Fam 990-T		Exempt Orgai		ısine	ss Inco	me T	ax Ret	urn		OMB N	lo 1545-0687
4		•	nd proxy tax un	ider se						2	017
	Force	alendar year 2017 or other tax yea			, and e				- 1		U 1 /
Department of the Treass Internal Revenue Service	ury b	► Go to www. • Do not enter SSN number	irs.gov/Form990T for s on this form as it m					c)(3).			ublic Inspection for organizations Only
	Check box if address changed Name of organization (Check box if name changed and see instructions.)							,,,	D Empk (Empl		fication number
B Exempt under se	ction Print	GEORGIA O'KI	REFER MICE	īΤΜ							37114
X 501(c)(3 (Number, street, and room			otrustia no						ess activity codes
	220(e) Type	217 JOHNSON		dux, see iii	Su ucuons.				(See ii	nstructions	1)
408A 55 529(a)	530(a)	City or town, state or prov	ince, country, and ZIP	or foreign	n postal code				453	220	
o Book value of all asso	nto	F Group exemption numb		-					100	000	
137,71	0,419.	G Check organization type			50	1(c) trust		401(a)	trust	$\overline{}$	Other trust
		ary unrelated business activ			STATEM			- 1-7			
I During the tax yea	r, was the corp	poration a subsidiary in an a	ffiliated group or a pai					▶ſ	Ye	s X	No
If "Yes," enter the	name and iden	tifying number of the parent	corporation.		,	- 6 ,		_		<u> </u>	_
J The books are in c	are of 🕨 🛚	RICHARD MURRA	Y		V=	Teleph	one number	\ (505	946	-1034
Part I Unre	lated Trac	de or Business Inc	ome		(A) Inc	ome	(B) Exp	enses	Ī		(C) Net
1a Gross receipts	or sales	721,199.									
b Less returns an	nd allowances		c Balance	- 1c	721	,199.					
2 Cost of goods s	sold (Schedule	A, line 7)	_	2		682.				77.19	
3 Gross profit. Su	ubtract line 2 fi	rom line 1c		3		,517.	سر	. :	. ,	3:	937517.
4a Capital gain net	t income (attac	ch Schedule D)		4a							101
	•	Part II, line 17) (attach Form	4797)	4b			1			\ \S\(1)\text{6}	3 /8/
c Capital loss dec		· '	,	4c			Nu N	11/1	(a	<u> </u>	
· · · · · · · · · · · · · · · · · · ·		ups and S corporations (atta	ch statement)	5			Hori	-1/1			
6 Rent income (S		ips and o corporations (atte	on statement)	6			Till		ا کیسر	والاام	
•	•	ne (Schedule E)		7		···	I can h	- 		مستعلق لأستع	
		and rents from controlled or	oonizations (Cab. E)		20	,535.		۱۰ <u>۱ ()</u> السنامي			29,535.
				. 8	<u> </u>	, , , , , ,	E P		-		29,555.
		on 501(c)(7), (9), or (17) or	ganization (Schedule G								
·		me (Schedule I)		10							
11 Advertising inco	•	•		11							
•		ns; attach schedule)		12	400	752	····				02 050
13 Total, Combine Part II Dedu		ot Taken Elsewhere	. (C	13	423	052.				4	23,052.
(Excep	t for contribu	utions, deductions must	be directly connected	tor limitat ed with th	tions on dec ne uprelated	huctions.)	income)				
Ç					- IC diriciated			- 1	44		
45 0.1		rectors, and trustees (Sched	iule K)					- 1	14		62 644
5.0								ł	15		62,644.
Repairs and m	lamtenance							ł	16		
	h oobodule\							ŀ	17		
18 Interest (attack	•							ŀ	18		
io iakos and noci								- 1	19		
4 - 1		e instructions for limitation i	ules)		,	1		- 1	20		
21 Depreciation (a		•			}	21					
Z 22 Less depreciat	tion claimed or	n Schedule A and elsewhere	on return		Į	22a			22b		
23 Depletion								l	23		
S 24 Contributions		mpensation plans							24		
25 Employee Deni	. •								25		
26 Excess exempt	•	•							26		
27 Excess readers		,							27		
28 Other deduction	•	•			SEE	STAT	EMENT :	2	28		53,210.
29 Total deductio		_							29		15,854.
30 Unrelated busi	ness taxable ır	ncome before net operating	loss deduction. Subtra	act line 29					30		07,198.
		(limited to the amount on I	•			STAT	EMENT :	3 [31		74,452.
		ncome before specific deduc			30				32		32,746.
33 Specific deduc	tion (Generally	y \$1,000, but see line 33 ins	tructions for exception	ns)					33		1,000.
	iness taxable	income. Subtract line 33 fr	om line 32. If line 33 i	s greater t	han line 32, e	nter the sm	naller of zero or	r [
line 32									34		31,746.
723701 01-22-18 I HA	A For Paner	work Reduction Act Notice	see instructions							Form	990-T (2017)

Schedule A - Cost of Good	Is Sold. Enter	method of inve	ntory valuation COS	ST		· · · · · · · · · · · · · · · · · · ·
1 Inventory at beginning of year	1		6 Inventory at end of ye	ar	Ī	6
2 Purchases	2		7 Cost of goods sold. S		line 6	
3 Cost of labor	3		from line 5. Enter here			
4 a Additional section 263A costs			line 2		1	7
(attach schedule)	4a		8 Do the rules of section	n 263A (with respect to	Yes No
b Other costs (attach schedule)	4b		property produced or		•	
5 Total. Add lines 1 through 4b	5		the organization?	00400	o to. Toolio, apply to	x
Schedule C - Rent Income		Property and	d Personal Property	Lease	d With Real Prope	
(see instructions)	•		• •		• •	•
Description of property						
(1)				•	· · · · · · · · · · · · · · · · · · ·	
(2)			_			
(3)						
(4)						•
	2. Rent recerv	ed or accrued				
(a) From personal property (if the per rent for personal property is mor 10% but not more than 50%	e than	of rent for	and personal property (if the percent personal property exceeds 50% or if int is based on profit or income)	age	3(a) Deductions directly c columns 2(a) and	onnected with the income in 2(b) (attach schedule)
(1)						
(2)						
(3)						
(4)						
Total	0.	Total		0.		
(c) Total income. Add totals of columns		ter			(b) Total deductions.	_
here and on page 1, Part I, line 6, colum	n (A)	<u> </u>		0.	Part I, line 6, column (B)	<u> </u>
Schedule E - Unrelated Del	ot-Financed	income (see	instructions)	,		
			2. Gross income from		Deductions directly conne to debt-finance	
1. Description of debt-fi	inanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)						
(2)						
(3)				<u> </u>	-	
(4)				†		
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to need property in schedule)	6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	8_ Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)	[%			
(2)			%			
(3)	I		%			<u> </u>
(4)			%		· · · · · ·	
					Enter here and on page 1, Part 1, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B)
Totals			•		0.	0.
Total dividends-received deductions	ncluded in columr	18	•		•	0.
						Farm 000 7 (0047)

		2. Employer		Exempt Controlled Organizations							
Name of controlled organization		ident	mployer dication mber		related income e înstructions)		Total of specified payments made		umn 4 that is a controlling gross income	Deductions directly connected with income in column 5	
(1) GOKM I	NNOVATION			<u> </u>						· • · · · · · · · · · · · · · · · · · ·	
(2) INC.		47-56	22335								
(3)											
(4)											
Nonexempt Con	trolled Organizat	tions		<u> </u>	-				•		
7. Taxable	tncome	8. Net unrelated inco (see instruction	ome (loss) ns)	9. Total	of specified pays made	nents		nn 9 that is inclu ng organization'i income		Deductions directly connected ith income in column 10	
(1)		~~								······································	
(2)					29.	535.		29,53	5.	· · · · · · · · · · · · · · · · · · ·	
(3)											
(4)			-						1		
Totals							Enter here and	ons 5 and 10 on page 1, Part olumn (A).	, Enter	Add columns 6 and 11 -here and on page 1, Part I, Irne 8, column (B).	
	- Investment	Income of a	Section	501/c)/7	(1) (0) or (-	17) Ora	anization	29,53	3.	0.	
concadic a	(see instruc		Section	301(0)(7), (3), 01 (i, Org	janization				
	1. Description				2. Amount of	income	3. Deduction directly connect (attach schedu	ted 4.	Set-asides tach schedule)	5. Total deductions and set-asides (col 3 plus col 4)	
(1)										,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(2)	"	***************************************					,				
(3)										-	
(4)											
					Enter here and o Part I, line 9, col			•		Enter here and on page 1 Part I, line 9, column (B)	
Totals						0.				0.	
Schedule I -	(see instruction	empt Activity ons)	/ Income	e, Other	Than Adv	ertisin	g Income				
1, Descrip exploited a		2. Gross unrelated business income from trade or business	3. Exp directly co with pro- of unre- business	onnected duction elated	4. Net incom from unrelated business (coi minus column gain, compute through	trade or lumn 2 i 3) If a cols 5	5. Gross inconfrom activity the soft unrelated business inconfigures.	nat at	Expenses tributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)											
(2)					1						
(3)					<u> </u>						
(4)				-							
		Enter here and on page 1, Part I, line 10, col (A)	Enter here page 1, line 10, e	, Parti, col (B).		4				Enter here and on page 1, Part II, line 26	
Totals Schedule J -	Advertising	0. Income (see	In other sets and	0.	L					0.	
Part I Inco	me From Per	riodicals Rep	orted on	a Cons	solidated	Basis					
1. Nam	e of periodical	2. Gross advertising income		3. Direct rtising costs	4. Adverti or (loss) (co col 3). If a ga cols 5 th	l 2 minus in, compute	5. Circulati income	on 6.	Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)											
(2)											
(3)										1	
(4)									**	1	
		_ 									
			ł								

Form 990-T (2017) GEORGIA O'KEEFFE MUSEUM 85~04371

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

1. Name of periodical		2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3). If a gain, compute cols 5 through 7	5. Circutation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)							
(2)							I
(3)	ĺ	-					
(4)							T
Totals from Part I	▶	0.	0.				0.
		Enter here and on page 1, Part 1, line 11, col. (A)	Enter here and on page 1, Part I, line 11, col. (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	▶	. 0 .	0.				0.

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

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		•	0.

Form 990-T (2017)

Form 4626 Department of the Treasury Internal Revenue Service

Alternative Minimum Tax - Corporations

Attach to the corporation's tax return.

► Go to www.irs.gov/Form4626 for instructions and the latest information.

OMB No 1545-0123

Name	GEORGIA O'KEEFFE MUSEUM			85-0437114
	Note: See the instructions to find out if the corporation is a small corporation exempt			
	from the alternative minimum tax (AMT) under section 55(e).			
1	Taxable income or (loss) before net operating loss deduction		1	106,198.
2	Adjustments and preferences;			
а			2a	
b	Amortization of certified pollution control facilities		2b	
c	Amortization of mining exploration and development costs		2c	
đ	A secretical transfer of a secretary secretary and A secretary for a secretary that the secretary section is a later and A		2d	
е	Adjusted gain or loss		2e	
f	Long-term contracts		2f	
a	Merchant marine capital construction funds		2g	
h	Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only)		2h	
i	Tax shelter farm activities (personal service corporations only)		2i	
i	Passive activities (closely held corporations and personal service corporations only)		2j	
k	Loss limitations		2k	
- 1	Depletion		21	
п	Tax-exempt interest income from specified private activity bonds		2m	
n	Intangible drilling costs		2n	
0	Other adjustments and preferences		20	
3	Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 20		3	106,198.
4	Adjusted current earnings (ACE) adjustment:			
a	ACE from line 10 of the ACE worksheet in the instructions	4a 106,198.		
b	Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a			1
	negative amount. See instructions	4b 0.		
C	Multiply line 4b by 75% (0.75). Enter the result as a positive amount	4c	}	
d	Enter the excess, if any, of the corporation's total increases in AMTI from prior	<u> </u>		
	year ACE adjustments over its total reductions in AMTI from prior year ACE			
	adjustments. See instructions. Note You must enter an amount on line 4d		ŀ	
	(even if line 4b is positive)	46		
е	ACE adjustment.		1	
	If line 4b is zero or more, enter the amount from line 4c	1		
	• If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount	ř	4e	0.
5	Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT	•	5	106,198.
6	Alternative tax net operating loss deduction. See instructions		6	
7	Alternative minimum taxable income. Subtract line 6 from line 5. If the corporation held a	ı residual		105.100
	interest in a REMIC, see instructions		7	106,198.
8	Exemption phase-out (If line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on I	ine 8c):		
a	Subtract \$150,000 from line 7. If completing this line for a member of a controlled			
	group, see instructions. If zero or less, enter -0-	8a 0.	ļ	
b	Multiply line 8a by 25% (0.25)	8b 0.	ļ	
C		led		40 000
	group, see instructions. If zero or less, enter -0-		8c	40,000.
9	Subtract line 8c from line 7. If zero or less, enter -0-		9	66,198.
10	Multiply line 9 by 20% (0.20)		10	13,240.
11	Alternative minimum tax foreign tax credit (AMTFTC). See instructions		11	12 240
12	Tentative minimum tax. Subtract line 11 from line 10		12_	13,240.
13	Regular tax liability before applying all credits except the foreign tax credit	4	13_	4,762.
14	Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0 Enter her			0 470
	Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return	1	14	8,478.
JWA	For Paperwork Reduction Act Notice, see separate instructions.			Form 4626 (2017)

4.

	, Adjus	► See ACE Worksheet Ins	•		
	•	OCC AGE VOIRSHEET INS	au ucuons.		
1	Pre-adjustment AMTI. Enter the amount from line 3 of	Form 4626		1 1	106,198.
2	ACE depreciation adjustment		* ** *		
_	a AMT depreciation		2a		
	b ACE depreciation:				
•	(1) Post-1993 property	2b(1)		1 i	
	(2) Post-1989, pre-1994 property	2b(2)			
	(3) Pre-1990 MACRS property	2b(3)		1 1	
	(4) Pre-1990 original ACRS property	2b(4)			
	(5) Property described in sections	23(4)	- 1	! !	
	168(f)(1) through (4)	2b(5)		1 1	
	(6) Other property	2b(6)		1 1	
	(7) Total ACE depreciation. Add lines 2b(1) through		2b(7)		
	ACE depreciation adjustment. Subtract line 2b(7) from		[20[1]]		
3	Inclusion in ACE of items included in earnings and pro			120	
-	a Tax-exempt interest income	,ω (εαι <i>).</i>	3a	1 1	
	Death benefits from life insurance contracts		3b		
	All other distributions from life insurance contracts (in	icludina surrenders)	3c		
	Inside buildup of undistributed income in life insurance	,	36		
	Other items (see Regulations sections 1.56(g)-1(c)(6)				
	for a partial list)	(···/ ····-+5··· (···/	3e		
1	Total increase to ACE from inclusion in ACE of items i	ncluded in E&P. Add lines 3a thro		3f	
4	Disallowance of items not deductible from E&P:				
	Certain dividends received		4a		
ı	Dividends paid on certain preferred stock of public utilities that a	re deductible under section 247 (as			
	affected by P.L. 113-295, Div. A, section 221(a)(41)(A), Dec. 19, 2	014, 128 Stat. 4043)	4b		
(Dividends paid to an ESOP that are deductible under s	ection 404(k)	4c		
(Nonpatronage dividends that are paid and deductible i	inder section			
	1382(c)		4d		
•	Other items (see Regulations sections 1.56(g)-1(d)(3)	(ı) and (ıı) for a			
	partial list)		4e		
1	Total increase to ACE because of disallowance of item	s not deductible from E&P. Add I	ines 4a through 4e	4f	
5	Other adjustments based on rules for figuring E&P:				
	Intangible drilling costs		5a		
	Circulation expenditures		5b		
•	Organizational expenditures		5c		
	LIFO inventory adjustments		5d		
	Installment sales		5e		
	Total other E&P adjustments. Combine lines 5a throug	n 5e		5f	
6	Disallowance of loss on exchange of debt pools			6	
7	Acquisition expenses of life insurance companies for o	qualified foreign contracts		7	
8	Depletion			8	
9	Basis adjustments in determining gain or loss from sa	•	•	9	
10	Adjusted current earnings. Combine lines 1, 2c, 3f, 4	f, and 5f through 9. Enter the res	ult here and on line 4a of		106 100
	Form 4626			10	106,198.

4.

FORM 990-T	DESCRIPTION C	OF ORGANIZATION'S	PRIMARY	UNRELATED	STATEMENT	, 1
		BUSINESS ACTIVIT	ΥΥ			

GIFT SHOP SALES FOR ITEMS UNRELATED TO EXEMPT ACTIVITY

TO FORM 990-T, PAGE 1

FORM 990-T OTHER DEDU	CTIONS STATEMENT	2
DESCRIPTION	AMOUNT	
ADMINISTRATIVE AND OVERHEAD COSTS RETAIL MISC EXPENSE	231,3 21,8	
TOTAL TO FORM 990-T, PAGE 1, LINE 28	253,2	210.

FORM 990-T	NET	STATEMENT 3		
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/01	9,992.	9,992.	0.	0.
12/31/02	10,090.	10,090.	0.	0.
12/31/03	8,551.	8,551.	0.	0.
12/31/04	674.	674.	0.	0.
12/31/05	7,836.	981.	6,855.	6,855.
12/31/06	1,641.	0.	1,641.	1,641.
12/31/07	4,887.	0.	4,887.	4,887.
12/31/08	14,285.	0.	14,285.	14,285.
12/31/09	7,770.	0.	7,770.	7,770.
12/31/10	3,035.	0.	3,035.	3,035.
12/31/11	15,050.	0.	15,050.	15,050.
12/31/12	16,522.	0.	16,522.	16,522.
12/31/14	2,813.	0.	2,813.	2,813.
12/31/15	1,594.	0.	1,594.	1,594.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	74,452.	74,452.