

Public Disclosure Copy

Form 990

*****PLEASE SIGN THIS COPY AND RETAIN FOR YOUR RECORDS*****

Public Inspection Requirement

An exempt organization must make available for public inspection, upon request and without charge, a copy of its original and amended annual information returns. Each information return must be made available from the date it is required to be filed (determined without regard to any extensions), or is actually filed, whichever is later. An original return does not have to be made available if more than 3 years have passed from the date the return was required to be filed (including any extensions) or was filed, whichever is later. An amended return does not have to be made available if more than 3 years have passed from the date it was filed.

An annual information return includes an exact copy of the return (Form 990 or 990-EZ and amended return, if any) and all schedules, attachments, and supporting documents filed with the IRS. In the case of a tax-exempt organization other than a private foundation, the names and addresses of contributors to the organization need not be disclosed, and Schedule B has been redacted accordingly.

For returns filed by Section 501(c)(3) organizations after August 17, 2006, Form 990-T must also be made available for public inspection. However, only those schedules, statements, and attachments to Form 990-T that relate to the imposition of the unrelated business income tax must be made available for public inspection.

This copy of the return is provided only for Public Disclosure purposes. Any confidential information regarding donors, and schedules or attachments to Form 990-T that do not relate to the calculation of unrelated business income tax, have been removed.

EXTENDED TO MARCH 15, 2023

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2021

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the **2021** calendar year, or tax year beginning **MAY 1, 2021** and ending **APR 30, 2022**

B Check if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending	C Name of organization NATIONAL MUSEUM OF WILDLIFE ART OF THE UNITED STATES Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite P.O. BOX 6825 City or town, state or province, country, and ZIP or foreign postal code JACKSON, WY 83002-6825	D Employer identification number 74-2431071
	F Name and address of principal officer: STEVE SEAMONS P.O. BOX 6825, JACKSON, WY 83002-6825	E Telephone number (307) 733-5771
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	G Gross receipts \$ 13,256,185.
	J Website: WWW.WILDLIFEART.ORG	H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? Yes No If "No," attach a list. See instructions
	K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other ▶	H(c) Group exemption number ▶
	L Year of formation: 1986	M State of legal domicile: WY

Part I Summary

	1	Briefly describe the organization's mission or most significant activities: IMPART KNOWLEDGE AND APPRECIATION OF HUMANITY'S RELATIONSHIP WITH WILDLIFE THROUGH ART.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)	3	22
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	22
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	43
	6	Total number of volunteers (estimate if necessary)	6	60
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
	Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year
9		Program service revenue (Part VIII, line 2g)	3,096,599.	2,817,753.
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	494,778.	969,909.
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,005,373.	770,811.
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-19,573.	79,530.
			4,577,177.	4,638,003.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,958,639.	2,183,015.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	32,358.	45,910.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 537,615.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,158,411.	2,710,991.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,149,408.	4,939,916.
	19	Revenue less expenses. Subtract line 18 from line 12	427,769.	-301,913.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	44,306,250.	41,741,861.
	22	Net assets or fund balances. Subtract line 21 from line 20	684,743.	264,065.
			43,621,507.	41,477,796.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer STEVE SEAMONS, MUSEUM DIRECTOR Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name DORI J. EGGETT	Preparer's signature
	Firm's name ▶ PLANTE & MORAN, PLLC	Date 01/30/23
	Firm's address ▶ 8181 E TUFTS AVE, SUITE 600 DENVER, CO 80237-2579	Check if self-employed <input type="checkbox"/> PTIN P00645252
		Firm's EIN ▶ 38-1357951 Phone no. 303-740-9400

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
SEE SCHEDULE O.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses \$ 280,925. including grants of \$ _____) (Revenue \$ 834,675.)
MUSEUM MEMBERSHIP - SEE SCHEDULE O

4b (Code: _____) (Expenses \$ 2,112,366. including grants of \$ _____) (Revenue \$ 103,322.)
2020-2021 EXHIBITS - SEE SCHEDULE O

4c (Code: _____) (Expenses \$ 579,957. including grants of \$ _____) (Revenue \$ 7,273.)
EDUCATION PROGRAMS FOR CHILDREN - SEE SCHEDULE O

4d Other program services (Describe on Schedule O.)
(Expenses \$ 376,284. including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses **▶** 3,349,532.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
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? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	X	
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
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 Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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 foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
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? <i>If "Yes," complete Schedule J</i>		X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 43		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b		X
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 unrelated business gross income of \$1,000 or more during the year? 3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a		X
b	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).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? ... 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966? 9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12 10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders 11a		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? 13a		
Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b		
c	Enter the amount of reserves on hand 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year? 14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15		X
If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16		X
If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17		
If "Yes," complete Form 6069.			

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
1b	Enter the number of voting members included on line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on 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?		X
16b	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 (1024 or 1024-A, 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 on Schedule O)
- 19** Describe on 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 **LISA HOLMES - (307) 733-5771**
P.O. BOX 6825, JACKSON, WY 83002-6825

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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.
- See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) STEVEN SEAMONS MUSEUM DIRECTOR	50.00			X			166,281.	0.	6,651.	
(2) MIKE HOPHIENS DIRECTOR OF OPERATIONS	40.00				X		120,732.	0.	23,220.	
(3) PONTEIR SACKREY DIRECTOR OF ADVANCEMENT	40.00				X		123,289.	0.	17,373.	
(4) JANE LAVINO CURATOR OF EDUCATION	40.00				X		101,587.	0.	18,719.	
(5) LISA HOLMES CHIEF FINANCIAL OFFICER	40.00				X		102,692.	0.	8,974.	
(6) RICHARD BECK CHAIRMAN	20.00	X		X			0.	0.	0.	
(7) LAURENT ROUX VICE CHAIRMAN	10.00	X		X			0.	0.	0.	
(8) WILLIAM KERR CHAIRMAN EMERITUS	10.00	X		X			0.	0.	0.	
(9) NADA JAIN TREASURER	10.00	X		X			0.	0.	0.	
(10) LINDY SAYERS SECRETARY	10.00	X		X			0.	0.	0.	
(11) JAN BENZ TRUSTEE	3.00	X					0.	0.	0.	
(12) TASSO COIN TRUSTEE	3.00	X					0.	0.	0.	
(13) SUE SIMPSON GALLAGHER TRUSTEE	5.00	X					0.	0.	0.	
(14) JIM GERSACK TRUSTEE	3.00	X					0.	0.	0.	
(15) GIGI HALLORAN TRUSTEE	3.00	X					0.	0.	0.	
(16) MARY JANE HUNT TRUSTEE	3.00	X					0.	0.	0.	
(17) DES JENNINGS TRUSTEE	3.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) LISA JENNINGS TRUSTEE	3.00	X						0.	0.	0.
(19) AVI KANTOR TRUSTEE	3.00	X						0.	0.	0.
(20) SCOTT KIRKPATRICK TRUSTEE	3.00	X						0.	0.	0.
(21) CAROL LINTON TRUSTEE	3.00	X						0.	0.	0.
(22) ADRIENNE MARS TRUSTEE	3.00	X						0.	0.	0.
(23) PAM NINER TRUSTEE	3.00	X						0.	0.	0.
(24) PETER SAFIR TRUSTEE	3.00	X						0.	0.	0.
(25) CHARLOTTE STIFEL TRUSTEE	3.00	X						0.	0.	0.
(26) MARCIA TAYLOR TRUSTEE	3.00	X						0.	0.	0.
1b Subtotal								614,581.	0.	74,937.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								614,581.	0.	74,937.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 5

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ACM WYOMING LLC 4245 FALLEN LEAF, JACKSON, WY 83001	REMODELING THE MUSEUM SHOP	325,244.
HJH ART ADVISORY LLC P.O. BOX 4731, JACKSON, WY 83001	RESEARCH AND CREATE A CATALOG	212,397.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 2

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	459,212.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	2,358,541.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 93,418.				
	h Total. Add lines 1a-1f			2,817,753.			
Program Service Revenue	2 a ADMISSIONS	Business Code					
		611600	645,774.	645,774.			
	b MEMBERSHIP DUES	611600	219,273.	219,273.			
	c PROGRAM TICKETS	611600	65,822.	65,822.			
	d EXHIBIT FEES	611600	37,500.	37,500.			
	e EDUCATIONAL PROGRAMS	611600	1,540.	1,540.			
	f All other program service revenue						
g Total. Add lines 2a-2f			969,909.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		702,681.			702,681.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
			190,026.				
	b Less: rental expenses ...	6b	95,006.				
	c Rental income or (loss)	6c	95,020.				
	d Net rental income or (loss)			95,020.		95,020.	
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
			7,716,570.	2,202.			
	b Less: cost or other basis and sales expenses	7b	7,650,642.	0.			
	c Gain or (loss)	7c	65,928.	2,202.			
d Net gain or (loss)			68,130.		68,130.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a		25,645.				
		b Less: direct expenses	8b	16,496.			
		c Net income or (loss) from fundraising events			9,149.		9,149.
9 a Gross income from gaming activities. See Part IV, line 19	9a						
		b Less: direct expenses	9b				
		c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	10a		816,853.				
		b Less: cost of goods sold	10b	856,038.			
		c Net income or (loss) from sales of inventory			-39,185.		-39,185.
Miscellaneous Revenue	11 a _____	Business Code					
	b _____						
	c _____						
	d All other revenue		900099	14,546.	14,546.		
	e Total. Add lines 11a-11d			14,546.			
12 Total revenue. See instructions			4,638,003.	945,270.	0.	874,980.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
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, trustees, and key employees	186,452.	74,581.	74,581.	37,290.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,638,509.	957,148.	389,019.	292,342.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	57,539.	32,422.	14,963.	10,154.
9 Other employee benefits	155,438.	81,921.	48,347.	25,170.
10 Payroll taxes	145,077.	78,263.	36,217.	30,597.
11 Fees for services (nonemployees):				
a Management				
b Legal	4,778.	3,625.	1,153.	
c Accounting	35,250.		35,250.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	45,910.			45,910.
f Investment management fees	20,725.			20,725.
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	635,868.	522,902.	102,086.	10,880.
12 Advertising and promotion	92,861.	1,447.	91,414.	
13 Office expenses	204,982.	149,409.	38,714.	16,859.
14 Information technology	72,496.	38,681.	26,188.	7,627.
15 Royalties				
16 Occupancy	122,169.	100,199.	17,337.	4,633.
17 Travel	23,923.	10,980.	10,162.	2,781.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	9,259.	1,328.	4,784.	3,147.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	808,582.	687,295.	121,287.	
23 Insurance	77,879.	68,258.	9,621.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a ACCESSION OF ART	352,150.	352,150.		
b ENTERTAINMENT	80,268.	27,467.	23,301.	29,500.
c WESTERN VISION EXPENSES	77,238.	77,238.		
d LICENSES & FEES	48,259.	47,737.	522.	
e All other expenses	44,304.	36,481.	7,823.	
25 Total functional expenses. Add lines 1 through 24e	4,939,916.	3,349,532.	1,052,769.	537,615.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	4,975.	1	4,947.
	2 Savings and temporary cash investments	3,925,872.	2	3,655,256.
	3 Pledges and grants receivable, net	1,799,601.	3	1,365,553.
	4 Accounts receivable, net		4	750.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	106,926.	8	127,241.
	9 Prepaid expenses and deferred charges	20,957.	9	8,936.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 23,219,339.		
	b Less: accumulated depreciation	10b 12,511,205.	10,917,924.	10c 10,708,134.
	11 Investments - publicly traded securities	25,204,592.	11	23,512,093.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	2,325,403.	15	2,358,951.
16 Total assets. Add lines 1 through 15 (must equal line 33)	44,306,250.	16	41,741,861.	
Liabilities	17 Accounts payable and accrued expenses	225,531.	17	264,065.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	459,212.	25	0.
	26 Total liabilities. Add lines 17 through 25	684,743.	26	264,065.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	16,450,164.	27	16,040,034.
	28 Net assets with donor restrictions	27,171,343.	28	25,437,762.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	43,621,507.	32	41,477,796.
33 Total liabilities and net assets/fund balances	44,306,250.	33	41,741,861.	

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Part 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	4,638,003.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,939,916.
3	Revenue less expenses. Subtract line 2 from line 1	3	-301,913.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	43,621,507.
5	Net unrealized gains (losses) on investments	5	-1,875,346.
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 on Schedule O)	9	33,548.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	41,477,796.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed 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?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2021)

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	9,907,241.	3,858,598.	6,357,723.	3,096,599.	2,817,753.	26,037,914.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	9,907,241.	3,858,598.	6,357,723.	3,096,599.	2,817,753.	26,037,914.
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 amount shown on line 11, column (f)						10,583,329.
6 Public support. Subtract line 5 from line 4.						15,454,585.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	9,907,241.	3,858,598.	6,357,723.	3,096,599.	2,817,753.	26,037,914.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	677,823.	562,318.	893,367.	508,198.	892,707.	3,534,413.
9 Net income from unrelated business activities, whether or not the business is regularly carried on		26,524.	9,839.	10,031.	9,149.	55,543.
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						29,627,870.
12 Gross receipts from related activities, etc. (see instructions)					12	8,182,777.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	52.16	%
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	51.97	%
16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

Schedule A (Form 990) 2021

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
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 businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c 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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

Section 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section 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 year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a 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? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.**
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries 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	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section 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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	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 (<i>explain in detail in Part VI</i>):		
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 0.015 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 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2021

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2021		
a	From 2016		
b	From 2017		
c	From 2018		
d	From 2019		
e	From 2020		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2021 distributable amount		
i	Carryover from 2016 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2021 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2021 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2022. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2017		
b	Excess from 2018		
c	Excess from 2019		
d	Excess from 2020		
e	Excess from 2021		

Schedule A (Form 990) 2021

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990 or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Name of the organization

NATIONAL MUSEUM OF WILDLIFE ART
OF THE UNITED STATES

Employer identification number

74-2431071

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization NATIONAL MUSEUM OF WILDLIFE ART OF THE UNITED STATES	Employer identification number 74-2431071
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	_____ _____ _____	\$ 459,212.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
2	_____ _____ _____	\$ 282,600.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
3	_____ _____ _____	\$ 243,032.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
4	_____ _____ _____	\$ 113,240.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
5	_____ _____ _____	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
6	_____ _____ _____	\$ 93,324.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization NATIONAL MUSEUM OF WILDLIFE ART OF THE UNITED STATES	Employer identification number 74-2431071
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ 72,150.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization NATIONAL MUSEUM OF WILDLIFE ART OF THE UNITED STATES	Employer identification number 74-2431071
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization NATIONAL MUSEUM OF WILDLIFE ART OF THE UNITED STATES	Employer identification number 74-2431071
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization NATIONAL MUSEUM OF WILDLIFE ART OF THE UNITED STATES Employer identification number 74-2431071

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two Yes/No questions about donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form with multiple sections: 1. Purpose(s) of conservation easements (check all that apply); 2. Complete lines 2a through 2d if the organization held a qualified conservation contribution; 3-7. Monitoring and enforcement details; 8-9. Reporting requirements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form with sections 1a-1b and 2. 1a: Text of footnote for public exhibition. 1b: Amounts relating to art collections. 2: Amounts required to be reported under FASB ASC 958.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange program
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	26,893,590.	22,173,562.	22,468,163.	20,479,973.	13,447,192.
b Contributions	282,600.	653,800.	1,004,105.	1,600,000.	6,500,000.
c Net investment earnings, gains, and losses	-1,043,073.	4,901,228.	-564,706.	868,190.	832,781.
d Grants or scholarships					
e Other expenditures for facilities and programs	840,000.	835,000.	734,000.	480,000.	300,000.
f Administrative expenses					
g End of year balance	25,293,117.	26,893,590.	22,173,562.	22,468,163.	20,479,973.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 13.3060 %
- b Permanent endowment 76.3090 %
- c Term endowment 10.3850 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) Unrelated organizations
- (ii) Related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		509,930.		509,930.
b Buildings		9,904,498.	5,508,445.	4,396,053.
c Leasehold improvements		11,293,940.	6,025,739.	5,268,201.
d Equipment		1,435,417.	944,336.	491,081.
e Other		75,554.	32,685.	42,869.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				10,708,134.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market 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.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) BENEFICIAL INTEREST IN TRUST	2,358,951.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	2,358,951.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. 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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	3,787,815.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-1,875,346.	
b	Donated services and use of facilities	2b	24,070.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	1,001,088.	
e	Add lines 2a through 2d		2e	-850,188.
3	Subtract line 2e from line 1		3	4,638,003.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	4,638,003.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	5,931,526.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	24,070.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	967,540.	
e	Add lines 2a through 2d		2e	991,610.
3	Subtract line 2e from line 1		3	4,939,916.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	4,939,916.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 1A:

IN CONFORMITY WITH THE PRACTICE FOLLOWED BY MANY MUSEUMS, THE MUSEUM'S ART

COLLECTION, WHICH HAS BEEN ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS

SINCE INCEPTION, IS NOT RECOGNIZED AS AN ASSET ON THE STATEMENT OF

FINANCIAL POSITION. PROCEEDS FROM THE SALES OF COLLECTION ITEMS ARE USED

TO ACQUIRE OTHER ITEMS FOR THE COLLECTION.

STEWARDSHIP POLICIES INCLUDE WRITTEN PROCEDURES FOR ACCESSION OF ART,

DEACCESSION OF ART, ART ON LOAN TO THE MUSEUM, AND ART ON LOAN FROM THE

MUSEUM. THE POLICIES ALSO INCLUDE PROCEDURES FOR THE CARE OF THE

COLLECTION, SUCH AS PRESERVATION, SAFETY AND SECURITY, INSTALLATION, AND

PACKAGING AND SHIPPING. THE POLICIES DETAIL THE PROCEDURES FOR

Part XIII Supplemental Information (continued)

INVENTORYING THE COLLECTION, INCLUDING LABELING, MONITORING, RECORDKEEPING
AND RECORD RECONCILIATION, ACCESS REPRODUCTION, AND INSURANCE. THE MUSEUM
TRACKS THE COLLECTION AT ORIGINAL PURCHASED OR DONATED VALUE AND USES A
MUTUALLY AGREED-UPON VALUE FOR LOANED ITEMS AS A WHOLE FOR PURPOSES OF
ADEQUATE INSURANCE COVERAGE. IN ADDITION, THE MUSEUM'S FACILITY IS
SPECIFICALLY DESIGNED TO PROTECT THE COLLECTION FROM DAMAGE.

PART III, LINE 4:

THE MUSEUM'S COLLECTION CONTAINS OVER 5000 CATALOGUES ITEMS INCLUDING
PAINTINGS, SCULPTURES, PRINTS, SKETCHES, AND ARCHIVAL MATERIAL RELATED TO
WILDLIFE AND HUMANITY'S RELATIONSHIP WITH NATURE. THE COLLECTION IS USED
TO EDUCATE EVERYONE FROM GENERAL MUSEUM VISITORS TO RESEARCHERS INTERESTED
IN SPECIFIC TOPICS RELATED TO WILDLIFE AND NATURE.

PART III, LINE 5: THE MUSEUM DID SOLICIT GIFTS FOR ARTWORK TO BE SOLD. THE
SOLICITATIONS WERE MADE ONLY TO ARTISTS FOR DONATIONS OF THEIR OWN
ARTWORK.

PART V, LINE 4:

THE MUSEUM HAS AN ENDOWMENT PORTFOLIO WHOSE PRIMARY OBJECTIVE IS TO
PROVIDE A LONG-TERM SOURCE OF INCOME (DEFINED AS APPRECIATION AND/OR
INCOME) TO BE DISTRIBUTED ANNUALLY IN SUPPORT OF THE MUSEUM'S MISSION AND
GOALS. AS A SECONDARY OBJECTIVE, THE MUSEUM'S ENDOWMENT ASSETS AND/OR
RESERVE FUNDS. AS REQUIRED BY ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN
THE UNITED STATES OF AMERICA, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS,
INCLUDING FUNDS DESIGNATED BY THE BOARD OF TRUSTEES (THE "BOARD") TO
FUNCTION AS ENDOWMENTS, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE
OR ABSENCE OF DONOR IMPOSED RESTRICTIONS.

Part XIII Supplemental Information (continued)

PART X, LINE 2:

THE MUSEUM IS A NOT-FOR-PROFIT CORPORATION AND IS EXEMPT FROM TAX UNDER
THE PROVISIONS OF INTERNAL REVENUE CODE SECTION 501(C)(3). THE MUSEUM ALSO
HAS BEEN DETERMINED NOT TO BE A PRIVATE FOUNDATION UNDER SECTION 509(A)(1)
OF THE IRC, BUT IT IS A PUBLIC CHARITY. ACCOUNTING PRINCIPLES GENERALLY
ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE MANAGEMENT TO EVALUATE
TAX POSITIONS TAKEN BY THE MUSEUM AND RECOGNIZE A TAX LIABILITY IF THE
MUSEUM HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT
BE SUSTAINED UPON EXAMINATION BY THE IRS OR OTHER APPLICABLE TAXING
AUTHORITIES. MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN BY THE MUSEUM
AND HAS CONCLUDED THAT, AS OF APRIL 30, 2022, THERE ARE NO UNCERTAIN
POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF
A LIABILITY OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES	95,006.
SPECIAL EVENT EXPENSES	16,496.
COST OF GOODS SOLD	856,038.
CHANGE IN NPV OF SPLIT-INTEREST INVESTMENT	33,548.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	1,001,088.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD	856,038.
RENTAL EXPENSES	95,006.
SPECIAL EVENT EXPENSES	16,496.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	967,540.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
		PLEIN AIR FESTIVAL (event type)	(event type)	(total number)	
Revenue	1 Gross receipts	25,645.			25,645.
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	25,645.			25,645.
Direct Expenses	4 Cash prizes	12,823.			12,823.
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	654.			654.
	8 Entertainment	1,150.			1,150.
	9 Other direct expenses	1,869.			1,869.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				16,496.
11 Net income summary. Subtract line 10 from line 3, column (d)				9,149.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
7 Direct expense summary. Add lines 2 through 5 in column (d)					
8 Net gaming income summary. Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: MARGARET CREEL

(I) ADDRESS OF FUNDRAISER: 1680 QUARTERHORSE DRIVE, JACKSON, WY 83001

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2021

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization **NATIONAL MUSEUM OF WILDLIFE ART OF THE UNITED STATES** Employer identification number **74-2431071**

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2021

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) STEVEN SEAMONS MUSEUM DIRECTOR	(i)	166,281.	0.	0.	6,651.	0.	172,932.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization **NATIONAL MUSEUM OF WILDLIFE ART OF THE UNITED STATES** Employer identification number **74-2431071**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art	X	19		DONOR ESTIMATE
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications	X			DONOR ESTIMATE
5 Clothing and household goods	X			DONOR ESTIMATE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	5	75,788.	AVG HI/LOW FOR DATE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	4	7,300.	DONOR ESTIMATE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (OTHER: FLORA)	X	1	4,502.	DONOR ESTIMATES
26 Other (OTHER: FLAT F)	X	1	3,400.	DONOR ESTIMATES
27 Other (OTHER: DONAT)	X	1	1,320.	DONOR ESTIMATES
28 Other (OTHER: DONATE)	X	1	785.	DONOR ESTIMATES

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

PART I, OTHER TYPES OF PROPERTY:

OTHER: CONTRIBUTIONS

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII § 323.

(D) METHOD OF DETERMINING REVENUE: DONOR ESTIMATES

SCHEDULE M, LINE 32B:

THIRD PARTY - UBS & MERRILL LYNCH RECEIVES OUR STOCK DONATIONS INTO OUR ACCOUNT AND SELLS THEM UPON NOTIFICATION FROM AUTHORIZED STAFF.

SCHEDULE M, LINE 33:

DONATED ART IS FOR THE PUBLIC EXHIBIT, RESEARCH AND PRESERVATION AND NOT REPORTED AS REVENUE UNDER SFAS 116.

**SCHEDULE O
(Form 990)**

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 Form 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization	NATIONAL MUSEUM OF WILDLIFE ART OF THE UNITED STATES	Employer identification number	74-2431071
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FORM 990, PART III, LINE 1

THE MISSION OF THE NATIONAL MUSEUM OF WILDLIFE ART IS TO IMPART

KNOWLEDGE AND INSPIRE APPRECIATION OF HUMANITY'S RELATIONSHIP WITH

WILDLIFE AND NATURE THROUGH ART AND EDUCATION.

FORM 990, PART III, LINE 4A

MUSEUM MEMBERSHIP WAS 1,088 AND ANNUAL VISITATION WAS APPROXIMATELY

69,525. THE MUSEUM'S ART COLLECTION CONSISTS OF ALMOST 5,000 CATALOGUED

WORKS BY APPROXIMATELY 600 ARTISTS. THE WORK OF THESE ARTISTS

REPRESENTS HISTORIC IMAGES AND STYLES WHICH HAVE SHAPED PUBLIC

PERCEPTION OF WILDERNESS, WILDLIFE AND THE AMERICAN WEST. ARTISTS

REPRESENTED INCLUDE CARL RUNGIUS, GEORGE CATLIN, ARTHUR FITZWILLIAM

TAIT, C.M. RUSSELL, ALBERT BIERSTADT, CONRAD SCHWIERING, JOHN CLYMER,

BOB KUHN, JOHN JAMES AUDUBON AND GEORGIA O'KEEFE. CAPITALIZING ON THE

MUSEUM'S SETTING NEAR THE BIG GAME HABITATS OF GRAND TETON AND

YELLOWSTONE NATIONAL PARKS, THE NMWA COLLECTION IS UTILIZED IN A

VARIETY OF EDUCATIONAL PROGRAMS. OVER 47 VOLUNTEERS, RANGING IN AGE

FROM TEENS TO SENIOR CITIZENS, ASSIST THE MUSEUM STAFF IN ALL FACETS OF

THE MUSEUM'S OPERATION. THE "FIRST SUNDAYS" PROGRAM OFFERS FREE

ADMISSION TO LOCALS ON THE FIRST SUNDAY OF EVERY MONTH. DURING THE

WINTER MONTHS, A FREE COMMUNITY PERFORMANCE SERIES IS OFFERED ON THESE

DAYS, AS WELL AS HANDS-ON ART PROJECTS FOR CHILDREN IN THE MUSEUM

CLASSROOMS.

Name of the organization NATIONAL MUSEUM OF WILDLIFE ART OF THE UNITED STATES	Employer identification number 74-2431071
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FORM 990, PART III, LINE 4B

UN/NATURAL SELECTIONS: WILDLIFE IN CONTEMPORARY ART

MAY 22 AUGUST 22, 2021

VALUED SPECIES: ANIMALS IN THE ART OF ANDY WARHOL AND AI WEIWEI

JUNE 5 OCTOBER 3, 2021

WESTERN VISIONS

SEPTEMBER 10 OCTOBER 3, 2021

NATIONAL GEOGRAPHIC: 50 GREATEST ANIMAL PHOTOS

NOVEMBER 6, 2021 APRIL 24, 2022

WHILE THEY'RE SLEEPING: A STORY OF BEARS

OCTOBER 23, 2021 MAY 15, 2022

NMWA OPENED THE 2021 SEASON WITH UN/NATURAL SELECTIONS: WILDLIFE IN

CONTEMPORARY ART, DRAWN ENTIRELY FROM THE MUSEUM'S PERMANENT

COLLECTION. THERE ARE APPROXIMATELY 50 ARTWORKS IN THE EXHIBIT. WE

PREMIERED THIS EXHIBIT AS THE FIRST STOP ON A TRAVELING SHOW THAT WILL

TOUR ACROSS THE COUNTRY, WITH ONGOING SUPPORT FROM ART BRIDGES. THE

TOUR DID NOT BEGIN DIRECTLY AFTER THE EXHIBIT CLOSED IN AUGUST OF 2021

DUE TO THE SCHEDULE CHANGES BECAUSE OF COVID RESTRICTIONS. WE HAD TO

REBOOK THE TOUR AND THE 5 STOPS AFTER WILL BEGIN IN SEPTEMBER OF 2022,

WITH THE FIRST TOUR STOP BEING AT THE WHATCOM MUSEUM IN BELLINGHAM, WA.

WE HAVE PARTNERED WITH ART BRIDGES FOR THIS TOUR AND THEY ARE

SUPPORTING THE TRAVELING COSTS, WHICH HAVE GONE UP EXPONENTIALLY SINCE

COVID AND BECAUSE OF THE RISING COST OF EVERYTHING. WE ARE ASSURED THAT

Name of the organization NATIONAL MUSEUM OF WILDLIFE ART OF THE UNITED STATES	Employer identification number 74-2431071
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OUR TRAVELING COSTS WILL BE COVERED BY ART BRIDGES AND BECAUSE OF OUR AGREEMENT WE ARE ONLY CHARGING \$5,000 FOR THE RENTAL OF THE SHOW. THIS IS AN EXCELLENT WAY TO HAVE OUR NAME RECOGNIZED, WORK WITH OTHER INSTITUTIONS ACROSS THE COUNTRY, AND PARTNER WITH THE ART BRIDGES FOUNDATION. ART BRIDGES ALSO SUPPLIED US WITH COVID SUPPORT OF OVER \$60,000 AND THEY PROVIDED US WITH \$17,500 FOR DEVELOPMENT OF THE EXHIBIT. WE ALSO CREATED A CATALOGUE THAT WAS NOT COVERED BY ART BRIDGES. THE CATALOGUE HIGHLIGHTS SOME OF THE NEWER ARTWORKS IN OUR COLLECTION AS A COMPLIMENT TO ADAM HARRIS' BOOK, WILDLIFE IN AMERICAN ART.

WE ALSO OPENED VALUED SPECIES: ANIMALS IN THE ART OF ANDY WARHOL AND AI WEIWEI IN JUNE. WE RENTED THE AI WEIWEI LEGO ZODIAC SERIES TO ADD IN COMBINATION WITH THE ANDY WARHOL ENDANGERED SPECIES SERIES THAT WE HAVE IN OUR PERMANENT COLLECTION. SINCE BOTH ARTISTS ARE SO WELL KNOWN, THE EXHIBIT WAS WIDELY POPULAR WITH TOURISTS AND COMMUNITY MEMBERS. WE WERE ABLE TO KEEP THE RENTAL PIECES INTO OCTOBER SINCE WESTERN VISIONS WOULD ONLY BE IN THE BISON AND CHANGING VISIONS GALLERIES. THIS HELPED TO PULL VISITORS INTO THE MUSEUM DURING WESTERN VISIONS. WE ALSO PURCHASED ONE OF THE AI WEIWEI PIECES, THE TIGER, THROUGH COLLECTORS CIRCLE. IT WILL BE PLACED IN THE PERMANENT GALLERIES.

WESTERN VISIONS SALE AND EXHIBIT OPENED IN SEPTEMBER AND WITH RESPECT TO PROTOCOL ASSOCIATED WITH COVID WE HAD A LIMITED NUMBER OF GUESTS. THIS WAS TO HELP PREVENT LARGE NUMBERS OF PEOPLE FROM GATHERING IN SPACES IN OBSERVANCE OF SOCIAL DISTANCING PROTOCOLS SET BY THE TOWN OF JACKSON.

Name of the organization NATIONAL MUSEUM OF WILDLIFE ART OF THE UNITED STATES	Employer identification number 74-2431071
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WE HAVE BEEN WORKING WITH NATIONAL GEOGRAPHIC ON A SHARED TOURING SHOW

TITLED WOLVES: PHOTOGRAPHY BY RONAN DONOVAN, WHICH WAS SCHEDULED FOR

OPENING IN FALL OF 2021; HOWEVER, DUE TO COVID, WOLVES WAS POSTPONED

UNTIL FALL OF 2022. THEREFORE, WE NEEDED AN EXHIBITION TO REPLACE

WOLVES FOR THIS FALL, AND WE HAD ALREADY CONSIDERED THE EXHIBIT TITLED

50 GREATEST ANIMAL PHOTOS. SINCE THIS EXHIBIT WAS AVAILABLE NAT GEO WAS

ABLE TO RENT THIS EXHIBIT TO US QUICKLY AND IT WAS GREATLY APPRECIATED

BY OUR PATRONS. BECAUSE WE DO NOT COLLECT PHOTOGRAPHY AND DO NOT

REGULARLY FEATURE PHOTOGRAPHY, THE PHOTOGRAPHY SHOWS ARE ALWAYS

POPULAR. OVER FOUR HUNDRED PEOPLE ATTENDED THE OPENING EVENT AND WE

RECEIVED WONDERFUL FEEDBACK ON THE EXHIBITION.

THE IDEA FOR WHILE THEY'RE SLEEPING: A STORY OF BEARS CAME FROM THE

SUGGESTION OF A BOARD MEMBER TO DO AN EXHIBITION ABOUT JACKSON'S

FAVORITE GRIZZLY 399. I HAD SCHEDULED ANOTHER INSTALLMENT OF LIVING

LEGENDS, WHICH IS PUT TOGETHER FROM OUR PERMANENT COLLECTION. HOWEVER,

I WAS HOPING TO CHANGE THIS UP SINCE WE WERE COMING TO THE POINT WHERE

LIVING ARTIST WOULD NEED TO BE REPEATED IN THE EXHIBIT. I PUT FORTH THE

IDEA OF DOING AN EXHIBIT ABOUT BEARS FROM OUR PERMANENT COLLECTION,

HISTORIC AND CONTEMPORARY TO SHOW HOW BEARS HAVE BEEN VIEWED IN ART FOR

A CENTURY AND A HALF. I THEN ADDED THE IDEA THAT WE MIGHT ASK

WELL-KNOWN PHOTOGRAPHER TOM MANGELSON IF HE MIGHT LOAN US A FEW OF HIS

PHOTOGRAPHS OF 399 (SINCE HE IS PROLIFIC WITH HIS BEAR PHOTOGRAPHY) AS

AN ASIDE TO A BEARS EXHIBIT. MAGELSON KINDLY LENT US 7 PHOTOGRAPHS AND

HAD THEM PRINTED. WE ONLY HAD TO PAY FOR SHIPPING FROM THE PRINTERS,

WHICH WAS MINIMAL. THE EXHIBIT IN THE KING GALLERY WAS CREATED ENTIRELY

FROM OUR PERMANENT COLLECTION AND TOM MANGELSON SPOKE AT THE

SNEAK-PEEK, WHICH HELPED WITH ATTENDANCE.

Name of the organization NATIONAL MUSEUM OF WILDLIFE ART OF THE UNITED STATES	Employer identification number 74-2431071
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FORM 990, PART III, LINE 4C

EDUCATIONAL PROGRAMS FOR CHILDREN - NMWA TYPICALLY SERVES CHILDREN THROUGHOUT THE REGION ANNUALLY, RANGING IN AGE FROM PRE-K TO GRADE 12. THIS YEAR WE SERVED 3,926 CHILDREN IN PERSON AND ANOTHER 112 VIA ZOOM DURING THE '21-'22 FISCAL YEAR. THE NUMBERS WERE UP SIGNIFICANTLY OVER LAST YEAR (2,587 CHILDREN) DUE TO THE LIFTING OF COVID RESTRICTIONS FOR LOCAL SCHOOLS. THIS PAST YEAR WE HAVE RESUMED IN-PERSON CONTACTS SIGNIFICANTLY BUT HAVE CONTINUED TO OFFER ON-LINE CLASSES (CHILDREN) AND WEBINARS (ADULTS) SINCE THEY REMAIN POPULAR WITH SOME AUDIENCES. THROUGHOUT THE YEAR WE USE OUR COLLECTION OF FINE ART TO TEACH A WIDE RANGE OF SUBJECT AREAS COMPATIBLE WITH SCHOOL CURRICULA. PROGRAMS FOR PRE-K THROUGH HIGH SCHOOL AGE CHILDREN ARE FREE, OCCUR THROUGHOUT THE YEAR, AND ARE OUTLINED ON OUR WEBSITE:

[HTTPS://WWW.WILDLIFEART.ORG/LEARN/SCHOOL-PROGRAMS/](https://www.wildlifeart.org/learn/school-programs/)

OUR ANNUAL STATE OF THE ART: SCHOOL ART SHOW CONTINUED AS AN ANNUAL ON-SITE EVENT, FEB. 26 2022 MAY 29, 2022. APPROXIMATELY 350 WORKS OF ART BY LOCAL CHILDREN GRADES K-12 WERE EXHIBITED. FOR A FIFTH YEAR, LOCAL JACKSON HOLE HIGH SCHOOL STUDENTS PARTICIPATED IN OUR "STUDENT CURATED EXHIBITION". THE SELECTED THEME THIS YEAR WAS THE INFECTIOUS CULTURE OF WYOMING WILDLIFE. THE STUDENTS' ARTISTIC DEPICTIONS OF BACTERIA AND VIRUSES THAT AFFECT WILDLIFE WERE FABULOUS. STUDENT CURATORS LEARNED THE FUNDAMENTALS OF EXHIBIT CURATION INCLUDING SELECTING A THEME, REQUESTING ARTWORK FROM FELLOW STUDENTS, WRITING LABEL TEXT AND HANGING THE EXHIBIT. FABLES, FEATHERS, AND FUR (FFF), IS OUR PROGRAM FOR PRE-K CHILDREN AND THEIR FAMILIES. WE WERE BACK FULL

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FORCE WITH THIS FRIDAY PROGRAM IN-PERSON. THE PROGRAM INCLUDES AGE APPROPRIATE STORYTELLING AND ART MAKING. LIKewise, WE WERE ABLE TO RESUME IN-PERSON COLLABORATIONS WITH TETON SCIENCE SCHOOL (TSS) DURING THE SCHOOL YEAR TO PROVIDE "ART AND SCIENCE" THEMATIC TOURS, PERFORMANCES AND ART MAKING ACTIVITIES FOR FAMILIES WITH CHILDREN RESUMED ON THE FIRST SUNDAY OF EACH MONTH FROM NOVEMBER THROUGH MARCH. OUTREACH PROGRAMS CONTINUED BOTH IN PERSON AND VIA ONLINE PLATFORMS. OUR ONLINE VIDEO OUTREACH PROGRAM CALLED BISONCAST FOR TEENS THROUGH ADULTS CONTINUED TO PROVIDE REMOTE ACCESS TO THE MUSEUM'S ART COLLECTION AND SURROUNDING ENVIRONMENT. ONE NEW EDUCATIONAL VIDEO (ABOVE THE CLOUDS) WAS PRODUCED DURING THE PAST FISCAL YEAR. THIS EPISODE FEATURED MOUNTAIN GOAT AND BIGHORN SHEEP THEMED ART FROM OUR PERMANENT COLLECTION PAIRED WITH RELEVANT EXPLORATIONS INTO THE GREATER YELLOWSTONE ECOSYSTEM, SPECIFICALLY GRAND TETON NATIONAL PARK. OUR ON-SITE CHILDREN'S GALLERY PROVIDES HANDS-ON INTERACTIVE EXHIBITS FOR CHILDREN. A RANGE OF IN-GALLERY TECHNOLOGY-DRIVEN INTERACTIVES WERE OFFERED INCLUDING A NEW TOUCH-SCREEN INFORMING VISITORS ABOUT ROBERT BATEMAN'S PAINTING PROCESS FOR HIS POPULAR PAINTING OF A BISON, "CHIEF". ANOTHER NEW INTERACTIVE TOUCHSCREEN WAS ADDED TO THE CLYMER STUDIO. VISITORS CAN VIRTUALLY TOUCH AN OBJECT SEEN IN THE STUDIO AND READ ABOUT ITS SIGNIFICANCE.

EDUCATIONAL PROGRAMS FOR ADULTS WE TYPICALLY SERVE APPROXIMATELY 4,000 ADULTS ANNUALLY WITH OUR "SNEAK PEEK" GALLERY TALKS FOR NEW EXHIBITS, OUR FILMS, LECTURES, AND STUDIO CLASSES. WE ALSO HAVE A RICH ROSTER OF COMMUNITY PROGRAMS ON THE OUTDOOR SCULPTURE TRAIL SUCH AS YOGA ON THE TRAIL AND SUMMER WATERCOLOR WORKSHOPS. WE CURRENTLY HAVE SIX FREE MOBILE TOURS AVAILABLE INCLUDING EXPLORING WILDLIFE ART, RUNGIUS

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LETTERS, SAVING A SPECIES, SCULPTURE TRAIL, THROUGH HER EYES, AND THE GREATER YELLOWSTONE BOTANICAL TOUR. FOR THE SECOND YEAR WE CONTINUED OUR ONLINE ART MAKING SERIES FOR TEENS AND ADULTS CALLED MAKE IT WILD. WE HOSTED 4 MAKE IT WILD CLASSES AND 4 COLLABORATIVE WEBINARS HOSTED IN PARTNERSHIP WITH THE YELLOWSTONE TO YUKON CONSERVATION INITIATIVE. TWO NEW AUDIO TOURS WERE ADDED INCLUDING ONE CALLED "THROUGH HER EYES" ABOUT WOMAN ARTISTS IN THE PERMANENT COLLECTION AND "GREATER YELLOWSTONE BOTANICAL TOUR" ABOUT NATIVE PLANTS ALSO ALONG THE OUTDOOR SCULPTURE TRAIL. THE LATER TOUR WAS TRANSLATED INTO SPANISH LANGUAGE. WE RAISED ADULT PROGRAM ATTENDANCE TO 4,539 ANNUALLY (3,310 IN PERSON AND 1,229 VIRTUAL) THIS PAST FISCAL YEAR.

FORM 990, PART III, LINE 4D

THE MUSEUM'S COLLECTION EMBODIES THE BEST EFFORTS OF HISTORIC AND CONTEMPORARY ARTISTS TO DEPICT WILDLIFE, INCLUDING OVER 5,000 CATALOGED ITEMS SPANNING 4,000 YEARS BY APPROXIMATELY 600 ARTISTS. AS A NATIONAL COLLECTION, IT EMPHASIZES PRIME EXAMPLES OF WORK PRODUCED BY ARTISTS FROM THE NATION ITSELF, WITH A REPRESENTATIVE SELECTION OF SUBJECTS, FORMS, STYLES, MATERIALS, AND MEDIA, SPANNING THE DIVERSITY OF THE NATION'S ARTISTS, THEIR ANTECEDENTS, AND THE TIMES AND PLACES IMPORTANT TO THEIR WORK. THE PRIMARY COLLECTING GOAL FOR THE NATIONAL MUSEUM OF WILDLIFE ART IS THE ENHANCEMENT OF THE PERMANENT COLLECTION THROUGH STRATEGIC ACQUISITIONS RANGING FROM MAJOR ARTWORKS TO SUPPLEMENTAL PIECES, WHICH WILL ENHANCE THE OVERALL QUALITY AS WELL AS DIVERSITY OF THE COLLECTION WHILE ADDING THEMATIC DEPTH AND BREADTH.

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FORM 990, PART VI, SECTION A, LINE 1A:

THE EXECUTIVE COMMITTEE CONSISTS OF THE CHAIRMAN, CHAIRMAN EMERITUS,
VICE-CHAIRMAN, TREASURER & FINANCE COMMITTEE CHAIRMAN, DEVELOPMENT
CHAIRMAN, COLLECTIONS COMMITTEE CHAIRMAN, FACILITY & GROUNDS COMMITTEE
CHAIR, COMMUNITY FOCUS COMMITTEE CHAIRMAN, NOMINATING COMMITTEE CHAIRMAN,
AND STRATEGIC PLANNING CHAIRMAN. ALL ARE MEMBERS OF THE BOARD.

THE EXECUTIVE COMMITTEE IS EMPOWERED TO ACT WHEN THE FULL BOARD HAS NOT
CONVENED. IF EITHER THE BOARD DELEGATES AN ITEM TO THE EXECUTIVE COMMITTEE,
OR THE MUSEUM DIRECTOR BRINGS AN ITEM TO THE EXECUTIVE COMMITTEE WHICH
NEEDS ACTION, THEY CAN ACT. IF THEY DO ACT, THE FULL BOARD STILL HEARS THE
ISSUE AND COULD OVERTURN THE EXECUTIVE COMMITTEE, THOUGH THAT IS NOT
ANTICIPATED.

FORM 990, PART VI, SECTION B, LINE 11B:

ALL TRUSTEES ARE PROVIDED WITH A COPY OF THE FORM 990 PRIOR TO FILING. THE
DETAIL REVIEW HAS BEEN DELEGATED BY THE GOVERNING BODY TO THE AUDIT
COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 12C:

AN ANNUAL QUESTIONNAIRE IS SENT TO EACH TRUSTEE. THE CHIEF FINANCIAL
OFFICER REVIEWS THE RESPONSES TO DETERMINE IF ANY CONFLICTS EXIST. NO
CONFLICTS HAVE BEEN NOTED.

FORM 990, PART VI, SECTION B, LINE 15:

PRIOR TO THE CLOSE OF EACH FISCAL YEAR, THE CHAIRMAN AND VICE CHAIRMAN
ASSESS IN WRITING THE PERFORMANCE OF THE MUSEUM DIRECTOR IN LIGHT OF STATED
GOALS AND OBJECTIVES. IN KEEPING WITH THE TERMS AND CONDITIONS OF ANY

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RELEVANT EMPLOYMENT CONTRACT, A RECOMMENDATION IS THEN MADE TO THE EXECUTIVE COMMITTEE REGARDING COMPENSATION FOR THE UPCOMING YEAR, WHICH REVIEWS AND APPROVES THE MUSEUM DIRECTOR'S COMPENSATION.

AN INDEPENDENT SALARY REVIEW IS PERFORMED EVERY THREE YEARS.

THE ORGANIZATION MAINTAINS THE APPROPRIATE DOCUMENTATION OF THE COMPENSATION AGREEMENT.

FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

PROFESSIONAL FEES:

PROGRAM SERVICE EXPENSES	522,902.
MANAGEMENT AND GENERAL EXPENSES	102,086.
FUNDRAISING EXPENSES	10,880.
TOTAL EXPENSES	635,868.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	635,868.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN NPV OF SPLIT-INTEREST INVESTMENT	33,548.
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