** PUBLIC DISCLOSURE COPY **

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

OMB No. 1545-0047

Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.irs.gov/form990.

ZU 14	
Open to Public Inspection	

A F	or the	2014 calendar year, or tax year beginning $$ FEB 1 , $$ 2014 $$ and $$	ending J	AN 31, 2015					
Boa	heck if pplicable:	C Name of organization		D Employer identifi	cation number				
	_Address _change	Portland Museum of Art							
	Name change	Doing business as		01-0378420					
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	E Telephone numbe						
L	Final return/ termin-	7 Congress Square		$\frac{775-6148}{36,409,261}$					
_	ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$						
<u>_</u>	Amende	FOICIANG, MB 04101	H(a) Is this a group return						
L	Application pending	Finally and address of principal officer. Technology		for subordinates					
		same as C above	507	1	ncluded? Yes No				
<u></u>	ax-exe	mpt status: $X = 501(c)(3) = 501(c)(0) $ (insert no.) 4947(a)(1) 0 : \rightarrow www.portlandmuseum.org	or 527	H(c) Group exemption	list. (see instructions)				
		organization: X Corporation Trust Association Other	i Vear		State of legal domicile: ME				
-		Summary	L + Cai	or formation. 2002[1	otate of logar commons, ===				
	1 E	Briefly describe the organization's mission or most significant activities: Muse	um/Edu	cational					
Activities & Governance	' '	shelly describe the organization's mission of most significant activities.							
nar	2 (Check this box if the organization discontinued its operations or dispose	sed of more	e than 25% of its net a	ssets.				
Ş	1			3	39				
Ğ	L	lumber of independent voting members of the governing body (Part VI, line 1b)			39				
S.		otal number of individuals employed in calendar year 2014 (Part V, line 2a)			114				
¥	6 1	otal number of volunteers (estimate if necessary)		6	203				
Ę		otal unrelated business revenue from Part VIII, column (C), line 12			2,861.				
_	bt	let unrelated business taxable income from Form 990-T, line 34			0.				
			<u> </u>	Prior Year	Current Year				
ē	8 (Contributions and grants (Part VIII, line 1h)		2,765,487.	5,653,631.				
ē		Program service revenue (Part VIII, line 2g)		830,618.	702,112.				
Revenue	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		1,422,604.					
_	I .	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-61,454.	-39,540.				
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,957,255.					
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
	1	Benefits paid to or for members (Part IX, column (A), line 4)		3,068,087.					
Expenses	15 5	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		10,475.	3,003,300.				
Dec	100 1	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 1,084,4	82	10,473.	0.				
Ä	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,366,528.	3,056,720.				
		Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		6,445,090.					
		Revenue less expenses. Subtract line 18 from line 12		-1,487,835.					
o Ses	3	tovortae 1000 experience. Cabitaet inte 10 nont into 12		eginning of Current Year					
Net Assets	20	Total assets (Part X, line 16)		47,240,524.					
ASS	21]	Total liabilities (Part X, line 26)	_	723,290.	1,542,980.				
Ne.	22 1	Net assets or fund balances. Subtract line 21 from line 20		46,517,234.	48,454,268.				
P	art II	Signature Block							
Und	ler penal	ties of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	nents, and to the best of m	ny knowledge and belief, it is				
true	, correct	, and complete. Declaration of preparer (other than officer) is based on all information of wi	hich prepareı	r has any knowledge.					
		Signature of officer			9-15				
Sig		,		Date					
He	re	Anna H. Wells, President Type or print name and title							
				Date Check	II DTIN				
Pai	,	Print/Type preparer's name Barbara J. McGuan, CPA Barbara J. McGu		I SHOOK L	PTIN				
	- F	Barbara J. McGuan, CPA Barbara J. McGu Firm's name Derry Dunn McNeil & Parker, LLC		06/04/15 self-emplo	P00219457 01-0523282				
	Only	Firm's address P.O. Box 1100		Firm's EIN	01-0272787				
550	,	Portland, ME 04104-1100		Phone no. (2	207) 775-2387				
Ma	v the ID	S discuss this return with the preparer shown above? (see instructions)		Filolie IIo. (2					
ivia	, ui c ii	C discuss this return with the preparer shown above? (see instructions)			X Yes No				

Pa	rt 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: The Portland Museum of Art (PMA) strives to enrich the lives of	f people
	through acquisition, preservation, and interpretation of the vi	isual
	arts and the museum's architecturally significant buildings.	
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 X 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 X No
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 exercise, if any, for each program service reported.	
42	(Code:) (Expenses \$ 839,571 • including grants of \$) (Revenue \$	188,479.)
-14	Educational Programs: Create outstanding educational programs	and
	collection-based activities to inspire and enrich the lives of audiences and serve as a vital cultural center for the city and	
	(46,146 participants in 2014).	region
	(40,140 participants in 2014).	
4b	(Code:) (Expenses \$ 3,130,328 • including grants of \$) (Revenue \$	513,633.)
710	Exhibitions and Collections: Originate outstanding exhibitions	from
	PMA's permanent collection and through borrowed works of art.	Present
		Preserve,
	document, and interpret eighteen-thousand objects in the collect	ction and
	five architectural landmarks (132,886 visitors in 2014).	
	406 500	
4c	(Code:) (Expenses \$ 496,500. including grants of \$))
	collections in 2014, providing new opportunities for visitors a	and the
	community to experience original work.	and the
	Community to experience original work:	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 4,466,399.	
		Form 990 (2014)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		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? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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? If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	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?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			,,
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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	446		х
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		
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? If "Yes," complete Schedule F, Parts II and IV	45		х
16		15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		<u> </u>
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	-17		
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		
13	complete Schedule G, Part III	19		х
20a		20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u></u> -
	1 30 to mile 200, and the organization attach a copy of ite addition infancial statements to this return:		990	(0044)

Part IV Checklist of Required Schedules (continued)

			Yes	No
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? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			\ _{3,7}
	Schedule K. If "No", go to line 25a	24a		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		x
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		22
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Cohodula I. David	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	230		
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			37
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		- v	
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form **990** (2014)

Form 990 (2014) Portland Museum of Art 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				X
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	28			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming				
	(gambling) winnings to prize winners?	<u>L</u>	1c	X	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return 2a 1	14			
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)				
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<u>L</u> 3	3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	<u>L</u> 3	3b		X
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)?	<u>L</u>	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).				
	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?	<u>L</u> t	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	L	5с		
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?	<u>L</u> e	6a	Х	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts				
	were not tax deductible?	<u>L</u> e	6b	X	
7	Organizations that may receive deductible contributions under section 170(c).				
			7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<u> 7</u>	7b	X	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required				77
	to file Form 8282?	🛂	7с		X
	If "Yes," indicate the number of Forms 8282 filed during the year	┥.	_		v
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	3 , 3 , 1 , 1 ,	⊢	7f		
			7g		
	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. Did the opensoring organization make any tayable distributions under costion 40662		0-		
	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9a 9b		
10	Section 501(c)(7) organizations. Enter:	···· 📑	90		
	Initiation fees and capital contributions included on Part VIII, line 12				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	$-\parallel$			
11	Section 501(c)(12) organizations. Enter:	-			
	Gross income from members or shareholders 11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against	-			
	amounts due or received from them.)				
I2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	1	l2a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	Is the organization licensed to issue qualified health plans in more than one state?	1	За		
	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				
С	Enter the amount of reserves on hand 13c				
	Did the organization receive any payments for indoor tanning services during the tax year?	1	l4a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	1	4b		
			Form	990	(2014)

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 in Schedule O. See instructions.

Tall Enter the number of voting members of the governing body at the end of the tax year 1a 3.9		Check if Schedule O contains a response or note to any line in this Part VI			X
to the ten number of voting members of the governing body of the flav year if there are market difference is voting rights among members of the governing body, of the governing body delegated tread authority to an executive committee or similar committee, explain in Schedule 0. b Center the number of voting members included in line 1a, above, who are independent of the governing to the property of the propert	Sec				
there are matrial differences in voting rights among members of the governing body, of if the governing body delegated troad authority to an executive committee or similar committee, explain in Schedule 0. b Ernet the number of voting members included in 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 employees to a management company or other person? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X 5 Did the organization have members as to stockholders? 7 Did the organization have members as to stockholders? 7 Did the organization have members as to stockholders? 8 Did the organization have members as to stockholders? 9 Did the organization have members as to stockholders? 10 Did the organization have members as to stockholders? 11 Did the organization have members as to stockholders? 12 Did the organization have members as the prior of the province of the organization have members as the governing body? 13 Did the organization that the governing body? 14 Did the organization that the governing body? 15 Is there any officer, director, trustee, or key employee listed in Fart VII, Section A, who cannot be reached at the organization is making body? 16 Is there any officer, director, trustee, or key employee listed in Fart VII, Section A, who cannot be reached at the organization have written policies and procedures governing the activities of such chapters, stimilates, and branches are consistent with the organization of security the information above the organization have a written policies and procedures governing the activities of such chapters, the form of the or				Yes	No
the there are material differences in voting nights among members of the governing body delegated broad authority to an executive committee or similar committies, explain in Schedule 0. b Enter the number of voting members included in line 1a, above, who are independent 1 b 39 2 Did any officer, director, frustee, or key employee have a family relationship or a business relationship with any other officer, director, frustee, or key employees to a management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 900 was filed? 4 Light the organization have members or stockholders? 5 Did the organization have members or stockholders? 6 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? 5 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 5 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization have members of the powerning body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Each committee with authority to act on behalf of the governing body? 10 Each committee with authority to act on behalf of the governing body? 10 Each comm	1a	Enter the number of voting members of the governing body at the end of the tax year la			
b Enter the number of voting members included in line 1a, above, who are independent 1b 39 2 Did any officer, director, furstee, or key employee have a family relationship or a business relationship with any other officer, director, furstee, or key employees to a management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization have members or stockholders? 5 Did the organization have members or stockholders? 6 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? 5 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 5 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 6 The poverning body? 7 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? 9 Is there any officer, director, furstee, or key employee listed in Part VII. Section A. who cannot be reached at the organization or maining address? If "Yes," further provider the names and addressess in Schedule O 9 X Section B. Policies (This Section B. Paquests information about optices not required by the Internal Revenue Code). 10a Did the organization have local chapters, branches, or affiliates? 10b Did the organization have written policies and procedures governing the activities of such chapters, affiliates, and pranches to ensure their populations. 10a Did the organization have a written organization three s		If there are material differences in voting rights among members of the governing body, or if the governing			
2 Did any officer, director, fustee, or key employee have a family relationship or a business relationship with any other officer, director, fustee, or key employees to a management duties customanly performed by or under the direct supervision of officers, directors, or fustees, or key employees to a management company or other person? 3		body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.			
and fictor, director, trustee, or key employee? 3 Did the organization delegate control over management duries customarily performed by or under the direct supervision of offices, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was fleet? 5 Did the organization have members or stockholders? 6 Did the organization have members or stockholders? 7 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 Ave any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7 Did the organization contemporareously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? 8 Bid the organization ortherporareously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the propagalization's mailing address? If If Yes, 1 provide the names and addresses in Schedule 0 9 If Yes, 1 of the organization have local chapters, branches, or affiliates? 10 Did the organization have local chapters, branches, or affiliates? 10 If Yes, 2 of the organization have written operations are consistent with the organization's exempt purposes? 11 Has the organization have a written conflict of interest policy? If Yio, 2 or to line 13 12 West Offices, (frice tors, or trustees, and key employee) seep or the Form 990 to a limenthese of its governing body before filling the form? 12 Did the organization have a written conflict of interest policy? If Yio, 2 or to line 13 13 West Offices, directors, or trustees, and key employees required to disclose animally interests that could give rise to onf	b	Enter the number of voting members included in line 1a, above, who are independent 1b 39			
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or often person? 3 X X 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 X 7a Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 8 Are arry governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization than a management of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization is mailing address? If If Yes, * provide the names and addresses in Schedule O. 8 Section B, Policies (7ins Section B requests information about policies not required by the Internal Revenue Code.) 10a Did the organization have local chapters, branches, or affiliates? 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? 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? 10b If Yes, * did the organization have written organization or the violation's governing body before fi	2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
3 Did the organization delegate control over management durles customarily performed by or under the direct supervision of offiors, directors, circultesses, or key employees to a management company or orther person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assetts? 6 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 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? 8 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? 8 Did the organization have members of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization the organization have intended the organization submitted with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee isted in Part VII, Section A, who cannot be reached at the organization is maling address? If If "bes." provide the names and addresses in Schedule O 8 Section B, Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Did the organization have local chapters, branches, or affiliates? 10b If the organization have witten policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization seempt purposes? 10b If the organization have a written policies and procedures governing the activities of such chapters, file to the process, if any, used by the organization or every this Form 990. 11a Has the organization have a written objective the		officer, director, trustee, or key employee?	2		Х
Did the organization make any significant changes to its governing documents since the prior Form 990 was filled? 4	3				
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5		of officers, directors, or trustees, or key employees to a management company or other person?	3		
6 Did the organization have members or stockholders? 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? 5 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b X 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8 Bids to committee with authority to act on behalf of the governing body? 8 Bids to committee with authority to act on behalf of the governing body? 8 Bids to committee with authority to act on behalf of the governing body? 8 Bids to section B, Policies (7 firector, frustee, or key employee listed in Part VIII, Section A, who cannot be reached at the organization's mailing address? If Yes, "provide the names and addresses as Schedule O 9 X Section B, Policies (7 his Section B requests information about policies not required by the Internal Revenue Code.) 10a Did the organization have verified policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Did the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12a Did the organization have a written conflict of interest policy? If "No," got oline 13 12b Were officias, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X 12c Did the organization have a written document retention and enforce compliance with the policy? If "Yes," describe in Schedule O the organization have a written document retention and enforce compliance with the policy? "Yes," describe in bo	4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		
Ta 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? A van any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? B Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? B Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailling address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Saction B requests information about policies not required by the Internal Revenue Code.) Section B. Policies (This Saction B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b If the state organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 980. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directins, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X b Were officers, directins, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c X 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written whistleblower policy? 15 Did the process for determining compensation of the doliving persons include a review and approval by	5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VIII, Section A, who cannot be reached at the organization's malling address? If "Yes," provide the names and addresses in Schedule 0 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Did the organization have local chapters, branches, or affiliates? 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 is exempt purpose? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written official of interest policy If "No", go to line 13 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give is et ocnificits? 12b X 12c Did the organization have a written office of interest policy If "No" go to line 13 13b Unit the organization have a written operation and destruction policy? If "Yes," describe in Schedule O how this was done 13D to the organization have a written operations and provide a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15b If "Yes," of the organization have a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements with a taxable entity during the year? 16a Did the organization invest in, c	6	Did the organization have members or stockholders?	6		Х
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? a The governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? s Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailling address? If "Yes," provide the names and addresses in Schedule O 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? b If "Yes," did the organization have existen 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? 11b Bescribe in Schedule O the process, if any, used by the organization review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 2b Here offices, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X 12c Did the organization have a written whistleblower policy? 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written organization organization organization have a written organization in the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization is CEO, Executive Director, or top management official b Other officers or key employees of the organization if "Yes" is the estates with which a copy of this Form 990 is required to be filed ▶ME Section C. Di	7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
a The governing body? a The governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? list there any officer, director, furstee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailling address? If "Yes," provide the names and addresses in Schedule O 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? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Earth Schedule O the process, if any, used by the organization is 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? 11b Earth Schedule O the process, if any, used by the organization to review this Form 990. 12c Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Z C bid the organization have a written observed the process in schedule O how this was done in Schedule O how this was done 13 Did the organization have a written obcument retention and destruction policy? 13 Did the organization is a written with self-blower policy? 14 Did the organization have a written obcument retention and destruction policy? 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? a The organization is to like a prop		more members of the governing body?	7a		Х
a The governing body? a The governing body? b Each committee with authority to act on behalf of the governing body? 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 in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Did the organization have local chapters, branches, or affiliates? b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Describe in 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 b Were officers, directors, or trustees, and key employee required to disclose annually interests that could give rise to conflicts? 12b X 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes," describe in Schedule O how this was done 12c Did the organization have a written document retention and destruction policy? 13 Did the organization have a written document retention and destruction policy? 14 Did the organization have a written document retention and destruction policy? 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 invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 15b Ust the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 15c Did the organization invest in, contribute as	b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
a The governing body? a The governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? b It rearry officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Ves No 10a Did the organization have local chapters, branches, or affiliates, and branches to ensure their operations are consistent with the organization is exempt purposes? 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 is governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 11a W It was a second of the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O with was done 12c X 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written whistleblower policy? 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		persons other than the governing body?	7b		X
b Each committee with authority to act on behalf of the governing body? 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 "Nes," provide the names and addresses in Schedule O 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Ves No	8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
b Each committee with authority to act on behalf of the governing body? 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 in Schedule O 9	а	The governing body?	8a		
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Ves	b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Inta Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 11a Inta Has the organization have a written conflict of interest policy? If "No." go to line 13 12b Did the organization have a written conflict of interest policy? If "No." go to line 13 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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 SCD, Executive Director, or top management official 15b X 15c X 15d Did the organization the process in Schedule O (see instructions). 15d Did the organization see. CD, Executive Director, or top management official 15a X 15b Interventive arrangements with a taxable entity during the year? 16a X 15b Interventive arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 15a Section C. Disclosure 17b List the states with which a copy of this Form 990 is required to be filed PME 17c Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 99	9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
New Note No		organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
10a	Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 15a Describe in 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 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 Did the organization have a written document retention and destruction policy? 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 X 15 Did the organization's CEO, Executive Director, or top management official 15a X 15b Other officers or key employees of the organization 15a If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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				Yes	
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? b Describe in 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 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12b X 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written whistleblower policy? 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? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a 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 ME Section G. Disclosure 18 Section S104 (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public durin	10a	Did the organization have local chapters, branches, or affiliates?	10a		X
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? b Describe in 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 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 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? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 15 List the states with which a copy of this Form 990 is required to be filed ▶ME 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ME 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available Check al	b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
b Describe in 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 b Were officers, idrectors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 15 Did the organization have a written document retention and destruction policy? 16 Did the organization have a written document retention and destruction policy? 17 Did the organization have a written document of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 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? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ME Section C. Disclosure 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule O whethe		and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X	11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ME Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ Elena Murdock	b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? a The organization's CEO, Executive Director, or top management official persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official persons in the organization of the deliberation and decision? a The organization's CEO, Executive Director, or top management official persons in the organization in the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure Section C. Disclosure	12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		
in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ME Section 6:104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. □ Own website □ Another's website X Upon request □ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ Elena Murdock - 207-775-6148			12b	X	
13	С				
14 Did the organization have a written document retention and destruction policy? 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? 15 The organization's CEO, Executive Director, or top management official 15 Other officers or key employees of the organization 16 If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 Diff "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? 16 Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ME 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. □ Own website □ Another's website ☑ Upon request □ Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ Elena Murdock - 207-775-6148			12c		
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? The organization's CEO, Executive Director, or top management official Did the organization or 15b, describe the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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 List the states with which a copy of this Form 990 is required to be filed ▶ME Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. □ Own website □ Another's website ☑ Upon request □ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ Elena Murdock - 207-775-6148	13		—		
persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 15a	14		14	X	
a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ME 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ Elena Murdock - 207-775-6148	15				
b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ME Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ Elena Murdock - 207-775-6148				37	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X 16b Section C. Disclosure 17 List the states with respect to such arrangements? 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. 18 Own website Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ► Elena Murdock - 207-775-6148					
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ME 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. □ Own website □ Another's website X Upon request □ Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ Elena Murdock - 207-775-6148	b		15b	Λ	
taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure	40				
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ME 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ Elena Murdock − 207−775−6148	16a				v
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 ▶ME 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990·T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. □ Own website □ Another's website ▼ Upon request □ Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ Elena Murdock - 207-775-6148			16a		
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 ▶ME 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ Elena Murdock - 207-775-6148	b				
Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ME 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. □ Own website □ Another's website ▼ Upon request □ Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ Elena Murdock - 207-775-6148			4Ch		
 List the states with which a copy of this Form 990 is required to be filed ►ME Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: ► Elena Murdock - 207-775-6148 	800		מטו		
 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.					
for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: Elena Murdock - 207-775-6148			availah	ما	
Own website Another's website X Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ► Elena Murdock - 207-775-6148	10		avalidD	iC	
 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: ► Elena Murdock - 207-775-6148 					
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: Elena Murdock - 207-775-6148	10		l finan	cial	
State the name, address, and telephone number of the person who possesses the organization's books and records: ► Elena Murdock - 207-775-6148	13		ı ıırıarı	oidi	
Elena Murdock - 207-775-6148	20	•			
	20				
		7 Congress Square, Portland, ME 04101			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Name and Title	(A)	(B)	o, gc		(0		прог	1001	(D)	(E)	(F)
Nours per Nour	Name and Title	Average	Position					one	Reportable	Reportable	Estimated
Companies Comp			box, unless person is both an					h an	·	•	
Claudia J. Bantz S.00 X			_	001 411			1 1				
Claudia J. Bantz S.00 X		1 '	direct				p			•	
Claudia J. Bantz S.00 X		1	ee or	stee			nsate		<u> </u>	(** 2, 1000 111100)	
Claudia J. Bantz S.00 X		organizations	l trust	nal tru		oyee	ompe.				and related
Claudia J. Bantz S.00 X			vidua	itutior	ser	empl	hest c oloyee	ner			organizations
Trustee		,	Indi	Inst	Offi	Key	Hig	P.			
Carriage Carriage		3.00									_
Trustee			X						0.	0.	0.
Carried		3.00									_
Trustee		2 00	X						0.	0.	0.
(4) Nathan J. Clark		3.00									
Trustee		2 00	X						0.	0.	0.
Trustee		3.00									_
Trustee		2 00	X						0.	0.	0.
Columbia Columbia		3.00	,,								_
Trustee		2 00	X						0.	0.	0.
Trustee		3.00	,,								_
Name		2 00	X						0.	0.	0.
Secretary Secr	, · , · - · · · · · · · · · · · · · · ·	3.00	,,								_
Trustee		2 00	X						0.	0.	0.
Secretary Secr		3.00									
Trustee		2 00	X						0.	0.	0.
Trustee		3.00	٠,,							_	_
Trustee		2 00	A						0.	0.	U •
Trustee		3.00	٠,,							_	_
Trustee		2 00	X						0.	0.	<u> </u>
Trustee		3.00	٠,,								•
Trustee		2 00	A						0.	0.	U •
Clifford M. Ginn 3.00 X 0.	= = =	3.00	₹,							_	_
Past Trustee X 0. 0. 0. (14) Walter B. Goldfarb, M.D. 3.00 X 0. 0. 0. Trustee X 0. 0. 0. 0. (15) Cyrus Y. Hagge 3.00 X 0. 0. 0. Trustee X 0. 0. 0. 0. (16) William D. Hamill 3.00 X 0. 0. 0. Trustee X 0. 0. 0. 0. (17) James A. Houle 3.00 X X 0. 0. 0. Secretary X X X 0. 0. 0. 0.		3 00	Λ						0.	0.	0.
(14) Walter B. Goldfarb, M.D. 3.00 Trustee X (15) Cyrus Y. Hagge 3.00 Trustee X (16) William D. Hamill 3.00 Trustee X (17) James A. Houle 3.00 Secretary X X X 0. 0. 0. 0. 0. 0.		3.00	₹,							_	_
Trustee X 0. 0. 0. (15) Cyrus Y. Hagge 3.00 0. 0. 0. Trustee X 0. 0. 0. (16) William D. Hamill 3.00 0. 0. 0. Trustee X 0. 0. 0. (17) James A. Houle 3.00 0. 0. 0. Secretary X X 0. 0. 0.		3 00	Λ						0.	0.	0.
(15) Cyrus Y. Hagge 3.00 Trustee X (16) William D. Hamill 3.00 Trustee X (17) James A. Houle 3.00 Secretary X X X 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	,	3.00	₹,							_	_
Trustee X 0. 0. 0. (16) William D. Hamill 3.00 X 0. 0. 0. Trustee X 0. 0. 0. (17) James A. Houle 3.00 X X 0. 0. Secretary X X X 0. 0.		3 00	A						0.	0.	U•
(16) William D. Hamill 3.00 Trustee X (17) James A. Houle 3.00 Secretary X X X 0. 0. 0. 0. 0. 0.	= ===	3.00	v						_	^	_
Trustee X 0. 0. 0. (17) James A. Houle 3.00 X X 0. 0. 0. Secretary X X X 0. 0. 0. 0.		3 00	^						0.	0.	U •
(17) James A. Houle 3.00 X X X 0. 0. 0.		3.00								_	_
Secretary X X 0. 0.		3 00	^						0.	<u> </u>	<u> </u>
		3.00	v		, l				_	^	_
	432007 11-07-14		Λ		Λ				<u> </u>	<u> </u>	Form 990 (2014)

Form **990** (2014)

Form 990 (2014) Portland	Museum	01	t P	\rt					01-0	<u> 378</u>	420	Р	age 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ighe	st C	Compensated Employe	es (continued)				
(A)	(B)			(C				(D)	(E)			(F)	
Name and title	Average	Position (do not check more than one) than	one	Reportable	Reportable	;	Es	timat	ed
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	on	an	nount	of
	week		cer an	a a a	recto	or/trus	itee)	from	from related			other	
	(list any	director						the	organization		l	pensa	
	hours for related	Ιb	æ			ated		organization	(W-2/1099-MIS	SC)		om th	
	organizations	trustee	trust		يو	bens		(W-2/1099-MISC)				aniza	
	below	ual tr	ional		ploye	t con	L					d rela [.] anizat	
	line)	Individual	nstitutional trustee	Officer	Key employee	Highest compensated employee	orme				l	ai iiZat	10113
(18) John F. Isacke	3.00	=	=	0	호	Ξ 0	<u> </u>						
Chairman	- 3333	X		x				0.		0.			0.
(19) Jeffrey D. Kane	3.00												
Vice President		X		x				0.		0.			0.
(20) Nancy K. Kaye	3.00												
Vice President	- 3333	x		x				0.		0.			0.
(21) Harry W. Konkel	3.00												
Trustee		x						0.		0.			0.
(22) Robert D. Kump	3.00												
Trustee	- 3333	X						0.		0.			0.
(23) Bree A. LaCasse	3.00												
Trustee		X						0.		0.			0.
(24) Samuel A. Ladd III	3.00												
Trustee		X						0.		0.			0.
(25) Judy Glickman Lauder	3.00												
Trustee		X						0.		0.			0.
(26) James L. Moody, Jr.	3.00												
Trustee		Х						0.		0.			0.
1b Sub-total	•						▶	0.		0.			0.
c Total from continuation sheets to Part V	II, Section A							449,282.		0.	3	4,7	93.
d Total (add lines 1b and 1c)								449,282.		0.	3	4,7	93.
2 Total number of individuals (including but n	ot limited to th	nose	liste	ed al	bove	e) wł	no r	eceived more than \$100	0,000 of reportab	le			
compensation from the organization													3
												Yes	No
3 Did the organization list any former officer,	,		,	,	•	,	,		. ,				
line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$15	0,000? If "Yes,	" со	mple	ete S	Sche	edule	e J f	for such individual			4	Х	
5 Did any person listed on line 1a receive or a	accrue compe	nsat	ion f	rom	any	/ unr	elat	ted organization or indiv	idual for services	3			
rendered to the organization? If "Yes," com	plete Schedul	e J f	or su	ıch	pers	son .					5		X
Section B. Independent Contractors													
1 Complete this table for your five highest co	mpensated in	depe	ende	nt c	onti	racto	ors t	that received more than	\$100,000 of con	npens	ation f	rom	
the organization. Report compensation for	the calendar y	ear	endi	ng v	vith	or w	ithir	n the organization's tax	year.				
(A)								(B)		_	(C)	
Name and business	address							Description of s			compe	nsatio	nn
Scott Simons Architects	0.4						- 1	Architectura		l	4.0		
75 York Street, Portland	, ME 04	T () :	L					Services		 	T0	6,5	20.
							_						

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

1 \$100,000 of compensation from the organization
See Part VII, Section A Continuation sheets

Form **990** (2014)

Form 990 Portland Museum of Art 01-037842									0420	
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A) (B) (C) (D) (E) (
Name and title	Average	Position						Reportable	Reportable	Estimated
	hours	(cl	(check all that apply)				ly)	compensation	compensation	amount of
	per							from	from related	other
	week	<u> </u>				loyee		the	organizations	compensation
	(list any	lirecto				l emp		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	hours for related	eord	stee			sated		(88-2/1099-8866)		organization and related
	organizations	truste	al frus		yee	mpen				organizations
	below	ndividual trustee or director	nstitutional trustee	J.	Key employee	Highest compensated employee	er			3
	line)	Indiv	Instit	Officer	Keye	High	Former			
(27) John P. Moore	3.00									
Trustee		Х						0.	0.	0.
(28) Robert S. Nanovic	3.00									
Trustee		Х						0.	0.	0.
(29) Leonard M. Nelson	3.00									
Trustee		Х						0.	0.	0.
(30) Leslie B. Otten	3.00									
Trustee		Х						0.	0.	0.
(31) Hilary G. Robbins	3.00									
Past Trustee		Х						0.	0.	0.
(32) Christopher N. Robinson	3.00									
Trustee		Х						0.	0.	0.
(33) Laurence H. Rubinstein	3.00									
Trustee		Х						0.	0.	0.
(34) William J. Ryan, Jr.	3.00								_	
Treasurer		Х		Х				0.	0.	0.
(35) Earle G. Shettleworth, Jr.	3.00									
Trustee		Х						0.	0.	0.
(36) Stewart Strawbridge	3.00								•	
Trustee	1 2 2 2	Х						0.	0.	0.
(37) Hans Underdahl	3.00	,,							0	0
Trustee	2 00	Х						0.	0.	0.
(38) Heather Veitch	3.00	٠,,							0	0
Trustee	3 00	Х						0.	0.	0.
(39) John H. Wallace	3.00	x						0.	0	^
Trustee	3.00	Δ.						0.	0.	0.
(40) Anna H. Wells	3.00	x		х				0.	0.	0.
President (41) William B. Williams	3.00	^		Δ				0.	0.	0.
Trustee	3.00	Х						0.	0.	0.
(42) Amy H. Woodhouse	3.00	^						0.	0.	•
Trustee	3.00	Х						0.	0.	0.
(43) Mark H. C. Bessire	40.00		\vdash					0.	0.	•
Director	13.00	1		Х				214,156.	0.	15,261.
(44) Elena Murdock	40.00							221/2300		10,2010
Deputy Dir. for Finance/Operations		1		х				133,273.	0.	11,564.
(45) Elizabeth F. Cartland	40.00		Н			Н		, , , , , ,		,
Director of Development		1				x		101,853.	0.	7,968.
A	†					\vdash		1 = , 2 = 0		,,,,,,
		1								
	•									
								449,282.		34,793.

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (**D)** Revenue excluded Unrelated Total revenue Related or from tax under exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns **b** Membership dues 1b 673,624. c Fundraising events d Related organizations 1d e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 4,980,007 570,502. g Noncash contributions included in lines 1a-1f: \$ 5,653,631 h Total. Add lines 1a-1f Business Code 2 a Admissions 513,633 Program Service Revenue 713990 513,633 b Program Revenues 713990 188,479 188,479 С f All other program service revenue 702,112, g Total. Add lines 2a-2f Investment income (including dividends, interest, and 507,736 2,861 504,875. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 44,852 6 a Gross rents 39,965 **b** Less: rental expenses 4,887. c Rental income or (loss) 4.887 4,887. d Net rental income or (loss) . 7 a Gross amount from sales of (i) Securities (ii) Other 28,993,109 assets other than inventory b Less: cost or other basis 25,695,314 and sales expenses 3,297,795. c Gain or (loss) 3,297,795 3,297,795. d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c). See Part IV, line 18 a 82,650 Other **b** Less: direct expenses 29,493. c Net income or (loss) from fundraising events 53,157 53,157. 9 a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 425,171 522,755 **b** Less: cost of goods sold -97,584 -97,584 c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a b d All other revenue e Total. Add lines 11a-11d 2,861. Total revenue. See instructions. 10,121,734. 702,112. 3,763,130. 432009 11-07-14

Part IX | Statement of Functional Expenses

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

	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(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	374,255.	105,532.	188,427.	80,296
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	2,262,070.	1,613,259.	115,441.	533,370
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	33,955.	20,219.	7,749.	5,987
9	Other employee benefits	195,589.	152,387.	5,912.	37,290
10	Payroll taxes	204,117.	141,743.	18,155.	44,219
11	Fees for services (non-employees):				<u> </u>
a	' ' ' '	24,872.	20,400.	4,472.	
b		51,480.	47,609.	3,871.	
c	[29,821.		29,821.	
	Lobbying				
e	D () 1())				
f	Investment management fees	124,985.		124,985.	
g	//(!! 44				
9	column (A) amount, list line 11g expenses on Sch 0.)	19,481.	7,170.		12,311
10	· ·	243,952.	202,262.		41,690
12	Advertising and promotion	124,957.	54,277.	36,383.	34,297
13	Office expenses	125,101.	93,706.	809.	30,586
14	Information technology	125,101.	33,700.	003.	30,300
15	Royalties	367,821.	353,361.	4,787.	9,673
16	Occupancy	41,510.	25,324.	8,872.	7,314
17	Travel	41,310.	23,324.	0,072.	7,314
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	11 506	6 071	1 722	2 002
19	Conferences, conventions, and meetings	11,586. 19,453.	6,871.	1,722.	2,993
20	Interest	19,403.	2,845.	16,608.	
21	Payments to affiliates	121 071	115 710	E 070	11 000
22	Depreciation, depletion, and amortization	431,874.	415,742.	5,070.	11,062
23	Insurance	98,476.	94,690.	2,741.	1,045
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
9	Acquisition of Art	496,500.	496,500.		
h	Exhibition & Collection	463,178.	463,178.		
2	Fundraising	232,349.			232,349
d	Education	149,324.	149,324.		
	All other expenses	_10,0010	_10,041		
	Total functional expenses. Add lines 1 through 24e	6,126,706.	4,466,399.	575,825.	1,084,482
<u>25</u> 26	Joint costs. Complete this line only if the organization	0,120,7000	1,200,000	3,3,023	1,001,102
∠0					
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2014

Form **990** (2014)

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 6,414. 9,769. Cash - non-interest-bearing 1 160,830. 984,887. 2 Savings and temporary cash investments 670,752. 1,357,825. 3 Pledges and grants receivable, net 137,913. 147,079. Accounts receivable, net **5** Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary Assets employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 Notes and loans receivable, net 7 220,273. 182,554. 8 Inventories for sale or use 327,844. 220,401. Prepaid expenses and deferred charges **10a** Land, buildings, and equipment: cost or other 32,076,445. basis. Complete Part VI of Schedule D ______ 10a 13,355,115. 16,597,088. 18,721,330. b Less: accumulated depreciation 10b 10c 26,410,745. 20,634,049. Investments - publicly traded securities 11 11 1,237,404. 6,100,512. 12 Investments - other securities. See Part IV, line 11 13 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 14 1,471,261. 1,638,842. 15 Other assets. See Part IV, line 11 15 47,240,524. 49,997,248. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 449,753. 17 624,698. 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 273,537. 918,282. Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 25 Schedule D 723,290. 1,542,980. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. **Net Assets or Fund Balances** 20,957,973. 21,605,356. 27 Unrestricted net assets 27 2,105,181. 3,240,612. 28 Temporarily restricted net assets 23,454,080. 23,608,300. 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶

49,997,248. Form **990** (2014)

48,454,268.

30 31

32

33

46,517,234.

47,240,524.

32

33

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

Ра	rt 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	10,12					
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,12					
3	Revenue less expenses. Subtract line 2 from line 1	3	3,99					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		46,51					
5	5 Net unrealized gains (losses) on investments 5 -2							
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,							
	column (B))	10	48,45	4,2	68.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII							
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.						
2a	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	l on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	X				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,						
	consolidated basis, or both:							
	X Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit						
	Act and OMB Circular A-133?		3a		Х			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b					
				990	(2014)			

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Portland Museum of Art

Employer identification number 01 – 0378420

D		Danasa fan Dalalia f	Olerite Olete					1 0370120			
Pa		Reason for Public									
he o	organ	ization is not a private found			-	-					
1	Щ	A church, convention of ch			d in sectio	n 170(b)(1	I)(A)(i).				
2	Н	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)									
3	Щ	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,									
		city, and state:									
5		An organization operated for		llege or university owne	d or opera	ted by a g	overnmental unit describ	ped in			
		section 170(b)(1)(A)(iv). (C	· ·								
6		A federal, state, or local go	-								
7	X	An organization that norma	-	ntial part of its support	from a gov	ernmental	unit or from the general	public described in			
		section 170(b)(1)(A)(vi). (C									
8	Н	A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete Par	t II.)						
9		An organization that norma	Illy receives: (1) more	than 33 1/3% of its sup	oport from	contributi	ons, membership fees, a	and gross receipts from			
		activities related to its exen	•	•			• • •	•			
		income and unrelated busin		(less section 511 tax) fr	om busine	esses acqu	ired by the organization	after June 30, 1975.			
		See section 509(a)(2). (Co	. ,								
10	H	An organization organized	•	•	-						
11	Ш	An organization organized	=	•	=		· · · · · · · · · · · · · · · · · · ·				
		more publicly supported or	-					Check the box in			
	_	lines 11a through 11d that				-					
а			· · · · · · · · · · · · · · · · · · ·	•	•	•					
		the supported organization			a majority	of the dire	ctors or trustees of the s	supporting			
	_	organization. You must o									
b			· · · · · · · · · · · · · · · · · · ·					-			
		control or management of			same perso	ons that co	ontrol or manage the sup	pported			
	_	organization(s). You mus	- · · · · · · · · · · · · · · · · · · ·								
С							• •	ed with,			
		its supported organizatio		•							
d											
		that is not functionally int	-	•	-		-	iveness			
		requirement (see instruct	•	-							
е		☐ Check this box if the orga					Type I, Type II, Type III				
	_	functionally integrated, o	* *	nally integrated support	ing organi	zation.					
f		er the number of supported of									
g		vide the following information i) Name of supported	about the supporte		(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of			
	,	organization	(11) = 114	(described on lines 1-9	listed i	in your	support (see	other support (see			
		3		above or IRC section	governing of Yes	No No	Instructions)	Instructions)			
				(see instructions))	162	NO					
ota	ı										

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

14

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	6,040,330.	4,324,229.	4,565,459.	2,765,487.	5,653,631.	23,349,136.
2	Tax revenues levied for the organ-						
	ization'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	6,040,330.	4,324,229.	4,565,459.	2,765,487.	5,653,631.	23,349,136.
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)						3,326,057.
6							20,023,079.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	6,040,330.	4,324,229.	4,565,459.	2,765,487.	5,653,631.	23,349,136.
8	Gross income from interest,						_
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	483,531.	558,442.	582,919.	617,638.	552,588.	2,795,118.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						26,144,254.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 6	,605,080.
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stop						>
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2014 (line 6, column (f) di	vided by line 11, c	olumn (f))		14	76.59 %
15	Public support percentage from 2013	Schedule A, Part	II, line 14			15	72.96 %
16a	33 1/3% support test - 2014. If the	•		•		•	
	stop here. The organization qualifies	as a publicly supp	orted organization				►X
b	33 1/3% support test - 2013. If the						is box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶□
17a	10% -facts-and-circumstances tes	t - 2014. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and stop h	ere. Explain in Par	rt VI how the organ	ization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		▶□
b	10% -facts-and-circumstances tes	t - 2013. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, ch	neck this box and	stop here. Explain	in Part VI how the	
	organization meets the "facts-and-circ	cumstances" test.	The organization o	qualifies as a public	cly supported orga	anization	▶∐
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	and see instructions	<u>s</u>

Schedule A (Form 990 or 990-EZ) 2014

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Gallendar yearr (or fiscal year beginning in) 1 Giffs, grants, contributions, and membership less received. (Do not include any "unusual grants.") 2 Gross neaphs from admissions, merchandise sold or services permany activity that is related to the organization's tax-exempt purpose of some sold or services permany activity that is related to the organization's tax-exempt purpose of some sold or services permany activity that is related to the organization's tax-exempt purpose of some sold or services permany activity that is related to the organization's tax-exempt purpose of some sold or services or facilities furnished by a governmental unit to the organization without charge of the sold of services or facilities furnished by a governmental unit to the organization without charge of the sold of services or facilities furnished by a governmental unit to the organization without charge of the sold of the sold of services or facilities furnished by a governmental unit to the organization without charge of the sold of the	Sec	qualify under the tests listed be ction A. Public Support	elow, please com	plete Part II.)				
I Giffs, grants, contributions, and membership feer received. (Do not include any "unusual grants.") Gress receipts from admitiscins, merchandiae acid or services per formed, or facilities furnished in any activity that is related to the organization's tix-evempt purpose 3 Gross receipts from admitiscins, merchandiae acid or services per formed, or facilities furnished in any activity that is related to the organization's tix-evempt purpose 3 Gross receipts from admitiscins and the part of the organization's benefit and either paid to or expended on its obhail 5 The value of services or facilities furnished by a governmental unit to the organization without charge of Total. Add install through 5 7 As mounts included on lines 1, 2, and 3 received from disqualified persons be asserted to service of \$1,000 or 1% of the analysis of the services of			(a) 2010	(b) 2011	(6) 2012	(4) 2013	(a) 2014	(f) Total
membership fees received. (Do not include any runsual grants?) 2 Gross receipts from admissions, membershops sold or services performed, or facilities furnished in any activity that is related to the organization is tax-exempt purpose 3 Gross receipts from admissions that are not an unrelated trade or business under section 513 4 Tax revenues leviad for the organization is tax-exempt purpose 3 Gross receipts from admissions that are not an unrelated trade or business under section 513 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7 A mounts included on lines 1, 2, and 3 received from disqualified persons b A mounts included on lines 1, 2, and 3 received from disqualified persons b A mounts included on lines 1, 2, and 3 received from disqualified persons b A mounts included on lines 1, 2, and 3 received from disqualified persons b A mounts included on lines 1, 2, and 3 received from disqualified persons b A mounts included on lines 1, 2, and 3 received from disqualified persons b A mounts included on lines 1, 2, and 3 received from disqualified persons b A mounts included on lines 1, 2, and 3 received from disqualified persons b A mounts included on lines 1, 2, and 3 received from disqualified persons b A mounts included on lines 1, 2, and 3 received from disqualified persons b A mounts included in lines 1, 2, and 3 received from disqualified persons b A mounts included in lines 1, 2, and 3 received from disqualified persons b A mounts included in lines 1, 2, and 3 received from similar sources b A received from similar sources and a received from similar sources b A received from		. ,	(a) 2010	(6) 2011	(6) 2012	(u) 2013	(e) 2014	(i) iotai
include any "unusual grants.") Gross receipts from admissions, merchandise sold or services per formed, or facilities furnished in any activity that is related to the organization's travewerpt purpose 3. Gross receipts from activities that are not an unrelated trade or business under section 513 4. Tax revenues levied for the organization or separated on its behalf 5. The value of services or facilities furnished by a governmental unit to the organization of its behalf 6. Total. Add lines 1 through 5. 7. A mounts included on lines 12, and 3 received from disqualified persons by homesis related in lines 2 and 2 received from disqualified persons by homesis related in lines 2 and 2 received from disqualified persons by homesis related in lines 2 and 2 received from disqualified persons by homesis related in lines 2 and 2 received from the disqualified persons by homesis related in lines 2 and 2 received from the disqualified persons by homesis related in lines 2 and 2 received from the disqualified persons by homesis related in lines 2 and 2 received from the disqualified persons by homesis related in lines 2 and 2 received from the disqualified persons by homesis related in lines 2 and 2 received from the disqualified persons by homesis related in lines 2 received from the disqualified persons by homesis related to the disqualified persons by homesis related t	•	, • ,						
2 Gross receipts from admissions, merchandles 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 bus iness under section 513 and the section 513 are exempted to or expended on its behalf 5. The value of services or facilities furnished by a governmental unit to 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. — 73 A mounts included on lines 1, 2, and 3 received from disqualified persons 9 Amounts included on lines 1, 2, and 3 received from disqualified persons 9 Amounts from lines 1 (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total 9 Amounts from line 6 (a) 2014 (d) 2013 (e) 2014 (f) Total 9 Amounts from line 6 (a) 2014 (d) 2013 (e) 2014 (f) Total 9 Amounts from line 6 (a) 2014 (d) 2013 (e) 2014 (f) Total 9 Amounts from line 6 (a) 2014 (d) 2013 (e) 2014 (f) Total 9 Amounts from line 6 (a) 2014 (d) 2013 (e) 2014 (f) Total 9 Amounts from line 6 (a) 2014 (d) 2013 (e) 2014 (f) Total 9 Amounts from line 6 (a) 2014 (f) 2015 (e) 2014 (f) Total 9 Amounts from line 6 (a) 2014 (f) 2015 (e) 2014 (f) Total 9 Amounts from line 7 (a) 2014 (f) 2015 (e) 2014 (f) Total 9 (f) 2015 (e) 2014 (f) 2015 (e) 2014 (f) 2015 (e) 2014 (f) 2015 (f) (f) 201		,						
marchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's trave-empt purpose 3. Gross receipts from activities that are not an unrelated trade or bus- iness under section 513. 4. Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf 5. The value of services or facilities furnished by a governmental unit to the organization without charge 6. Total. Add lines 1 through 5. 7. A mount is niculated on lines 1, 2, and 3. received from disqualified persons by Amounts founded on lines 1, 2, and 3. received from disqualified persons by Amounts founded on lines 1, 2, and 3. received from disqualified persons by Amounts founded on lines 1, 2, and 3. received from disqualified persons by Amounts founded on lines 1, 2, and 3. received from disqualified persons by Amounts founded on lines 1, 2, and 3. received from disqualified persons by Amounts founded nines 2 and 2 received to not have disqualified persons by Amounts form to the business received from lines and lines 7 and 7 by 4. Public support justicity 1 to 163 by Section B. Total Support Calendar year (or float lyear beginning in) Amounts from line 6 10a Gross income from interest, choiced his 30, 1975 9. Add lines 10a and 10b 11. Next Income from a minister sources and income from similar sources and income from similar sources and income from income (iss section 511 taxes) from businssess acquired after June 30, 1975 9. Add lines 10a and 10b 11. Not Income from unrelated business in regularly carried on 12. Other income 15. Do not include gain or loss from the saie of capital in line 18 in ord in Part 11, in 9, 12 15. By Section D. Computation of Public Support Percentage 15. Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f) 17. In settlement line from 900 is for the organization in the box on divide by supported organization 18. 33 1378 support tests - 2014, if the organiz	2	******						
formed, or facilities furnished in any activity that is related to the organization's tax exampts purpose of 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 the furnished by a governmental unit to the organization without charge the furnished by a governmental unit to the organization without charge to the form disqualified persons of a received from disqualified persons of a received from disqualified persons or a received from disqualified persons or the form of the form disqualified persons or the form of the form disqualified persons or the form of t	2							
origanization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or bus- iness under section 513 4 Tax revolues levited for the organ- ization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7 A Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and a received from other than disqualified persons to the second the graded relines 2 and 1 for the amount or lines to the view from other than disqualified persons to the second the graded relines 2 and 1 for the amount or lines to the view from other than disqualified persons to the second the graded relines 2 and 1 for the amount or lines to the view from other than disqualified persons to the second the graded relines 2 and 1 for the amount or lines to the view from other than disqualified persons to the second the graded relines 2 and 1 for the amount or lines to the view from the second the graded to the second the graded relines 2 and 1 for the graded to the second the graded to the graded to the graded to the second the graded to		formed, or facilities furnished in						
3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levited for the organization to break and the paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7 a Amounts included on lines 1, 2, and 3 received from disqualified persons but were provided in the service of the provided persons. In the organization without charge of the provided persons but were provided in the service of the provided persons. In the organization of the service of the provided persons of th								
are not an unrelated trade or business under section 513 4 Tax reverues 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 7 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 8 Total. Add lines 1 through 5 9 Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts included on lines 1, 2, and 3 received from other than disqualified persons by Amounts for the through the persons by Amounts for the service of 1500 or 14 to	2	_						
Hess 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 7 a Amounts included on lines 1, 2, and 3 received from disputified persons b Amounts included on lines 1, 2, and 3 received from disputified persons b Amounts included on lines 2 and 3 received from disputified persons b Amounts included on lines 2 and 3 received from either that 15 for the year services on the services of 15 for 15 fo	3	•						
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 7 A Amounts included on lines 1, 2, and 3 received from disqualified persons 9 Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts on line 13 for the year • Add lines 73 and 75 8 Public support absencing 7 through 5 9 Amounts from line 6 10a Gross income from increat, dividends, payments received on securities lones from line 6 10a Gross income from increat, dividends, payments received on securities lones, rents, royalties and income from similar sources 10 Intellab unises stazable income (less section 5.11 taxes) from businesses acquired after Line 30, 1975 • Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, required in lines 1, and 1,								
ization's benefit and either paid to or expanded 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 disqualified persons b. Amounts included on lines 2 and 3 received from disqualified persons but exceeds the grade of 8,000 or 16 of the services of 15 o	4							
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 2, 2, and 3 received from disqualified persons by Amounts included on lines 2 and 3 received from disqualified persons that exceed the greated of 18 or 2 and 3 received from disqualified persons that exceed the greated of 18 or 2 and 3 received from other than disqualified persons that exceed the greated of 18 or 2 and 3 received from other than disqualified persons that exceed the greated of 18 or 2 and 7 b 8. Public support (greated 18,000 or 19 to	4							
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 disqualified persons b Amounts included on lines 2 and 3 received from disqualified persons but exceed the greater of \$5,000 or 1% of the amount on line disqualified persons but exceed the greater of \$5,000 or 1% of the amount on line 18 for the year of 18 for year of 18 for the year of 18 for the year of 18 for year of 18 for the year of 18 for year of 18 for the year of 18 for year of 18 for the year of 18 for year of 1		·						
furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7 a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 1, 2, and 3 received from disqualified persons c Add lines 7 and 7 b 8 Public support (signates) through 5 9 Public support (signates) through 5 10a Gross income from line 6 10a Gross inc	_							
the organization without charge 6 Total. Add lines 1 through 5 7 a Amounts included on lines 1, 2, and 3 received from disqualified persons but an accept the greater of \$5,000 or 1% of the amount on line 13 for the year coad the greater of \$5,000 or 1% of the amount on line 13 for the year coad the greater of \$5,000 or 1% of the amount on line 13 for the year coad the greater of \$5,000 or 1% of the amount on line 13 for the year coad the greater of \$5,000 or 1% of the amount on line 13 for the year coad the greater of \$5,000 or 1% of the amount on line 13 for the year coad the greater of \$5,000 or 1% of the amount on line 13 for the year coad the greater of \$5,000 or 1% of the amount on line 13 for the year coad the greater of \$5,000 or 1% of the amount on line 13 for the year coad the greater of \$5,000 or 1% of the amount on line 10 for the year coad the greater of \$5,000 or 1% or 1% of the year coad the greater of \$5,000 or 1% of the year coad the greater of \$5,000 or 1% of the year coad the greater of \$5,000 or 1% of the year coad the year coad the greater of \$5,000 or 1% of the year coad the year year year year year year year yea	5							
6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualidid persons b Amounts included on lines 2 and 3 received shoon other than disqualide persons b Amounts included on lines 2 and 3 received shoon other than disqualide persons b Amounts included on lines 2 and 3 received shoon other than disqualide persons that exceed the greater of \$3.000 or 1% of the amount on line 15 for the year c Add lines 7a and 7b 8 Public support (gripping line)		* *						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts included on lines 2 and 3 received from disqualified persons that exceed the greater of \$6,000 or 15 of the amount on line 15 for the year CAdd lines 7 and 77		*						<u> </u>
3 received from disqualified persons b Amounts included on lines 2 and 3 received town other than disqualified persons that exceed the great of 15 0,000 or 1% of the mount of the than disqualified persons that exceed the great of 15 0,000 or 1% of the mount of 15 or the year c Add lines 7a and 7b 8 Public support (September 15 or 16 year) Section B. Total Support Callendar year (or fiscal year beginning in) (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (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 Dusiness activities not included in line 10b, whether or not the business is regularly carried on or loss too included in line 10b, whether or not the business is regularly carried on or loss too mit he sale of capital assesses (Explain in Part VI). 13 Total support, Road ines 9, 10a, 11, and 12) 14 First five 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 2014 (line 8, column (f) divided by line 13, column (f)) 15 9/6 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 17 9/6 18 Investment income percentage for 2013 Schedule A, Part III, line 15 16 9/6 19 a 33 1/3% support tests - 2014. 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 percentage for 2014 (line 10c, column (f) divided by line 19a, and line 16 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box		_						
b Amounts included on lines 2 and 3 received from their than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 to the year. c Add lines 7a and 7b 8 Public support Spitzatilins (tomaline is) Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royallies and income from similar sources b Unrelated business taxable income (less section 51 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b. 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 10s from the sale of capital assests (Explain in Part VI.) 13 Total support, Add lines 9, to, 11, and 12) 14 First five 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 D. Computation of Public Support Percentage 15 Public support percentage from 2013 Schedule A, Part III, line 15 8 Section B. 33 1/3% support tests - 2014. If the organization id 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. ▶ □ 33 1/3% support tests - 2014. If the organization id 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. ▶ □ 33 1/3% support tests - 2014. If the organization id not check to soo no line 14 or line 19a, and line 16 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. ▶ □ 13 15 13 15 13 15 15 16 15 16 15 16 16 16 16 16 16 16 16 16 16 16 16 16	16	, ,						
tom other than disqualified persons that exceed the peater of \$5,000 or \$% of the amount on line 13 for the year or \$6 for \$100 or	ŀ	· · · · ·						
amount on line 13 for the year c Add lines 7a and 7b 3 Public support (Sitructine 7c from line 5) Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (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 51 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business satisties not included in 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 assests (Explain in Part VI.). 13 Total support, exert seems of the prometry of the	•							
a Public support Support Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (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 and income from similar sources (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 in 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 five 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 from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2013 Schedule A, Part III, line 17 18 9/6 19 19 33 1/3% support tests - 2014. 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 - 2013. If the organization did not check the box on line 14 or line 19a, and line 16 is more than 33 1/3%, a								
8 Public support. Support (submedian 7 chorn line 6) Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (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 in 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 five 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 15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 17 Investment income percentage from 2013 Schedule A, Part III, line 15 96 19a 33 1/3% support tests - 2014. 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								
Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total 9 Amounts from line 6 (10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources (less section 511 taxes) from businessses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business sactivities not included in line 10b, whether or not the business is regularly carried on 12 Other income. On ont include gain or loss from the sale of capital assets (Explain in Part VI) 13 Total support, Aded ines, 9t, c, 11, and 12) 14 First five 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 D. Computation of Public Support Percentage 15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15 96 16 Public support percentage from 2013 Schedule A, Part III, line 15 96 18 Investment income percentage from 2013 Schedule A, Part III, line 17 96 19 a 33 1/3% support tests - 2014. 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 bine 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization bine 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization line 18 is not more th								
Calendar year (or fiscal year beginning in) 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 in line 10b, whether or not the business is activities not included in 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 five 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 from 2013 Schedule A, Part III, line 15 6 Public support percentage from 2013 Schedule A, Part III, line 17 19 a 33 1/3% support tests - 2014. If the organization clid 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 - 2014. If the organization clid 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.								
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 in line 10b, whether or not the business is activities not included in line 10b, whether or not the business is activities not included in 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 five 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 from 2013 Schedule A, Part III, line 15 16 96 16 Public support percentage from 2013 Schedule A, Part III, line 17 19 19 33 1/3% support tests - 2014. 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 - 2014. 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.			(a) 2010	(b) 0011	(a) 2012	(4) 2012	(a) 2014	(f) Total
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources but 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 satable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 12 Other income. Do not included in line 10b, whether or not the business is regularly carried on some some from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c. 11, and 12.) 14 First five 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 from 2013 Schedule A, Part III, line 15 6 Public support percentage from 2013 Schedule A, Part III, line 15 7 Investment income percentage from 2013 Schedule A, Part III, line 17 8 Investment income percentage from 2013 Schedule A, Part III, line 17 19 3 33 1/3% support tests - 2014. 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 - 2013. 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 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 - 2013. 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 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		· · · · · · · · · · · · · · · · · · ·	(a) 2010	(0) 2011	(0) 2012	(a) 2013	(e) 2014	(I) Total
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 in 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.)		F						
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 sactivities not included in line 10b, whether or not the business is regularly carried on resplance (Explain in Part VI.) 13 Total support, (Add lines 9, 10c, 11, and 12.) 14 First five 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 2014 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage for 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2013 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2014. 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 - 2013. 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 1 public support tests - 2013. 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	106	, ,						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included in 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 five 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 2014 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 19 a 31 1/3% support tests - 2014. 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 - 2013. 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		securities loans, rents, royalties						
(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 in 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 five 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 2014 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 19a 33 1/3% support tests - 2014. 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 - 2013. 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		F		+				_
acquired after June 30, 1975 c Add lines 10a and 10b	Ľ							
c Add lines 10a and 10b 11 Net income from unrelated business activities not included in 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 five 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 2014 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2013 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2014. 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 1 Investment income percentage for 2013. 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 1 Investment income percentage for 2013. 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		acquired ofter June 20, 1075						
11 Net income from unrelated business activities not included in 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 five 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 2014 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2013 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2014. 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 10 J 33 1/3% support tests - 2013. 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 15 J 35 J 36 J 37 S S S S S S S S S S S S S S S S S S		······						_
activities not included in 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 five 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 2014 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2013 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2014. 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 10 b 33 1/3% support tests - 2013. 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								
regularly carried on 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 five 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 2014 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2013 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2014. 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 - 2013. 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 19 Investment income percentage from 2013. 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 10 Investment income percentage from 2013. 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	••							
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 five 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 2014 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2013 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2014. 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 1 b 33 1/3% support tests - 2013. 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 1								
or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First five 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 2014 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2013 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2014. 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 - 2013. 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 17 Investment income percentage from 2013 Schedule A, Part III, line 17 18 Investment income percentage from 2013 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2014. 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 Investment I	12			+				_
Total support. (Add lines 9, 10c, 11, and 12.) 14 First five 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 2014 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2013 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2014. 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 - 2013. 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 19 Jan 19	12							
14 First five 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 2014 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2013 Schedule A, Part III, line 17 18 Investment income percentage from 2013 Schedule A, Part III, line 17 19 a 33 1/3% support tests - 2014. 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 - 2013. 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	12							
check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2013 Schedule A, Part III, line 17 18 Media 33 1/3% support tests - 2014. 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 - 2013. 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			the evacuization!	s first seemed this	d fourth or fifth t	l ny voor oo o oostis	 	Totion .
Section C. Computation of Public Support Percentage 15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2013 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2014. 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 - 2013. 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	14		· ·	•		-		zation,
15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2013 Schedule A, Part III, line 17 19 33 1/3% support tests - 2014. 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 - 2013. 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 10	Sec							
16 Public support percentage from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2013 Schedule A, Part III, line 17 19 a 33 1/3% support tests - 2014. 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 - 2013. 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		-			column (f))		15	
Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2013 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2014. 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 - 2013. 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							 	-
17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2013 Schedule A, Part III, line 17 19 a 33 1/3% support tests - 2014. 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 - 2013. 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		<u> </u>					10	70
18 Investment income percentage from 2013 Schedule A, Part III, line 17		•					17	
19a 33 1/3% support tests - 2014. 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							 	
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 - 2013. 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	196							
line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	L							
\cdot \square								
	20							

432023 09-17-14

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9c		
	10a		
	10b 90 or 99		0011
n u	un i Ar UU	 / \	-21174

Par	t IV	Supporting Organizations (continued)			
				Yes	No
11	Has th	ne organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below	, the governing body of a supported organization?	11a		
b	A fami	ly member of a person described in (a) above?	11b		
С	A 35%	controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion E	3. Type I Supporting Organizations			
				Yes	No
1	Did th	e directors, trustees, or membership of one or more supported organizations have the power to			
	regula	rly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax ye	ar? If "No," describe in part VI how the supported organization(s) effectively operated, supervised, or			
	contro	illed the organization's activities. If the organization had more than one supported organization,			
	descri	be how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organi	zations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		e organization operate for the benefit of any supported organization other than the supported			
		zation(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	-	how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		vised, or controlled the supporting organization.	2		
Sec		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			
		stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
		nagement of the supporting organization was vested in the same persons that controlled or managed			
		pported organization(s).	1		
Sec		D. Type III Supporting Organizations			
		<u> </u>		Yes	No
1	Did th	e organization provide to each of its supported organizations, by the last day of the fifth month of the			
		zation's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	-	2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
		zation's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	-	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
		zation(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	-	ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3		ison of the relationship described in (2), did the organization's supported organizations have a			
		cant voice in the organization's investment policies and in directing the use of the organization's			
		e or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		rted organizations played in this regard.	3		
Sec		. Type III Functionally-Integrated Supporting Organizations			
1		the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions):			
а		The organization satisfied the Activities Test. Complete line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.			
С		The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst.	ructions).	
2		ies Test. Answer (a) and (b) below.	ļ	Yes	No
а		bstantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the su	pported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
		supported organizations and explain how these activities directly furthered their exempt purposes,			
		ne organization was responsive to those supported organizations, and how the organization determined			
	that th	nese activities constituted substantially all of its activities.	2a		
b	Did th	e activities described in (a) constitute activities that, but for the organization's involvement, one or more			
		organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
		ns for the organization's position that its supported organization(s) would have engaged in these			
		ies but for the organization's involvement.	2b		
3		t of Supported Organizations. Answer (a) and (b) below.			
		e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
		es of each of the supported organizations? Provide details in <i>Part VI</i> .	3a		
b		e organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations				
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All						
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E.				
Cook	ion A. Adiusted Not Income		(A) Drier Voor	(B) Current Year			
Seci	ion A - Adjusted Net Income		(A) Prior 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					
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year			
	on b Millimum Asset Amount		(A) I HOI TOU	(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					
е	Discount claimed for blockage or other						
	factors (explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
3	Subtract line 2 from line 1d	3					
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,						
	see instructions).	4					
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
_6	Multiply line 5 by .035	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sect	ion C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2	Enter 85% of line 1	2					
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4	Enter greater of line 2 or line 3	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
	emergency temporary reduction (see instructions)	6					
7	Check here if the current year is the organization's first as a non-functional	ly-integrat	ed Type III supporting org	anization (see			
	instructions).						

Schedule A (Form 990 or 990-EZ) 2014

Par	rt V Type III Non-Functionally Integrat	ed 509	(a)(3) Supporting Organic	anizations _(continued)	
Secti	tion D - Distributions			,	Current Year
1	Amounts paid to supported organizations to accom				
2	Amounts paid to perform activity that directly furthe				
	organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exemp				
4	Amounts paid to acquire exempt-use assets				
5	Qualified set-aside amounts (prior IRS approval requ	uired)			
6	Other distributions (describe in Part VI). See instruc	tions.			
7	Total annual distributions. Add lines 1 through 6.				
8	Distributions to attentive supported organizations to	which t	he organization is responsive	9	
	(provide details in Part VI). See instructions.				
9	Distributable amount for 2014 from Section C, line 6	6			
10	Line 8 amount divided by Line 9 amount				
Secti	tion E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6	 S			
2	Underdistributions, if any, for years prior to 2014				
	(reasonable cause required-see instructions)				
3	Excess distributions carryover, if any, to 2014:				
а					
b					
С					
d					
е	From 2013				
f	Total of lines 3a through e				
g	Applied to underdistributions of prior years				
h	Applied to 2014 distributable amount				
i	Carryover from 2009 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.				
4	Distributions for 2014 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2014 distributable amount				
С	Remainder. Subtract lines 4a and 4b from 4.				
5	Remaining underdistributions for years prior to 2014	1, if			
	any. Subtract lines 3g and 4a from line 2 (if amount				
	greater than zero, see instructions).				
6	Remaining underdistributions for 2014. Subtract line	es 3h			
	and 4b from line 1 (if amount greater than zero, see				
	instructions).				
7	Excess distributions carryover to 2015. Add lines	3j			
	and 4c.				
8	Breakdown of line 7:				
a					
b					
C					
	Excess from 2013				
е	Excess from 2014				

Schedule A (Form 990 or 990-EZ) 2014

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 ·

OMB No. 1545-0047

Name of the organization

Employer identification number

Portland Museum of Art

01-0378420

Organization type (check one):							
Filers of: Section:							
Form 990	0 or 990-EZ	X 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					
	nly a section 501(c)(covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
	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 one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special	Rules						
X	sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from r, 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, line 1. Complete Parts I and II.					
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III.					
	year, contributions is checked, enter he purpose. Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., emplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year					
but it mu	ust answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization Employer identification number

Portland Museum of Art 01-0378420

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) (d) Total contributions Type of contribution	n				
1		\$ 290,457. Person X Payroll Noncash (Complete Part II for noncash contributions.	.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution	n				
2		\$ 200,000. Person X Payroll Noncash (Complete Part II for noncash contributions.					
(a)	(b)	(c) (d) Total contributions Type of contribution					
No. 3	Name, address, and ZIP + 4	\$ 240,025. Person X Payroll Noncash (Complete Part II for noncash contributions.					
(a)	(b)	(c) (d)					
No. 4	Name, address, and ZIP + 4	Total contributions Type of contribution Person X Payroll Noncash X (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution	n				
5		Person X Payroll Noncash (Complete Part II for noncash contributions.					
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution	 n				
		Person Payroll Noncash (Complete Part II for noncash contributions.					

Portland Museum of Art

01 - 0378420

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	1 Share of Berkshire Hathaway Class A & 285 Shares of Berkshire Hathaway Class B stock	\$\$	08/28/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	190, 9 90-EZ, or 990-PF) (201 ₉

Name of organization Employer identification number 01-0378420 Portland Museum of Art 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 Part III 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. `fŕom 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Portland Museum of Art

Employer identification number 01-0378420

Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		
		, , , , , , , , , , , , , , , , , , , ,	
Pai			
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e		orically important land area
	Protection of natural habitat	Preservation of a cert	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			21
С	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired a		
	listed in the National Register		
3	Number of conservation easements modified, transferred, rel		
	year▶		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements d	uring the year >
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	the year > \$
8	Does each conservation easement reported on line 2(d) above	re satisfy the requirements of section 170	(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	cion's financial statements that describes	the organization's accounting for
	conservation easements.		
Pai	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue staten	nent and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furthera	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	bes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pul	blic service, provide the following amounts
	relating to these items:		
	(i) Revenue included in Form 990, Part VIII, line 1		> \$
			. .
2	If the organization received or held works of art, historical treat	asures, or other similar assets for financia	I gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenue included in Form 990, Part VIII, line 1		• \$
b	Assets included in Form 990, Part X		· · · · · · · · · · · · · · · · · · ·

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

Pai	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, o	or Othe	er Simila	ar Asse	ts (contii	nued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following tha	at are a s	ignificant ι	use of its	collectio	n item	าร
	(check all that apply):									
а	X Public exhibition	d	Loan or exc							
b	X Scholarly research	е	Other							
С	V									
4										
5	During the year, did the organization solicit o	r receive donations o	of art, historical trea	sures, or oth	er simila	r assets		_		_
	to be sold to raise funds rather than to be ma	aintained as part of tl	ne organization's c	ollection?			Х	Yes		No
Pai	t IV Escrow and Custodial Arran		te if the organizatio	n answered	"Yes" to	Form 990,	Part IV, I	ine 9, or		
	reported an amount on Form 990, Par	t X, line 21.								
1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for contributior	ns or other as	sets not	included		_	_	_
	on Form 990, Part X?						L	Yes	L	∟ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:							
								Amoun	t	
С	Beginning balance					1c				
	Additions during the year									
е	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on Fo						L	Yes		No
<u>b</u>	If "Yes," explain the arrangement in Part XIII.									
Pai	T V Endowment Funds. Complete it	f the organization and	swered "Yes" to Fo	rm 990, Part	IV, line 1	0.				
		(a) Current year	(b) Prior year	(c) Two year	rs back	(d) Three y	ears back	(e) Fou	r years	back
1a	Beginning of year balance	27,743,488.	26,917,982.	25,22	5,358.	26,3	92,816.	22	,593	,253.
b	Contributions	565,318.	545,166.	93	8,212.	6	15,453.	3	,035	,908.
	Net investment earnings, gains, and losses	1,622,552.	2,211,823.	2,34	1,165.	-	90,476.	2	,510	,841.
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	2,302,298.	1,931,483.	1,58	6,753.	1,6	92,435.	1	,747	,186.
f	Administrative expenses									,
g	End of year balance	27,629,060.	27,743,488.	26,91	7,982.	25,2	25,358.	26	,392	,816.
2	Provide the estimated percentage of the curr	rent year end balance	e (line 1g, column (a	a)) held as:						,
а	Board designated or quasi-endowment	13.10	%							
b	Permanent endowment ► 84.10	%	_							
С	Temporarily restricted endowment ▶	2.8 0 %								
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%.								
За	Are there endowment funds not in the posse	ssion of the organiza	tion that are held a	and administe	ered for t	he organiz	ation			
	by:								Yes	No
	(i) unrelated organizations							3a(i)		X
	(ii) related organizations							3a(ii)		X
b	If "Yes" to 3a(ii), are the related organizations									
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.							
Pai	t VI Land, Buildings, and Equipm	ent.								
	Complete if the organization answered	d "Yes" to Form 990,	Part IV, line 11a. S	See Form 990	, Part X,	line 10.				
	Description of property	(a) Cost or ot	her (b) Cost	or other	(c) A	ccumulate	d	(d) Boo	k valu	ie
		basis (investm		(other)		preciation				
1a	Land			5,809.				8,58		
b	Buildings		22,53	5,254.	12,	769,11		9,76		
С	Leasehold improvements									
d	Equipment		95	5,382.	. !	586,00	01.	36	9,3	81.
_ е	Other									
	. Add lines 1a through 1e. (Column (d) must e		X, column (B), line	10c.)			1	8,72	1,3	30.
		. ,		,						

Schedule D (Form 990) 2014 Portland Mus	seum of Art		01	-0378420	Page 3
Part VII Investments - Other Securities.					
Complete if the organization answered "Yes"					
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation: Cost or end	d-of-year market v	value
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
(A) Investments in Limited	1 005 101				
(B) Partnerships	1,095,431	End-of-Y	ear Market	Value	
(C) Limited Liability and					
(D) Other Closely Held	F 00F 001	<u> </u>		1	
(E) Companies	5,005,081	End-of-Y	ear Market	Value	
(F)					
(G)					
(H)	C 100 F10				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	6,100,512	•			
Part VIII Investments - Program Related.					
Complete if the organization answered "Yes"					1
(a) Description of investment	(b) Book value	(c) Method of V	aluation: Cost or end	a-ot-year market v	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"	to Form 990, Part IV, lin	e 11d. See Form 990,	Part X, line 15.		
(a) [Description			(b) Book va	alue
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	e 15.)		_		
Complete if the organization answered "Yes"	to Form 990, Part IV, lin	e 11e or 11f. See Form	າ 990, Part X, line 25		
1. (a) Description of liability		(b) Book value			
(1) Federal income taxes					
(2)					
(3)					
(4)					

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Sche	edule D (Form 990) 2014 Portland Museum of Art			01-	03/8420 Page 4
Pai	rt XI Reconciliation of Revenue per Audited Financial Stateme	nts W	ith Revenue per R	etur	n.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	7,979,793.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	41,038.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	-2,016,956.
3	Subtract line 2e from line 1			3	9,996,749.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	124,985.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	124,985.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				10,121,734.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents V	With Expenses per	Retu	ırn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	6,042,759.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	41,038.		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2 d			
е	Add lines 2a through 2d			2e	41,038.
3	Subtract line 2e from line 1			3	6,001,721.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	124,985.		
b	Other (Describe in Part XIII.)	4b			

Part XIII Supplemental Information.

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

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:

c Add lines 4a and 4b

The art collection and library are reflected in the plant fund at a nominal value. The cost of a collection item is recorded as a decrease in net assets when purchased. The proceeds from the sale of a collection item are recorded as an increase in net assets when sold.

The collection is managed according to a policy which adheres to the standards of the American Association of Museums. The policy delineates responsibilities in such matters as museum ethics, acquisitions, loans, care of collections, and deaccessioning. Objects held in the collection are carefully tracked and monitored. PMA's deaccessioning policy allows

for sale or trade of an object only when it is incompatible with PMA's

Schedule D (Form 990) 2014

124,985.

6,126,706.

4c

Part XIII | Supplemental Information (continued)

collecting mission and when clear and complete title to the work is confirmed. Proceeds from the sale of an object may only be applied toward collection acquisitions.

Part III, line 4:

PMA's collection is comprised of more than 18,000 objects, representing fine and decorative arts from the 18th century to the present. These holdings include paintings, sculpture, prints, photographs, glass, ceramics, furniture, silver, artists' books and other media. Works by George Bellows, Sir Anthony Caro, Frederic Church, Stuart Davis, John Haberle, William Harnett, Marsden Hartley, Childe Hassam, Winslow Homer, Edward Hopper, Rockwell Kent, Fitz-Henry Lane, Thomas Moran, Louise Nevelson, John Frederick Peto, Maurice Prendergast, John Singer Sargent, and Andrew Wyeth, among others, showcase the unique artistic heritage of the United States and the creative culture of Maine. European traditions are represented by works from the hand of Max Beckmann, Marc Chagall, Gustave Courbet, Edgar Degas, Jean-Auguste-Dominique Ingres, Claude Monet, Henry Matisse, and Pierre-Auguste Renoir. PMA is accredited by the American Association of Museums and adheres to best practices in developing and managing these works of art in the public trust.

Part V, line 4:

PMA's intended use of endowment funds is for general operations,
education, maintenance of collection and buildings, acquisition of art for
the collection, wages, and other related expenses.

SCHEDULE G

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 990.

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

Name of the organization

Portland Museum of Art | 01-0378420

required to complete this part	. Complete if the organization answe t.	erea "Y	es" to	Form 990, Part IV, II	ne 17. Form 990-EZ	filers are not						
Indicate whether the organization rais	e Solicita f Solicita g Special or oral agreement with any individual art VII) or entity in connection with p	tion of tion of fundra (includerofess	non-g gover ising o ding o	overnment grants nment grants events fficers, directors, trus undraising services?	stees or Yes							
b If "Yes," list the ten highest paid indi compensated at least \$5,000 by the		uant to	agre	ements under which	the fundraiser is to	oe						
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		or control of		or control of		or control of		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No									
Fotal			•									
3 List all states in which the organizatio or licensing.			utions	s or has been notified	d it is exempt from re	egistration						

432081 08-28-14 Schedule G (Form 990 or 990-EZ) 2014

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

Pa	rt I	Fundraising Events. Complete if the of fundraising event contributions and gr							•	
			(a) Event #1 Auction		(b) Event	#2	(с	None		(d) Total events (add col. (a) through
ē			(event type)		(event typ	oe)	(total numb	er)	col. (c))
Revenue	1	Gross receipts	79,450.							79,450.
	2	Less: Contributions								
	3	Gross income (line 1 minus line 2)	79,450.							79,450.
	4	Cash prizes								
S	5	Noncash prizes	5,360.							5,360.
pense	6	Rent/facility costs								
Direct Expenses	7	Food and beverages	24,133.							24,133.
	8	Entertainment								
	9 10	Other direct expenses								29,493.
	11	•		•••••						49,957
Pa	rt	Gaming. Complete if the organization	answered "Yes" to Form	990	, Part IV, lin	e 19, or r	eport	ed more th	an	· ·
		\$15,000 on Form 990-EZ, line 6a.								
Revenue			(a) Bingo		o) Pull tabs/ii go/progressiv		(c)	Other gan	ning	(d) Total gaming (add col. (a) through col. (c)
Rev	1	Gross revenue								
ses	2	Cash prizes								
Direct Expenses	3	Noncash prizes								
Direct	4	Rent/facility costs								
	5	Other direct expenses								
	6	Volunteer labor	Yes % No		Yes No	%		Yes No	%	
	7	Direct expense summary. Add lines 2 through	h 5 in column (d)						▶	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)						▶	
9	Fn	ter the state(s) in which the organization condu	ucts gaming activities:							
а	ls t	the organization licensed to conduct gaming a	ctivities in each of these	state	es?					Yes No
D		No," explain:								
		ere any of the organization's gaming licenses re	evoked, suspended or te	rmin	ated during	the tax y	/ear?			Yes No
b	If "	Yes," explain:								

Schedule G (Form 990 or 990-EZ) 2014

432082 08-28-14

Sch	edule G (Form 990 or 990-EZ) 2014 Portland Museum of Art 01	1-0378420	Page 3
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	O No
13	Indicate the percentage of gaming activity conducted in:		
a	The organization's facility	13a	%
	An outside facility		%
	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
k	o 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		
	Coming manager componentian		
	Gaming manager compensation \$		
	Description of services provided		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandaton, distributions:		
	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to		
•		Yes	□ No
	retain the state gaming license? Discrete the amount of distributions required under state law to be distributed to other exempt organizations or spent in t		110
	organization's own exempt activities during the tax year > \$, i c	
Pa	IT IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part	III lines 9 9h 10l	15h
	15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	in, in 65 0, 05, 10k	5, 105,
	res, re, and res, as approacher, not provide any additional information (cost monatorio).		
-			

Schedule G	(Form 990 or 990-EZ)	Portland Mus	seum of	Art		01-0378420 Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Info	rmation (continued)				
					<u> </u>	

SCHEDULE J (Form 990)

Compensation Information

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.

► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

Portland Museum of Art

Employer identification number 01-0378420

Pa	art I Questions Regarding Compensation			
	·		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes 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	1b	Х	
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 in line 1a?	2	Х	
3	Indicate which, if any, of the following the filing 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.			
	X Compensation committee X Written employment contract			
	Independent compensation consultant			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	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 in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:	_		Х
а	The organization?	5a		X
b	Any related organization?	5b		
_	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:	0-		х
а	The organization?	6a		X
р	Any related organization?	6b		
_	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	_		v
_	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			v
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	i	ı

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

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 in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(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.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Derients	(B)(i)-(D)	reported as deferred in prior Form 990
(1) Mark H. C. Bessire	(i)	214,156.	0.	0.	6,970.	8,291.	229,417.	0.
Director	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							ļ
	(ii)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
Part I, Line 1a:
PMA paid \$1,695 for a membership fee and dues to Portland's Cumberland
Club, for Mark H.C. Bessire, Director. The Cumberland Club is adjacent to
the Portland Museum of Art, and membership allows the Director to host
meetings for the purpose of conducting museum business.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

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.

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number 01-0378420

	Portland Mus	eum of	Art			01-0	378	420	
Pai	rt I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contributio amounts reported or Form 990, Part VIII, line	ո լ	(d) Method of de noncash contribu		•	s
1	Art - Works of art	X	66						
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	X	55	530,842	. Sto	ock Marke	t V	alu	<u>e</u>
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								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts			20.66		1		_	
25	Other (Auction Items)	X	11	39,660	. Fa	r Market	Va	Lue	
26	Other ()								
27	Other ()								
28	Other ()								
29	Number of Forms 8283 received by the organi								
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement 29					
				=				Yes	No
30a	During the year, did the organization receive b	-			_				
	must hold for at least three years from the dat								37
	exempt purposes for the entire holding period	?					30a		X
	If "Yes," describe the arrangement in Part II.					_		v	
31	Does the organization have a gift acceptance					s?	31	Х	
32a	Does the organization hire or use third parties			· ·				Х	
	contributions?						32a	Λ	
	If "Yes," describe in Part II.	() :		an de la constant de	ta ala 1	-1			
33	If the organization did not report an amount in	column (c) 1	or a type of prope	rty for which column (a)	is cnecke	a,			
LHA	describe in Part II. For Paperwork Reduction Act Notice, see	the Instruc	tions for Earm 00	n		Schedule M	(Ecrr	000)	2014
	i oi rabei work neudclion Act Notice. See	ะเมษามาอนเนต	LIUIIS IUI FUI III 99	v.		Scriedule IVI	ur Ul III	コンフリ し	4U 141

432141 08-12-14

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. Schedule M, Line 32b: Contributions of securities are sold through PMA's investment broker. All gifts of securities are sold as soon as administratively possible. Schedule M, Line 33: The art collection and library are reflected in the plant fund at a nominal value. The cost of a collection item is recorded as a decrease in net assets when purchased. The proceeds from the sale of a collection item are recorded as an increase in net assets when sold. The collection is managed according to a policy which adheres to the standards of the American Association of Museums. The policy delineates responsibilities in such matters as museum ethics, acquisitions, loans, care of collections, and deaccessioning. Objects held in the collection are carefully tracked and monitored. PMA's deaccessioning policy allows for sale or trade of an object only when it is incompatible with PMA's collecting mission and when clear and complete title to the work is confirmed. Proceeds from the sale of an object may only be applied toward collection acquisitions.

SCHEDULE 0

Internal Revenue Service

(Form 990 or 990-EZ)
Department of the Treasury

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.

990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to

Open to Public Inspection

OMB No. 1545-0047

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

Name of the organization

Portland Museum of Art

Employer identification number 01-0378420

Form 990, Part V, Line 3b:

The Organization is waiting on Schedule K-1s from investment partnerships in order to complete Form 990-T. The Organization will file Form 990-T once this information has been received.

Form 990, Part VI, Section B, line 11:

The Form 990 is distributed to the full board of trustees with sufficient time for each trustee to review it. The 990 is then discussed at a full meeting of the board of trustees, before the board votes to accept the 990.

Form 990, Part VI, Section B, Line 12c:

In 2010, a top priority for the board of trustees was to formalize its governance procedures. To that end, on May 26, 2010, PMA's revised bylaws were approved, resulting in the establishment of a governance committee. Since that time, the governance committee has established procedures for monitoring and enforcing compliance with PMA's policies, including the conflict of interest policy. Each trustee is required to review and sign a copy of the PMA Code of Ethics on an annual basis. Also on an annual basis, each trustee is required to complete and submit a personal information form on which any potential conflicts of interest are to be disclosed. If a conflict of interest is disclosed, the form is presented to the governance committee to be reviewed and addressed.

Form 990, Part VI, Section B, Line 15:

Per PMA's Bylaws, the executive committee is authorized to exercise the

following specific powers and duties on behalf of the board of trustees:

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

Schedule O (Form 990 or 990-EZ) (2014)

08-27-14

- (a) To enter into employment with, and to terminate the employment of, the chief executive officer (the "Director"), to negotiate and enter into employment contracts with the Director subject to final approval by the board of trustees, to annually review the performance of the Director, to determine the Director's annual compensation adjustments and benefits adjustments, to resolve all disciplinary and other issues relating to the Director's employment;
- (b) To review annually the performance of any other key employees and to resolve all disciplinary and other issues relating to such employees when such tasks are specifically delegated to the executive committee by the board of trustees;

In 2010, the PMA engaged an independent HR consulting firm, Maine HR
Partners, LLC, to conduct a classification and compensation study of all
positions, including the Director and Deputy Directors. The study included
a customized salary and employee benefits survey of comparable
organizations, as well as other employers in the relevant market areas and
in other published surveys. A survey of fringe benefit practices was also
conducted and the results incorporated into the final report, in order to
consider total compensation in the establishment of a salary structure.
Based on this analysis of market data, salary ranges were developed which
address the concepts of market competitiveness and internal equity
considerations. In 2014, the same firm conducted another survey of
comparable organizations and the PMA's salary ranges were adjusted to
reflect this new data. Maine HR Partners, LLC, also worked with PMA staff
and the human resources committee to develop a performance evaluation

Name of the organization Portland Museum of Art	Employer identification number 01-0378420
system, which included 360 degree performance reviews of	these individuals.
The Director's performance review is conducted by the Boa	rd President and
reviewed with the executive committee. The Deputy Direct	or's performance
review is conducted by the Director and presented to the	executive
committee. Compensation for these two individuals is det	ermined by vote of
the executive committee, utilizing the performance review	data and data
from the independent classification and compensation stud	у•
Form 990, Part VI, Section C, Line 19:	
PMA's governing documents, conflict of interest policy, a	nd financial
statements are made available to the public upon request.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

➤ Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

01-0378420

(a)	(b)	(c)	(d)	(e)			(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity Legal domicile (state or foreign country) Total income		me End-of-yea	r assets		ontrolling ntity	g	
Part II Identification of Related Tax-Exempt Organizations during the tax year.	I Itions Complete if the organizati	on answered "Yes" on Form 99	0, Part IV, line 34 b	ecause it had one	or more	related tax-exen	npt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section		(f) ct controlling entity	cont	g) 512(b)(13) rolled tity?
		loreigh country)		501(c)(3))		,	Yes	No
Davis Family Foundation - 01-0390443 30 Forest Falls Drive								
Yarmouth, ME 04096	To award grants	Maine	501(c)(3)	Line 11a, I	N/A			X

Portland Museum of Art

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

		,									
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General managir partner	Percentage ownership
		country)		sections 512-514)		455515	Yes	No	K-1 (Form 1065)	Yes N	0
	1										
	1										
	1										
	1										
	1										
	1										
											
	1										
											+
	1										
	1										
	1										
							l				

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	
		,						Yes	No_

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1a

X

Yes No

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b	Gift, grant, or capital contribution to related organization(s)				1b	X		
c Gift, grant, or capital contribution from related organization(s)								
d	Loans or loan guarantees to or for related organization(s)				1d	X		
e Loans or loan guarantees by related organization(s)								
f	Dividends from related organization(s)				1f	X		
	Sale of assets to related organization(s)					X		
h	Purchase of assets from related organization(s)				1h	X		
i	Exchange of assets with related organization(s)				1i	X		
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	X		
k	Lease of facilities, equipment, or other assets from related organization(s)				1k	х		
ı	Performance of services or membership or fundraising solicitations for related organization	on(s)			11	Х		
	Performance of services or membership or fundraising solicitations by related organization					X		
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	X		
 n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) 								
_					10			
p	Reimbursement paid to related organization(s) for expenses				1p	Х		
p Reimbursement paid to related organization(s) for expenses q Reimbursement paid by related organization(s) for expenses								
•	1 , 0 (, 1							
r	Other transfer of cash or property to related organization(s)				1r	Х		
s	Other transfer of cash or property from related organization(s)				1s	X		
	If the answer to any of the above is "Yes," see the instructions for information on who mu							
	•	(b) ransaction rype (a-s)	(c) Amount involved	(d) Method of determining amount in	volved			
1)								
2)								
2)								
3)								
4)								
		1						
5)								
-								
6)								
3216	3 08-14-14	45		Schedule	R (Form 9	90) 2014		

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

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

(a)	(b)	(c)	(d)	(e) Are a partners 501(c) orgs.)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners	S Sec.	Share of	Share of	Disp	ropor-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera	or Percentage
of entity		(state or foreign	excluded from tax under	orgs.)(3) .?	total	end-of-year	alloca	tions?	of Schedule K-1	partne	ownership
		country)	sections 512-514)	Yes I		income	assets	Yes	No	(Form 1065)	Yes N	О
	-											
	-											
				\vdash	_			-			\vdash	
	4											
	-											
				Ш								
	1											
	1											
	1											
				\vdash				<u> </u>	-			
	1											
	-											
				\sqcup								
	1											
				\sqcap								
	1											
	1											
	l .	l .		ш				_			$\perp \perp$	000) 0044