

Form **990**

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

OMB No. 1545-0047

2021

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning _____ **and ending** _____

B Check if applicable:	C Name of organization AMERICAN ASSOCIATION OF MUSEUMS Doing business as AMERICAN ALLIANCE OF MUSEUMS	D Employer identification number 53-0205889
Address change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2451 CRYSTAL DRIVE 1005	E Telephone number (202) 289-1818
Name change	City or town, state or province, country, and ZIP or foreign postal code ARLINGTON, VA 22202	G Gross receipts \$ 10,324,080.
Initial return	F Name and address of principal officer: LAURA L. LOTT SAME AS C ABOVE	H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> No
Final return/terminated		H(b) Are all subordinates included? Yes No
Amended return	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	If "No," attach a list. See instructions
Application pending	J Website: ▶ WWW.AAM-US.ORG	H(c) Group exemption number ▶
	K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other ▶	L Year of formation: 1906 M State of legal domicile: DC

Part I Summary

1	Briefly describe the organization's mission or most significant activities: TO ENHANCE MUSEUMS' VALUE TO THEIR COMMUNITIES THROUGH LEADERSHIP, ADVOCACY, RESOURCES & 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	21
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	21
5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	39
6	Total number of volunteers (estimate if necessary)	6	256
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	716,247.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	457,583.
		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	1,386,141.	4,255,228.
9	Program service revenue (Part VIII, line 2g)	5,022,258.	4,977,514.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	178,323.	361,299.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	119,890.	80,556.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,706,612.	9,674,597.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	250,000.	250,000.
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)	3,993,990.	4,098,256.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 799,606.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,521,179.	3,577,611.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	7,765,169.	7,925,867.
19	Revenue less expenses. Subtract line 18 from line 12	-1,058,557.	1,748,730.
		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	10,353,160.	11,405,115.
21	Total liabilities (Part X, line 26)	5,450,402.	4,516,997.
22	Net assets or fund balances. Subtract line 21 from line 20	4,902,758.	6,888,118.

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 LAURA L. LOTT, PRESIDENT & CHIEF EXECUTIVE OFFICER Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name J. ANDREW SMITH	Preparer's signature J. ANDREW SMITH
	Firm's name ▶ CLIFTONLARSENALLEN LLP	Date 07/05/22
	Firm's address ▶ 901 N. GLEBE ROAD, SUITE 200 ARLINGTON, VA 22203	Check if self-employed <input type="checkbox"/> PTIN P00635175
		Firm's EIN ▶ 41-0746749
		Phone no. 571-227-9500

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

Part III Statement of Program Service Accomplishments

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

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 [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No 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 \$ 3,839,991. including grants of \$ 250,000.) (Revenue \$ 355,750.)

FIELD-WIDE SERVICES: THE ALLIANCE SERVES AS THE U.S. ACCREDITING BODY FOR MUSEUMS. AS THE MUSEUM FIELD'S MARK OF DISTINCTION, ACCREDITATION OFFERS HIGH-PROFILE, PEER-BASED VALIDATION OF A MUSEUM'S OPERATIONS AND IMPACT THROUGH OUR CORE DOCUMENTS VERIFICATION PROGRAM. THE ALLIANCE EVALUATES A MUSEUM'S FIVE CORE POLICY DOCUMENTS AGAINST A SET OF REQUIRED ELEMENTS. THE ALLIANCE'S MUSEUM ASSESSMENT PROGRAM (MAP), SUPPORTED THROUGH A COOPERATIVE AGREEMENT BETWEEN THE INSTITUTE OF MUSEUM AND LIBRARY SERVICES AND THE ALLIANCE, PROVIDES TECHNICAL ASSISTANCE TO ALL TYPES OF MUSEUMS TO IMPROVE OPERATIONS THROUGH SELF-STUDY AND A CONSULTATIVE PEER SITE VISIT.

4b (Code:) (Expenses \$ 879,765. including grants of \$) (Revenue \$ 973,414.)

MEETINGS AND PROFESSIONAL EDUCATION: THE ALLIANCE'S ANNUAL MEETING & MUSEUM EXPO BRINGS TOGETHER MUSEUM PROFESSIONALS FROM AROUND THE WORLD AND IS THE MUSEUM FIELD'S PREMIER PROFESSIONAL DEVELOPMENT OPPORTUNITY. THE EVENT SHOWCASES THE BEST THINKING FROM PRACTITIONERS AND VISIONARIES ON THE MAJOR ISSUES CONFRONTING US AND THE COMMUNITIES WE SERVE. WHILE SHOWCASING THE LATEST MUSEUM PRODUCTS AND SERVICES THROUGH NUMEROUS PROFESSIONAL DEVELOPMENT PROGRAMS, THE ALLIANCE PROVIDES A ROBUST CALENDAR OF OPPORTUNITIES DESIGNED TO HELP MUSEUM COLLEAGUES BUILD PROFESSIONAL SKILLS, MANAGE THEIR CAREERS, FOSTER COMMUNITIES OF PRACTICE, SHARE EXPERTISE AND CONTRIBUTE TO COMMON STANDARDS AND BEST PRACTICES.

4c (Code:) (Expenses \$ 653,519. including grants of \$) (Revenue \$ 60,322.)

PUBLICATIONS AND BUSINESS ENTERPRISES: THE ALLIANCE'S AWARD-WINNING MAGAZINE ADDRESSES THE ISSUES AND CHALLENGES FACING MUSEUMS TODAY AND IS A MUST-READ FOR THOSE WHO WORK FOR MUSEUMS AND THOSE WHO LOVE THEM. PUBLISHED BI-MONTHLY, RECENT ISSUES HAVE FOCUSED ON INCLUSION AND ACCESSIBILITY, CIVIC ENGAGEMENT, AUDIENCE ENGAGEMENT, AND CRISIS MANAGEMENT. THE AAM PRESS AND BOOKSTORE OFFERS THE BEST AND MOST COMPREHENSIVE PROFESSIONAL LITERATURE IN PRINT AND EBOOK FORMATS, MAKING THEM THE GO-TO SOURCE FOR ALL TITLES CRITICAL TO THE WORK OF MUSEUMS FROM ACCESSIBILITY, INTERPRETATION/EDUCATION AND AUDIENCE RESEARCH TO TECHNOLOGY, MISSION/INSTITUTIONAL PLANNING, COLLECTIONS STEWARDSHIP, FINANCIAL SUSTAINABILITY AND MORE. THE ALLIANCE IS PROUD TO MAINTAIN AN ONLINE LIBRARY OF OVER 2,000

4d Other program services (Describe on Schedule O.) (Expenses \$ 984,062. including grants of \$ 0.) (Revenue \$ 2,909,304.)

4e Total program service expenses 6,357,337.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Yes, No. Rows 22-38 detailing various IRS requirements and schedules.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question ID, Yes, No. Rows 1a, 1b, 1c regarding Form 1096, W-2G forms, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No checkboxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and various organizational requirements.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 21; 1b Enter the number of voting members included... 21; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders? X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 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 on Schedule O X

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? X; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 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 on Schedule O. See instructions.; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ, CT, FL, IL, KS, KY, MA, MD, ME
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records CAROL CONSTANTINE - (202)289-1818 2451 CRYSTAL DRIVE, SUITE 1005, ARLINGTON, VA 22202

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LAURA LOTT PRESIDENT & CHIEF EXECUTIVE OFFICER	40.00			X			391,552.	0.	683.	
(2) ARTHUR AFFLECK EXECUTIVE VICE PRESIDENT	40.00				X		131,470.	0.	21,615.	
(3) ELIZABETH MERRITT VP STRATEGIC FORESIGHT & FOUNDING DR	40.00				X		136,762.	0.	2,521.	
(4) BROOKE LEONARD CHIEF OF STAFF	40.00				X		116,042.	0.	8,504.	
(5) ANDREW PLUMLEY SR. DIRECTOR OF INCLUSION	40.00				X		121,998.	0.	1,683.	
(6) RYAN BOURKE DIRECTOR OF MEMBERSHIP	40.00				X		115,216.	0.	1,198.	
(7) CAROL CONSTANTINE DIRECTOR OF FINANCE & ADMIN	40.00			X			99,611.	0.	2,941.	
(8) CHEVY HUMPHREY CHAIR	2.00	X		X			0.	0.	0.	
(9) JORGE ZAMANILLO TREASURER	2.00	X		X			0.	0.	0.	
(10) KIPPEN DE ALBA CHU IMMEDIATE PAST CHAIR	2.00	X		X			0.	0.	0.	
(11) DEVON M. AKMON DIRECTOR	2.00	X					0.	0.	0.	
(12) DINA BAILEY DIRECTOR	2.00	X					0.	0.	0.	
(13) CARRIE REBORA BARRATT DIRECTOR	2.00	X					0.	0.	0.	
(14) FREDERIC BERTLEY DIRECTOR	2.00	X					0.	0.	0.	
(15) ALISON REMPEL BROWN DIRECTOR	2.00	X					0.	0.	0.	
(16) CAROLE CHARNOW DIRECTOR	2.00	X					0.	0.	0.	
(17) ROBERT M. DAVIS 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MARCIA DEWITT DIRECTOR	2.00	X						0.	0.	0.
(19) CHRISTINE A. DONOVAN DIRECTOR	2.00	X						0.	0.	0.
(20) ANN FRIEDMAN DIRECTOR	2.00	X						0.	0.	0.
(21) LINDA HARRISON DIRECTOR	2.00	X						0.	0.	0.
(22) CHARLES L. KATZENMEYER DIRECTOR	2.00	X						0.	0.	0.
(23) JULISSA MARENCO DIRECTOR	2.00	X						0.	0.	0.
(24) KELLY MCKINLEY DIRECTOR	2.00	X						0.	0.	0.
(25) JAMES PEPPER HENRY DIRECTOR	2.00	X						0.	0.	0.
(26) NATHAN RICHIE DIRECTOR	2.00	X						0.	0.	0.
1b Subtotal								1,112,651.	0.	39,145.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,112,651.	0.	39,145.

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 **11**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ALLEY INTERACTIVE LLC, 228 PARK AVENUE SOUTH #85467, NEW YORK, NY 10003	CONSULTING	159,950.
WILKENING CONSULTING LLC 2649 W BOSTON STREET, SEATTLE, WA 98199	CONSULTING	143,500.
RED RIVER MANAGED SERVICES LLC, 14111 PARK MEADOW DRIVE, CHANTILLY, VA 20151	CONSULTING	129,101.
TEAM OF CREATIVES LLC 5920 EDSON LANE, BETHESDA, MD 20852	CONSULTING	108,723.
APTIFY CORPORATION, 9620 EXECUTIVE CENTER DR N #200, ST. PETERSBURG, FL 33702	CONSULTING	101,644.

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 **5**

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	1,445,930.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,809,298.				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f			4,255,228.			
Program Service Revenue	2 a MEMBERSHIP DUES	Business Code					
		900099	2,890,003.	2,890,003.			
	b ADVERTISING INCOME	541800	716,247.		716,247.		
	c REGISTRATIONS	900099	713,341.	713,341.			
	d ACCREDITATION FEES	900099	324,954.	324,954.			
	e EXHIBIT FEES	900099	293,650.	293,650.			
	f All other program service revenue	900099	39,319.	39,319.			
g Total. Add lines 2a-2f			4,977,514.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		89,567.			89,567.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		37,839.			37,839.	
	6 a Gross rents	(i) Real					
		(ii) Personal					
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other					
	b Less: cost or other basis and sales expenses						
c Gain or (loss)							
d Net gain or (loss)			271,732.			271,732.	
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18							
b Less: direct expenses							
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19							
b Less: direct expenses							
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances							
b Less: cost of goods sold							
c Net income or (loss) from sales of inventory			37,523.	37,523.			
Miscellaneous Revenue	11 a _____	Business Code					
	b _____						
	c _____						
	d All other revenue	900099	5,194.			5,194.	
	e Total. Add lines 11a-11d			5,194.			
12 Total revenue. See instructions			9,674,597.	4,298,790.	716,247.	404,332.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	250,000.	250,000.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	494,788.	50,991.	365,350.	78,447.
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	3,043,631.	1,904,910.	760,876.	377,845.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	26,851.	15,458.	7,788.	3,605.
9 Other employee benefits	289,813.	161,670.	90,553.	37,590.
10 Payroll taxes	243,173.	134,548.	77,244.	31,381.
11 Fees for services (nonemployees):				
a Management				
b Legal	21,154.		21,154.	
c Accounting	33,202.		33,202.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	44,976.		44,976.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	1,035,025.	728,252.	281,538.	25,235.
12 Advertising and promotion	63,116.	63,116.		
13 Office expenses	610,469.	230,309.	376,383.	3,777.
14 Information technology	362,081.	276,040.	80,029.	6,012.
15 Royalties				
16 Occupancy	760,671.		760,671.	
17 Travel	134,872.	131,766.	1,186.	1,920.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	235,054.	235,054.		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	188,939.		188,939.	
23 Insurance	27,741.		27,741.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a PROF. DEVELOPMENT	42,129.	36,124.	4,748.	1,257.
b M&G ALLOCATION	0.	1,878,960.	-2,111,497.	232,537.
c _____				
d _____				
e All other expenses _____	18,182.	260,139.	-241,957.	
25 Total functional expenses. Add lines 1 through 24e	7,925,867.	6,357,337.	768,924.	799,606.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	563,387.	1	424,929.
	2 Savings and temporary cash investments	2,701,316.	2	2,721,369.
	3 Pledges and grants receivable, net	597,674.	3	1,046,891.
	4 Accounts receivable, net	117,279.	4	268,476.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	47,535.	8	45,717.
	9 Prepaid expenses and deferred charges	337,425.	9	395,660.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 3,026,416.		
	b Less: accumulated depreciation	10b 1,981,563.	10c	1,044,853.
	11 Investments - publicly traded securities	4,924,322.	11	5,457,220.
	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 33)	10,353,160.	16	11,405,115.	
Liabilities	17 Accounts payable and accrued expenses	399,241.	17	664,808.
	18 Grants payable		18	
	19 Deferred revenue	2,403,471.	19	2,353,521.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	300,000.	23	
	24 Unsecured notes and loans payable to unrelated third parties	767,091.	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	1,580,599.	25	1,498,668.
	26 Total liabilities. Add lines 17 through 25	5,450,402.	26	4,516,997.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	3,558,077.	27	5,676,986.
	28 Net assets with donor restrictions	1,344,681.	28	1,211,132.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	4,902,758.	32	6,888,118.
33 Total liabilities and net assets/fund balances	10,353,160.	33	11,405,115.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,674,597.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,925,867.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,748,730.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,902,758.
5	Net unrealized gains (losses) on investments	5	236,630.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	6,888,118.

Part XII Financial Statements and Reporting

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

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

	Yes	No
1		
2a		X
b	X	
c	X	
3a		X
3b		

Form 990 (2021)

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2384843.	5165423.	1730459.	1386141.	4255228.	14922094.
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	2384843.	5165423.	1730459.	1386141.	4255228.	14922094.
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)						3813575.
6 Public support. Subtract line 5 from line 4.						11108519.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	2384843.	5165423.	1730459.	1386141.	4255228.	14922094.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	211,614.	220,305.	133,569.	110,761.	127,406.	803,655.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	170,859.	428,481.	317,098.	223,342.	538,881.	1678661.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1,762.	7,165.	-723.	20,122.	5,194.	33,520.
11 Total support. Add lines 7 through 10						17437930.
12 Gross receipts from related activities, etc. (see instructions)					12	28,955,251.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	63.70	%
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	60.03	%
16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

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

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

Section A. Public Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support.

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

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2020 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2020 Schedule A, Part III, line 17 18%.

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

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

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

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

2017 AMOUNT: \$ 1,762.

2018 AMOUNT: \$ 7,165.

2019 AMOUNT: \$ -723.

2020 AMOUNT: \$ 20,122.

2021 AMOUNT: \$ 5,194.

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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 campaign activity expenditures ▶ \$ _____
- 3 Volunteer hours for political campaign activities _____

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) 2021

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 (grassroots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	122,146.													
c	Total lobbying expenditures (add lines 1a and 1b)	122,146.													
d	Other exempt purpose expenditures	7,579,124.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	7,701,270.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	535,064.													
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">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)	133,766.													
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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount	585,598.	660,811.	546,603.	535,064.	2,328,076.
b Lobbying ceiling amount (150% of line 2a, column(e))					3,492,114.
c Total lobbying expenditures	81,756.	89,224.	166,893.	122,146.	460,019.
d Grassroots nontaxable amount	146,400.	165,203.	136,651.	133,766.	582,020.
e Grassroots ceiling amount (150% of line 2d, column (e))					873,030.
f Grassroots lobbying expenditures					

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)).

Table with 3 columns: (a) Yes, (a) No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

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

Table with 3 columns: Question, Yes, No. Rows include: 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 campaign activity 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."

Table with 2 columns: Question, Amount. Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 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?; 5 Taxable amount of lobbying and political expenditures.

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.

Blank lines for providing supplemental information as required by the instructions.

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.

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

OMB No. 1545-0047

2021

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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? (Yes/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? (Yes/No)

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of a historically important land area, Preservation of a certified historic structure; 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: 2a Total number of conservation easements, 2b Total acreage restricted by conservation easements, 2c Number of conservation easements on a certified historic structure included in (a), 2d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register; 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.

Table with 2 columns: Revenue, Assets. Rows include: 1a If the organization elected, as permitted under FASB 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.; 1b If the organization elected, as permitted under FASB 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 FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1; b Assets included in Form 990, Part X

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	425,303.	380,938.	334,993.	388,697.	353,287.
b Contributions					
c Net investment earnings, gains, and losses	53,385.	67,945.	79,137.	-18,462.	55,867.
d Grants or scholarships					
e Other expenditures for facilities and programs	34,856.	23,580.	33,192.	35,242.	20,457.
f Administrative expenses					
g End of year balance	443,832.	425,303.	380,938.	334,993.	388,697.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 36.2100 %
 - b Permanent endowment 63.7900 %
 - c Term endowment .0000 %
- 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:
- | | Yes | No |
|-----------------------------|--------------------------|-------------------------------------|
| (i) Unrelated organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) Related organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- 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		1,275,047.	525,793.	749,254.
d Equipment		277,060.	240,219.	36,841.
e Other		1,474,309.	1,215,551.	258,758.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,044,853.

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	1,498,668.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	1,498,668.

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	9,202,853.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	236,630.
b	Donated services and use of facilities	2b	101,812.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	1,881.
e	Add lines 2a through 2d	2e	340,323.
3	Subtract line 2e from line 1	3	8,862,530.
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	44,976.
b	Other (Describe in Part XIII.)	4b	767,091.
c	Add lines 4a and 4b	4c	812,067.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	9,674,597.

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	7,984,584.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	101,812.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	1,881.
e	Add lines 2a through 2d	2e	103,693.
3	Subtract line 2e from line 1	3	7,880,891.
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	44,976.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	44,976.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	7,925,867.

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:

DEVELOPED IN RESPONSE TO THE ACCREDITATION COMMISSION'S OBSERVATION OF THE NEED FOR IMPROVED COLLECTIONS CARE IN AMERICA'S MUSEUMS, THE PROFESSIONAL STANDARDS ENDOWMENT WAS CREATED IN 1984 TO SUPPORT AND SUSTAIN THE AAM ACCREDITATION PROGRAM, AND OTHER MUSEUM STANDARDS PROGRAMS. FUNDS ARE USED TO SUPPORT ONGOING ACTIVITY OF THE PROGRAM WHICH INCLUDES THE DEVELOPMENT OF CORE STANDARDS IN THE AREAS OF COLLECTIONS STEWARDSHIP, FINANCIAL STABILITY, RISK MANAGEMENT AND PUBLIC TRUST AND ACCOUNTABILITY.

PART X, LINE 2:

THE ALLIANCE IS EXEMPT FROM THE PAYMENT OF INCOME TAXES ON ITS EXEMPT ACTIVITIES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS

Part XIII Supplemental Information (continued)

CLASSIFIED AS OTHER THAN A PRIVATE FOUNDATION. HOWEVER, THE ALLIANCE IS SUBJECT TO FEDERAL AND VIRGINIA INCOME TAXES ON ITS UNRELATED BUSINESS ACTIVITIES. THE ALLIANCE'S PRIMARY SOURCE OF UNRELATED BUSINESS INCOME IS ADVERTISING IN ITS PERIODICALS AND IN ITS ONLINE JOB-POSTING FORUM.

THE ALLIANCE FOLLOWS THE ACCOUNTING STANDARD REGARDING THE RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS. THE ASSOCIATION EVALUATED ITS TAX POSITIONS AND DETERMINED THAT ITS TAX POSITIONS ARE MORE-LIKELY-THAN-NOT TO BE SUSTAINED ON EXAMINATION.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD 1,881.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

PPP LOAN FORGIVEN 767,091.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD 1,881.

**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.**

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

OMB No. 1545-0047

2021

**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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance

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 ▶ _____

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

Schedule I (Form 990) 2021

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS & AWARDS	10	250,000.	0.	N/A	N/A

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE ALLIANCE RECEIVES A SIGNED IMPLEMENTATION AGREEMENT STATING THE
 SUBRECIPIENT AGREES TO THE OUTLINED TERMS AND CONDITIONS. TERMS AND
 CONDITIONS INCLUDE REGULATIONS STATED BY THE GUARANTEE.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2021

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICAN ASSOCIATION OF MUSEUMS

Employer identification number

53-0205889

Part I Questions Regarding Compensation

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

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

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

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

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

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <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?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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

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

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

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

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

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

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

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

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

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

Schedule J (Form 990) 2021

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) LAURA LOTT PRESIDENT & CHIEF EXECUTIVE OFFICER	(i)	391,552.	0.	0.	0.	683.	392,235.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ARTHUR AFFLECK EXECUTIVE VICE PRESIDENT	(i)	131,470.	0.	0.	1,563.	20,052.	153,085.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

AMERICAN ASSOCIATION OF MUSEUMS

Employer identification number

53-0205889

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

SOUND PROFESSIONAL PREPARATION AND 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 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

THE ALLIANCE'S INCLUSION WORK ADDRESSING DIVERSITY, EQUITY, ACCESSIBILITY AND INCLUSION WITHIN THE ENTIRE MUSEUM FIELD HAS LEAD TO FURTHER RESEARCH AND PROGRAMMING AVAILABLE TO ALL MUSEUMS AND MUSEUM PROFESSIONALS IN NAVIGATING THIS PIVOTAL WORK IN AN EVER-CHANGING PROFESSIONAL LANDSCAPE.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

GUIDELINES, ARTICLES, AND FACT SHEETS FOR OUR MEMBERS ON ALL ASPECTS OF MUSEUM OPERATIONS. OUR MEMBERS-ONLY WEEKLY E-NEWSLETTER, AVISO, PROVIDES LATE-BREAKING NEWS ON FEDERAL LEGISLATION AFFECTING MUSEUMS, UPCOMING SEMINARS AND WORKSHOPS, FEDERAL GRANT DEADLINES, AND ALLIANCE ACTIVITIES AND SERVICES.

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

MEMBERSHIP:

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

Schedule O (Form 990) 2021

132211 11-11-21

Name of the organization AMERICAN ASSOCIATION OF MUSEUMS	Employer identification number 53-0205889
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THE ALLIANCE REPRESENTS MUSEUMS OF ALL DISCIPLINES AND SIZES, FROM ART MUSEUMS TO HISTORIC HOUSES TO ZOOS, FROM WITHIN THE US AND AROUND THE WORLD. THE ALLIANCE DESIGNED ITS MEMBERSHIP PROGRAMS TO SERVE THE DIVERSE NEEDS OF MUSEUM PROFESSIONALS BY ALLOWING THEM TO CHOOSE THEIR LEVEL OF ENGAGEMENT WITH DUES BASED ON THEIR MUSEUM'S STAFF SIZE, OR THEY CAN JOIN ON A "PAY WHAT YOU CAN" BASIS. INDIVIDUAL MEMBERS OF THE ALLIANCE HAVE ACCESS TO NEARLY TWO DOZEN PROFESSIONAL NETWORKS BASED ON JOB RESPONSIBILITIES AND AREAS OF INTEREST.

EXPENSES \$ 434,808. INCLUDING GRANTS OF \$ 0. REVENUE \$ 2,890,003.

ADVOCACY: THE ALLIANCE'S YEAR-ROUND ADVOCACY INITIATIVES LEND ENERGY AND BREADTH TO FIELD-WIDE EFFORTS TO ADVANCE THE CAUSE OF MUSEUMS. THE ALLIANCE PROVIDES TOOLS TO HELP PEOPLE MAKE THE CASE FOR MUSEUMS AT THE NATIONAL, STATE, AND LOCAL LEVEL. OUR ANNUAL MUSEUMS ADVOCACY DAY, OFFERED WITH PARTNER ORGANIZATIONS AT THE NATIONAL, REGIONAL, AND STATE LEVELS, BRINGS TOGETHER MUSEUM PROFESSIONALS, TRUSTEES, STUDENTS, AND SUPPORTERS FOR HANDS-ON ADVOCACY TRAINING AND VISITS TO CAPITOL HILL.

EXPENSES \$ 423,941. INCLUDING GRANTS OF \$ 0. REVENUE \$ 19,301.

CENTER FOR THE FUTURE OF MUSEUMS: AN ALLIANCE INITIATIVE, THE CENTER FOR THE FUTURE OF MUSEUMS (CFM) IDENTIFIES TRENDS AND CRITICAL ISSUES FACING MUSEUMS AND SOCIETY. CFM PRODUCES A WEEKLY DISPATCH FROM THE FUTURE NEWSLETTER AND TRENDSWATCH, AN ANNUAL FORECASTING REPORT.

EXPENSES \$ 125,313. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

THERE SHALL BE AN EXECUTIVE COMMITTEE COMPRISED OF THE OFFICERS OF THE CORPORATION AND AT LEAST ONE ADDITIONAL MEMBER OF THE BOARD TO BE APPOINTED

Name of the organization AMERICAN ASSOCIATION OF MUSEUMS	Employer identification number 53-0205889
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BY A MAJORITY VOTE OF THE ENTIRE BOARD OF DIRECTORS. THE CHAIR OF THE BOARD SHALL BE THE CHAIR OF THE EXECUTIVE COMMITTEE. THE PRESIDENT SHALL BE AN EX OFFICIO NON-VOTING MEMBER OF THE COMMITTEE.

THE EXECUTIVE COMMITTEE IS THE ONLY COMMITTEE AUTHORIZED TO ACT FOR THE FULL BOARD. ACTIONS TAKEN BY THE EXECUTIVE COMMITTEE SHALL HAVE THE SAME FORCE AND EFFECT AS ACTIONS TAKEN BY THE BOARD. HOWEVER, THE EXECUTIVE COMMITTEE MAY ACT ONLY IF (I) SPECIFICALLY AUTHORIZED BY THESE BYLAWS OR BY RESOLUTION OF THE BOARD OF DIRECTORS OR (II) WARRANTED BY EXCEPTIONAL OR EMERGENCY CIRCUMSTANCES (E.G., AN ACT OF GOD). THE EXECUTIVE COMMITTEE SHALL REPORT ANY AND ALL ACTIONS IT TAKES TO THE FULL BOARD OF DIRECTORS AS SOON AS POSSIBLE, AND NO LATER THAN THE NEXT REGULAR MEETING OF THE BOARD.

THE EXECUTIVE COMMITTEE SHALL BE RESPONSIBLE FOR CONDUCTING AN ANNUAL REVIEW OF THE PRESIDENT'S PERFORMANCE AND ASSURING THE REASONABLENESS OF HIS OR HER TOTAL COMPENSATION, AND FOR REVIEWING, APPROVING AND ENSURING THE REASONABLENESS OF COMPENSATION RANGES FOR KEY EMPLOYEES AND OTHERS WHO ARE DISQUALIFIED PERSONS WITHIN THE MEANING OF SECTION 4958 OF THE INTERNAL REVENUE CODE.

THE EXECUTIVE COMMITTEE SHALL NOT BE DELEGATED THE POWER TO: (1) AUTHORIZE DISTRIBUTIONS; (2) FILL VACANCIES ON THE BOARD OF DIRECTORS ON THE EXECUTIVE COMMITTEE; OR (3) ADOPT, AMEND, OR REPEAL BYLAWS. THE DELEGATION OF AUTHORITY TO THE EXECUTIVE COMMITTEE SHALL NOT OPERATE TO RELIEVE THE BOARD OF DIRECTORS, OR INDIVIDUAL DIRECTOR, OF ANY RESPONSIBILITY IMPOSED UPON THEM BY LAW.

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

Name of the organization AMERICAN ASSOCIATION OF MUSEUMS	Employer identification number 53-0205889
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MEMBERSHIP OF THE CORPORATION SHALL BE COMPOSED OF INDIVIDUAL AND INSTITUTIONAL MEMBERS IN SUCH MEMBERSHIP CATEGORIES AS THE BOARD OF DIRECTORS SHALL DETERMINE. MEMBERS SHALL NOT BE ELIGIBLE TO VOTE. THE ADMITTANCE AND CONTINUED MEMBERSHIP OF ALL MEMBERS SHALL BE SUBJECT TO THE APPROVAL OF THE BOARD OF DIRECTORS. THE MEMBERSHIP STRUCTURE AND ANNUAL MEMBERSHIP DUES OR OTHER DUES AND ASSESSMENTS FOR MEMBERSHIP OR AFFILIATION, AS WELL AS THE PRIVILEGES AND RESPONSIBILITIES ACCORDED CATEGORIES OF MEMBERSHIP SHALL BE DETERMINED BY THE BOARD OF DIRECTORS.

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

THE INFORMATION FOR THE FEDERAL FORM 990 IS PREPARED BY AAM STAFF AND DELIVERED TO A PUBLIC ACCOUNTING FIRM. ONCE THE FIRM HAS PREPARED A DRAFT, THE AUDIT COMMITTEE OF THE BOARD REVIEWS IT AND IT IS THEN FORWARDED ON TO THE ENTIRE BOARD OF DIRECTORS FOR THEIR REVIEW. THE PRESIDENT & CEO REVIEWS THE RETURN PRIOR TO SIGNATURE AND PROVIDING E-FILE AUTHORIZATION TO THE ACCOUNTING FIRM.

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

Name of the organization AMERICAN ASSOCIATION OF MUSEUMS	Employer identification number 53-0205889
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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 HIM/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 EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS (BOD) HAS THE RESPONSIBILITY FOR REVIEWING AND SETTING THE PRESIDENT & CHIEF EXECUTIVE OFFICER (CEO) AND OTHER KEY STAFF'S COMPENSATION PACKAGE. THE COMMITTEE REVIEWS MARKET DATA ALONG WITH THE PRESIDENT & CEO AND OTHER KEY STAFF'S PERFORMANCE IN DETERMINING WHAT AN EQUITABLE COMPENSATION PACKAGE SHOULD BE. IN TURN, THE PRESIDENT AND CEO IS CHARGED WITH PREPARING EVALUATIONS FOR THE ALLIANCE'S SENIOR MANAGEMENT TEAM BASED ON EACH INDIVIDUAL'S PERFORMANCE DURING THE CURRENT YEAR. THIS DATA IS THEN USED BY THE PRESIDENT & CEO IN SETTING COMPENSATION PACKAGES FOR THE SENIOR MANAGEMENT TEAM. THE LAST COMPENSATION REVIEW FOR THE PRESIDENT & CEO WAS PERFORMED IN 2019.

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

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

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

THE ALLIANCE'S MOST RECENT ANNUAL REPORT, AUDITED FINANCIAL STATEMENTS, AND IRS FORM 990 ARE AVAILABLE ON ITS WEBSITE. THE ALLIANCE'S GOVERNING

Name of the organization AMERICAN ASSOCIATION OF MUSEUMS	Employer identification number 53-0205889
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DOCUMENTS ARE AVAILABLE ON THE WEBSITE, UNDER THE MEMBER WALL. THE CONFLICT OF INTEREST POLICY IS MADE AVAILABLE ON A PER REQUEST BASIS.

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

OTHER PROFESSIONAL FEES:

PROGRAM SERVICE EXPENSES	728,252.
MANAGEMENT AND GENERAL EXPENSES	281,538.
FUNDRAISING EXPENSES	25,235.
TOTAL EXPENSES	1,035,025.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,035,025.