

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2018

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 2018 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE NEWARK MUSEUM ASSOCIATION		D Employer identification number 22-1487275
	Doing business as		E Telephone number 973-596-6550
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	49 WASHINGTON STREET		G Gross receipts \$ 56,801,947.
	City or town, state or province, country, and ZIP or foreign postal code NEWARK, NJ 07102		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
F Name and address of principal officer: LINDA C. HARRISON SAME AS C ABOVE		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			If "No," attach a list. (see instructions)
J Website: WWW.NEWARKMUSEUM.ORG			H(c) Group exemption number ▶
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1909	M State of legal domicile: NJ

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE NEWARK MUSEUM OPERATES FOR THE BENEFIT OF THE PUBLIC AS A MUSEUM OF 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	27
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	27
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	243
	6 Total number of volunteers (estimate if necessary)	6	153
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	196,678.
b Net unrelated business taxable income from Form 990-T, line 38	7b	-10,537.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	13,025,100.	10,555,443.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	293,609.	537,722.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,622,704.	9,694,921.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	134,836.	749,552.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	17,076,249.	21,537,638.
	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)	0.	0.
	16 a Professional fundraising fees (Part IX, column (A), line 11e)	9,327,270.	8,471,304.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,776,891.	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	10,687,933.	6,815,688.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	20,015,203.	15,286,992.
19 Revenue less expenses. Subtract line 18 from line 12	-2,938,954.	6,250,646.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	67,207,830.	62,426,494.
	22 Net assets or fund balances. Subtract line 21 from line 20	1,503,176.	1,186,703.
		65,704,654.	61,239,791.

Part II Signature Block

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

Sign Here	Signature of officer		Date		
	LINDA C. HARRISON, CEO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	GARRETT M. HIGGINS	GARRETT M. HIGGINS	05/15/19		P00543209
Firm's name ▶ PKF O'CONNOR DAVIES, LLP			Firm's EIN ▶ 27-1728945		
Firm's address ▶ 665 FIFTH AVENUE NEW YORK, NY 10022			Phone no. 212-286-2600		

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:
FOUNDED IN 1909 BY MUSEUM PIONEER AND VISIONARY JOHN COTTON DANA, THE NEWARK MUSEUM (THE "MUSEUM") IS ONE OF THE MOST INFLUENTIAL MUSEUMS IN THE UNITED STATES AND THE LARGEST ART AND EDUCATION INSTITUTION IN NEW JERSEY. [SEE CONTINUATION ON SCHEDULE O]

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [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? [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 \$ 4,272,239. including grants of \$) (Revenue \$)
EXHIBITIONS AND FACILITIES:

THE MUSEUM'S FIRE SUPPRESSION SYSTEMS WERE REVIEWED AND UPDATED TO ADDRESS THE NEED FOR ADDITIONAL HEADS IN SOME EMERGENCY EXITS AND EXHIBITION SPACE AND ADDING A SPRINKLER TO THE FUEL ROOM.

IN 2018, THE MUSEUM REINSTALLED THE NORTH WING ATRIUM SKYLIGHT TO RESOLVE A CONDENSATION ISSUE. [SEE CONTINUATION ON SCHEDULE O]

4b (Code:) (Expenses \$ 3,397,404. including grants of \$) (Revenue \$)
REGISTRAR & CURATORIAL:

THE MUSEUM IS AN INTERNATIONAL LEADER IN THE THOUGHTFUL APPROACH TO COLLECTING AND PRESENTING, CONNECTING OBJECTS IN ITS COLLECTIONS TO THE CULTURAL NEEDS OF ITS COMMUNITIES, PRODUCING INTERDISCIPLINARY PUBLIC PROGRAMMING IN THE HUMANITIES AND SCIENCES, AND MAKING IMPORTANT CONNECTIONS ACROSS TRADITIONAL COLLECTING AREAS. AMONG ONE OF THE MOST DISTINCTIVE MUSEUMS IN THE UNITED STATES, THE MUSEUM IS HOME TO AN EXTRAORDINARILY DIVERSIFIED GLOBAL COLLECTION. [SEE CONTINUATION ON SCHEDULE O]

4c (Code:) (Expenses \$ 2,951,443. including grants of \$) (Revenue \$ 997,376.)
PROGRAM SERVICES AND MARKETING:

IN 2018, THE MARKETING TEAM CONTINUED WORKING WITH AN EXTERNAL BRANDING PARTNER TOWARDS A BRAND REFRESH FOR THE MUSEUM, FOLLOWING EXTENSIVE QUANTITATIVE AND QUALITATIVE RESEARCH IN 2017. COMPLETED DELIVERABLES INCLUDED THE BRAND STRATEGY, DESIGN CONCEPTS, LOGO REDESIGN, TAGLINE AND ADVERTISING TEMPLATES. A FULL BRAND LAUNCH WILL OCCUR IN 2019. [SEE CONTINUATION ON SCHEDULE O]

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 10,621,086.

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> ?	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 Revenue Procedure 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 temporarily restricted endowments, permanent endowments, or 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>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (27); 1b Enter the number of voting members included in line 1a, above, who are independent (27); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (X); 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 in 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 in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (X); 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 in Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (X); b Other officers or key employees of the organization (X); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X); 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 SEE SCHEDULE O
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 [X] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records C. ELIZABETH ARON, DEPUTY DIRECTOR, FINANCE & ADMIN. - 973-596-6681 49 WASHINGTON STREET, NEWARK, NJ 07102

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CLIFFORD BLANCHARD CO-CHAIR	15.00	X		X				0.	0.	0.
(2) CHRISTINE C. GILFILLAN CO-CHAIR	15.00	X		X				0.	0.	0.
(3) JACOB S. BUURMA VICE PRESIDENT	8.00	X		X				0.	0.	0.
(4) ROBERT H. DOHERTY VICE PRESIDENT	8.00	X		X				0.	0.	0.
(5) STEPHANIE GLICKMAN VICE PRESIDENT	8.00	X		X				0.	0.	0.
(6) KATHY GRIER VICE PRESIDENT	8.00	X		X				0.	0.	0.
(7) ARLENE LIEBERMAN VICE PRESIDENT	8.00	X		X				0.	0.	0.
(8) MARSHALL B. MCLEAN VICE PRESIDENT	8.00	X		X				0.	0.	0.
(9) PETER B. SAYRE TREASURER	10.00	X		X				0.	0.	0.
(10) SARA BONESTEEL TRUSTEE	2.00	X						0.	0.	0.
(11) JOSEPH L. BUCKLY TRUSTEE	2.00	X						0.	0.	0.
(12) SHEILA NUGENT CARTER TRUSTEE THRU FEB 2018	2.00	X						0.	0.	0.
(13) JEFFREY S. CHIESA TRUSTEE	2.00	X						0.	0.	0.
(14) ELEANORE K. COHEN TRUSTEE	2.00	X						0.	0.	0.
(15) LERESSA CROCKETT TRUSTEE	2.00	X						0.	0.	0.
(16) LEE ANN DILLON TRUSTEE	2.00	X						0.	0.	0.
(17) CORY M. GRAY TRUSTEE THRU FEB 2018	2.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JEFFREY S. JACOBSON TRUSTEE	2.00	X						0.	0.	0.
(19) ALLEN J. KARP TRUSTEE	2.00	X						0.	0.	0.
(20) JUDITH LIEBERMAN TRUSTEE	2.00	X						0.	0.	0.
(21) SHAHID MALIK TRUSTEE	2.00	X						0.	0.	0.
(22) NATALIE MCKENSIE TRUSTEE	2.00	X						0.	0.	0.
(23) D. NICHOLAS MICELI TRUSTEE THRU FEB 2018	2.00	X						0.	0.	0.
(24) RONALD M. OLLIE TRUSTEE	2.00	X						0.	0.	0.
(25) ANDREW H. RICHARDS TRUSTEE	2.00	X						0.	0.	0.
(26) WILLIAM C. ROBINSON TRUSTEE	2.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								1,250,339.	0.	227,465.
d Total (add lines 1b and 1c)								1,250,339.	0.	227,465.

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 **9**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
HOLLISTER CONSTRUCTION SERVICES 339 JEFFERSON ROAD, PARSIPPANY, NJ 07054	CONSTRUCTION SERVICES	933,938.
ONLINE COMPUTERS AND COMMUNICATIONS LLC P.O. BOX 428, FLORHAM PARK, NJ 07932	TECHNOLOGY CONSULTING SERVICES	147,953.
ISAACSON MILLER INC 1300 19TH ST NW, WASHINGTON, DC 20036	RECRUITMENT AGENCY	111,000.

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 **3**

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) DR. LINDA M. A. RODRIGUES TRUSTEE THRU FEB 2018	2.00	X						0.	0.	0.
(28) SETH L. ROSEN TRUSTEE	8.00	X						0.	0.	0.
(29) SOPHIA SHENG TRUSTEE THRU FEB 2018	2.00	X						0.	0.	0.
(30) MONICA SLATER STOKES TRUSTEE	2.00	X						0.	0.	0.
(31) ELIZA SHANLEY SUTTE TRUSTEE	2.00	X						0.	0.	0.
(32) ERIC D. WEINSTOCK TRUSTEE	2.00	X						0.	0.	0.
(33) JAY WEINSTEIN TRUSTEE THRU FEB 2018	2.00	X						0.	0.	0.
(34) ULYSSES DIETZ DEPUTY DIRECTOR THRU OCT. 2018	20.00			X				65,280.	0.	0.
(35) DEBORAH KASINDORF INTERIM SECRETARY / DEPUTY DIRECTOR	50.00			X				220,754.	0.	45,682.
(36) C. ELIZABETH ARON DEPUTY DIR., FINANCE & ADMIN.	50.00			X				161,602.	0.	20,747.
(37) SONNET TAKAHISA, DEPUTY DIR., ENGAGEMENT & INNOVATION	50.00					X		132,377.	0.	31,608.
(38) TIM WINTEMBERG DEPUTY DIR., DESIGN & EXHIBITION	50.00					X		120,205.	0.	15,380.
(39) KRISTIN CURRY DIRECTOR OF DEVELOPMENT	50.00					X		107,546.	0.	28,072.
(40) DAVID MAY DIRECTOR OF OPERATIONS	50.00					X		106,914.	0.	40,952.
(41) CAROLYN CLARK DIRECTOR OF HUMAN RESOURCE	50.00					X		105,437.	0.	25,069.
(42) STEVEN KERN FORMER SECRETARY & CEO	0.00						X	230,224.	0.	19,955.
Total to Part VII, Section A, line 1c								1,250,339.		227,465.

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b 518,510.				
	c Fundraising events	1c 894,252.				
	d Related organizations	1d				
	e Government grants (contributions)	1e 5,082,140.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 4,060,541.				
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f		10,555,443.			
	Program Service Revenue	2 a MEMBERSHIP DUES AND TOURS NTD	Business Code 900099	214,413.	214,413.	
b EDUC PGMS & WORKSHOPS		611710	156,371.	156,371.		
c REGISTRATION FEES		900099	141,938.	141,938.		
d TRAVELING EXHIBITION		900099	25,000.	25,000.		
e						
f All other program service revenue						
g Total. Add lines 2a-2f			537,722.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		500,499.		500,499.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real	256,329.			
		(ii) Personal				
		b Less: rental expenses	18,953.			
		c Rental income or (loss)	237,376.			
	d Net rental income or (loss)		237,376.		237,376.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities	43,818,184.	219,688.		
		(ii) Other				
		b Less: cost or other basis and sales expenses	34,843,450.	0.		
		c Gain or (loss)	8,974,734.	219,688.		
	d Net gain or (loss)		9,194,422.		9,194,422.	
	8 a Gross income from fundraising events (not including \$ 894,252. of contributions reported on line 1c). See Part IV, line 18	a	109,775.			
		b Less: direct expenses	307,141.			
c Net income or (loss) from fundraising events			-197,366.		-197,366.	
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses					
	c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a	554,419.				
	b Less: cost of goods sold	94,765.				
	c Net income or (loss) from sales of inventory		459,654.	459,654.		
Miscellaneous Revenue		Business Code				
11 a PARKING LOT INCOME	900099	249,888.		196,678.	53,210.	
	b					
	c					
	d All other revenue					
e Total. Add lines 11a-11d		249,888.				
12 Total revenue. See instructions		21,537,638.	997,376.	196,678.	9,788,141.	

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	514,065.	128,516.	154,220.	231,329.
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	6,013,875.	3,851,176.	707,466.	1,455,233.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	635,401.	432,880.	87,859.	114,662.
9 Other employee benefits	717,682.	565,987.	16,029.	135,666.
10 Payroll taxes	590,281.	377,788.	91,069.	121,424.
11 Fees for services (non-employees):				
a Management				
b Legal	49,864.	6,214.	43,650.	
c Accounting	80,575.		80,575.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	366,969.	253,824.	41,817.	71,328.
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	487,212.	328,533.	109,510.	49,169.
12 Advertising and promotion	521,277.	280,915.	5,269.	235,093.
13 Office expenses	870,849.	709,004.	93,046.	68,799.
14 Information technology	136,069.	88,142.	22,971.	24,956.
15 Royalties				
16 Occupancy	968,200.	682,397.	264,254.	21,549.
17 Travel	217,950.	123,201.	47,201.	47,548.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	69,923.	36,058.	23,154.	10,711.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,205,090.	1,144,836.	24,101.	36,153.
23 Insurance	290,367.	277,188.	5,323.	7,856.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a ACQ OF WORKS OF ART	671,885.	671,885.		
b REPAIRS AND MAINT.	589,261.	565,674.	9,449.	14,138.
c EQUIPMENT RENTAL & MAIN	131,525.	84,308.	30,011.	17,206.
d MEMBERSHIP TOURS	114,071.			114,071.
e All other expenses	44,601.	12,560.	32,041.	
25 Total functional expenses. Add lines 1 through 24e	15,286,992.	10,621,086.	1,889,015.	2,776,891.
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)		(B)	
		Beginning of year		End of year	
Assets	1 Cash - non-interest-bearing	6,204,116.	1	5,462,136.	
	2 Savings and temporary cash investments	7,333,408.	2	7,729,894.	
	3 Pledges and grants receivable, net	2,932,782.	3	1,827,726.	
	4 Accounts receivable, net		4		
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use	141,837.	8	156,411.	
	9 Prepaid expenses and deferred charges	93,716.	9	253,958.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 62,908,838.			
	b Less: accumulated depreciation	10b 47,118,374.	14,792,667.	10c	15,790,464.
	11 Investments - publicly traded securities	16,447,641.	11	21,825,308.	
	12 Investments - other securities. See Part IV, line 11	19,041,884.	12	9,011,556.	
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	219,779.	15	369,041.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	67,207,830.	16	62,426,494.		
Liabilities	17 Accounts payable and accrued expenses	1,502,224.	17	1,148,946.	
	18 Grants payable		18		
	19 Deferred revenue		19		
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	952.	25	37,757.	
	26 Total liabilities. Add lines 17 through 25	1,503,176.	26	1,186,703.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	44,740,890.	27	44,336,916.	
	28 Temporarily restricted net assets	7,418,391.	28	3,213,690.	
	29 Permanently restricted net assets	13,545,373.	29	13,689,185.	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
33 Total net assets or fund balances	65,704,654.	33	61,239,791.		
34 Total liabilities and net assets/fund balances	67,207,830.	34	62,426,494.		

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	21,537,638.
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,286,992.
3	Revenue less expenses. Subtract line 2 from line 1	3	6,250,646.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	65,704,654.
5	Net unrealized gains (losses) on investments	5	-10,760,943.
6	Donated services and use of facilities	6	2,000.
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	43,434.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	61,239,791.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____	X	

Form 990 (2018)

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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	10753545.	9021901.	9671682.	13025100.	10555443.	53027671.
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	10753545.	9021901.	9671682.	13025100.	10555443.	53027671.
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)						869,859.
6 Public support. Subtract line 5 from line 4.						52157812.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	10753545.	9021901.	9671682.	13025100.	10555443.	53027671.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	805,800.	594,210.	621,123.	568,704.	756,828.	3346665.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	2,012.	2,084.	72,859.	2,545.	53,210.	132,710.
11 Total support. Add lines 7 through 10						56507046.
12 Gross receipts from related activities, etc. (see instructions)					12	4,504,040.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	92.30 %
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	93.33 %
16a 33 1/3% support test - 2018. 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 - 2017. 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 - 2018. 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 - 2017. 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

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2018. 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 - 2017. 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 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</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 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</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 in 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 in 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 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2018

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

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:

BOOK SALE/ OTHER REVENUE

2014 AMOUNT: \$ 2,012.

2015 AMOUNT: \$ 2,084.

2016 AMOUNT: \$ 3,945.

2017 AMOUNT: \$ 2,545.

INSURANCE REIMBURSEMENT

2016 AMOUNT: \$ 68,914.

PARKING LOT INCOME

2018 AMOUNT: \$ 53,210.

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2018

Name of the organization

THE NEWARK MUSEUM ASSOCIATION

Employer identification number

22-1487275

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

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

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

Name of organization THE NEWARK MUSEUM ASSOCIATION	Employer identification number 22-1487275
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	_____ _____ _____	\$ <u>4,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____ _____ _____	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____ _____ _____	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____ _____ _____	\$ <u>350,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	_____ _____ _____	\$ <u>220,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE NEWARK MUSEUM ASSOCIATION	Employer identification number 22-1487275
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization THE NEWARK MUSEUM ASSOCIATION	Employer identification number 22-1487275
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE D
(Form 990)

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

2018
Open to Public Inspection

Name of the organization THE NEWARK MUSEUM ASSOCIATION **Employer identification number** 22-1487275

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

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)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

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

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

(ii) Assets included in Form 990, Part X

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

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2018

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	43,504,779.	48,763,846.	49,608,807.	52,126,984.	49,446,301.
b Contributions	363,500.	574,393.	1,127,247.	955,158.	73,333.
c Net investment earnings, gains, and losses	-1,371,887.	5,678,260.	2,823,485.	152,573.	4,345,795.
d Grants or scholarships					
e Other expenditures for facilities and programs	3,711,226.	10,903,803.	4,382,084.	3,299,753.	1,738,445.
f Administrative expenses	366,979.	607,917.	413,609.	326,155.	
g End of year balance	38,418,187.	43,504,779.	48,763,846.	49,608,807.	52,126,984.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 63.34 %
 - b Permanent endowment 35.63 %
 - c Temporarily restricted endowment 1.03 %
- 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? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- 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		58,740,535.	44,160,254.	14,580,281.
c Leasehold improvements				
d Equipment		2,942,425.	2,747,567.	194,858.
e Other		1,225,878.	210,553.	1,015,325.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				15,790,464.

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) LIMITED PARTNERSHIP	9,011,556.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	9,011,556.	

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) REFUNDABLE ADVANCES	37,757.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	37,757.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

1	Total revenue, gains, and other support per audited financial statements		1	10,224,225.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a	-10,760,943.	
	b Donated services and use of facilities	2b	2,000.	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d	62,387.	
	e Add lines 2a through 2d	2e	-10,696,556.	
3	Subtract line 2e from line 1		3	20,920,781.
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	366,969.	
	b Other (Describe in Part XIII.)	4b	249,888.	
	c Add lines 4a and 4b	4c	616,857.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	21,537,638.

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	14,689,088.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a		
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d	18,953.	
	e Add lines 2a through 2d	2e	18,953.	
3	Subtract line 2e from line 1		3	14,670,135.
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	366,969.	
	b Other (Describe in Part XIII.)	4b	249,888.	
	c Add lines 4a and 4b	4c	616,857.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	15,286,992.

Part XIII Supplemental Information.

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

PART III, LINE 1A:

THE VALUE OF THE MUSEUM'S COLLECTIONS HAS BEEN EXCLUDED FROM THE STATEMENTS OF FINANCIAL POSITION, AND GIFTS OF ART OBJECTS ARE EXCLUDED FROM REVENUE IN THE STATEMENTS OF ACTIVITIES. PURCHASES OF ART OBJECTS BY THE MUSEUM ARE RECORDED AS DECREASES IN NET ASSETS IN THE STATEMENTS OF ACTIVITIES. THE MUSEUM'S POLICY IS TO UTILIZE BOARD DESIGNATED ACQUISITION FUNDS TO ACQUIRE NEW OBJECTS FOR ITS COLLECTIONS. PROCEEDS FROM THE SALE OF COLLECTION ITEMS ARE REFLECTED AS INCREASES IN NET ASSETS IN THE STATEMENTS OF ACTIVITIES.

PART III, LINE 4:

THE MUSEUM IS AN INTERNATIONAL LEADER IN THE THOUGHTFUL APPROACH TO

Part XIII Supplemental Information (continued)

COLLECTING AND PRESENTING, CONNECTING OBJECTS IN ITS COLLECTIONS TO THE CULTURAL NEEDS OF ITS COMMUNITIES, PRODUCING INTERDISCIPLINARY PUBLIC PROGRAMMING IN THE HUMANITIES AND SCIENCES, AND MAKING IMPORTANT CONNECTIONS ACROSS TRADITIONAL COLLECTING AREAS. AMONG ONE OF THE MOST DISTINCTIVE MUSEUMS IN THE UNITED STATES, THE MUSEUM IS HOME TO AN EXTRAORDINARILY DIVERSIFIED GLOBAL COLLECTION.

A CENTURY AFTER ITS FOUNDING, THE MUSEUM IS NOW CUSTODIAN TO OVER 300,000 OBJECTS IN THE DEPARTMENTS OF AMERICAN ART, ASIAN ART, AFRICAN ART, NATIVE AMERICAN ART, DECORATIVE ARTS, NUMISMATICS, AND AN IMPORTANT NATURAL SCIENCE COLLECTION. THE MUSEUM IS ALSO THE HOME OF THE HISTORIC BALLANTINE HOUSE.

IN 2018, RIGHTS AND REPRODUCTION REQUESTS TOTALED 110 IMAGES. IN 2018, 3434 OBJECTS WERE ADDED TO THE MUSEUM'S ONLINE SEARCHABLE DATABASE AND 47 PURCHASES, 203 GIFTS, 44 BEQUESTS, AND 12 TRANSFERS WERE ACCESSIONED INTO OUR PERMANENT COLLECTION.

PART V, LINE 4:

THE PRIMARY OBJECTIVE OF THE MUSEUM'S ENDOWMENT FUNDS IS TO PROVIDE A STABLE STREAM OF INCOME TO SUPPORT ITS OPERATIONS WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS.

PART X, LINE 2:

THE MUSEUM RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT TO BE SUSTAINED. MANAGEMENT HAS DETERMINED THAT THE MUSEUM HAS NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION OR DISCLOSURE. THE MUSEUM IS NO

Part XIII Supplemental Information (continued)

LONGER SUBJECT TO EXAMINATIONS BY THE APPLICABLE TAXING JURISDICTIONS FOR PERIODS PRIOR TO 2015.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RENT EXPENSES REPORTED IN PART VIII, LINE 6B	18,953.
WRITE-OFF OF INTERNAL INTEREST ACCOUNTS	43,434.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	62,387.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

PARKING LOT INCOME REPORTED IN PART VIII, LINE 11	249,888.
---	----------

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENT EXPENSES REPORTED IN PART VIII, LINE 6B	18,953.
--	---------

PART XII, LINE 4B - OTHER ADJUSTMENTS:

PARKING LOT INCOME REPORTED IN PART VIII, LINE 11	249,888.
---	----------

Part IV Foreign Forms

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

Part V Supplemental Information

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

SCHEDULE F, PART IV, LINE 3:

THE ORGANIZATION IS NOT REQUIRED TO FILE FORM 5471 BECAUSE IT DOES NOT MEET THE APPLICABLE OWNERSHIP REQUIREMENT.

SCHEDULE F, PART I, LINE 3F:

THE INVESTMENT WAS FULLY REDEEMED ON 12/31/2018.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		2018 GALA (event type)	BENEFIT LUNCHEON (event type)	NONE (total number)	
Revenue	1	Gross receipts	885,282.	118,745.	1,004,027.
	2	Less: Contributions	798,832.	95,420.	894,252.
	3	Gross income (line 1 minus line 2)	86,450.	23,325.	109,775.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	149,513.	14,938.	164,451.
	7	Food and beverages	78,796.	20,975.	99,771.
	8	Entertainment			
	9	Other direct expenses	34,027.	8,892.	42,919.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			307,141.
11	Net income summary. Subtract line 10 from line 3, column (d)			-197,366.	

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

Part IV Supplemental Information *(continued)*

Multiple horizontal lines for supplemental information.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2018

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: **THE NEWARK MUSEUM ASSOCIATION**
 Employer identification number: **22-1487275**

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 **1b**

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

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

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" 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? **4a**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c**
- 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? **5a**
- b** Any related organization? **5b**
- 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? **6a**
- b** Any related organization? **6b**
- 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 **7**

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

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

	Yes	No
1b		
2		
4a	<input checked="" type="checkbox"/>	
4b		<input checked="" type="checkbox"/>
4c		<input checked="" type="checkbox"/>
5a		<input checked="" type="checkbox"/>
5b		<input checked="" type="checkbox"/>
6a		<input checked="" type="checkbox"/>
6b		<input checked="" type="checkbox"/>
7		<input checked="" type="checkbox"/>
8		<input checked="" type="checkbox"/>
9		

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

Schedule J (Form 990) 2018

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 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) DEBORAH KASINDORF INTERIM SECRETARY / DEPUTY DIRECTOR	(i)	220,108.	0.	646.	28,925.	16,757.	266,436.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) C. ELIZABETH ARON DEPUTY DIR., FINANCE & ADMIN.	(i)	160,858.	0.	744.	20,747.	0.	182,349.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SONNET TAKAHISA, DEPUTY DIR., ENGAGEMENT & INNOVATION	(i)	130,609.	0.	1,768.	17,680.	13,928.	163,985.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) STEVEN KERN FORMER SECRETARY & CEO	(i)	0.	0.	230,224.	0.	19,955.	250,179.	198,611.
	(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)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 4A:

PURSUANT TO THE TERMS AND CONDITIONS STIPULATED IN MR. STEVEN KERN'S SEPARATION AGREEMENT DATED NOVEMBER 20, 2017, THE NEWARK MUSEUM ASSOCIATION PAID A SEVERANCE PAYMENT TO MR. STEVEN KERN IN THE AMOUNT OF \$230,224 IN 2018.

THE \$230,224 WAS TREATED AS TAXABLE COMPENSATION TO THE RECIPIENT ON HIS 2018 FORM W-2 AND REFLECTED ON SCHEDULE J, PART II, COLUMN B(III).

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization **THE NEWARK MUSEUM ASSOCIATION** Employer identification number **22-1487275**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art	X	203	0.	
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** **0**

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2018

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

SCHEDULE M, PART I, COLUMN (B):

THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS IN PART I, COLUMN (B) OF SCHEDULE M.

SCHEDULE M, LINE 32B:

HIRE AND USE OF THIRD PARTIES:

THE NEWARK MUSEUM OCCASIONALLY CONTRACTS WITH COMMERCIAL AUCTION HOUSES SUCH AS SOTHEBY'S TO SELL NON-CASH CONTRIBUTIONS OF WORKS OF ART OR PERSONAL PROPERTY. THESE GIFTS MAY BE WORKS THAT HAVE BEEN PART OF THE COLLECTION FOR YEARS, BUT THAT HAVE BEEN RECENTLY DE-ACCESSIONED, OR THEY MAY BE WORKS OF ART OR PERSONAL PROPERTY DONATED TO THE MUSEUM THAT DO NOT FIT IN WITH THE MUSEUM'S COLLECTIONS.

SCHEDULE M, LINE 33:

THE VALUE OF THE MUSEUM'S COLLECTIONS HAS BEEN EXCLUDED FROM THE STATEMENTS OF FINANCIAL POSITION, AND GIFTS OF ART OBJECTS ARE EXCLUDED FROM REVENUE IN THE STATEMENT OF ACTIVITIES. PURCHASES OF ART OBJECTS BY THE MUSEUM ARE RECORDED AS DECREASES IN NET ASSETS IN THE STATEMENT OF ACTIVITIES.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

THE NEWARK MUSEUM ASSOCIATION

Employer identification number

22-1487275

FORM 990, PART III, LINE 1, MISSION STATEMENT:

ITS EXTENSIVE COLLECTIONS, WHICH INCLUDE ART FROM AROUND THE GLOBE AS
WELL AS SIGNIFICANT HOLDINGS OF SCIENCE, TECHNOLOGY AND NATURAL
HISTORY, RANK 12TH IN SIZE NATIONALLY. THE MUSEUM IS DEDICATED TO
ARTISTIC EXCELLENCE, EDUCATION AND COMMUNITY ENGAGEMENT WITH AN
OVERARCHING COMMITMENT TO BROADENING AND DIVERSIFYING ARTS
PARTICIPATION.

THE ORGANIZATION'S MISSION STATES: "THE NEWARK MUSEUM OPERATES, AS IT
HAS SINCE ITS FOUNDING, IN THE PUBLIC TRUST AS A MUSEUM OF SERVICE, AND
AS A LEADER IN CONNECTING OBJECTS AND IDEAS TO THE NEEDS AND WISHES OF
ITS CONSTITUENCIES. OUR RENOWNED ART COLLECTIONS HAVE THE POWER TO
EDUCATE, INSPIRE AND TRANSFORM INDIVIDUALS OF ALL AGES, AND THE LOCAL,
REGIONAL, NATIONAL AND INTERNATIONAL COMMUNITIES THAT IT SERVES. IN THE
WORDS OF DANA, 'A GOOD MUSEUM ATTRACTS, ENTERTAINS, AROUSES CURIOSITY,
LEADS TO QUESTIONING AND THUS PROMOTES LEARNING.'" IN ACCORDANCE WITH
THIS MANDATE, THE MUSEUM ACCOMPLISHES ITS MISSION BY PRESENTING SPECIAL
EXHIBITIONS, PERMANENT GALLERIES, EDUCATION AND PUBLIC PROGRAMMING, A
RESEARCH LIBRARY, PARTNERSHIPS AND RESOURCES DESIGNED TO ENRICH
PEOPLES' LIVES.

THE MUSEUM'S DISTINGUISHED ART COLLECTIONS ARE INTERNATIONAL IN SCOPE
AND INCLUDE AN ASIAN ART COLLECTION WITH THE MOST IMPORTANT COLLECTION
OF TIBETAN ART IN THE WEST; ONE OF THE NATION'S EARLIEST AND MOST
COMPREHENSIVE COLLECTIONS OF AFRICAN ART; A NATIONALLY AND
INTERNATIONALLY RECOGNIZED COLLECTION OF 18TH- TO 21ST-CENTURY AMERICAN

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

Schedule O (Form 990 or 990-EZ) (2018)

832211 10-10-18

Name of the organization THE NEWARK MUSEUM ASSOCIATION	Employer identification number 22-1487275
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PAINTING AND SCULPTURE; AN ACCLAIMED DECORATIVE ARTS COLLECTION; AND ANCIENT MEDITERRANEAN COLLECTIONS FEATURING AN UNPARALLELED COLLECTION OF ANCIENT GLASS. THE COLLECTIONS ARE PRESENTED IN 91 GALLERIES HOUSED ON A SEVEN-ACRE CAMPUS THAT ENCOMPASSES THE BALLANTINE HOUSE, A VICTORIAN-ERA MANSION WHICH IS A NATIONAL HISTORIC LANDMARK, THE DREYFUSS MEMORIAL GARDEN, AND HORIZON PLAZA. THE MUSEUM ALSO FEATURES THE ALICE & LEONARD DREYFUSS PLANETARIUM AS WELL AS THE MAKERSPACE, A DEDICATED MAKER STUDIO AND EXHIBITION SPACE THAT OFFERS INTERACTIVE, HANDS-ON ACTIVITIES FOR VISITORS OF ALL AGES THAT INTEGRATE THE ARTS WITH STEM LEARNING.

CONSIDERED THE BIRTHPLACE OF MUSEUM-BASED EDUCATION, THE MUSEUM REMAINS ONE OF THE LEADERS IN ARTS EDUCATION IN THE COUNTRY. THE MUSEUM OFFERS A WEALTH OF ON-SITE AND OFF-SITE SCHOOL PROGRAMS FOR NEW JERSEY STUDENTS FROM PRE-K THROUGH 12TH GRADE, AS WELL AS PROFESSIONAL DEVELOPMENT TRAINING SESSIONS FOR TEACHERS, THAT SUPPORT STATE CURRICULUM STANDARDS IN THE ARTS, SCIENCES AND THE HUMANITIES. IN ADDITION, THE MUSEUM SERVES AS AN EDUCATIONAL RESOURCE FOR THE ENTIRE REGION BY PROVIDING VARIED PROGRAMMING FOR ALL AGES THAT INCREASES VISITORS' ENGAGEMENT WITH WORKS IN THE COLLECTIONS AND PROMOTES LIFELONG LEARNING AND CREATIVITY.

FORM 990, PART III, LINE 4A, EXHIBITIONS AND FACILITIES:

HUMIDIFICATION AND RELATED CONTROLS WERE SUCCESSFULLY INSTALLED IN A NEW CONSERVATION LAB THAT WAS FORMERLY AN OFFICE AREA.

THE 2017-2018 CAPITAL PROJECT CONCLUDED AND SAW THE MUSEUM REOPEN THE

Name of the organization THE NEWARK MUSEUM ASSOCIATION	Employer identification number 22-1487275
---	--

WASHINGTON STREET DOORS AFTER 20 YEARS, BUILD A NEW VISITOR CENTER AND UPDATE SEVERAL GALLERY SPACES. THE PROJECT INCLUDED AN EXTERIOR HANDICAP ACCESS RAMP AND ENTRY, AN OUTDOOR PLAZA SPACE ON WASHINGTON STREET THAT INCLUDED PUBLIC FURNITURE, AN ACCESSIBLE LIFT FOR THE ENGELHARD COURT, REPLACEMENT OF FOUR OUTDATED AIR HANDLING UNITS, INTERIOR AND EXTERIOR LIGHTING UPGRADES, COLLECTIONS STORAGE FLOOD REMEDIATION, AND FIRE ALARM SYSTEM UPGRADES.

CAPITAL PROJECT GALLERY UPGRADES INCLUDED COMBINING SEVERAL SMALLER GALLERIES INTO ONE NEW LARGER GALLERY DEDICATED TO THE MUSEUM'S SPECIAL EXHIBITIONS. THIS NEW 5,000 SQUARE FOOT SPACE WAS INAUGURATED WITH THE SPRING EXHIBITION THE ROCKIES & THE ALPS: BIERSTADT, CALAME AND THE ROMANCE OF THE MOUNTAINS. THE SPACE ALSO HOSTED KIMONO REFASHIONED IN THE FALL. THE SPECIAL EXHIBITION GALLERY ALSO INCORPORATES NEW, FLEXIBLE LED LIGHTING AND A REDESIGNED SET OF RE-USABLE, RECONFIGURABLE WALL PANELS.

ADDITIONAL EXHIBITIONS SUCH AS VANTAGE POINTS, DRAMATIC THREADS, TEEN ARTS, THE ANNUAL EXPLORERS PROJECT PLUS SUBSTANTIAL ROTATIONS IN THE NATIVE AMERICAN GALLERIES BROUGHT THE TOTAL OF SQUARE FEET REINSTALLED DURING THIS TRANSITION YEAR TO OVER 15,000 SQUARE FEET OVER 9 PROJECTS.

SUBSTANTIAL WORK WAS ALSO UNDERTAKEN IN 2018 TO RENOVATE THE ENTIRE SECOND FLOOR OF THE NORTH WING IN ADVANCE OF THE REINSTALLATION OF SEEING AMERICA. THIS PROJECT WILL REOPEN IN 2019 WITH CLEANER, MORE FLEXIBLE OPEN SPACES, WOOD FLOORS AND OTHER IMPROVEMENTS. SEEING AMERICA WILL HIGHLIGHT THE MUSEUM'S 19TH-21ST CENTURY AMERICAN COLLECTIONS WHILE INCORPORATING BILINGUAL LABELS, MORE DIVERSE ARTISTIC

Name of the organization THE NEWARK MUSEUM ASSOCIATION	Employer identification number 22-1487275
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CONTENT AND ACCESSIBLE VOICES THAT BROADEN AND DEEPEN VISITORS' EXPERIENCES OF AMERICAN ART AND LIFE.

FORM 990, PART III, LINE 4B, REGISTRAR & CURATORIAL:

A CENTURY AFTER ITS FOUNDING, THE MUSEUM IS NOW CUSTODIAN TO OVER 300,000 OBJECTS IN THE DEPARTMENTS OF AMERICAN ART, ASIAN ART, AFRICAN ART, NATIVE AMERICAN ART, DECORATIVE ARTS, NUMISMATICS, AND AN IMPORTANT NATURAL SCIENCE COLLECTION. THE MUSEUM IS ALSO THE HOME OF THE HISTORIC BALLANTINE HOUSE.

IN 2018, RIGHTS AND REPRODUCTION REQUESTS TOTALED 110 IMAGES. IN 2018, 3434 OBJECTS WERE ADDED TO THE MUSEUM'S ONLINE SEARCHABLE DATABASE AND 47 PURCHASES, 203 GIFTS, 44 BEQUESTS, AND 12 TRANSFERS WERE ACCESSIONED INTO OUR PERMANENT COLLECTION.

FORM 990, PART III, LINE 4C, PROGRAM SERVICES AND MARKETING:

MARKETING EFFORTS FOCUSED ON OUT-OF-HOME ADVERTISING TO MAXIMIZE EXPOSURE AND INCREASE AWARENESS FOR THE MUSEUM, WITH PRINT ADVERTISING IN NEWARK BASED PUBLICATIONS, THE NEW YORK TIMES AND THE PLAYBILLS OF REGIONAL THEATRE COMPANIES. MESSAGES PROMOTED SPECIAL EXHIBITIONS: ROCKIES & ALPS AND KIMONO REFASHIONED. DIGITAL BILLBOARDS NEXT TO NEWARK CITY HALL PROMOTED COMMUNITY PROGRAMMING INCLUDING THE NEWARK BLACK FILM FESTIVAL, SECOND SUNDAYS AND LATE THURSDAYS. IN 2018, AUDIENCE ENGAGEMENT WAS 300,000 ACROSS ALL PLATFORMS.

DANA MAGAZINE, THE OFFICIAL MUSEUM MEMBERS PUBLICATION, WAS PUBLISHED

Name of the organization THE NEWARK MUSEUM ASSOCIATION	Employer identification number 22-1487275
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IN JUNE AND OCTOBER, WITH COPIES DISTRIBUTED TO MEMBERS AS A DIGITAL FLIPBOOK VIA EMAIL. TOP TIER MEMBERS AND SELECT VIPS (FUNDERS AND COMMUNITY LEADERS) RECEIVED PRINTED COPIES. FOLLOWING DISTRIBUTION, THE PDF OF DANA MAGAZINE WAS MADE AVAILABLE ON THE MUSEUM'S WEBSITE.

PARTNERING WITH CURATORS AND EXTERNAL PUBLISHERS, THE FOLLOWING CATALOGS WERE PRODUCED IN 2018 TO DOCUMENT AND MARKET OUR COLLECTIONS AND SPECIAL EXHIBITIONS:

- "KOREAN COLLECTION"
- "SEEING AMERICA: NATIVE ARTISTS OF NORTH AMERICA" DELIVERED JANUARY 2019
- "SEEING AMERICA: ARC OF ABSTRACTION" DELIVERED FEBRUARY 2019
- "WENDY RED STAR" SELF-PUBLISHED BY THE NEWARK MUSEUM; DELIVERED JANUARY 2019

SCHOOL PROGRAMS

UTILIZING ITS UNIQUE POSITION AS A LEADER IN ARTS AND SCIENCES, THE MUSEUM PROVIDED SUCCESSFUL PROGRAMMING FOR 150,000 AUDIENCE PARTICIPANTS, INCLUDING SCHOOL CHILDREN, THEIR TEACHERS, FAMILIES AND ADULTS IN 2018.

THE MUSEUM MAINTAINED ITS DISTRICT CONTRACTS WITH NEWARK PUBLIC SCHOOL 4TH GRADERS (THRU A PRIVATELY FUNDED GRANT) AND JERSEY CITY PUBLIC SCHOOLS (5TH & 8TH GRADES) WHICH INCLUDE PROFESSIONAL DEVELOPMENT FOR TEACHERS AND GALLERY AND STUDIO ACTIVITIES AT THE MUSEUM FOR STUDENTS.

AS A RESULT OF THE MUSEUM'S ROBUST LEARNING PROGRAMS AND STEAM EDUCATION INITIATIVES PARTICIPATION REACHED 40,000 SCHOOL CHILDREN AT

Name of the organization THE NEWARK MUSEUM ASSOCIATION	Employer identification number 22-1487275
---	--

THE NEWARK MUSEUM OR HAD A MUSEUM EDUCATOR IN THEIR CLASSROOM IN 2018.

THIS IMPACT REPRESENTS 168 DISTRICTS (719 PUBLIC AND PRIVATE SCHOOLS)

THROUGHOUT NORTHERN AND CENTRAL NEW JERSEY, SERVING 880 CLASSROOM

TEACHERS AND SUPERVISORS FOR PROFESSIONAL DEVELOPMENT. PROGRAM SCOPE

AND SIZE RANGED FROM SCIENCE LABS TO ARTS AND HUMANITIES PROGRAMS AND

PLANETARIUM SHOWS.

FAMILY PROGRAMS

IN ADDITION TO SCHOOL PROGRAMS, THE MUSEUM OPERATED WEEKEND DROP-IN

PROGRAMMING FOR FAMILIES. IN 2018 REGULAR WEEKEND ART AND GALLERY TOURS

WERE COMPLEMENTED BY THE MUSEUM'S CONTINUING INITIATIVE TO PROVIDE

PROGRAMMING FOR 3 TO 5-YEAR-OLDS AND THEIR FAMILIES. THE MUSEUM

CONTINUED ITS CREATIVE PLAY PROGRAMMING AS PART OF OUR FAMILY PROGRAMS,

SERVING 1,644 CHILDREN.

SERVING SCHOOL CHILDREN AND THE PUBLIC, THE MAKERSPACE EXPANDED ITS

CAPACITY IN 2018 WITH HANDS-ON MAKING PROJECTS THAT BLENDED ART, CRAFT,

AND TECHNOLOGY, ALLOWING VISITORS TO DEEPLY ENGAGE WITH THE TOOLS,

MATERIALS, AND TECHNIQUES FOUND IN THE MUSEUM'S VAST COLLECTION. BY

USING HI-TECH TOOLS, UPCYCLED AND COMMON MATERIALS, AND NOVEL

APPROACHES TO CREATE SOMETHING NEW, THE MAKERSPACE GREW ITS AUDIENCE

FOR DROP-IN ACTIVITIES, STUDIOS, AND COURSES BY OVER 300%.

CAMP NEWARK MUSEUM

THE MUSEUM'S 7-WEEK SUMMER PROGRAM SERVED 472 CAMPERS BETWEEN AGES 3

AND 14 WITH ON AND OFF-SITE CLASSES IN, INCLUDING A PARTNERSHIP WITH

GLASSROOTS, A NON-PROFIT PARTNER FOCUSING ON ARTS EDUCATION THROUGH A

GLASS ART EXPERIENCE.

Name of the organization THE NEWARK MUSEUM ASSOCIATION	Employer identification number 22-1487275
---	--

EXPLORERS PROGRAM

THE EXPLORERS PROGRAM AT THE NEWARK MUSEUM, IN ITS 23RD YEAR IN 2018, IS A HIGHLY SUCCESSFUL COLLEGE AND JOB PREPAREDNESS PROGRAM THAT PROVIDES 45 HIGH SCHOOL STUDENTS WITH EDUCATION, EMPLOYMENT, AND MENTORING OPPORTUNITIES. THE EXPLORERS PROGRAM FOLLOWS AN INTENSIVE CURRICULUM IMPLEMENTED THROUGH WORKSHOPS, FIELD TRIPS AND INTERNSHIPS AT THE MUSEUM. FOR THE PAST TEN YEARS, 100% OF EXPLORER GRADUATES HAVE GONE ON TO COLLEGE.

MARTIN LUTHER KING, JR. DAY

THE MARTIN LUTHER KING JR. DAY CELEBRATION IS AN ANNUAL EVENT THAT DREW 1500 PEOPLE IN 2018. PROGRAM ELEMENTS INCLUDED FILM SCREENINGS, SPOKEN WORD PERFORMANCES, LIVE PERFORMANCES, AND HANDS-ON ACTIVITIES.

JAZZ IN THE GARDEN

NOW IN ITS 54TH YEAR, JAZZ IN THE GARDEN BRINGS JAZZ MUSICIANS TO SHARE THEIR TALENT, ATTRACTING HUNDREDS OF VISITORS PER EVENT DURING WEEKLY SUMMER EVENTS TO MUSIC FANS, RESIDENTS AND LOCAL PROFESSIONALS.

ADULT PROGRAMS

THE MUSEUM CONTINUED ITS SERIES OF MONTHLY SECOND SUNDAY EVENTS OFFERING CUSTOM-DESIGNED GALLERY TOURS, LECTURES, PERFORMANCES, HANDS-ON WORKSHOPS FOR VISITORS OF ALL AGES, ARTIST AND MAKER DEMONSTRATIONS, PERFORMANCES, AND LIVE MUSIC, ALONG WITH AN ARRAY OF REFRESHMENTS FOR PURCHASE. THESE LIVELY DAYS ENCOURAGED THOSE FAMILIAR WITH THE MUSEUM TO BRING FRIENDS AND ENTICED NEW AUDIENCES TO EXPLORE THE RESOURCES OF THE MUSEUM, SOCIALIZE IN OUR SPECTACULAR GALLERIES,

Name of the organization THE NEWARK MUSEUM ASSOCIATION	Employer identification number 22-1487275
---	--

AND FIND CONNECTIONS TO THE MUSEUM'S COLLECTIONS. AVERAGE ATTENDANCE PER EVENT WAS 250.

LATE THURSDAYS

THIS AFTERHOURS EXPERIENCE FOR ADULTS CONTINUED TO DRAMATICALLY INCREASE ITS AUDIENCE WHILE REMAINING A HIGH-QUALITY AND COMPELLING WAY TO ENGAGE, EDUCATE, AND UNITE VISITORS. LATE THURSDAYS MANIFESTS THE MUSEUM'S MISSION FOR A MODERN AUDIENCE. AVERAGE ATTENDANCE PER EVENT WAS 350.

COMMUNITY PARTNERSHIPS

IN 2018 THE MUSEUM PARTNERED WITH: THE CITY OF NEWARK, RUTGERS UNIVERSITY, GREATER NEWARK CONVENTION VISITORS BUREAU, NEWARK FASHION FORWARD, NEWARK COMMUNITY EDC, NEWARK INTERNATIONAL FILM FESTIVAL, HYCIDE MAGAZINE, NEWARK ARTS FESTIVAL, FOR FREEDOMS, SHINE PORTRAIT STUDIO, PROJECT FOR EMPTY SPACES, MOBILIZING OUR BROTHERS INITIATIVE (MOBI), GIRLS ON BIKES, HALSEY STREET FESTIVAL, COOL CATS, SANITAS, DODGE POETRY FEST, CENTER FOR COURT INNOVATION, NEWARK EMERGENCY SERVICES FOR FAMILIES, RUTGERS URBAN EDUCATION, ESSEX COUNTY PROSECUTOR'S OFFICE, LA CASA DE DON PEDRO, NEWARK WATER FRONT, GLASSROOTS, AND MORE.

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

THE BOARD OF TRUSTEES OF THE MUSEUM ESTABLISHES THE CLASSES OF MEMBERS, AND THE MEMBER'S QUALIFICATIONS, PRIVILEGES AND DUTIES.

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

Name of the organization THE NEWARK MUSEUM ASSOCIATION	Employer identification number 22-1487275
---	--

THE MUSEUM'S MEMBERS ELECT THE MUSEUM'S TRUSTEES OTHER THAN THE EX-OFFICIO TRUSTEES.

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

AMENDMENTS TO THE BYLAWS ARE APPROVED BY THE MUSEUM'S MEMBERS, AND UNDER THE NEW JERSEY NON-PROFIT CORPORATION ACT, CERTAIN SIGNIFICANT TRANSACTIONS REQUIRE MEMBER'S APPROVAL SUCH AS MERGER, CONSOLIDATION AND DISSOLUTION.

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

THE NEWARK MUSEUM COLLABORATED WITH AN OUTSIDE ACCOUNTING FIRM TO PREPARE ITS FORM 990 AND HAS ESTABLISHED THE FOLLOWING REVIEW PROCESS TO ENSURE THAT THE INFORMATION REPORTED IS COMPLETE AND ACCURATE. WHEN THE FORM 990 HAS BEEN PREPARED, REVIEWED BY MANAGEMENT (INCLUDING THE DEPUTY DIR., FINANCE & ADMIN.) AND REVIEWED BY THE MUSEUM'S OUTSIDE LEGAL COUNSEL, IT IS PRESENTED TO THE AUDIT COMMITTEE. AFTER THE AUDIT COMMITTEE REVIEWS/APPROVES THE FORM 990 AND WHEN THE RETURN IS READY TO BE FILED WITH THE INTERNAL REVENUE SERVICE, IT IS ELECTRONICALLY SENT TO ALL THE MUSEUM'S TRUSTEES FOR ANY COMMENTS. ANY COMMENTS ARE THEN SUMMARIZED AND DISCUSSED WITH THE OUTSIDE ACCOUNTING FIRM. EACH ISSUE IS DOCUMENTED AND ADDRESSED UNTIL THE RETURN IS FINALIZED FOR FILING.

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

THE MUSEUM'S CONFLICT OF INTEREST POLICY IS REVIEWED PERIODICALLY, BY THE BOARD OF TRUSTEES. THE BOARD OF TRUSTEES, COMMITTEE MEMBERS, AND OFFICERS OF THE MUSEUM COMPLETE ANNUAL CONFLICT AND RELATED PARTY QUESTIONNAIRES. THE MUSEUM'S CONFLICT OF INTEREST POLICY REQUIRES THAT TRUSTEES, COMMITTEE MEMBERS, AND OFFICERS DISCLOSE ANY CONFLICTS. AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH

Name of the organization THE NEWARK MUSEUM ASSOCIATION	Employer identification number 22-1487275
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THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE BOARD OF TRUSTEES OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCLOSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS. AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE BOARD OF TRUSTEES OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST.

THE CHAIRPERSON OF THE BOARD OF TRUSTEES OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER EXERCISING DUE DILIGENCE, THE BOARD OF TRUSTEES OR COMMITTEE SHALL DETERMINE WHETHER THE MUSEUM CAN AND/OR SHOULD OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT APPROPRIATE OR REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE BOARD OF TRUSTEES OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED TRUSTEES WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE MUSEUM'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE. IN CONFORMITY WITH THE ABOVE DETERMINATION IT SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT.

THE MINUTES OF THE BOARD OF TRUSTEES AND ALL COMMITTEES SHALL CONTAIN:

1. THE NAMES OF THE PERSONS WHO DISCLOSED OR OTHERWISE WERE FOUND TO HAVE A FINANCIAL INTEREST IN CONNECTION WITH AN ACTUAL OR POSSIBLE CONFLICT OF

Name of the organization THE NEWARK MUSEUM ASSOCIATION	Employer identification number 22-1487275
---	--

INTEREST, THE NATURE OF THE FINANCIAL INTEREST, ANY ACTION TAKEN TO DETERMINE WHETHER A CONFLICT OF INTEREST WAS PRESENT, AND THE BOARD OF TRUSTEES' OR COMMITTEE'S DECISION AS TO WHETHER A CONFLICT OF INTEREST IN FACT EXISTED.

2. THE NAMES OF THE PERSONS WHO WERE PRESENT FOR DISCUSSIONS AND VOTES RELATING TO THE TRANSACTION OR ARRANGEMENT, THE CONTENT OF THE DISCUSSION, INCLUDING ANY ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT, AND A RECORD OF ANY VOTES TAKEN IN CONNECTION WITH THE PROCEEDINGS.

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

THE MUSEUM CONDUCTS A DETAILED REVIEW OF COMPENSATION FOR ITS DIRECTOR/CEO, TOP MANAGEMENT OFFICIAL, OTHER OFFICERS AND KEY EMPLOYEES AND ENSURES THAT THE COMPENSATION LEVELS COMPARE WITH ART MUSEUMS IN COMPARABLE MARKETS ACROSS THE COUNTRY. AS PART OF THIS PROCESS THE MUSEUM ALSO CONSIDERS PUBLISHED COMPENSATION SURVEYS AND COMPENSATION INFORMATION INCLUDED IN FORMS 990 FILED BY OTHER ART MUSEUMS. THIS INFORMATION IS REVIEWED BY THE COMPENSATION SUB-COMMITTEE OF THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES (AS MORE PARTICULARLY SET FORTH IN THE MUSEUM'S BYLAWS), WHO THEN APPROVES ANY CHANGES IN COMPENSATION. THIS PROCESS WAS LAST UNDERTAKEN IN 2018. CONTEMPORANEOUS SUBSTANTIATION OF THESE DELIBERATIONS AND DECISIONS ARE ACCOMPLISHED THROUGH MINUTES OF THE COMMITTEE'S MEETINGS.

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

CA, CO, FL, IL, ME, MD, MA, NH, NJ, NY, NC, OH, RI, UT, VA, WA, WI

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

THE MUSEUM MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION AS REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE. THE RETURN IS POSTED ON

Name of the organization THE NEWARK MUSEUM ASSOCIATION	Employer identification number 22-1487275
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GUIDESTAR.ORG AND OTHER SIMILAR TYPES OF WEBSITES. IN ADDITION, THE FORM 990 AS WELL AS ITS FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, CERTIFICATE OF INCORPORATION, BYLAWS, AND FORM 1023 ARE AVAILABLE UPON WRITTEN REQUEST OR BY CALLING THE MUSEUM DIRECTLY.

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

WRITE-OFF OF INTERNAL INTEREST ACCOUNTS 43,434.

FORM 990, PART XII, LINE 2C:

THE MUSEUM HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE SELECTION OF AN INDEPENDENT AUDITOR AND THE AUDIT OF THE MUSEUM'S FINANCIAL STATEMENTS. THE MUSEUM DID NOT CHANGE ITS OVERSIGHT PROCESS DURING THE TAX YEAR.