

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning and ending	
B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization AMERICAN ASSOCIATION OF MUSEUMS Doing business as AMERICAN ALLIANCE OF MUSEUMS Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2451 CRYSTAL DRIVE 1005 City or town, state or province, country, and ZIP or foreign postal code ARLINGTON, VA 22202 F Name and address of principal officer: LAURA LOTT SAME AS C ABOVE
D Employer identification number 53-0205889	
E Telephone number (202) 289-1818	
G Gross receipts \$ 15,231,538.	
H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
J Website: ▶ WWW.AAM-US.ORG	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
L Year of formation: 1906 M State of legal domicile: DC	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO ENHANCE THE VALUE OF MUSEUMS TO THEIR COMMUNITIES THROUGH LEADERSHIP, ADVOCACY, AND SERVICE.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	26
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	26
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	61
	6 Total number of volunteers (estimate if necessary)	6	350
		7a Total unrelated business revenue from Part VIII, column (C), line 12	7a
	b Net unrelated business taxable income from Form 990-T, line 34	7b	117,590.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 2,937,659.	Current Year 2,877,543.
	9 Program service revenue (Part VIII, line 2g)	6,863,386.	6,861,388.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	146,023.	435,916.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	446,257.	727,637.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,393,325.	10,902,484.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	958,096.	1,023,065.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,493,808.	4,422,789.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 557,976.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,556,356.	4,761,933.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	10,008,260.	10,207,787.
	19 Revenue less expenses. Subtract line 18 from line 12	385,065.	694,697.
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 5,382,080.	End of Year 6,473,237.
	21 Total liabilities (Part X, line 26)	4,042,458.	4,846,894.
	22 Net assets or fund balances. Subtract line 21 from line 20	1,339,622.	1,626,343.

Part II Signature Block

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

Sign Here	Signature of officer 	Date 5/12/16	
	Type or print name and title LAURA LOTT, PRESIDENT AND CEO		
Paid Preparer Use Only	Print/Type preparer's name FRANK H. SMITH	Preparer's signature 	Date 05/12/16
	Firm's name RAFFA, P.C.	Check if self-employed <input type="checkbox"/>	PTIN P00639053
	Firm's address 1899 L STREET, NW, SUITE 850 WASHINGTON, DC 20036	Firm's EIN 52-1511275	Phone no. (202) 822-5000

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒

1 Briefly describe the organization's mission:
THE AMERICAN ALLIANCE OF MUSEUMS (THE ALLIANCE) IS DEDICATED TO PROMOTING EXCELLENCE WITHIN THE MUSEUM COMMUNITY. THE ALLIANCE SUPPORTS MUSEUM STAFF, BOARDS AND VOLUNTEERS ACROSS THE COUNTRY IN BETTER SERVING THE PUBLIC. THE ALLIANCE WILL SUPPORT OPPORTUNITIES FOR

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

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

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

4a (Code:) (Expenses \$ **3,141,448.** including grants of \$ **967,325.**) (Revenue \$ **346,324.**)
FIELD-WIDE SERVICES: STRENGTHENS MUSEUMS THROUGH PROFESSIONAL ASSESSMENT AND OPPORTUNITIES FOR EXCHANGE AND COLLABORATION. THE CONTINUUM OF EXCELLENCE PROGRAMS-INCLUDING THE FEDERALLY FUNDED MUSEUMS ASSESSMENT PROGRAM (MAP)- FOSTER EXCELLENCE AND OFFER TACTICAL STRATEGIES TO BETTER FULFILL MUSEUMS' PUBLIC SERVICE, COLLECTIONS STEWARDSHIP AND EDUCATIONAL ROLES. THE ALLIANCE'S ACCREDITATION PROGRAM IS THE FIELD'S PRIMARY VEHICLE FOR QUALITY ASSURANCE, SELF-REGULATION AND PUBLIC ACCOUNTABILITY. THROUGH THE FEDERALLY FUNDED INTERNATIONAL EXCHANGE PROGRAM MUSEUMS CONNECT, MUSEUMS COLLABORATE WITH COMMUNITIES AND PARTNERS ABROAD TO TACKLE TIMELY SOCIAL ISSUES, ADVANCING CROSS-CULTURAL DIALOGUE.

4b (Code:) (Expenses \$ **3,063,164.** including grants of \$ **18,911.**) (Revenue \$ **2,516,983.**)
MEETINGS AND PROFESSIONAL EDUCATION: BRINGS TOGETHER AUTHORITATIVE VOICES AND INFORMATION PIONEERS TO DELIVER WORLD-CLASS EDUCATIONAL AND PROFESSIONAL DEVELOPMENT EXPERIENCES FOR THE MUSEUM FIELD, INCLUDING YEAR-ROUND SEMINARS AND WORKSHOPS, ONLINE PROGRAMS, LEADERSHIP TRAINING AND THE AAM ANNUAL MEETING, THE LARGEST GATHERING OF MUSEUM PROFESSIONALS IN THE WORLD.

4c (Code:) (Expenses \$ **1,082,479.** including grants of \$ **30,125.**) (Revenue \$ **3,264,327.**)
MEMBERSHIP: PROVIDES INDISPENSABLE RESOURCES FOR THE INSTITUTIONS AND INDIVIDUALS THAT MAKE UP THE DIVERSE MUSEUM FIELD. THE ALLIANCE'S 22 PROFESSIONAL NETWORKS OFFER MEMBERS RELEVANT INFORMATION FOR CAREER SUCCESS, OPPORTUNITIES FOR PEER-TO-PEER NETWORKING AND INTERDISCIPLINARY EXCHANGE OF BEST PRACTICES AND INNOVATIVE IDEAS.

4d Other program services (Describe in Schedule O.)
 (Expenses \$ **2,062,349.** including grants of \$ **6,704.**) (Revenue \$ **827,029.**)

4e Total program service expenses **9,349,440.**

Part IV Checklist of Required Schedules

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

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Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	
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	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	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		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 former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		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		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c 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		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		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		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		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

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

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Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	1a	1b	1c	2a	2b	3a	3b	4a	5a	5b	5c	6a	6b	7a	7b	7c	7d	7e	7f	7g	7h	8	9a	9b	10a	10b	11a	11b	12a	12b	13a	13b	13c	14a	14b
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	151																																		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		0																																	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			X																																
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		61																																	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			X																																
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			X																																
b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O			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)?								X																											
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).																																			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?									X																										
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?									X																										
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?																																			
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?												X																							
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?																																			
7 Organizations that may receive deductible contributions under section 170(c).																																			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?								X																											
b If "Yes," did the organization notify the donor of the value of the goods or services provided?																																			
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?												X																							
d If "Yes," indicate the number of Forms 8282 filed during the year																																			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?									X																										
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?									X																										
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?																																			
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?																																			
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?																																			
9 Sponsoring organizations maintaining donor advised funds.																																			
a Did the sponsoring organization make any taxable distributions under section 4966?																																			
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?																																			
10 Section 501(c)(7) organizations. Enter:																																			
a Initiation fees and capital contributions included on Part VIII, line 12																																			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities																																			
11 Section 501(c)(12) organizations. Enter:																																			
a Gross income from members or shareholders																																			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)																																			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?																																			
b 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.																																			
a Is the organization licensed to issue qualified health plans in more than one state? 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																																			
c Enter the amount of reserves on hand																																			
14a Did the organization receive any payments for indoor tanning services during the tax year?																																			
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O																																			

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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.

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

☒**Section A. Governing Body and Management**

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	26													
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.														
b Enter the number of voting members included in line 1a, above, who are independent		26												
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?														X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?														X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?														X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?														X
6 Did the organization have members or stockholders?							X							
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?								X						
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?									X					
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:														
a The governing body?										X				
b Each committee with authority to act on behalf of the governing body?										X				
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O														X

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

	10a	10b	11a	12a	12b	12c	13	14	15a	15b	16a	16b	Yes	No
10a Did the organization have local chapters, branches, or affiliates?														X
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?			X											
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				X										
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?				X										
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done						X								
13 Did the organization have a written whistleblower policy?						X								
14 Did the organization have a written document retention and destruction policy?						X								
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?														
a The organization's CEO, Executive Director, or top management official									X					
b Other officers or key employees of the organization									X					
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?														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: **AL, AK, AZ, AR, CT, FL, IL, KS, KY, ME, MD, MA**

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: **KYLE ANGE - (202) 289-1818**
2451 CRYSTAL DRIVE, NO. 1005, ARLINGTON, VA 22202

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KAYWIN FELDMAN CHAIR	2.00	X		X				0.	0.	0.
(2) WILLIAM T. HARRIS VICE CHAIR & SECRETARY	2.00	X		X				0.	0.	0.
(3) MEME OMOGBAI IMMEDIATE PAST CHAIR	2.00	X		X				0.	0.	0.
(4) GEORGE G. JOHNSON TREASURER	2.00	X		X				0.	0.	0.
(5) KIPPEN DE ALBA CHU DIRECTOR	2.00	X						0.	0.	0.
(6) ELLEN CHARLES DIRECTOR	2.00	X						0.	0.	0.
(7) ROBERT M. DAVIS DIRECTOR	2.00	X						0.	0.	0.
(8) BERIT N. DURLER DIRECTOR	2.00	X						0.	0.	0.
(9) MARK EDWARD DIRECTOR	2.00	X						0.	0.	0.
(10) DAVID ELLIS DIRECTOR	2.00	X						0.	0.	0.
(11) JOEL HOFFMAN DIRECTOR	2.00	X						0.	0.	0.
(12) NIK HONEYSETT DIRECTOR	2.00	X						0.	0.	0.
(13) DOUGLAS S. JONES DIRECTOR	2.00	X						0.	0.	0.
(14) ELIZA BENINGTON KOZLOWSKI DIRECTOR	2.00	X						0.	0.	0.
(15) LISA YUN LEE DIRECTOR	2.00	X						0.	0.	0.
(16) CINNAMON CATLIN LEGUTKO DIRECTOR	2.00	X						0.	0.	0.
(17) JUDITH MARGLES DIRECTOR	2.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) TONYA MATTHEWS DIRECTOR	2.00	X						0.	0.	0.
(19) TEY MARIANNA NUNN DIRECTOR (UNTIL 5/2015)	2.00	X						0.	0.	0.
(20) PATTY ORTIZ DIRECTOR	2.00	X						0.	0.	0.
(21) LAWRENCE PIJEAUX DIRECTOR	2.00	X						0.	0.	0.
(22) VAN A. ROMANS DIRECTOR	2.00	X						0.	0.	0.
(23) RUTH SHELLY DIRECTOR	2.00	X						0.	0.	0.
(24) SILVIA SINGER DIRECTOR	2.00	X						0.	0.	0.
(25) STEPHANIE STEBICH DIRECTOR	2.00	X						0.	0.	0.
(26) CARLOS TORTOLERO DIRECTOR	2.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								1,164,653.	0.	126,289.
d Total (add lines 1b and 1c)								1,164,653.	0.	126,289.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **10**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
PRODUCTION RESOURCES GROUP P.O. BOX 905897, CHARLOTTE, NC 28290	AUDIOVISUAL	176,126.
APTIFY CORPORATION, 7900 WESTPARK DRIVE, 5TH FLOOR, TYSONS CORNER, VA 22102	SOFTWARE DEVELOPMENT	165,622.
CALLAWAY TRANSPORTATION, 7564 MAIN STREET 2ND FLOOR, SYKESVILLE, MD 21784	TRANSPORTATION	127,951.
CREATIVE EVENT EXPERIENCE, 1802 NORTH UNDERWOOD STREET, ARLINGTON, VA 22205	OUTSOURCED SALES/COMMISSION FEE	124,124.
ATLANTA MARRIOTT MARQUIS 265 PEACHTREE CENTER, ATLANTA, GA 30303	HOTEL	113,873.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **6**

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2015)

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) MARSHALL TURNER DIRECTOR (UNTIL 05/2015)	2.00	X						0.	0.	0.
(28) JOHN WETENHALL DIRECTOR	2.00	X						0.	0.	0.
(29) LAURA LOTT COO (UNTIL 05/2015); PRESIDENT & CEO	40.00			X				271,124.	0.	19,971.
(30) FORD BELL PRESIDENT & CEO (UNTIL 05/2015)	40.00			X				148,706.	0.	14,341.
(31) KYLE ANGE VP OF FINANCE & OPERATIONS	40.00			X				134,522.	0.	14,331.
(32) JANET VAUGHAN VP OF MEMBERSHIP & EXCELLENCE	40.00				X			128,961.	0.	19,241.
(33) GAIL RAVNITZKY SILBERGLIED VP OF GOVERNMENT RELATIONS	40.00				X			128,349.	0.	7,905.
(34) ELIZABETH MERRITT VP OF STRATEGIC FORESIGHT	40.00				X			121,302.	0.	16,860.
(35) BRENT MUNDT VP OF DEVELOPMENT	40.00				X			115,225.	0.	17,498.
(36) CANAN ABAYAN DIRECTOR OF IT & BUSINESS STRATEGY	40.00				X			116,464.	0.	16,142.
Total to Part VII, Section A, line 1c								1,164,653.		126,289.

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e 1,663,285.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 1,214,258.			
	g Noncash contributions included in lines 1a-1f: \$				
	h Total. Add lines 1a-1f	2,877,543.			
Program Service Revenue	2 a MEMBERSHIP DUES	Business Code 900099	3,264,327.	3,264,327.	
	b EXHIBIT FEES	900099	1,372,349.	1,372,349.	
	c REGISTRATIONS	900099	1,160,200.	1,160,200.	
	d ADVERTISING INCOME	541800	701,244.		701,244.
	e ACCREDITATION FEES	900099	338,308.	338,308.	
	f All other program service revenue	900099	24,960.	24,960.	
	g Total. Add lines 2a-2f	6,861,388.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		60,877.	
4 Income from investment of tax-exempt bond proceeds					
5 Royalties			161,625.		161,625.
6 a Gross rents		(i) Real 136,760.			
b Less: rental expenses		(ii) Personal 166,692.			
c Rental income or (loss)		-29,932.			
d Net rental income or (loss)			-29,932.		-29,932.
7 a Gross amount from sales of assets other than inventory		(i) Securities 4422878.			
b Less: cost or other basis and sales expenses		(ii) Other 4047839.			
c Gain or (loss)		375,039.			
d Net gain or (loss)			375,039.		375,039.
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		a			
b Less: direct expenses		b			
c Net income or (loss) from fundraising events					
9 a Gross income from gaming activities. See Part IV, line 19		a			
b Less: direct expenses		b			
c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances		a 207,798.			
b Less: cost of goods sold	b 114,523.				
c Net income or (loss) from sales of inventory		93,275.	93,275.		
Miscellaneous Revenue		Business Code			
11 a RELOCATION INCENTIVE	900099	351,572.		351,572.	
b OTHER INCOME	900099	151,097.		151,097.	
c					
d All other revenue					
e Total. Add lines 11a-11d		502,669.			
12 Total revenue. See instructions.		10902484.	6,253,419.	701,244.	1070278.

Part IX Statement of Functional Expenses

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

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

☒ X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	791,165.	791,165.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	30,125.	30,125.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	201,775.	201,775.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	602,995.		557,581.	45,414.
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	3,144,401.	2,211,853.	716,809.	215,739.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	136,422.	98,155.	28,929.	9,338.
9 Other employee benefits	279,680.	179,762.	80,304.	19,614.
10 Payroll taxes	259,291.	155,056.	86,168.	18,067.
11 Fees for services (non-employees):				
a Management				
b Legal	52,345.	15,981.	36,364.	
c Accounting	36,000.		36,000.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	13,767.		13,767.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	1,421,040.	1,014,850.	358,986.	47,204.
12 Advertising and promotion				
13 Office expenses	879,350.	608,649.	262,508.	8,193.
14 Information technology	129,427.	65,403.	64,024.	
15 Royalties	6,207.		6,207.	
16 Occupancy	743,355.	9,975.	733,380.	
17 Travel	426,040.	381,375.	35,019.	9,646.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	440,718.	417,851.	20,158.	2,709.
20 Interest	188.		188.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	273,962.		273,962.	
23 Insurance	40,082.	10,423.	29,659.	
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 O.)				
a UBI TAX	42,000.		42,000.	
b DISPOSAL-PROPERTY/EQUIP	182,302.		182,302.	
c PROF. DEVELOPMENT	52,920.	36,251.	12,397.	4,272.
d MISCELLANEOUS EXPENSES	22,230.	22.	22,208.	
e All other expenses		3,120,769.	-3,298,549.	177,780.
25 Total functional expenses. Add lines 1 through 24e	10,207,787.	9,349,440.	300,371.	557,976.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	470,529.	1	416,045.
	2 Savings and temporary cash investments	151,604.	2	139,628.
	3 Pledges and grants receivable, net	192,815.	3	187,998.
	4 Accounts receivable, net	237,881.	4	350,514.
	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	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see Instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	323,605.	8	238,263.
	9 Prepaid expenses and deferred charges	222,148.	9	266,670.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,199,735.		
	b Less: accumulated depreciation	10b 2,259,341.	10c	1,940,394.
	11 Investments - publicly traded securities	2,902,811.	11	2,933,725.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	5,382,080.	16	6,473,237.	
Liabilities	17 Accounts payable and accrued expenses	445,254.	17	561,518.
	18 Grants payable		18	
	19 Deferred revenue	2,742,486.	19	2,813,450.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	150,000.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	704,718.	25	1,471,926.
	26 Total liabilities. Add lines 17 through 25	4,042,458.	26	4,846,894.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	361,770.	27	691,766.
	28 Temporarily restricted net assets	706,537.	28	663,262.
	29 Permanently restricted net assets	271,315.	29	271,315.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	1,339,622.	33	1,626,343.
34 Total liabilities and net assets/fund balances	5,382,080.	34	6,473,237.	

Form 990 (2015)

Part XI Reconciliation of Net AssetsCheck 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	10,902,484.
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,207,787.
3	Revenue less expenses. Subtract line 2 from line 1	3	694,697.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,339,622.
5	Net unrealized gains (losses) on investments	5	-407,976.
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	1,626,343.

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

Form 990 (2015)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

AMERICAN ASSOCIATION OF MUSEUMS

Employer identification number

53-0205889

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service 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 the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2015

Form 990 or 990-EZ. 532021 09-23-15

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2424939.	2720687.	2382498.	2937659.	2877543.	13343326.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	2424939.	2720687.	2382498.	2937659.	2877543.	13343326.
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)						720,074.
6 Public support. Subtract line 5 from line 4.						12623252.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	2424939.	2720687.	2382498.	2937659.	2877543.	13343326.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	558,893.	567,921.	531,922.	544,924.	359,262.	2562922.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	142,617.	109,564.	98,686.	106,501.	118,590.	575,958.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	24,382.		9,339.	17,069.	502,669.	553,459.
11 Total support. Add lines 7 through 10						17035665.
12 Gross receipts from related activities, etc. (see instructions)					12	32,608,392.
13 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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	74.10 %
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	73.68 %
16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2015

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2015. 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 ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

- 11** Has the organization accepted a gift or contribution from any of the following persons?
- a** A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
- b** A family member of a person described in (a) above?
- c** 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**.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

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

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 1** Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

	Yes	No
1		

Section D. All Type III Supporting Organizations

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

	Yes	No
1		
2		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):
- a** ☐ 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.
- c** ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.

- a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI** identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.

	Yes	No
2a		
2b		
3a		
3b		

- b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

3 Parent of Supported Organizations. Answer (a) and (b) below.

- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in **Part VI**.
- b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (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	

Section 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-functionally-integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2015

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

Section D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in Part VI). See instructions.		
7	Total annual distributions. Add lines 1 through 6.		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.		
9	Distributable amount for 2015 from Section C, line 6		
10	Line 8 amount divided by Line 9 amount		

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
a				
b				
c				
d	From 2013			
e	From 2014			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7	Excess distributions carryover to 2016. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b				
c	Excess from 2013			
d	Excess from 2014			
e	Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

Part VI

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:**OTHER INCOME**

2011 AMOUNT: \$ 24,382.

2012 AMOUNT: \$ 0.

2013 AMOUNT: \$ 9,339.

2014 AMOUNT: \$ 17,069.

2015 AMOUNT: \$ 151,097.

RELOCATION INCENTIVE

2011 AMOUNT: \$ 0.

2012 AMOUNT: \$ 0.

2013 AMOUNT: \$ 0.

2014 AMOUNT: \$ 0.

2015 AMOUNT: \$ 351,572.

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

2015

Name of the organization

Employer identification number

AMERICAN ASSOCIATION OF MUSEUMS

53-0205889

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

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

☐ 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

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

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet 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) (2015)

Name of organization

Employer identification number

AMERICAN ASSOCIATION OF MUSEUMS**53-0205889****Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$ <u>1,177,927.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>455,358.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>193,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>72,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>		\$ <u>60,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
AMERICAN ASSOCIATION OF MUSEUMS	53-0205889

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization

Employer identification number

AMERICAN ASSOCIATION OF MUSEUMS

53-0205889

Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$

Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2015

**Open to Public
Inspection**

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

AMERICAN ASSOCIATION OF MUSEUMS

Employer identification number

53-0205889

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ▶ \$

3 Volunteer hours ▶

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

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

Schedule C (Form 990 or 990-EZ) 2015

LHA
532041
10-05-15

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)		100,626.													
c Total lobbying expenditures (add lines 1a and 1b)		100,626.													
d Other exempt purpose expenditures		9,807,846.													
e Total exempt purpose expenditures (add lines 1c and 1d)		9,908,472.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		645,424.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)		161,356.													
h Subtract line 1g from line 1a. If zero or less, enter -0-		0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-		0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount	674,978.	595,480.	656,176.	645,424.	2,572,058.
b Lobbying ceiling amount (150% of line 2a, column(e))					3,858,087.
c Total lobbying expenditures	111,851.	61,606.	85,545.	100,626.	359,628.
d Grassroots nontaxable amount	168,745.	148,870.	164,044.	161,356.	643,015.
e Grassroots ceiling amount (150% of line 2d, column (e))					964,523.
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2015

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**
▶ **Attach to Form 990.**▶ **Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2015**Open to Public Inspection**

Name of the organization

AMERICAN ASSOCIATION OF MUSEUMS

Employer identification number

53-0205889

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

	(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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified 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
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above 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 easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$

(ii) Assets included in Form 990, Part X ▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

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

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

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

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

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

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

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

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	412,842.	413,809.	388,628.	450,896.	461,240.
b Contributions		140.	420.	310.	225.
c Net investment earnings, gains, and losses	-43,700.	20,622.	46,540.	43,034.	-10,569.
d Grants or scholarships					
e Other expenditures for facilities and programs	20,642.	21,729.	21,779.	105,612.	
f Administrative expenses					
g End of year balance	348,500.	412,842.	413,809.	388,628.	450,896.

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

a Board designated or quasi-endowment ☒ 22.15 %

b Permanent endowment ☒ 77.85 %

c Temporarily restricted endowment ☐ %

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

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

(i) unrelated organizations

(ii) related organizations

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

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,298,876.	20,928.	1,277,948.
d Equipment		353,532.	165,411.	188,121.
e Other		2,547,327.	2,073,002.	474,325.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,940,394.

Schedule D (Form 990) 2015

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) DEFERRED RENT AND LEASEHOLD		
(3) INCENTIVE LIABILITY	1,431,426.	
(4) SECURITY DEPOSITS	40,500.	
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	1,471,926.	

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 ☒

Schedule D (Form 990) 2015

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

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

1	Total revenue, gains, and other support per audited financial statements	1	10,579,654.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-407,976.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	98,913.
e	Add lines 2a through 2d	2e	-309,063.
3	Subtract line 2e from line 1	3	10,888,717.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	13,767.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	13,767.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	10,902,484.

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

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

1	Total expenses and losses per audited financial statements	1	10,292,933.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	98,913.
e	Add lines 2a through 2d	2e	98,913.
3	Subtract line 2e from line 1	3	10,194,020.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	13,767.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	13,767.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	10,207,787.

Part XIII Supplemental Information.

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

PART V, LINE 4:

THE ALLIANCE'S ENDOWMENT CONSISTS OF DONOR-RESTRICTED FUNDS AND BOARD-DESIGNATED MATCHING FUNDS CONTRIBUTED TO THE ALLIANCE IN SUPPORT OF ITS ACCREDITATION PROGRAM AND OTHER PROFESSIONAL STANDARDS INITIATIVES.

PART X, LINE 2:

THE ALLIANCE PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEAR ENDED DECEMBER 31, 2015, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:532054
09-21-15

Schedule D (Form 990) 2015

Part XIII Supplemental Information (continued)

COST OF GOODS SOLD	114,523.
RENTAL EXPENSES	166,692.
LOSS ON DISPOSAL OF PROPERTY AND EQUIPMENT	-182,302.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	98,913.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD	114,523.
RENTAL EXPENSES	166,692.
LOSS ON DISPOSAL OF PROPERTY AND EQUIPMENT	-182,302.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	98,913.

SCHEDULE F
(Form 990)Department of the Treasury
Internal Revenue Service**Statement of Activities Outside the United States**

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2015Open to Public
Inspection

Name of the organization

Employer identification number

AMERICAN ASSOCIATION OF MUSEUMS

53-0205889

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
SOUTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		156,372.
SOUTH ASIA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		15,169.
EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		11,421.
RUSSIA AND NEIGHBORING STATES	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		6,617.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		6,096.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		3,463.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		2,637.
3 a Sub-total	0	0			201,775.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			201,775.

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

Schedule F (Form 990) 2015

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
SCHOLARSHIP AND AWARDS	SOUTH ASIA	5	15,169	CHECK	0.		
SCHOLARSHIP AND AWARDS	EAST ASIA AND THE PACIFIC	4	11,421	CHECK	0.		
SCHOLARSHIP AND AWARDS	SOUTH AMERICA	3	8,117	CHECK	0.		
SCHOLARSHIP AND AWARDS	RUSSIA AND NEIGHBORING STATES	2	6,617	CHECK	0.		
SCHOLARSHIP AND AWARDS	EUROPE (INCLUDING ICELAND & GREENLAND)	2	6,096	CHECK	0.		
SCHOLARSHIP AND AWARDS	MIDDLE EAST AND NORTH AFRICA	1	3,463	CHECK	0.		
SCHOLARSHIP AND AWARDS	CENTRAL AMERICA AND THE CARIBBEAN	1	2,637	CHECK	0.		

Schedule F (Form 990) 2015

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990) ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471) ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865) ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990) ☐ Yes ☒ No

Schedule F (Form 990) 2015

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

PART I, LINE 2:

GRANTS AND SCHOLARSHIPS ARE AWARDED TO CITIZENS BASED ON THE FOLLOWING
CRITERIA:

1. MUSEUM EMPLOYEE, FULL-TIME GRADUATE OR PH.D. STUDENT IN A
MUSEUM-RELEVANT FIELD OUTSIDE OF THE US
2. CITIZEN OF A COUNTRY WITH AN EMERGING ECONOMY
3. NOT PREVIOUSLY A RECIPIENT OF ANY OF THE ALLIANCE FELLOWSHIPS TO
ATTEND THE ANNUAL MEETING (INTERNATIONAL, DIVERSITY, EMERGING MUSEUM
PROFESSIONAL, OR MID-CAREER PROFESSIONAL NETWORK)
4. MEETING IS RELEVANT TO HIS/HER CAREER PATH AND IT HAS BEEN ARTICULATED
AS TO HOW ATTENDING THIS MEETING COULD ASSIST THE APPLICANT
PROFESSIONALLY
5. THERE IS EVIDENCE OF THE IMPORTANCE AND UNIQUENESS OF PARTICIPATION IN
THE ALLIANCE ANNUAL MEETING
6. THERE IS EVIDENCE OF COMMITMENT TO MUSEUMS AND/OR THE LOCAL MUSEUM
COMMUNITY, AND IT IS CLEAR AS TO HOW THE APPLICANT CAN BRING NEW
INFORMATION AND SKILLS BACK TO BENEFIT THE LOCAL MUSEUM OR MUSEUM
COMMUNITY AND HOW THESE WILL BE APPLIED

THE MAJORITY OF THE FUNDS ARE PAID ON BEHALF OF THE RECIPIENTS FOR THEIR
ATTENDANCE AT THE ALLIANCE'S ANNUAL MEETING. A SMALL CASH STIPEND IS
PROVIDED ON SITE TO COVER INCIDENTAL EXPENSES.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

AMERICAN ASSOCIATION OF MUSEUMS

Employer identification number
53-0205889

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JANE ADDAMS HULL-HOUSE MUSEUM 809 SOUTH MARSHFIELD AVE. (M/C 551) CHICAGO, IL 60612	37-6000511	501(C)(3)	95,000.	0.			TEENS IN CHICAGO AND PHNOM PENH WILL ENGAGE IN VARIOUS JUSTICE PRACTICES, INCLUDING USING PEARL S. BUCK AS INSPIRATION, HIGH SCHOOL STUDENTS WILL UNEARTH STEREOTYPES AND
PEARL S. BUCK INTERNATIONAL INC. 520 DUBLIN ROAD PERKASIE, PA 18944	23-1637212	501(C)(3)	84,434.	0.			THE MODEL WINS (WOMEN IN NATURAL SCIENCES) PROGRAM AT THE ACADEMY OF NATURAL SCIENCES WILL SERVE AS A THROUGH AN EXPLORATION, WITH LOCAL SCIENTIST, OF COMMON ENVIRONMENTAL ISSUES SUCH AS INVASIVE
ACADEMY OF NATURAL SCIENCES OF DREXEL UNIVERSITY - 1900 BENJAMIN FRANKLIN PARKWAY - PHILADELPHIA, PA 19103	23-1352000	501(C)(3)	80,189.	0.			STORIES FROM THE HOME PLANET INVITES TEACHERS, THEIR K-THROUGH-12 STUDENTS, AND THE LARGER COLLEGE STUDENTS IN MOROCCO AND PHILADELPHIA WILL DOCUMENT ORAL HISTORIES FROM FEMALE
PATRICIA AND PHILLIP FROST MUSEUM OF SCIENCE - 3280 SOUTH MIAMI AVENUE - MIAMI, FL 33129	59-0854960	501(C)(3)	77,500.	0.			
JAMES FORD BELL MUSEUM OF NATURAL HISTORY - 2221 UNIVERSITY AVE. SE, #100 - MINNEAPOLIS, MN 55414	41-6007513	501(C)(3)	74,868.	0.			
THE FABRIC WORKSHOP AND MUSEUM 1214 ARCH STREET PHILADELPHIA, PA 19107	23-2018929	501(C)(3)	68,500.	0.			

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

14.
0.

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) **AMERICAN ASSOCIATION OF MUSEUMS**

53-0205889

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHABOT SPACE AND SCIENCE CENTER 10000 SKYLINE BOULEVARD OAKLAND, CA 94619	94-3146233	501(C)(3)	62,894.	0.			ACCORDING TO THE UNITED NATIONS, THE EARTH'S POPULATION IS EXPECTED TO REACH NINE BILLION BY
FRIENDS OF THE NORTH CAROLINA MUSEUM OF NATURAL SCIENCES, D/B/A NORTH CAROL - 11 WEST JONES STREET - RALEIGH, NC 27601	56-1240806	501(C)(3)	62,014.	0.			E-MAMMAL INTERNATIONAL UNITES 6TH, 7TH AND 8TH GRADE STUDENTS IN A GLOBAL-CITIZEN-SCIENTIST
CLAY CENTER FOR THE ARTS AND SCIENCES OF WEST VIRGINIA, INC. - ONE CLAY SQUARE - CHARLESTON, VA 25301	55-0702401	501(C)(3)	53,000.	0.			COMMON NOTES DELVES INTO THE ROOTS OF FOLK MUSIC IN ROMANIA AND WEST VIRGINIA TO ENRICH THE
MUSEUM OF CONTEMPORARY ART SAN DIEGO - 700 PROSPECT STREET - LA JOLLA, CA 92037	95-1855640	501(C)(3)	32,906.	0.			YOUNG PEOPLE IN AMERICA AND MEXICO EXPERIENCE VIOLENCE OR THE THREAT OF VIOLENCE IN THEIR
AS220, INC. 95 MATHEWSON STREET, #204 PROVIDENCE, RI 02903	22-2754566	501(C)(3)	27,505.	0.			THIS PROJECT WILL BRING UKRAINIAN YOUTH WHO HAVE BEEN AFFECTED BY CONFLICT IN THEIR COUNTRY TOGETHER
NEW BEDFORD WHALING MUSEUM 18 JOHNNY CAKE HILL NEW BEDFORD, MA 02740	04-2104805	501(C)(3)	26,584.	0.			DESPITE THEIR SOCIAL AND CULTURAL DIFFERENCES, STUDENTS IN NEW BEDFORD AND HUSAVIK COME FROM
SPACE CENTER HOUSTON 1601 NASA PARKWAY HOUSTON, TX 77058	76-0217152	501(C)(3)	22,000.	0.			SPACE IS A GLOBAL ENTERPRISE. SPACE SCIENCE AND TECHNOLOGY BRING TOGETHER PEOPLE,
CARIBBEAN CULTURAL CENTER AFRICAN DIASPORA INSTITUTE - 1825 PARK AVENUE, #602 - NEW YORK, NY 10035	13-3054001	501(C)(3)	21,900.	0.			THE FORMATION OF THE AFRICAN DIASPORA RESULTANT FROM SLAVERY TRAGICALLY ERASED THE

Schedule I (Form 990)

532241
04-01-15

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COPY

Part IV Supplemental Information

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: JANE ADDAMS HULL-HOUSE MUSEUM

(H) PURPOSE OF GRANT OR ASSISTANCE: TEENS IN CHICAGO AND PHNOM PENH WILL ENGAGE IN VARIOUS JUSTICE PRACTICES, INCLUDING ADVANCED TRAINING FOR YOUTH PEACE-BUILDERS, PRODUCTION OF A DOCUMENTARY FILM, AND A YOUTH PEACE SUMMIT IN PHNOM PENH, TO ADVANCE SOCIAL EQUALITY AND COMMUNITY HEALING.

NAME OF ORGANIZATION OR GOVERNMENT: PEARL S. BUCK INTERNATIONAL INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: USING PEARL S. BUCK AS INSPIRATION, HIGH SCHOOL STUDENTS WILL UNEARTH STEREOTYPES AND PREJUDICES THAT PERSIST TODAY BETWEEN THE TWO CULTURES IN THE MEDIA AND POPULAR CULTURE; PARTICIPATE IN YOUTH LEADERSHIP TRAINING ABOUT CREATIVE PROBLEM-SOLVING, GLOBAL VISION UNDERSTANDING, AND STRATEGIC DECISION-MAKING; AND INITIATE A COMMUNITY SERVICE PROJECT TO CHAMPION BUCK'S IDEALS.

NAME OF ORGANIZATION OR GOVERNMENT:

ACADEMY OF NATURAL SCIENCES OF DREXEL UNIVERSITY

(H) PURPOSE OF GRANT OR ASSISTANCE: THE MODEL WINS (WOMEN IN NATURAL SCIENCES) PROGRAM AT THE ACADEMY OF NATURAL SCIENCES WILL SERVE AS A LAUNCHING POINT TO EMPOWER HIGH SCHOOL GIRLS IN PHILADELPHIA AND ULAANBAATAR, WORKING IN PARTNERSHIP WITH SCIENTISTS, TO ENGAGE IN A DEEPER UNDERSTANDING OF CLIMATE EDUCATION THROUGH SCIENTIFIC RESEARCH, DISCOVERY, AND ENRICHMENT; DEVELOP AN AFTER-SCHOOL PROGRAM CURRICULUM ABOUT CLIMATE CHANGE; AND WILL GUIDE THE VISITOR EXPERIENCE AS EXPLAINERS IN BOTH MUSEUMS.

NAME OF ORGANIZATION OR GOVERNMENT:

PATRICIA AND PHILLIP FROST MUSEUM OF SCIENCE

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: THROUGH AN EXPLORATION, WITH LOCAL SCIENTIST, OF COMMON ENVIRONMENTAL ISSUES SUCH AS INVASIVE SPECIES, SEA-LEVEL RISE, URBAN SPRAWL, AND CLIMATE CHANGE, HIGH SCHOOL STUDENTS IN JAMAICA AND MIAMI WILL ENGAGE IN URBAN HABITAT RESTORATION AND CONSERVATION PRACTICES TO EARN DIGITAL BADGES FOR COMPLETED ASSIGNMENTS AND ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT:

JAMES FORD BELL MUSEUM OF NATURAL HISTORY

(H) PURPOSE OF GRANT OR ASSISTANCE: STORIES FROM THE HOME PLANET INVITES TEACHERS, THEIR K-THROUGH-12 STUDENTS, AND THE LARGER LOCAL COMMUNITIES TO MAP BILINGUAL PLANETARIUM PROGRAMMING AND DEVELOP A CURRICULUM FOCUSING ON THE WAYS IN WHICH ASTRONOMY CAN FORETELL STORIES ON ENVIRONMENTAL CHANGE AND IMPACT.

NAME OF ORGANIZATION OR GOVERNMENT: THE FABRIC WORKSHOP AND MUSEUM

(H) PURPOSE OF GRANT OR ASSISTANCE: COLLEGE STUDENTS IN MOROCCO AND PHILADELPHIA WILL DOCUMENT ORAL HISTORIES FROM FEMALE EMBROIDERY ARTISTS AND QUILT-MAKERS IN THE AU GRAIN DE SESAME COLLECTIVE IN MOROCCO AND THE QUILTERS OF COLOR COLLECTIVE IN BROOKLYN, NEW YORK TO WEAVE STORIES AND PRESERVE A LEGACY OF UNIQUE TEXTILE TRADITIONS THROUGH AN ONLINE CATALOGUE OF THE TEXTILE ARTISTS' WORK, AN EXHIBITION TO BE DISPLAYED IN BOTH LOCATIONS, AND A JOINT TEXTILE PROJECT THAT IS A SYMBOLIC TAPESTRY OF COMMON ORIGINS IN THESE DISTINCT TEXTILE ART FORMS.

NAME OF ORGANIZATION OR GOVERNMENT: CHABOT SPACE AND SCIENCE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: ACCORDING TO THE UNITED NATIONS, THE EARTH'S POPULATION IS EXPECTED TO REACH NINE BILLION BY 2050. THIS

Part IV Supplemental Information

POPULATION GROWTH WILL INEVITABLY IMPACT THE WAYS IN WHICH HUMAN BEINGS
MANAGE RESOURCES AND ADAPT TO ENVIRONMENTAL CHANGES. THE PURPOSE OF THIS
PROJECT IS TO BRING TOGETHER 16 STUDENTS AGES 15-18 IN THE UNITED STATES
AND INDIA TO GENERATE POTENTIAL STRATEGIES FOR ENVIRONMENTAL
SUSTAINABILITY ON EARTH BY FOCUSING ON THE LESSONS LEARNED FROM ATTEMPTED
SPACE TRAVEL. MANY TECHNOLOGIES DEvised FOR THE PURPOSE OF SPACE
EXPLORATION HAVE BEEN ADAPTED TO MEET NEEDS ON EARTH, INCLUDING MEDICAL
DEVICES, SOLAR PANELS AND WATER PURIFICATION SYSTEMS, TO NAME A FEW
EXAMPLES. THIS PROJECT WILL ENCOURAGE STUDENTS IN BOTH COUNTRIES TO
DEVELOP PROJECTS FOCUSING ON USING SPACE TRAVEL TECHNOLOGY TO ADDRESS
SUSTAINABILITY ON EARTH. PARTICIPANTS WILL CREATE WORKSHOPS FOR MUSEUMS
VISITORS AND A WEB SITE TO DEMONSTRATE THE APPLICABILITY OF SPACE TRAVEL
INNOVATIONS TO ADDRESSING THE ISSUE OF ENVIRONMENTAL SUSTAINABILITY ON
OUR PLANET.

NAME OF ORGANIZATION OR GOVERNMENT:

FRIENDS OF THE NORTH CAROLINA MUSEUM OF NATURAL SCIENCES, D/B/A NORTH CAROL
(H) PURPOSE OF GRANT OR ASSISTANCE: E-MAMMAL INTERNATIONAL UNITES 6TH,
7TH AND 8TH GRADE STUDENTS IN A GLOBAL-CITIZEN-SCIENTIST COMPARATIVE
STUDY IN MEXICO, INDIA, AND NORTH CAROLINA THAT WILL EMPLOY CAMERA TRAPS
IN SCHOOLS TO DOCUMENT ANIMAL POPULATION SIZES, ACTIVATION PATTERNS, AND
HABITAT USE AND USE THE RESULTS TO INFORM AN E-MAMMAL WEBSITE ACCESSIBLE
TO A NETWORK OF SCIENTISTS WORLDWIDE IN ORDER TO ILLUMINATE UNIVERSAL
UNDERSTANDING OF BIODIVERSITY.

NAME OF ORGANIZATION OR GOVERNMENT:

CLAY CENTER FOR THE ARTS AND SCIENCES OF WEST VIRGINIA, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMON NOTES DELVES INTO THE ROOTS

Schedule I (Form 990)

532291
04-01-15

Part IV Supplemental Information

OF FOLK MUSIC IN ROMANIA AND WEST VIRGINIA TO ENRICH THE LIVES OF TEENS THROUGH THE TRANSCENDENT POWER OF MUSIC, A LANGUAGE THAT HAS NO BOUNDARIES, AND INSPIRE AN ONLINE MUSICAL MASH-UP, A SYNTHESIS OF THE ASSONANCE AND DISSONANCE OF THEIR MUSIC, AS WELL AS PUBLIC CONCERTS.

NAME OF ORGANIZATION OR GOVERNMENT: MUSEUM OF CONTEMPORARY ART SAN DIEGO

(H) PURPOSE OF GRANT OR ASSISTANCE: YOUNG PEOPLE IN AMERICA AND MEXICO EXPERIENCE VIOLENCE OR THE THREAT OF VIOLENCE IN THEIR COMMUNITIES, A SIGNIFICANT SOCIAL ISSUE THAT IMPACTS OUR COUNTRIES AND COMMUNITIES IN PROFOUND WAYS. THIS PROJECT ENABLES YOUTH TO FIND MEANING AND EXPRESSION THROUGH THE POWER OF THE ARTS AND EMPOWERS THEM TO ENVISION SOLUTIONS THROUGH CREATIVE INTERVENTIONS. THIS PROJECT WILL CONNECT 40 TEENS (20 IN EACH COUNTRY) FROM UNDERSERVED AREAS AROUND SAN DIEGO AND MEXICO CITY WITH SOCIAL PRACTICE ARTISTS WHO SPECIALIZE IN FILM AND PHOTOGRAPHY AND HAVE EXPERIENCE WORKING WITH TEENS WHILE ADDRESSING ISSUES OF SOCIAL AND POLITICAL VIOLENCE. THE PROJECTS THAT THE YOUTH PRODUCE WILL EXAMINE THE IMPACT OF VIOLENCE ON TEEN LIVES. THE TEENS THEMSELVES WILL SELECT A THEME WITHIN VIOLENCE, SUCH AS INTRA-FAMILIAL VIOLENCE, DATING VIOLENCE, GANGS AND CARTELS OR GUN USE AS THE FOCUS OF THEIR ARTISTIC WORK. THEY ALSO WILL CREATE A SHORT DOCUMENTARY FILM AND MOUNT A PUBLIC EXHIBITION IN BOTH COUNTRIES.

NAME OF ORGANIZATION OR GOVERNMENT: AS220, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: THIS PROJECT WILL BRING UKRAINIAN YOUTH WHO HAVE BEEN AFFECTED BY CONFLICT IN THEIR COUNTRY TOGETHER WITH DISADVANTAGED RHODE ISLAND YOUTH TO EXPLORE HOW THE USE OF YOUTH-ORIENTED MEDIA CAN CHANNEL THEIR EXPERIENCES IN A POSITIVE AND EMPOWERING WAY. AT A SUMMER LAB INTENSIVE WORKSHOP, PARTICIPANTS WILL LEARN NEW MEDIA

Part IV Supplemental Information

TECHNIQUES, SUCH AS 3D MODELING, GAME DESIGN, LASER CUTTING AND SMALL SCALE MODEL BUILDING. THE PROJECT WILL RESULT IN A WEBSITE, AS WELL AS EXHIBITIONS IN BOTH CITIES THAT WILL BE CREATED AND INSTALLED BY THE PARTICIPANTS. TEN STUDENTS, AGES 16 TO 18, FROM EACH COUNTRY WILL PARTICIPATE, AND FOUR UNIVERSITY STUDENTS, AGES 20 -25, WILL SERVE AS MENTORS THROUGHOUT THE PROJECT.

NAME OF ORGANIZATION OR GOVERNMENT: NEW BEDFORD WHALING MUSEUM

(H) PURPOSE OF GRANT OR ASSISTANCE: DESPITE THEIR SOCIAL AND CULTURAL DIFFERENCES, STUDENTS IN NEW BEDFORD AND HUSAVIK COME FROM SIMILAR COASTAL COMMUNITIES WITH MARITIME ECONOMIES. BOTH SHARE A DEEP HISTORY OF TIES TO WHALES AS ECONOMIC GENERATORS AND CULTURAL SYMBOLS. IN THIS PROJECT, TEENAGERS IN HUSAVIK AND NEW BEDFORD WILL EXPLORE THEIR MUTUAL ECONOMIC AND CULTURAL HERITAGE WITHIN THE CONTEXT OF THEIR OCEAN ENVIRONMENTS. THE STUDENTS WILL ORGANIZE COMMUNITY AND SCHOOL EVENTS TO CELEBRATE WHALES IN THEIR LOCAL WATERS AND SHARE POINTS OF VIEW ABOUT PROTECTING THE OCEAN AND THE CREATURES LIVING IN IT, WHILE ALSO DEBATING WHALE-BASED TOURISM AND HARVESTING WHALES FOR ECONOMIC PURPOSES. HIGH SCHOOL STUDENTS AGES 15-18 IN EACH COUNTRY (18 IN THE U.S. AND NINE IN ICELAND) WILL FORM AN "OCEAN CREW." THEY WILL RECEIVE INSTRUCTION IN WHALE SCIENCE, BIOLOGY AND OCEAN ECOLOGY. THE STUDENTS WILL CREATE PUBLIC PROGRAMS, INCLUDING A "WHALE READATHON" FOR CHILDREN, A FAMILY-CENTERED "WHALE CELEBRATION DAY," AND A PROJECT WEBSITE FEATURING THE STUDENTS' DIGITAL PRESENTATIONS. IN ADDITION TO THE ENVIRONMENTAL THEME, THIS PROGRAM SUPPORTS THE 2015-2017 U.S. CHAIRMANSHIP OF THE ARCTIC COUNCIL.

NAME OF ORGANIZATION OR GOVERNMENT: SPACE CENTER HOUSTON

(H) PURPOSE OF GRANT OR ASSISTANCE: SPACE IS A GLOBAL ENTERPRISE. SPACE

Part IV Supplemental Information

SCIENCE AND TECHNOLOGY BRING TOGETHER PEOPLE, RESOURCES, IDEAS AND TALENTS FROM MANY DIFFERENT COUNTRIES AND CULTURES FROM ALL OVER THE WORLD. FIFTY DISADVANTAGED STUDENTS EACH FROM HOUSTON, TEXAS; TOULOUSE, FRANCE; AND SINGAPORE, AGES 15-16 WILL COLLABORATE TO PLAN A MISSION TO ESTABLISH A HUMAN BASE ON MARS. THEY WILL INVESTIGATE THE CULTURAL REQUIREMENTS FOR SUSTAINING HUMAN LIFE ON MARS, DEVELOP A "CHART OF LIFE ON MARS," AND TRAIN ON THE BASICS OF MARS SCIENCE IN ORDER TO DESIGN SPECIFIC PRODUCTS OR PROCESSES FOR PROVIDING THE AIR, WATER, ENERGY AND NUTRITION NEEDED TO SUPPORT HUMAN LIFE ON MARS. IN THE PROCESS, THEY WILL DISCOVER PARALLELS BETWEEN SUSTAINING LIFE ON MARS AND ON EARTH. BY TARGETING DISADVANTAGED YOUTH AND GIRLS, THE PROJECT AIMS TO EXPOSE NEW AUDIENCES TO THE FASCINATION OF OUTER SPACE. THE STUDENTS WILL COLLABORATE THROUGHOUT THE YEAR AND PARTICIPATE IN A THREE WEEK STEM COURSE CONSISTING OF ENGAGING LESSONS AND ACTIVITIES, VIDEOS OF MARS SCIENTISTS, LEARNING GAMES AND STUDENT DISCUSSIONS. THEY WILL CARRY OUT TEAM PROJECTS, CULMINATING IN A "LIVE THE MISSION" SUMMIT IN HOUSTON.

NAME OF ORGANIZATION OR GOVERNMENT:

CARIBBEAN CULTURAL CENTER AFRICAN DIASPORA INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: THE FORMATION OF THE AFRICAN

DIASPORA RESULTANT FROM SLAVERY TRAGICALLY ERASED THE HISTORY OF ENTIRE PEOPLES. THIS PROJECT AIMS TO RECOVER AND PRESERVE THE DIASPORIC HISTORY ASSOCIATED WITH THE RURAL COMMUNITY OF NONSUCH, JAMAICA AND THE URBAN COMMUNITY OF SAN JUAN HILLS IN MANHATTAN, NEW YORK. THROUGH CREATIVE DISCUSSIONS AND LEARNING ABOUT THE HISTORICAL CONDITIONS THAT DISADVANTAGED THESE TWO COMMUNITIES, THE 30-40 MIDDLE SCHOOL STUDENTS PARTICIPATING IN THIS PROJECT WILL RECLAIM A HISTORY THAT HAS BEEN SUBMERGED OVER TIME AND RECONNECT WITH THEIR PAST AS A MEANS OF BETTER

Part IV Supplemental Information

UNDERSTANDING THE PRESENT AND EMPOWERING THEIR FUTURES. THE TEENS WILL
LEARN HOW TO USE ARCHIVAL SOURCES AND CONDUCT INTERVIEWS WITH ELDERLY
RESIDENTS IN THEIR RESPECTIVE COMMUNITIES AS THEY DEVELOP COMPELLING
DIGITAL VIDEOS AND ART WORKS. THEY WILL CREATE EXHIBITIONS IN THEIR
COMMUNITIES TO DISPLAY THE RESULTS OF THEIR WORK. THEY WILL ALSO CREATE A
BOUND WRITTEN TEXT OF THE HISTORY THAT THEY WILL RECOVER THROUGH THE
PROJECT, ASSEMBLE TOURS OF RELEVANT HISTORICAL SITES AND DESIGN A
CURRICULUM ABOUT THIS HISTORY FOR FUTURE MIDDLE SCHOOL STUDENTS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

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

2015

Open to Public
Inspection

AMERICAN ASSOCIATION OF MUSEUMS

Employer identification number

53-0205889

Part 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 on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> 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	
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	
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. <input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a	X
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c	X
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	X
b Any related organization? If "Yes" to line 5a or 5b, describe in Part III.	5b	X
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	X
b Any related organization? If "Yes" on line 6a or 6b, describe in Part III.	6b	X
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	X
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

Schedule J (Form 990) 2015

Part III	Supplemental Information
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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.

[illegible]

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

AMERICAN ASSOCIATION OF MUSEUMS

Employer identification number

53-0205889

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SOUND PROFESSIONAL PREPARATION, PROVIDE OUTLETS FOR PROFESSIONAL
RESEARCH AND PUBLICATION AS WELL AS FOSTER THE CONTINUED IMPROVEMENT OF
THE MUSEUM PROFESSION THROUGH THE DEVELOPMENT AND OBSERVANCE OF HIGH
STANDARDS OF ETHICS. IN PROMOTING ITS PURPOSES, THE ALLIANCE USES
MEETINGS, REPORTS, PAPERS, DISCUSSIONS, PUBLICATIONS, AND OTHER MEDIA
OF PUBLICITY AND COMMUNICATION SO AS TO INCREASE AND DIFFUSE KNOWLEDGE
OF ALL MATTERS PERTAINING TO MUSEUMS AND ENCOURAGE COOPERATION AMONG
MUSEUMS, MUSEUM PROFESSIONALS, MUSEUM USERS, AND THE GENERAL PUBLIC.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PUBLICATIONS AND BUSINESS ENTERPRISES: PUBLISHES TITLES OF INTEREST TO
THE MUSEUM FIELD AND MAINTAINS A BOOKSTORE FOR DISTRIBUTION OF MUSEUM
RELATED BOOKS TO MUSEUM PROFESSIONALS, STUDENTS, LIBRARIES, AND OTHER
AUDIENCES. AAM ALSO CONNECTS MUSEUM PROFESSIONALS WITH RELEVANT SERVICE
PROVIDERS THROUGH ADVERTISEMENTS, PROGRAMMING AND DISCOUNT
OPPORTUNITIES.

EXPENSES \$ 959,294. INCLUDING GRANTS OF \$ 610. REVENUE \$ 787,124.

ADVOCACY: UNITES THE DIVERSE MUSEUM FIELD TO PROMOTE A DEEPER
UNDERSTANDING OF THE CRITICAL EDUCATIONAL, ECONOMIC AND SOCIAL VALUE OF
MUSEUMS WITH POLICYMAKERS, THE PRESS AND THE PUBLIC. THE ALLIANCE
OFFERS EXTENSIVE ADVOCACY TRAINING AND E-ADVOCACY TOOLS TO WORK CLOSELY
WITH PARTNERS IN THE FIELD AND HOSTS MUSEUMS ADVOCACY DAY IN
WASHINGTON, DC, ANNUALLY.

EXPENSES \$ 749,142. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
532211
09-02-15

Schedule O (Form 990 or 990-EZ) (2015)

Name of the organization

AMERICAN ASSOCIATION OF MUSEUMS

Employer identification number
53-0205889

CENTER FOR THE FUTURE OF MUSEUMS: FORECASTS GLOBAL MEGATRENDS AND RESEARCHES HOW THOSE TRENDS WILL AFFECT MUSEUMS. THE ALLIANCE'S THINK TANK AND RESEARCH LAB, CFM HELPS MUSEUMS EXPLORE THE CULTURAL, EDUCATIONAL, POLITICAL AND ECONOMIC CHALLENGES FACING SOCIETY AND DEVISE STRATEGIES TO SHAPE A BETTER TOMORROW. CFM PRODUCES ANNUAL TRENDS REPORTS, PROVIDES TRAINING AND CONSULTING SERVICES RELATED TO FORECASTING AND FUTURE STUDIES, RUNS A FELLOWSHIP PROGRAM DEVOTED TO EMERGING ISSUES AND IMPLEMENTS PROJECTS RESPONDING TO IMPORTANT TRENDS. EXPENSES \$ 353,913. INCLUDING GRANTS OF \$ 6,094. REVENUE \$ 39,905.

FORM 990, PART VI, SECTION A, LINE 6:

INDIVIDUAL MEMBERSHIP SHALL BE OPEN TO MUSEUM STAFF, NON-PROFIT ORGANIZATION STAFF, STUDENTS, NON-PAID MUSEUM STAFF, RETIRED MUSEUM STAFF, INDEPENDENT PROFESSIONALS, MUSEUM TRUSTEES, AND SUCH OTHER CATEGORIES OF INDIVIDUAL MEMBERSHIP AS THE BOARD OF DIRECTORS MAY ESTABLISH FROM TIME TO TIME.

HONORARY OR LIFETIME MEMBERSHIP MAY BE GRANTED TO INDIVIDUALS AND INSTITUTIONS AT THE DISCRETION OF THE BOARD OF DIRECTORS AND IN RECOGNITION OF EXEMPLARY AND SELFLESS SERVICE TO THE ALLIANCE OF THE FIELD. HONORARY MEMBERS AND LIFETIME MEMBERS MAY NOT VOTE AT MEETINGS OF THE ALLIANCE AND ARE NOT ELIGIBLE FOR ELECTION AS OFFICERS OR BOARD MEMBERS-AT-LARGE.

FORM 990, PART VI, SECTION A, LINE 7A:

ALL INDIVIDUAL MEMBERS OF THE ALLIANCE IN GOOD STANDING ARE ENTITLED TO VOTE AT MEETINGS OF THE ALLIANCE AND ARE ELIGIBLE FOR ELECTION AS OFFICERS AND BOARD MEMBERS-AT-LARGE, PROVIDED THEY MEET THE ADDITIONAL REQUIREMENTS

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OUTLINED IN ARTICLES IV AND V OF THE CONSTITUTION. ALL INSTITUTIONAL MEMBERS OF THE ALLIANCE IN GOOD STANDING ARE ENTITLED TO VOTE AT MEETINGS OF THE ALLIANCE, BUT ARE NOT ELIGIBLE FOR ELECTION AS OFFICERS OR BOARD MEMBERS-AT-LARGE.

A NOMINATING COMMITTEE, WHICH SHALL CONSIST OF THE IMMEDIATE PAST CHAIR, ONE REGIONAL PRESIDENT, ONE STANDING PROFESSIONAL COMMITTEE CHAIR, THREE MEMBERS OF THE BOARD OF DIRECTORS AND ONE INDIVIDUAL MEMBER TO BE SELECTED BY THE BOARD OF DIRECTORS, IS RESPONSIBLE FOR ELECTING MEMBERS OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION A, LINE 7B:

AMENDMENTS TO THE CONSTITUTION MAY BE RECOMMENDED BY THE BOARD OF DIRECTORS, OR PROPOSED TO THE CHAIR IN WRITING SIGNED BY NO FEWER THAN 3 PERCENT OF INDIVIDUAL OR INSTITUTIONAL MEMBERS IN GOOD STANDING, NOT MORE THAN 50 PERCENT OF WHOM ARE FROM ANY ONE REGION. AMENDMENTS TO THE BYLAWS MAY BE RECOMMENDED BY THE BOARD OF DIRECTORS OR PROPOSED TO THE CHAIR IN WRITING, SIGNED BY NO FEWER THAN ONE HUNDRED INDIVIDUAL OR INSTITUTIONAL MEMBERS IN GOOD STANDING, NOT MORE THAN 50 PERCENT OF WHOM ARE FROM ANY ONE REGION.

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

THE INFORMATION FOR THE FEDERAL FORM 990 IS PREPARED BY THE ACCOUNTING STAFF. ONCE THE PUBLIC ACCOUNTING FIRM DELIVERS THE DRAFT FEDERAL FORM 990, THE AUDIT COMMITTEE REVIEWS IT, AND IT IS THEN FORWARDED ON TO THE ENTIRE BOARD OF DIRECTORS FOR THEIR REVIEW AND APPROVAL. THE PRESIDENT AND CEO ALSO REVIEWS THE FEDERAL FORM 990 PRIOR TO SIGNING THE ELECTRONIC AUTHORIZATION FORM TO AUTHORIZE THE PUBLIC ACCOUNTING FIRM TO E-FILE WITH

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THE INTERNAL REVENUE SERVICE.

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

THE ALLIANCE STAFF, BOARD OF DIRECTORS, AND VOLUNTEERS ACT IN THE BEST INTEREST OF THE ALLIANCE RATHER THAN IN FURTHERANCE OF PERSONAL INTERESTS OR THE INTERESTS OF THIRD PARTIES, SUCH AS FRIENDS AND FAMILY. DECISIONS ABOUT THE ALLIANCE AND THE USE OR DISPOSITION OF ITS ASSETS ARE MADE SOLELY IN TERMS OF THE BENEFITS TO THE ALLIANCE AND ARE NEITHER INFLUENCED NOR APPEAR TO BE INFLUENCED, BY ANY PRIVATE PROFIT, PERSONAL GAIN, OR OUTSIDE BENEFIT FOR STAFF, BOARD OF DIRECTORS, AND VOLUNTEERS; THEIR FRIENDS AND FAMILY MEMBERS; OR ANY ORGANIZATION OR COMPANY WITH WHICH THEY ARE AFFILIATED. ON AN ANNUAL BASIS, ALL OFFICERS, BOARD OF DIRECTORS, AND KEY EMPLOYEES SHALL BE PROVIDED WITH A COPY OF THE CONFLICT OF INTEREST POLICY AND REQUIRED TO COMPLETE AND SIGN AN ACKNOWLEDGEMENT AND DISCLOSURE FORM PREPARED BY THE BOARD OF DIRECTORS. IF A CONFLICT ARISES IN REGARDS TO A BOARD MEMBER, THE MEMBER IMMEDIATELY NOTIFIES THE CHAIR. THAT MEMBER WILL THEN RECUSE HIMSELF OR HERSELF FROM ANY VOTING ON A RELATED ISSUE, AND WILL ALSO NOT BE COUNTED TOWARDS A QUORUM ON A RELATED ISSUE. FOR OFFICERS AND KEY EMPLOYEES, A CONFLICT WOULD IMMEDIATELY BE REPORTED TO MANAGEMENT AND APPROPRIATE ACTION WOULD BE TAKEN DEPENDING ON THE INDIVIDUAL ISSUE.

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

THE BOARD OF DIRECTORS HAS THE RESPONSIBILITY FOR REVIEWING AND SETTING THE PRESIDENT & CEO AND OTHER KEY STAFF'S COMPENSATION PACKAGE. THE BOARD OF DIRECTORS REVIEWS MARKET DATA ALONG WITH THE PRESIDENT AND OTHER KEY STAFF'S PERFORMANCE IN DETERMINING WHAT AN EQUITABLE COMPENSATION PACKAGE SHOULD BE. IN TURN, THE PRESIDENT & CEO IS CHARGED WITH PREPARING EVALUATIONS FOR THE ALLIANCE'S SENIOR MANAGEMENT TEAM BASED ON EACH

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INDIVIDUAL'S PERFORMANCE DURING THE CURRENT YEAR. THIS DATA IS THEN USED BY THE PRESIDENT AND CEO IN SETTING COMPENSATION PACKAGES FOR THE SENIOR MANAGEMENT TEAM. THE LAST COMPENSATION REVIEW FOR THE PRESIDENT & CEO WAS PERFORMED IN MAY 2015. THE LAST COMPENSATION REVIEW FOR OTHER KEY STAFF OF THE ALLIANCE WAS PERFORMED IN MARCH 2015.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AZ, AR, CT, FL, IL, KS, KY, ME, MD, MA, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

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

THE ALLIANCE'S MOST RECENT ANNUAL REPORT AND IRS FORM 990 ARE AVAILABLE ON ITS WEBSITE. THE ALLIANCE'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE MADE AVAILABLE ON A PER REQUEST BASIS.

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

CONSULTANTS & CONTRACTORS:

PROGRAM SERVICE EXPENSES	1,014,850.
MANAGEMENT AND GENERAL EXPENSES	329,481.
FUNDRAISING EXPENSES	47,204.
TOTAL EXPENSES	1,391,535.

EXECUTIVE SEARCH:

PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	29,505.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	29,505.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,421,040.
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