Form 990-T for this year? If *No.* to line 3b, provide an explanation in Schedule O. 3. If Yes, *Insist filed a Form 990-T for this year? If *No.* to line 3b, provide an explanation in Schedule O. 4. At any time the name of the foreign country. 5. If Yes, *Insist the name of the foreign country. 5. If Yes, *Insist the name of the foreign country. 5. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5. If Yes, *In Insist the many color the foreign country. 6. If Yes, *In Insist the organization has a bank account, securities account, or other financial account()? 6. If Yes, *In Insist the many color the foreign country. 6. If Yes, *In Insist the many color the foreign country. 6. If Yes, *In Insist the many color the foreign country. 6. If Yes, *In Insist the many color the foreign country. 6. If Yes, *In Insist the many color the color of the tax so is a party to a prohibited tax shelter transaction? 6. If Yes, *In Insist the many color the during the year of the organization and tax deductible as charitable contributions under section 170(c). 6. If Yes, *Indicate the number of Forms 8282 filed during the year 6. If Yes, *Indicate the number of Forms 8282 filed during the year 7. If Yes, *Indicate the number of Forms 8282 filed during the year 8. Of the organization during the year, p	1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 0			
to the calendar year ending with or within the year covered by this return by I at least one is reported on Ine 2a, did the organization file all required feeral employment tax returns? by I at least one is reported on Ine 2a, did the organization file all required feeral employment tax returns? by I if "Yes," has if filed a form 990-file for the year I "No," to line 80, provide an explanation in Schedule O by I if "Yes," and if filed a form 990-file for the year I "No," to line 80, provide an explanation in Schedule O by I if "Yes," enter the name of the foreign country which is a bank account, securities account, or other financial accounts (FBAR) 5a Was the organization aparty to a prohibited tax shelter transaction 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 accounts (FBAR) 5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 5b Was the organization have annual gross receipts that are normally greater than 3100,000, and did the organization shelt any contributions that were not tax deductibles contributions? 5b If "Yes," did the organization include with every selectation an express statement that such contributions or gifts were not tax deductibles a charitable contribution of any postition and party for goods and services provided to the payor? 7b Organizations that may receive deductible contributions under section 170(c). 9c Did the organization receive a payment in excess of S76 made partly as a contribution of quartly for goods and services provided? 1c Did the organization receive a payment in excess of S76 made partly as a contribution of a contribution of a many premiums on a personal benefit contract? 1c Did the organization receive any furnish, and th	ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0			l
2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unreated business gross income of \$1,000 or more dumpt the year? b If "Yes," has if filed a Form 990-T for the year? If "No," to line 3b, provide an explanation in Schedule O 3b X 4a At any time dumpt the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country [with the year] of the year of the foreign country [with as a bank account, securities account, or other financial account)? b If "Yes," the the name of the foreign country [with the year] or year and the year of the year of the organization have that was or is a party to a prohibited tax shelter transaction? c If "Yes," to line 5a or 5b, did the organization his It was or is a party to a prohibited tax shelter transaction? b If "Yes," the line 5a or 5b, did the organization his It was or is a party to a prohibited tax shelter transaction solicit any contributions that were not tax deductible es charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible? b If "Yes," did the organization receive a symmetric necess of \$75 made party is a contribution and party for goods and services provided to the payor? 7a	С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming			ĺ
hele for the calendar year ending with or within the year covered by this return? Note. If the sum of lines 1s and 2s is greater than 250, you may be required to e-frie (see instructions) 3a Dd the organization have unrelated business gross income of \$1,000 or more during the year? 3b Lill 1/12s, 1/18s at filled a Form 930 for for the year II him, 1/10, 1/10 in 30, provide an explanation in Schedule O 4a Al 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)? 4a A 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)? 5c West interest in the financial Accounts (FBAR) 5d Was the organization a party to a prohibited 1st whelter transaction at any time during the tax year? 5d Was the organization a party to a prohibited 1st was or is a party to a prohibited 1st whelter transaction? 6 Dose 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? 7 Organizations that may receive deductible contributions or did the organization solicit any contributions that were not tax deductible as charnable contributions? 8 Did the organization solicit, any receive deductible contributions under section 170(c). 8 Did the organization solicit, and the contribution of the value of the goods or services provided? 9 Did the organization receive a payment in excess of \$15 made party as a contribution and party for goods and services provided to the payor? 10 Did the organization received a contribution of cars, boats, anplanes, or other vehicles, did the organization file from 1088-0? 11 Did the organization received an annitation of payment of the year and the pa		(gambling) winnings to prize winners?		1c		
b if a least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Ox the organization have unrelated business gross income of \$1,000 or more during the year? 3a	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? If Yes,* has if filed a Form 990-T for this year? If Yes,* that if filed a Form 990-T for this year? If Yes,* that if filed a Form 990-T for this year? If Yes,* the third with the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. If Yes,* enter the name of the foreign country. See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? So If Yes,* or line fis and 50, did the organization file Form 88617. So Dos 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? If Yes,* of did the organization notify deduction and express statement that such contributions or gifts were not tax deductible as charitable contributions? If Yes,* of did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). If Yes,* of did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organization increeve a payment in excess of \$75 made party as contribution and party for goods and services provided to the payor? The section 82022 of the organization notify the donor of the value of the goods or servic		filed for the calendar year ending with or within the year covered by this return	2a 0	1		1
3a Dut the organization have unrelated business gross income of \$1,000 or more during the year? 4b if Yes,* has it filed a Form 990°F for this year? If No.* to line 3b, provide an explanation in Schedule O 4c 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 accounts (FBAR) 5c en instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Dd any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6c If Yes, * to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6c If Yes, * to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6c If Yes, * to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6c If Yes, * to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6c If Yes, * to line 5a or 5b, did the organization or line form 88861? 6d If Yes, * to line 5a or 5b, did the organization or line a party of a prohibition of the such contributions or gifts were not tax deductible? 6d If Yes, * did the organization neture with every solicitation an express statement that such contributions or gifts were not tax deductible? 6d If Yes, * did the organization neture with every solicitation an express statement that such contributions or gifts were not tax deductible? 6d If Yes, * did the organization expression of the value of the goods or services provided? 7d If Yes, * did the organization reserved a continuous of organization she party as a contribution of the goods or services provided? 7d If Yes, * did the organization	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b		<u> </u>
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Form 990 (2015)

The Denver Art Museum Foundation

74-2496760
Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response

Section A. Governing Body and Management 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differencis in voting rights among members of the governing body, or if the governing body selegated bread authority to an executive committee or small committee, explain in Schedule 0. b Enter the number of voting members included in the 1st, above, who are independent of the province of the control of the province of the	<u> </u>	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O			a 140	respor	136		
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Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 15a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 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 17 List the states with which a copy of this Form 990 is required to be filed ▶ None 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 Own website Another's website ▼ Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records ▶ Curtis Woltte, Denver Art Museum, Deputy Director & CFO - 720-913-0022 100 w. 14th Ave. Parkway, Denver, CO 80204		- · · · · · · · · · · · · · · · · · · ·				1	х		
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b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a 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? 17 List the states with which a copy of this Form 990 is required to be filed None 18 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 Own website Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year 20 State the name, address, and telephone number of the person who possesses the organization's books and records Curtis Woitte, Denver Art Museum, Deputy Director & CFO - 720-913-0022 100 w. 14th Ave. Parkway, Denver, CO 80204	а	·			15a	1	х		
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a 16a 16a 16a 16a 16a 16a 16					15b		х		
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? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed None 18 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 Own website Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year 20 State the name, address, and telephone number of the person who possesses the organization's books and records Curtis Woitte, Denver Art Museum, Deputy Director & CFO - 720-913-0022 100 w. 14th Ave. Parkway, Denver, CO 80204									
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In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ None 18 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 □ Own website □ Another's website ▼ Upon request □ Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year 20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶ Curtis Woitte, Denver Art Museum, Deputy Director & CFO - 720-913-0022 100 w. 14th Ave. Parkway, Denver, CO 80204		taxable entity during the year?			16a		х		
exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ None 18 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 □ Own website □ Another's website □ W. Upon request □ Other (explain in Schedule O). 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶ Curtis Woitte, Denver Art Museum, Deputy Director & CFO - 720-913-0022. 100 w. 14th Ave. Parkway, Denver, CO 80204	b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its	participation					
Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ None 18 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 □ Own website □ Another's website □ Upon request □ Other (explain in Schedule O). 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶ Curtis Woitte, Denver Art Museum, Deputy Director & CFO - 720-913-0022. 100 w. 14th Ave. Parkway, Denver, CO 80204		in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nizati	on's					
17 List the states with which a copy of this Form 990 is required to be filed ► None 18 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 □ Own website □ Another's website ▼ Upon request □ Other (explain in Schedule O). 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records ► Curtis Woitte, Denver Art Museum, Deputy Director & CFO - 720-913-0022. 100 w. 14th Ave. Parkway, Denver, CO 80204		exempt status with respect to such arrangements?			16b	<u> </u>	<u></u>		
 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	Sec	tion C. Disclosure		<u></u>		-			
for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records Curtis Woitte, Denver Art Museum, Deputy Director & CFO - 720-913-0022 100 w. 14th Ave. Parkway, Denver, CO 80204	17	List the states with which a copy of this form one is required to be med.							
Own website Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year 20 State the name, address, and telephone number of the person who possesses the organization's books and records Curtis Woitte, Denver Art Museum, Deputy Director & CFO - 720-913-0022 100 w. 14th Ave. Parkway, Denver, CO 80204	18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Sec	tion 501(c)(3)s only) avaıla	ble			
 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records Curtis Woitte, Denver Art Museum, Deputy Director & CFO - 720-913-0022 100 w. 14th Ave. Parkway, Denver, CO 80204 									
statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records Curtis Woitte, Denver Art Museum, Deputy Director & CFO - 720-913-0022 100 w. 14th Ave. Parkway, Denver, CO 80204		Own website Another's website Upon request Other (explain	ın So	hedule O)					
State the name, address, and telephone number of the person who possesses the organization's books and records Curtis Woitte, Denver Art Museum, Deputy Director & CFO - 720-913-0022 100 w. 14th Ave. Parkway, Denver, CO 80204	19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con	nflict	of interest policy, a	nd fina	ncial			
Curtis Woitte, Denver Art Museum, Deputy Director & CFO - 720-913-0022		· · · · · · · · · · · · · · · · · · ·							
100 w. 14th Ave. Parkway, Denver, CO 80204	20		oks a	nd records 🕨					
		100 w. 14th Ave. Parkway, Denver, CO 80204				- 000	100 15		

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The Denver Art Museum Foundation

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation 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 (A)	(B)							(D)	(E)	(F)	
Name and Title	Average	ر ا	Position (do not check more than one		Reportable	Reportable	Estimated				
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of	
	week	⊢	ceran	dad	recto	or/trus	tee)	from	from related	other	
	(list any	ndwdual trustee or director		1		l		the	organizations	compensation	
	hours for related	P o	8			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the	
	organizations	ustee	nstitutional frustee		빯	npeu		(88-2/1099-18113C)		organization and related	
	below	lan t	Eg .		(ey employee	stcor	<u></u>			organizations	
	line)	Indivi	nsttu	Officer	ey er	Highest compensate employee	Former Former]]		
(1) Frederic C. Hamilton	5.00			T							
President		х	Į	х				0.	0.	0.	
(2) Richard D. McCormick	0.30										
VP/Secretary		x		х			l	0.	0.	0.	
(3) J. Landis Martin	5.00						-				
Director		x					ļ	0.	0.	0.	
(4) Peter H. Coors	0.20			Г							
Director		x						0.	0.	0.	
(5) William J. Hybl	0.20										
Director		x						0.	0.	0.	
(6) Elisabeth W. Ireland	0.20				Γ]					
Director		x							0.	0.	
(7) Jay Precourt	0.20										
Director		х						0.	0.	0.	
(8) Daniel L. Ritchie	0.20										
Director		X	L	L	<u>L</u>	L	L	0.	0.	0.	
(9) Lewis Sharp	0.20			ļ			ļ				
Director		Х	_	L	L	L	L	0.	0.	0.	
(10) Donald L. Sturm	0.20						l				
Director		Х	_	ᆫ	<u>_</u>	L	L	0.	0.	0.	
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		L.						<u> </u>		ļ <u> </u>	
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	L _	I _	l		l	L				L	

Form 990 (2015) The Denver A					_			·	74-2496	760		Pa	age 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
Name and title	(B) Average hours per week	Average (do box, office		Pos heck ss pe nd a d	more rson	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	1	(F) Estimated amount of other		
	(list any hours for related organizations below	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee	 	the organization (W-2/1099-MISC)	organizations (W·2/1099·MIS	compensation from the organization and related organizations		e ion ed	
	line)	Indiwic	Institu	Officer	Key en	Highe	Fem						
		-	_			\vdash							
						_	_						
				-	-								
	ļ		_		_	_							
		-	_			\vdash					-		
1b Sub-total		_		_	_	L	L			0.			0.
c Total from continuation sheets to Part V. d Total (add lines 1b and 1c)	II, Section A						>	0.		0.		_	0.
Total number of individuals (including but recompensation from the organization	not limited to th	nose	liste	ed a	bov	e) w	ho r	received more than \$100	0,000 of reportable	•			(
3 Did the organization list any former officer,	director, or tr	uste	e, ke	ey er	nplo	oyee	, or	highest compensated e	employee on			Yes	No
line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the si	um of reportab	le co							the organization		3	- :	х
and related organizations greater than \$15 Did any person listed on line 1a receive or	accrue compe	nsat	ion 1	from	any	y uni			idual for services		4		x
rendered to the organization? If "Yes," com Section B. Independent Contractors	ipiete Scriedui	eji	Or Si	ucn	pers	SULL					5		
 Complete this table for your five highest co the organization. Report compensation for 	•	-								pens	ation	from	
(A) Name and business	address	NO	NE					(B) Description of s	services	C	Ompe	C) nsatio	n
	<u></u>												
							_					_	
							-						
							\dashv			-			
2 Total number of independent contractors (_	ot la	mıte	d to			stec	d above) who received r	nore than				
\$100,000 of compensation from the organi	zation_					0	-				Form	990 (2015

Form 990 (2015) The Denver
Part VIII Statement of Revenue

$\overline{\cdot}$		Check if Schedule O conta	ains a response	or note to any lin	e in this Part VIII			
			<u> </u>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
इस्	1 a	Federated campaigns	1a					
اة يَر		Membership dues	1b					
الْجَانَ		Fundraising events	1c					
a it		Related organizations	1d	4,690,125.				
S,E		Government grants (contribute						
ĔΩ		All other contributions, gifts, grant						
돌		similar amounts not included above	1 1	341,840.				
팀	g	Noncash contributions included in lines	1a-1f \$					
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f			5,031,965.			
				Business Code				
<u>8</u>	2 a							
P e	b							
n S	С							
Program Service Revenue	d							<u> </u>
<u>ğ</u>	е							
۱ ۳		All other program service reve	nue					
\dashv		Total. Add lines 2a-2f	 	_ _				
ľ	3	Investment income (including	dividends, intere	est, and	526 700	ĺ	-58,051.	584,841.
1		other similar amounts)			526,790.		-38,031.	304,041.
ľ	4 5	Income from investment of tax	x-exempt bond p	proceeds				
	5	Royalties	(i) Real	(ii) Personal				
	6 a	Gross rents	() Teal	(ii) i_ersonai				
		Less rental expenses						
ł		Rental income or (loss)						
		Net rental income or (loss)		•				
		Gross amount from sales of	(i) Securities	(ii) Other			· · · · · · · · · · · · · · · · · · ·	
		assets other than inventory	62,607,113.					
-	b	Less cost or other basis	-	1		Ì		ľ
		and sales expenses	58,783,677.					
- 1	С	Gain or (loss)	3,823,436.					
	d	Net gain or (loss)		<u> </u>	3,823,436.		119,361.	3,704,075.
9	8 a	Gross income from fundraising		ł		İ		
evenue		including \$	of	ł l				
		contributions reported on line	1c) See	ł				
Other R		Part IV, line 18	а					
ਰ		Less direct expenses	. b	└──┤				İ
1		Net income or (loss) from fund		<u> </u>				
1	9 a	Gross income from gaming ac		}				
	L	Part IV, line 19 Less direct expenses	a					
ŀ		Net income or (loss) from gam	b b	L				
		Gross sales of inventory, less						
	10 a	and allowances	a	!				
	h	Less cost of goods sold	b					
1		Net income or (loss) from sale				•		
Ì		Miscellaneous Revenu		Business Code				
	11 a							
	þ							
]	c							
	d	All other revenue						
	е	Total. Add lines 11a-11d		•				
	12	Total revenue. See instructions.		>	9,382,191.	0.	61,310.	
								Form QQA (2015)

Form 990 (2015) The Denver Art Museu
Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon			mpiete column (A)	
Do I	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	5,762,521.	5,762,521.		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				·
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	Į.			
	trustees, and key employees				
6	Compensation not included above, to disqualified	ł			
	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	ļ			
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits			-	
10	Payroll taxes				
11	Fees for services (non-employees)	ļ		í	
a	Management				
b	Legal Legal Accounting				
c d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	65,511.	· ·	65,511.	
g g	Other (If line 11g amount exceeds 10% of line 25,	·			
3	column (A) amount, list line 11g expenses on Sch O.)			•	
12	Advertising and promotion	1			
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses	j			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				ļ. —
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line	1			
	24e amount exceeds 10% of line 25, column (A)	J	}		
_	amount, list line 24e expenses on Schedule 0.)				
a					
b					
c					
d e	All other expenses	+			
25	Total functional expenses Add lines 1 through 24e	5,828,032.	5,762,521.	65,511.	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.				
	Check here fit following SOP 98-2 (ASC 958-720)]			

Form 990 (2015)
Part X | Balance Sheet

٠		Check if Schedule O contains a response or not	e to any line in this Part X			
		Constant Constant Contract Con	o to day mit in that dis A	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		176.	1	176.
	2	Savings and temporary cash investments	[360,885.	2	461,612.
	3	Pledges and grants receivable, net	. [4,875,228.	3	
	4	Accounts receivable, net	[4	
	5	Loans and other receivables from current and fo	ormer officers, directors,			
		trustees, key employees, and highest compensation	ated employees Complete		[[
		Part II of Schedule L	1		5	
	6	Loans and other receivables from other disquali	fied persons (as defined under		[[
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sect	ion 501(c)(9) voluntary			
ats		employees' beneficiary organizations (see instr)	Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		420,000.	7	
•	8	Inventories for sale or use	1		8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other				
		basis Complete Part VI of Schedule D	10a			
		Less accumulated depreciation		17. 760. 670	10c	70 050 005
	11	investments · publicly traded securities	}	37,769,678.	11	72,953,985.
	12	Investments - other securities See Part IV, line	F	107,518,159.	12	78,223,493.
	13	Investments - program-related See Part IV, line	'' }		13	
	14	Intangible assets	}	1,711,000.	14	1,711,000.
	15 16	Other assets See Part IV, line 11 Total assets. Add lines 1 through 15 (must equ.	- Line 24)	152,655,126.	15 16	153,350,266.
	17	Accounts payable and accrued expenses	at little 34)	5,540,841.	17	5,762,521.
	18	Grants payable	<u> </u>		18	-,,,
	19	Deferred revenue	- 	19		
	20	Tax-exempt bond liabilities	T T		20	
	21	Escrow or custodial account liability Complete	Part IV of Schedule D		21	
Ś	22	Loans and other payables to current and former				
ijį		key employees, highest compensated employee	· ·			
Liabilities		Complete Part II of Schedule L		, ,	22	
⊐	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelate	d third parties		24	
	25	Other liabilities (including federal income tax, pa	yables to related third			
		parties, and other liabilities not included on lines	17-24) Complete Part X of			
		Schedule D	L	21,530,047.	25	23,239,173.
	26	Total liabilities. Add lines 17 through 25		27,070,888.	26	29,001,694.
		Organizations that follow SFAS 117 (ASC 958	· · · · · · · · · · · · · · · · · · ·			
Ses		complete lines 27 through 29, and lines 33 an	d 34.	4		
a	27	Unrestricted net assets	<u> </u>	1,779,591.	27	1,690,054.
Ba	28	Temporarily restricted net assets	ļ.	6,919,472.	28	6,289,369.
핕	29	Permanently restricted net assets	· · · · · · · · ·	116,885,175.	29	116,369,149.
Ę		Organizations that do not follow SFAS 117 (A	SC 958), check here ▶ ∟			
S		and complete lines 30 through 34.		!		•
set	30	Capital stock or trust principal, or current funds			30	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or ed	· · ·		31 32	
Ž	32	Retained earnings, endowment, accumulated in	come, or other lunus	125,584,238.	33	124,348,572.
	33 34	Total net assets or fund balances Total liabilities and net assets/fund balances	ŀ	152,655,126.		153,350,266.
		TOTAL REPORTED BING HEL GOOGLE/TUHU DAMARCES				

	990 (2015) The Denver Art Museum Foundation	74-2496760		Pag	ge 12
Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,382,	
2	Total expenses (must equal Part IX, column (A), line 25)	2	5	,828,	032.
3	Revenue less expenses Subtract line 2 from line 1	3		<u> </u>	159.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	125	,584,	238.
5	Net unrealized gains (losses) on investments	5	-4	,789,	825.
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			<u> </u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	l l			
	column (B))	10	124	,348,	572.
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990		1		}
	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	L	x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both			}	
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				;
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit			1
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	<u> </u>	<u> </u>
			Form	990	(2015)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

OMB No 1545-0047

Name of the organization

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

Inspection Employer identification number

			nver Art Museum					-2436760
Pa		Reason for Public (e instructions	
The	<u>orga</u> n	ization is not a private found	ation because it is (For lines 1 through 11, o	heck only	one box)		
1		A church, convention of ch	urches, or associatio	on of churches described	d ın sectio	n 170(b)(1)(A)(i).	
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ))						
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	i).	
4		A medical research organiz	ation operated in coi	njunction with a hospital	described	l ın sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state	•	•				•
5		An organization operated for	or the benefit of a co	llege or university owner	d or opera	ed by a g	overnmental unit describ	ed in
•		section 170(b)(1)(A)(iv). (C		,		, 3		
6		A federal, state, or local go		, nental unit described in :	section 17	O(h)(1)(A)	(v)	
7	$\overline{\mathbf{x}}$	An organization that norma	_					nublic described in
•		•	•	Ittiai part of its support i	ioin a gov	citiiticittai	dilit of from the general	public described in
_		section 170(b)(1)(A)(vi). (C		(4)(4)((4) (O)-4- Day				
8	H	A community trust describe			•			
9		An organization that norma			•			•
		activities related to its exen	•	•				
		income and unrelated busin		(less section 511 tax) fr	om busine	sses acqu	ired by the organization	after June 30, 1975
		See section 509(a)(2). (Co	mplete Part III)					
10	닏	An organization organized a	•	•	•			
11	لـــا	An organization organized	and operated exclusi	ively for the benefit of, to	o perform	the functio	ns of, or to carry out the	purposes of one or
		more publicly supported or	ganızatıons describe	ed in section 509(a)(1) o	r section	509(a)(2)	See section 509(a)(3). C	theck the box in
	_	lines 11a through 11d that	describes the type o	f supporting organization	n and con	iplete lines	s 11e, 11f, and 11g	
а	_	Type I. A supporting orga	inization operated, s	upervised, or controlled	by its sup	ported org	janization(s), typically by	giving
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or trustees of the s	upporting
	_	organization You must o	complete Part IV, Se	ections A and B.				
b			anızatıon supervised	or controlled in connec	tion with it	s support	ed organization(s), by ha	ving
		control or management of	f the supporting orga	anization vested in the s	ame perso	ons that co	ontrol or manage the sup	ported
		organization(s) You mus	t complete Part IV,	Sections A and C.				
С		Type III functionally inte			in connec	tion with, a	and functionally integrate	ed with,
		its supported organizatio	n(s) (see instructions	s) You must complete	Part IV, Se	ctions A,	D, and E.	
d		Type III non-functionally	integrated. A supp	orting organization opei	ated in co	nnection v	vith its supported organi	zation(s)
		that is not functionally int	egrated The organiz	zation generally must sa	tisfy a dist	ribution re	quirement and an attent	veness
		requirement (see instruct	ions) You must con	nplete Part IV, Sections	s A and D,	and Part	٧.	
е		Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	Type I, Type II, Type III	
		functionally integrated, o	r Type III non-functio	nally integrated support	ing organi	zation		
f	Ente	er the number of supported (organizations		-			
g		vide the following information	=	ed organization(s)				
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(ıv) is the o		(v) Amount of monetary	(vi) Amount of
		organization		(described on lines 1-9	listed (n your document?	support (see	other support (see
				above (see instructions))	Yes	No	instructions)	instructions)
				-				
							-	
_								
			-					
Tota	al .							

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)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	2,930,437.	2,116,673.	281,760.	3,302,308.	5,031,965.	13,663,143.
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	2,930,437.	2,116,673.	281,760.	3,302,308.	5,031,965.	13,663,143.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the		ļ				
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4						13,663,143.
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	2,930,437.	2,116,673.	281,760.	3,302,308.	5,031,965.	13,663,143.
8	Gross income from interest,				-		
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	247,462.	453,791.	590,887.	326,090.	526,790.	2,145,020.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						15,808,163.
12	Gross receipts from related activities,	etc (see instruction	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	first, second, third	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	
_	organization, check this box and stor						
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2015 (line 6, column (f) di	vided by line 11, c	olumn (f))		14	86.43 %
	Public support percentage from 2014					15	85.02 %
16a	33 1/3% support test - 2015. If the c	organization did no	t check the box or	line 13, and line 1	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization				\triangleright [X]
t	33 1/3% support test - 2014. If the o	organization did no	t check a box on l	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	fies as a publicly s	supported organiza	ation			▶∟
17a	10% -facts-and-circumstances tes	_					
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	is box and stop h	ere. Explain in Pai	rt VI how the organ	ization
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a	publicly supported	lorganization		▶ L
b	10% -facts-and-circumstances tes	-					
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, ch	eck this box and	stop here. Explair	ın Part VI how the	
	organization meets the "facts-and-circ	cumstances" test	The organization of	ualifies as a public	ly supported orga	anization	▶∐
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	i, 16b, 17a, or 17b	, check this box a	ind see instruction	<u>s</u> ▶∟_
					Sche	dule A (Form 990	or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 The Denver Art Museum Foundation 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

Section A. Public Support	J DCION, Picase Com	picto ratt ii j				····
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
Gifts, grants, contributions, and	(4) 2011	(6) 2012	10,2013	10,2014	(6) 2013	(i) iotai
membership fees received (Do not	,					
include any "unusual grants ")	'				1	
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	·	<u> </u>	 	<u> </u>	 	
3 Gross receipts from activities that	\ 	1	1			
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities			ļ		į.	
furnished by a governmental unit to	0				1	
the organization without charge		<u> </u>			<u> </u>	
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, an	id					
3 received from disqualified persor	ıs					
b Amounts included on lines 2 and 3 received			[
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6	` \			<u> </u>		
10a Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income				 	 	
(less section 511 taxes) from businessi	es					
acquired after June 30, 1975						
,				 		
c Add lines 10a and 10b 11 Net income from unrelated busines	ee	 	 	 	 	
activities not included in line 10b,	20					
whether or not the business is			1			
regularly carried on			 	 	 -	
12 Other income Do not include gain or loss from the sale of capital			1	1	}	
assets (Explain in Part VI)	<u> </u>	<u> </u>			<u> </u>	
13 Total support. (Add lines 9, 10c, 11, and 12	2)	<u> </u>	<u> </u>	<u></u>	<u> </u>	
14 First five years. If the Form 990 is	for the organization'	's first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	zation,
check this box and stop here			- · ·			<u> </u>
Section C. Computation of Pu	blic Support Pe	rcentage				
15 Public support percentage for 201	• • • • • • • • • • • • • • • • • • • •	•	column (f))		15	%
16 Public support percentage from 20)14 Schedule A, Parl	t III, line 15			16	
Section D. Computation of Inv	estment Incom	ne Percentage				
17 Investment income percentage for	2015 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
18 Investment income percentage fro	m 2014 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2015. If t	he organization did i	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line	17 is not
more than 33 1/3%, check this box	=					▶□
b 33 1/3% support tests - 2014. If t		-				and
line 18 is not more than 33 1/3%, o	•			•		
20 Private foundation. If the organiza		. •	•		-	ightharpoons

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A	ΔΙΙ	Supporting	Organizations
Occion A.	~"	Supporting	Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
 1		
2 3a		
<u> </u>		
3b_		
3c		
4a_		
4b_		
4c_		
		1
5a		
5b		'
5c		
		, 2 3 4 4
6		'
7	-	
8		
9a		
9b		
9c		
10a		j
10b		/

Pa	rt IV Supporting Organizations (continued)			
,—			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
ь	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations	1		
	Nov. 27. Type i cupper and consumer and cons		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		163	140
'				
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the]	l
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			l
	controlled the organization's activities. If the organization had more than one supported organization,			ĺ
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			ĺ
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			l
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			1
	supervised, or controlled the supporting organization	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			l
	or management of the supporting organization was vested in the same persons that controlled or managed			1
	the supported organization(s)	1 1		1
Sec	tion D. All Type III Supporting Organizations		I	
		_	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	1		1
				ĺ
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			1
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		├──
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			1
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			-
	the organization maintained a close and continuous working relationship with the supported organization(s)	2	ļ.,	<u> </u>
3	By reason of the relationship described in (2), did the organization's supported organizations have a			l
	significant voice in the organization's investment policies and in directing the use of the organization's			1
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	-		1
	supported organizations played in this regard	3		<u></u>
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see Instructions):			
а	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions	s)	
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			l
	those supported organizations and explain how these activities directly furthered their exempt purposes,			l
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		ĺ
	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		-	_
þ				
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			ĺ
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b	\vdash	
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			i
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			_
_	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	_3b		
£2202	6 00-23-15	200 or 0	00 E71	2015

				mb -	D		M	Poundation
Schedule A	i i Formi 9	190 Or 990+F	712015	1116	Dellagi	MI L	museum	roundacton

74-2496760

Page 6

Pa	Type III Non-Functionally Integrated 509(a)(3) Supporting	Orga	anizations			
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 See instructions. All					
	other Type III non-functionally integrated supporting organizations must con	nplete S	Sections A through E			
Sect	ion A - Adjusted Net Income		(A) Pnor Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recovenes of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
_5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
_ <u>7</u> _	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8				
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year)					
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
e	Discount claimed for blockage or other					
	factors (explain in detail in Part VI)					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d	3	-			
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,					
	see instructions)	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
-6	Multiply line 5 by 035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
_ _	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
-5	Income tax imposed in prior year	5				
-6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
-	emergency temporary reduction (see instructions)	6				
_ 7	Check here if the current year is the organization's first as a non-functionally		ated Type III supporting ord	anization (see		
	instructions)					

Sche	dule A (Form 990 or 990 EZ) 2015 The Denver Art Muse	um Foundation		74-2496760	Page 7
Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)		
Secti	on D - Distributions			Current Y	/ear
1	Amounts paid to supported organizations to accomplish exe	empt purposes			
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported			
_	organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	S		
4	Amounts paid to acquire exempt-use assets				
5	Qualified set-aside amounts (prior IRS approval required)				
6	Other distributions (describe in Part VI) See instructions				
7	Total annual distributions. Add lines 1 through 6				
8	Distributions to attentive supported organizations to which t	he organization is responsive)		
	(provide details in Part VI) See instructions				
9	Distributable amount for 2015 from Section C, line 6				
10	Line 8 amount divided by Line 9 amount				
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributa Amount for	
1	Distributable amount for 2015 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2015			1	
	(reasonable cause required-see instructions)				
3	Excess distributions carryover, if any, to 2015				
а					
b					
c					
d	From 2013				
е	From 2014				
f	Total of lines 3a through e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2015 distributable amount			<u> </u>	
<u>i</u> _	Carryover from 2010 not applied (see instructions)				
<u>_i</u> _	Remainder Subtract lines 3g, 3h, and 3i from 3f	L			
4	Distributions for 2015 from Section D,				
	line 7\$				
<u>a</u>	Applied to underdistributions of prior years				
<u>b</u>	Applied to 2015 distributable amount				
c	Remainder Subtract lines 4a and 4b from 4				
5	Remaining underdistributions for years prior to 2015, if				
	any Subtract lines 3g and 4a from line 2 (if amount			Ì	
	greater than zero, see instructions)				
6	Remaining underdistributions for 2015 Subtract lines 3h	,		1	
	and 4b from line 1 (if amount greater than zero, see				
	instructions)			 	
7	Excess distributions carryover to 2016. Add lines 3j			1	
	and 4c				
8	Breakdown of line 7				
<u>a</u>					
b					
<u> </u>	Excess from 2013			ļ	
d	Excess from 2014				

e Excess from 2015

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

Schedule A (Form 990 or 990-EZ) 2015 The Denver Art Museum Foundation

74-2496760

Page 8

SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Pai	t I Organizations Maintaining Donor Advise		74-2496760
Га			s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		(b) Finds and the many
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		<u>,</u>
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed 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	dvisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
	ımpermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (e g , recreation or e	education) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of 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	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struc	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by th	e organization during the tax
	year >	,	3
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements in		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	servation easements during the year
	>		,
7	Amount of expenses incurred in monitoring, inspecting, hand	iling of violations, and enforcing conserva	ation easements during the year
	▶ \$	•	- ,
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization		
	conservation easements		
Pa	t III Organizations Maintaining Collections or	f Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue state	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furthera	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statemen	it and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	relating to these items	,	, , , , , , , , , , , , , , , , , , ,
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		s
2	If the organization received or held works of art, historical treations	asures or other similar assets for financi	al gain provide
-	the following amounts required to be reported under SFAS 1	•	argair, provide
а	Revenue included on Form 990, Part VIII, line 1	TO VICO 330/ relating to these itellis	•
			\$
	Assets included in Form 990, Part X		>

Sche	dule D (Form 990) 2015 The Denver	Art Museum Pour	dation			74-2496	760	Page 2
Par	t III Organizations Maintaining C	ollections of A	rt, Historical Tr	easures, or Oth	er Simi	lar Asse	ts(contin	ued)
3	Using the organization's acquisition, accessi	on, and other record	ls, check any of the	following that are a	significan	t use of its	collection	ı ıtems
	(check all that apply)							
а	Public exhibition	d		hange programs				
b	Scholarly research	е	Other				_	
С	Preservation for future generations							
4	Provide a description of the organization's co	=	•	-		oose in Par	t XIII	
5	During the year, did the organization solicit of			·	ar assets	_	٦	
<u> </u>	to be sold to raise funds rather than to be m						_ Yes	No_
Par	t IV Escrow and Custodial Arran		ete if the organizatio	n answered "Yes" o	n Form 99	90, Part IV,	line 9, or	
	reported an amount on Form 990, Pa							
та	Is the organization an agent, trustee, custod	ian or other intermed	diary for contribution	is or other assets no	t include	3 _	7,,,,	□
	on Form 990, Part X?		Da 4-61-				Yes	∟ No
D	If "Yes," explain the arrangement in Part XIII	and complete the lo	llowing table			T	A	
_	Dogunaya halanga				1	+	Amount	
	Beginning balance Additions during the year				1c 1d	-		
	Distributions during the year				1e	 		
f	Ending balance				1f			
	Did the organization include an amount on F	orm 990 Part X line	21 for escrow or ci	istodial account liah			Yes	□ No
	If "Yes," explain the arrangement in Part XIII				•	_		
Par	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1							
		(a) Current year	(b) Prior year	(c) Two years back		years back	(e) Four	years back
1a	Beginning of year balance	120,709,010.	117,654,452.	110,427,969.	103,	317,817.	93,	593,316.
b	Contributions	2,	642,005.	6,	787,964.			
С	Net investment earnings, gains, and losses	-505,110.	2,826,108.	11,741,733.	9,	327,871.	7,	400,061.
d	Grants or scholarships	5,762,521.	5,540,841.	5,262,343.	4,	859,724.	4,	463,524.
е	Other expenditures for facilities					•		
	and programs							
f	Administrative expenses							
g	End of year balance	124,348,572.	120,709,010.	117,654,452.	110,	427,969.	103,	317,817.
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1g, column (a	a)) held as				
а	Board designated or quasi-endowment	1.36	_%					
b	Permanent endowment ► 93.58	%						
C	Temporarily restricted endowment ▶	5.06 %						
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%						
3a	Are there endowment funds not in the posse	ession of the organization	ation that are held a	nd administered for	the orgar	ization	-	
	by							Yes No
	(i) unrelated organizations						3a(i)	X
	(ii) related organizations						3a(ii)	X
	If "Yes" on line 3a(ii), are the related organiza	•					_3b	
Bo.	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		owment funds		-			
Pai	Complete if the organization answere) Deet IV Inc. 44. C	` Farm 000 Dad \	lina 10			
	Description of property	(a) Cost or o					(d) D1	
	Description of property	basis (investr			Accumula epreciatio		(d) Book	value
	Land	- 						
	Buildings					İ		
С	Leasehold improvements							
d	Equipment	_						
е	Other							
Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column (B), line 1	(0c)				0,

Schedule D (Form 990) 2015 The Denver Art M	useum Foundation		7	4-2496760	Page 3
Part VII Investments - Other Securities.	<u></u> .				
Complete if the organization answered "Yes"	on Form 990, Part IV, III				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation Cost or e	end-of-year marke	t value
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
(A) Emerging markets	7,071,99		_		
(B) Global/macro	16,770,87				
(C) Healthcare	11,386,91				
(D) Leveraged buy-out	1,803,18				
(E) Long/short equities	20,685,09				
(F) Long/short fixed income	3,567,66	-			
(G) Multi-strategy	7,526,56				
(H) Natural resources and energy	33,02		Market Value		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	78,223,49	3.			
Part VIII Investments - Program Related.					
Complete if the organization answered "Yes"					
(a) Description of investment	(b) Book value	(c) Method of v	aluation Cost or e	end-of-year marke	t value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.	<u> </u>				
	on Form 000 Part IV II	11d C F 000	Dark V June 16		
Complete if the organization answered "Yes" (a)	Description	ie i iu See Foiii 990,	Part A, line 15	(b) Book	value
(1)				(2) 2001	
(2)					
(3)				<u> </u>	•
(4)					
(5)					
(6)					
(7)					
(8)					
(9)				-	
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 15)			>	
Part X Other Liabilities.	<u> </u>			•	
Complete if the organization answered "Yes"	on Form 990, Part IV, III	ne 11e or 11f See Forn	n 990, Part X, line	25	
1. (a) Description of liability		(b) Book value			
(1) Federal income taxes					
(2) Investments held for related entity		21,461,408.			
(3) Investments held for Clyfford Still M	useum	1,777,765.			
(4)		_			
(5)		•			
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) lin-	e 25)	23,239,173.			
O Liebiti formando de Det VIII annual					

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

	ule D (Form 990) 2015 The Denver Art Museum Foundation		74-2496760	Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statem	nents With Revenue per F	leturn.	-
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a		
1	Total revenue, gains, and other support per audited financial statements		1	4,526,855.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.			
а	Net unrealized gains (losses) on investments	. 2a -4,789,825.	.]	
b	Donated services and use of facilities	2b		
C	Recovenes of prior year grants	2c]	
ď	Other (Describe in Part XIII)	2d]	
е	Add lines 2a through 2d		2e	-4,789,825.
3	Subtract line 2e from line 1		3	9,316,680.
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 65,511.		
b	Other (Describe in Part XIII)	4b]	
C	Add lines 4a and 4b		4c	65,511.
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	9,382,191.
Par	XII Reconciliation of Expenses per Audited Financial State	ments With Expenses per	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a		
1	Total expenses and losses per audited financial statements		1	5,762,521.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a]	
b	Prior year adjustments	2b]	
С	Other losses	2c]	
d	Other (Describe in Part XIII)	2d]	
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	5,762,521.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			-
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a 65,511.	.] }	
b	Other (Describe in Part XIII)	4b]	
c	Add lines 4a and 4b	-	4c	65,511.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	5,828,032.
Par	XIII Supplemental Information.			
	le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any a		4, Part X, line 2	, Part XI,
Part	V, line 4:			
The o	endowment funds are used for the educational, operational, an	nd capital		
need	of the Denver Art Museum.			
				
				
			_	

74-2496760

Part VII Investments - Other Securities. See Form 990, Part X, II (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(including flame of security)		Cost of end-of-year market value
Private equity	6,354,365.	PMV
	0,331,303.	
Long only equities	3,023,819.	FMV
		<u> </u>
 		
		
		
		- -
		
<u> </u>		
		
	·	
		
		
	 	

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

➤ Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at www.lrs.gov/form990.

2015
Open to Public Inspection

Name of the organization **Employer identification number** The Denver Art Museum Foundation 74-2496760 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the **United States** 3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total employees, agents, and independent expenditures (by type) (e g , fundraising, program is a program service, offices for and ın the region services, investments, grants to describe specific type investments contractors recipients located in the region) of service(s) in region in region in region Central America and the Carribbean Passive investments 62,468,145. 0 62,468,145. 3 a Sub-total **b** Total from continuation 0 0. sheets to Part I c Totals (add lines 3a 62,468,145.

Schedule F (Form 990) 2015 The Denver Art Museum Foundation

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on 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

74-2496760

Enter total number of reciniant organizations listed above that are reconsisted as charities by the foreign country, reconsisted as tax-exempt by
Enter total number of recipient organizations listed above that are recognized as charities by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities

Page 3

Schedule F (Form 990) 2015 The Denver Art Museum Foundation

74-2496760

Part III. Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16 Part III can be duplicated if additional space is needed

]		}
(h) Method of valuation (book, FMV, appraisal, other)					
(g) Description of non-cash assistance					
(f) Amount of non-cash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
(c) Number of recipients					
(b) Region					
(a) Type of grant or assistance					

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015

Part V	- From 990) 2015 The Bernet At Maseum Foundation	Page 5
Party	Supplemental Information	
	Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of	
	investments vs expenditures per region), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c)	
	(estimated number of recipients), as applicable. Also complete this part to provide any additional information	
		
	 	
		
		
		
		•

Employer identification number OMB No 1545-0047 74-2496760 ▶ Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ▶ Attach to Form 990. The Denver Art Museum Foundation Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part

Open to Public 2015 Inspection

X Yes 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 General Information on Grants and Assistance criteria used to award the grants or assistance?

ž []

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for moni	toring the use of grant	funds in the United	1 States	Y" bereware nortezine	es" on Form 990 Part	IV line 21, for any	
_	\$5,000 Part II car	be duplicated if additi	onal space is need	ded led				
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
Denver Art Museum 100 W 14th Ave Pkwy Denver CO 80204	84-6038240	501 (c) (3)	5,762,521.	.0	n/a	n/a	General support	ľ
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government o	I organizations listed in th	ne line 1 table					- 0
3 Enter total number of other organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ns listed in the line e, see the Instruc	tions for Form 990.					Schedule I (Form 990) (2019	1 2

Schedule I (Form 990) (2015)

532102 10-28-15

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

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

Thaine of the organization	The Denver Art Museum Foundation	74-2496760
Form 990, Part VI, Sec	ction A, line 2:	
Frederic C Hamilton ar	nd Elisabeth Ireland have a business relationship.	
Form 990, Part VI, Sec	ction A, line 8b:	
The question is not ap	oplicable to the foundation as there are no additiona	1
committees with author	rity to act on behalf of the governing body.	
Form 990, Part VI, Sec	ction B, line 11:	
The Board of Directors	s has delegated the responsibility to review the Form	
990 before being filed	d to Mr. Hamilton who is President of the Board.	
Form 990, Part VI, Sec	ction B, Line 12c	
If any person who is a	a director or officer of the Foundation is aware that	
the Foundation is abou	ut to enter into any business transaction directly or	
indirectly, such person	on shall immediately disclose to the board of	·
directors of their int	terest or position, disclose any material facts that	
bear on the advisabil:	ity of such transaction from the standpoint of the	
Foundation, and recuse	e themselves from voting on decisions about such	
transaction.		
Form 990, Part VI, Sec	ction B, Line 15:	
Form 990, Part VI, Sec	ction B, Lines 15a and 15b:	
This does not apply to	o the Foundation as the Foundation has no employees.	
Form 990, Part VI, Sec	ction C, Line 19:	
The Foundation makes	its documents available to the public upon request.	

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization The Denver Art Museum Foundation	Employer identification number 74-2496760
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.	

Employer identification number Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Related Organizations and Unrelated Partnerships Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33 ▶ Attach to Form 990. The Denver Art Museum Foundation Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part

2015 Open to Public Inspection OMB No 1545-0047

74-2496760

Direct controlling entry Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year DAMP End-of-year assets ٥. <u>e</u> ٥. Total income Ð Legal domicile (state or foreign country) Colorado Primary activity Investments Name, address, and EIN (if applicable) of disregarded entity

100 W. 14th Ave. Parkway

DAMF LLC

CO 80204

Denver,

Part

(g) Section 512(b)(13) controlled Ŷ × entity? Yes Direct controlling entity status (if section Public charity 501(c)(3)) (10(P)(1) (a)(v1) Exempt Code section 501(c)(3) Legal domicile (state or foreign country) olorado Primary activity Art museum Name, address, and EIN of related organization Denver Art Museum - 84-6038240 100 West 14th Avenue Parkway CO 80204-2788 Denver,

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

Schedule R (Form 990) 2015

532161 09-08-15 LHA

(g) Section 512(b)(13) controlled Schedule R (Form 990) 2015 Employer identification number ŝ Open to Public Inspection OMB No 1545-0047 2015 × entity? Direct controlling Yes entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year 74-2496760 Direct controlling entity DAMP End-of-year assets ö e status (if section Public charity 501(c)(3)) (1)(Q)(1) (a)(vi) Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. 0 ► Information about Schedule R (Form 990) and its instructions is at www./rs.gov/form990. Total income Exempt Code Related Organizations and Unrelated Partnerships ਉ section 501(c)(3) Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Legal domicile (state or foreign country) foreign country) ▶ Attach to Form 990. Colorado Colorado Primary activity Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. The Denver Art Museum Foundation Investments Art museum Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity Denver Art Museum - 84-6038240 100 West 14th Avenue Parkway Denver, CO 80204-2788 1560 Broadway #2200 Name of the organization 80202 Department of the Treasury Internal Revenue Service ပ္ပ SCHEDULE R (Form 990) DAMP LLC Denver, Part II Part

Schedule R (Form 990) 2015 The Denver Art Museum Poundation 74-2496760

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

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€	Section 512(b)(13) controlled entity?	Yes No	 	 		 _	 				
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	Share of total income									_	
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(p)	Direct										
9	₩,	country)			_						
(p)	Primary activity										
(a)	Name, address, and EIN of related organization								,		

Schedule R (Form 990) 2015

532162 09-08-15

74-2496760

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ns with one or more re	lated organizations listed	In Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	>-			1a		×
b Gift, grant, or capital contribution to related organization(s)			•	9	×	
c Gift, grant, or capital contribution from related organization(s)				1	×	
d Loans or loan guarantees to or for related organization(s)				1	×	
e Loans or loan guarantees by related organization(s)				16		×
				•		-
† Ulvidends from related organization(s)			•			4
g Sale of assets to related organization(s)				뤼		×
h Purchase of assets from related organization(s)				₽	_	×
i Exchange of assets with related organization(s)				; =		×
j Lease of facilities, equipment, or other assets to related organization(s)			٠	1		×
		,				>
R Lease of Jacillites, equipment, of other assets from related organization(s)	17.			≟ ₹	\downarrow	<u> </u>
Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			= ;	\downarrow	4
	anization(s) hop(s)			= +	\perp	×
	(c) IIOII			٤	\perp	×
o onaring of paid employees with related organization(s)				2	1	
p Reimbursement paid to related organization(s) for expenses						×
q Reimbursement paid by related organization(s) for expenses				₽	Ц	×
r Other transfer of cash or property to related organization(s)				+		×
				<u>+</u>		×
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 th	is line, including covered	relationships and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved	t involved		
(1)						
(2)					1	
(3)			 			
(4)		i i				
(9)						
532163 09-08-15			Sched	Schedule R (Form 990) 2015	66 E) 2015

Schedule R (Form 990) 2015 The Denver Art Museum Foundation

Part VI. Unrelated Organizations Taxable as a Partnership Complete of the organization answered "Yes" on 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 bartnerships.

Name, address, and EIN Permany activity Legal down principle of regorn (1996) Legal down prin	Primary activity Legal domicile (state or foreign country)		 (B)	Ξ	€	9	ક
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		excluded from tax und sections 512-514)	end-of-year assets	allocations?	Schedule K-1 F (Form 1065)	es No	ownership
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Schedule R	(Form 990) 2015	The Denver Art Museum Foundation	74-2496760	Page 5
Part VII	(Form 990) 2015 Supplemental Inf	ormation		
	Provide additional infor	rmation for responses to questions on Schedule R (see instructions)		
	Towner additional lines	THE CONTROL TO SEPARAGE TO A CONTROL TO THE CONTROL		
				
				
				
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