PUBLIC DISCLOSURE COPY

PLEASE FILE IN A SAFE PLACE

ARMANINO ADVISORY LLC

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

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

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.

<u>A</u> I	For the	2023 calendar year, or tax year beginning JU	љ 1, 2023 and	ending J	UN 30, 20	24			
	Check if applicable	C Name of organization ASIAN ART MUSEUM FOUNDATION			D Employ	er identifi	cation number		
	Addres								
Ē	Name change	Doing business as			94-	1704765			
F	Initial return	Number and street (or P.O. box if mail is not de	ivered to street address)	Room/suite	E Telephone number				
F	Final return/	200 LARKIN STREET	,		(415) 581-3500				
	termin- ated	City or town, state or province, country, and	ZIP or foreign postal code		G Gross receipts \$ 73,404,374.				
Г	Amend		3 1		H(a) Is this	a group re	eturn		
Ē	Application		HEW AYOTTE		1 ` ′	bordinates			
	pendin	SAME AS C ABOVE			1		cluded? Yes No		
Τ.	Гах-ехе	mpt status: X 501(c)(3) 501(c) ()	(insert no.) 4947(a)(1)	or 527	7 ` ´		list. See instructions		
	Websit				H(c) Group				
K	orm of	organization: X Corporation Trust As	sociation Other	L Year	of formation:		1 State of legal domicile; CA		
		Summary					ŭ		
	1	Briefly describe the organization's mission or most	significant activities: THE AS	IAN ART N	MUSEUM CEL	EBRATES	,		
Governance	:	PRESERVES, AND PROMOTES ASIAN AND (CO							
nai	2	Check this box if the organization disco	ntinued its operations or dispos	sed of more	than 25% of	its net ass	sets.		
Š	3	Number of voting members of the governing body	(Part VI, line 1a)			3	42		
		Number of independent voting members of the gov					42		
م م	5	Total number of individuals employed in calendar y					177		
itie	6	Total number of volunteers (estimate if necessary)					262		
Activities &	7 a	Total unrelated business revenue from Part VIII, co					16,957.		
_	b	Net unrelated business taxable income from Form					13,187.		
					Prior Ye	ear	Current Year		
ø)	8	Contributions and grants (Part VIII, line 1h)			26,1	.66,275.	26,422,773.		
Revenue	9	Program service revenue (Part VIII, line 2g)			1,4	16,378.	3,205,807.		
eve	10	nvestment income (Part VIII, column (A), lines 3, 4,	and 7d)		2,3	398,250.	3,707,326.		
Œ	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c		7	18,543.	1,936,382.			
	12	Total revenue - add lines 8 through 11 (must equal	Part VIII, column (A), line 12)		30,6	99,446.	35,272,288.		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0.	0.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0.	0.		
ű	15	Salaries, other compensation, employee benefits (F	Part IX, column (A), lines 5-10)		19,2	271,347.	19,602,099.		
Expenses	16a	Professional fundraising fees (Part IX, column (A), I			0.	0.			
g	. b	Total fundraising expenses (Part IX, column (D), line	25) 3,224,	833.					
Û	17	Other expenses (Part IX, column (A), lines 11a-11d,	11f-24e)		18,8	394,287.	20,198,946.		
	18	Total expenses. Add lines 13-17 (must equal Part I	K, column (A), line 25)		38,1	.65,634.	39,801,045.		
_	19	Revenue less expenses. Subtract line 18 from line	12			66,188.	-4,528,757.		
Net Assets or				Ве	ginning of Cu		End of Year		
sets	20	Total assets (Part X, line 16)				74,364.	242,978,570.		
t As	21	Total liabilities (Part X, line 26)				64,691.	75,302,031.		
	22	Net assets or fund balances. Subtract line 21 from	line 20		164,9	09,673.	167,676,539.		
	art II	Signature Block							
		ties of perjury, I declare that I have examined this return,				-	knowledge and belief, it is		
true	, correc	a, and complete. Declaration of preparer (other than office	r) is based on all information of wh	nich preparer	has any know	ledge.			
		Signature of officer			l Dat	to.			
Sig		-			Dai	ıc			
Hei	·e	MATTHEW AYOTTE, CONTROLLER Type or print name and title							
		** *	Preparer's signature	Tr	Date		PTIN		
D - '	,	Print/Type preparer's name			Check if				
Paid	- I		KATY BROWN	U	05/09/25 "self-employed P00650274				
	parer	Firm's name ARMANINO ADVISORY LLC	50		Firm's EIN 94-6214841				
use	Only	Firm's address 2700 CAMINO RAMON, STE. 3	JU		Phone no.925-790-2600				
N/a-	, the IF	SAN RAMON, CA 94583-5004 S discuss this return with the preparer shown abo	vo2 Soo instructions		J Pho	one no. 323	X Yes No		
IVIA	,e iF	o diadusa iliia remitti witti ilie ofebarer shown abo	ver oee nishiichous						

OF SAN FRANCISCO

Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	THE ASIAN ART MUSEUM CELEBRATES, PRESERVES, AND PROMOTES ASIAN AND	
	ASIAN AMERICAN ART AND CULTURES FOR LOCAL AND GLOBAL AUDIENCES. WE	
	PROVIDE A DYNAMIC FORUM FOR EXCHANGING IDEAS, INVITING COLLABORATION,	
	AND FUELING IMAGINATION TO DEEPEN UNDERSTANDING AND EMPATHY AMONG	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by experiments for each of its three largest program services.	cpenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total exp	enses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 22,238,051. including grants of \$) (Revenue \$	3,457,022.
	THE MUSEUM IS ONE OF SAN FRANCISCO'S PREMIER ARTS INSTITUTIONS AND HOME	
	TO A WORLD-RENOWNED COLLECTION OF MORE THAN 18,000 ART TREASURES	
	SPANNING 6,000 YEARS OF HISTORY AND REPRESENTING COUNTRIES AND CULTURES	
	THROUGHOUT ASIA. THE COLLECTION'S SCOPE AND BREADTH ENABLE THE MUSEUM	
	TO INTRODUCE ALL OF THE MAJOR TRADITIONS OF ASIAN ART AND CULTURE, AS	
	WELL AS THE WORK OF MANY ASIAN AMERICAN ARTISTS. MORE THAN 2,500	
	ARTWORKS FROM THE COLLECTION ARE GENERALLY ON VIEW IN THE MUSEUM'S 33	
	COLLECTION GALLERIES, WITH ANOTHER 500 OBJECTS REMOVED AND REFRESHED	
	WITH WORKS FROM STORAGE EACH YEAR.	
4b	(Code:) (Expenses \$	4,775.
	THE MUSEUM PROVIDES A BROAD RANGE OF PROGRAMS THAT EXPLORE THE CULTURES	
	REPRESENTED IN THE MUSEUM'S COLLECTION AND EXHIBITIONS, AND WHICH ARE	
	DESIGNED TO REACH ALL LEVELS OF EDUCATION (K-12, COLLEGE, AND ADULT)	
	AND AWARENESS OF ART (NOVICE THROUGH EXPERT). FREE DOCENT-LED TOURS OF	
	THE COLLECTION GALLERIES AND SPECIAL EXHIBITIONS ARE CONDUCTED	
	THROUGHOUT THE DAY. THE MUSEUM'S STORYTELLING CORPS OFFERS ENTERTAINING	
	AND EDUCATIONAL PROGRAMS FOR CHILDREN AND ADULTS RELATING TO ARTWORKS	
	ON VIEW. SCHOOL PROGRAMS INCLUDE A VARIETY OF INDUSTRY-BASED	
	ACTIVITIES: ALL CLASS TOURS ARE INTERACTIVE AND EMPHASIZE OBSERVATION	
	SKILLS, CRITICAL THINKING, GROUP WORK, AND PEER PRESENTATIONS.	
4c	(Code:) (Expenses \$5,026,065. including grants of \$) (Revenue \$)	1,183,830.
	INTO VIEW: BERNICE BING	
	OCT 7, 2022 - DEC 4, 2023	
	DISCOVER THE LIFE, CAREER, AND COMMUNITY OF MODERN ARTIST BERNICE	
	"BINGO" BING (19361998), A SAN FRANCISCO ORIGINAL.	
	DEL TOUMBUL LUVURY, MUE ARM OF CULVEGE LACOUER	
	DELIGHTFUL LUXURY: THE ART OF CHINESE LACQUER	
	NOV 17, 2022 - NOV 19, 2023 EXPLORE HIGHLIGHTS FROM THE MUSEUM'S SUPERB COLLECTION OF CHINESE	
	LACQUER, INCLUDING COURT ACCESSORIES, SCHOLARS' OBJECTS, LUXURY ITEMS,	
	AND HOUSEHOLD FURNITURE.	
	CUINDED THE DAINTINGS. A SDIDGHION OF MODERN MASSEDS	
4.1	CHINESE INK PAINTINGS: A SELECTION OF MODERN MASTERS	
40	Other program services (Describe on Schedule O.)	\
4-	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses 28,258,976.	J
40	Total program service expenses 28,258,976.	Form 990 (2023

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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_		,,
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			,,
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		v	
_	Schedule D, Part III	8	Х	
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?			
40	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40	v	
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
L	Part VI	11a	Λ	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446	х	
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11b		
C		11c		x
ч	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		x
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
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? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х

332003 12-21-23

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Pai	t 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? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	х	
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		х
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
ŭ		24c		x
٨	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
		24u		
2 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes." complete Schedule L. Part IV	28c		х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		
30		36		x
37	If "Yes," complete Schedule R, Part V, line 2	30		
31		27		x
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		 ^
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	20	х	
Pai	Note: All Form 990 filers are required to complete Schedule O	38	Λ	
. ai				
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
	Establis mush must disk to 0 of Esta 4000 Est. 0 if 1 is 1		Yes	No
_	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 55	-		
b	Efficient the fluthber of Portis w-2d included of fine ra. Efficience in flot applicable	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

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(gambling) winnings to prize winners?

OF SAN FRANCISCO <u> Page</u> **5** Form 990 (2023) Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2h Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). X **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Х Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5с 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? Х 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Х to file Form 8282? 7с If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Х 7e Х Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand Х Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? X 15 If "Yes," see the instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities

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that would result in the imposition of an excise tax under section 4951, 4952 or 4953?

If "Yes," complete Form 6069

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

Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 42 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 42 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 6 Х 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? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? X 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Х 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 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 Upon request Another's website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records MATTHEW AYOTTE, CONTROLLER - (415) 581-3500 200 LARKIN STREET, SAN FRANCISCO, CA 94102-4734

<u> Page</u> **7**

Form 990 (2023) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEĆ) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization no	or any related	orga	niza	tion	con	nper	sat	ed any current officer, d	rector, or trustee.	
(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	(do	not c	Pos			nne	Reportable	Reportable	Estimated
	hours per	box	, unle: cer ar	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		Cer ai	lu a u	recto	i / ii us	lee)	from	from related	other
	(list any hours for	irecto						the	organizations (W-2/1099-MISC/	compensation from the
	related	eord	stee			sated		organization (W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al trustee		yee	m pen		1099-NEC)	1000 NEO)	and related
	below	Individual trustee or director	Institutional	 	Key employee	est co oyee	er	,		organizations
	line)	Indiv	Instit	Officer	Key 6	Highest compensated employee	Former			
(1) JAY XU	40.00									
DIRECTOR & CEO				Х				616,392.	0.	47,727.
(2) ROB MINTZ	40.00									
DEPUTY DIR OF ART & PROGRAMS				Х				233,312.	0.	42,183.
(3) SARA LEE	40.00									
CHIEF FIN & ADMIN OFFICER				Х				261,890.	0.	13,337.
(4) KO KO ZIN	40.00									
BUILDING & GROUNDS MAINTENANCE SUPER						Х		198,798.	0.	52,757.
(5) BANAFSHEH PERRONE	40.00	1								
CHIEF IMPACT OFFICER				Х				222,786.	0.	28,049.
(6) CALEN MCELDOWNEY	40.00	-								
DIRECTOR OF SECURITY & FACILITIES						Х		174,895.	0.	42,266.
(7) FORREST MCGILL	40.00	1								
SENIOR CURATOR						Х		173,441.	0.	36,018.
(8) LIA M. MAKSOUD	40.00	1								
DIRECTOR OF HUMAN RESOURCES						Х		173,375.	0.	19,560.
(9) ALISON H. MUNDY	40.00									
SENIOR DIRECTOR OF DEVELOPMENT						Х		170,639.	0.	19,400.
(10) YAEL EYTAN	40.00									
CHIEF MARKETING & COMMUNICATIONS OFF				Х				169,587.	0.	19,166.
(11) FRED M. LEVIN	1.00	1								
CHAIR		Х		Х				0.	0.	0.
(12) SALLE YOO	1.00	1								
PRESIDENT		Х		Х				0.	0.	0.
(13) YOGEN DALAL	1.00	1								
VICE PRESIDENT		Х		Х				0.	0.	0.
(14) GORRETTI LO LUI	1.00	1								
SECRETARY		Х		Х				0.	0.	0.
(15) KENNETH P. WILCOX	1.00	1								
TREASURER		Х		Х				0.	0.	0.
(16) AGGIE BRENNEMAN	1.00	4								
TRUSTEE		Х						0.	0.	0.
(17) AKIKO YAMAZAKI	1.00	4								
TRUSTEE		Х						0.	0.	0.

Form **990** (2023) 332007 12-21-23

0.

0.

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41

320,463.

0

2,395,115.

OF SAN FRANCISCO

Page 8 Form 990 (2023) Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (C) (D) (E) (F) Position Average Reportable Name and title Reportable Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any organizations compensation ndividual trustee or director the hours for organization (W-2/1099-MISC/ from the lighest compensated related nstitutional trustee (W-2/1099-MISC/ 1099-NEC) organization organizations ey employee 1099-NEC) and related below organizations line) 1.00 (18) ANN TANENBAUM TRUSTEE Х 0 0 0. (19) ANTHONY SUN 1.00 TRUSTEE Х 0 0 0. (20) ANJALI PICHAI 1.00 TRUSTEE X 0 0. 0. (21) CHARLES HUANG 1.00 TRUSTEE 0. 0. 0. (22) CHONG-MOON LEE 1.00 TRUSTEE 0. 0. 0. (23) CHOONGJA MARIA KAHNG 1.00 TRUSTEE X 0 0 0. (24) CLAUDINE CHENG 1.00 TRUSTEE X 0 0. 0. (25) CORI BATES 1.00 0. TRUSTEE 0 0. Х (26) DIPTI MATHUR 1.00 TRUSTEE 0 0. 0. 2,395,115, 0. 320,463. 1b Subtotal

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

Total from continuation sheets to Part VII, Section A

Yes No Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on 3 Х line 1a? If "Yes," complete Schedule J for such individual 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 Х 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services Х rendered to the organization? If "Yes." complete Schedule J for such person 5

Section B. Independent Contractors

Total (add lines 1b and 1c)

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)	(B)	(C)
Name and business address	Description of services	Compensation
MASTERPIECE INTERNATIONAL LTD		
39 BROADWAY, #1410, NEW YORK, NY 10006	INTERNATIONAL SHIPPING	871,613.
J. RICCARDO EVENTS STYLING, IN, 1055		
CALIFORNIA ST., #2, SAN FRANCISCO, CA	EVENT PRODUCTION	718,535.
LENAT & PARTNERS, INC.		
522 EDINBURGH ST., SAN MATEO, CA 94402	ADVERTISING	599,452.
BURKE CONSTRUCTION, 125 LARKSPUR ST.,		
#113, SAN RAFAEL, CA 94901	CONSTRUCTION CONTRACTING	468,600.
UOVO LLC		
PO BOX 989746, WEST SACRAMENTO, CA 95798	STORAGE	224,285.
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	18	
	· · · · · · · · · · · · · · · · · · ·	000

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 OF SAN FRANCISCO 94-1704765

Form 990 OF SAN FRA									94-17047	7 6 5
Part VII Section A. Officers, Directors,	Trustees, Key Er	nplo	yee	s, aı	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours	(cl			ition that		ly)	Reportable compensation	Reportable compensation	Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) DIXON R. DOLL TRUSTEE	1.00	х						0.	0.	0.
(28) ELIZA CASH	1.00							-		
TRUSTEE		Х						0.	0.	0
(29) FRED EYCHANER	1.00							-		
TRUSTEE		х						0.	0.	0.
(30) HANSONG ZHANG	1.00							-		
TRUSTEE		х						0.	0.	0.
(31) HUIFEN CHAN	1.00									
TRUSTEE		х						0.	0.	0.
(32) INA GOODWIN TATEUCHI	1.00									
TRUSTEE		Х						0.	0.	0.
(33) JENNIFER KAO	1.00									
TRUSTEE		Х						0.	0.	0.
(34) KAPIL CHHIBBER	1.00									
TRUSTEE		Х						0.	0.	0.
(35) KIKI KAPANY	1.00									
TRUSTEE (THRU 10/24/23)		Х						0.	0.	0
(36) LATA KRISHNAN	1.00									
TRUSTEE (THRU 10/24/23)		Х						0.	0.	0
(37) MARSHA VARGAS HANDLEY	1.00	1								
TRUSTEE		Х						0.	0.	0.
(38) MARTHA SAM HERTELENDY	1.00	-								
TRUSTEE		Х						0.	0.	0
(39) MICHELE ALIOTO	1.00	-						_	_	_
TRUSTEE (THRU 03/19/24)	1.00	Х						0.	0.	0
(40) MICHELLE S. TAI	1.00	-						_		
TRUSTEE (41) MIMI GARDNER GATES	1 00	Х						0.	0.	0.
	1.00							,	0	0
TRUSTEE (42) MINDY LIN SUN	1.00	Х						0.	0.	0.
TRUSTEE	1.00	x						0.	0	0 .
(43) NANCI NISHIMURA	1.00	Α						0.	0.	0,
TRUSTEE	1.00	x						0.	0.	0.
(44) PEHONG CHEN	1.00							•	· ·	
TRUSTEE (THRU 06/18/24)		х						0.	0.	0.
(45) RICHARD YEN	1.00							- •		
TRUSTEE		х						0.	0.	0.
(46) SANDRA CHEUNG	1.00									
	H	х	ı	ı	I	I		0.	0.	0.

Form 990 OF SAN FRANCISCO 94-1704765

1 01111 000	NCISCO							94-1704765					
Part VII Section A. Officers, Directors,	Trustees, Key En	nplo	yee	s, aı	nd H	lighe	est (Compensated Employe	ees (continued)				
(A) Name and title	(B) Average hours			(O Pos	C) ition that			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of			
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations			
(47) SONGYEE YOON	1.00												
TRUSTEE (THRU 06/18/24)		Х						0.	0.	0.			
(48) THAO DODSON	1.00												
TRUSTEE		Х						0.	0.	0.			
(49) TIFFANY CHANG	1.00												
TRUSTEE		Х						0.	0.	0.			
(50) TIMOTHY F. KAHN	1.00												
TRUSTEE		Х						0.	0.	0.			
(51) TRAVIS KIYOTA	1.00												
TRUSTEE		Х						0.	0.	0.			
(52) VAISHALI CHADHA	1.00												
TRUSTEE (THRU 03/19/24)		Х						0.	0.	0.			
(53) VARSHA RAO	1.00												
TRUSTEE		Х						0.	0.	0.			
(54) VASANT PRABHU	1.00												
TRUSTEE (THRU 10/24/23)		Х						0.	0.	0.			
(55) VIJAY SHRIRAM	1.00												
TRUSTEE		Х						0.	0.	0.			
(56) AMANDA MINAMI	1.00												
TRUSTEE		Х						0.	0.	0.			
(57) GURMEET "GIGI" GULATI	1.00							_	_	_			
TRUSTEE		Х						0.	0.	0.			
(58) LILLIAN CHUN	1.00												
TRUSTEE		Х						0.	0.	0.			
(59) MARY MEAD	1.00							_	_	_			
TRUSTEE		Х						0.	0.	0.			
				_									
				_									
				 									

OF SAN FRANCISCO 94-1704765 Page 9 Form 990 (2023) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Revenuè excluded Total revenue Related or exempt Unrelated from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1a **1 a** Federated campaigns 1,354,750. 1b **b** Membership dues 1,083,228 c Fundraising events 1c d Related organizations 1d 10,705,846 e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above ... 13,278,949 1f 348,068 g Noncash contributions included in lines 1a-1f 26,422,773. h Total. Add lines 1a-1f **Business Code** 2,966,714 2 a ADMISSION REVENUE 713990 2,966,714. Program Service Revenue b PUBLICATION REVENUE 713990 146,892 146,892 ARTWORK EXHIBITION LOA 713990 76,700. 76,700. 9,936. 9,936. OTHER REVENUE 713990 TOUR REVENUE 713990 5,565. 5,565. f All other program service revenue 3,205,807 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 2,657,085 16,957. 2,640,128. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5,089, 5,089. 5 Royalties (i) Real (ii) Personal 582,940 6 a Gross rents 190,222. 6b **b** Less: rental expenses ... 392,718. c Rental income or (loss) 392,718 392,718. d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 36,659,933. assets other than inventory **b** Less: cost or other basis 35,609,692. and sales expenses Other Revenue 1,050,241. c Gain or (loss) 1,050,241. 1,050,241. d Net gain or (loss) 8 a Gross income from fundraising events (not 1,083,228. of including \$ contributions reported on line 1c). See Part IV, line 18 628,745. **b** Less: direct expenses 752,987. -124,242, 124 242 c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9b **b** Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 3,019,005. and allowances 1,579,185 **b** Less: cost of goods sold 1,439,820. 1,439,820. c Net income or (loss) from sales of inventory **Business Code** 11 a MISCELLANEOUS INCOME 900099 183,430 183,430. b CAFE 722515 39,567 39,567. d All other revenue

12 332009 12-21-23

4,186,931. Form **990** (2023)

222,997

35,272,288.

Total. Add lines 11a-11d

Total revenue. See instructions

4,645,627

16,957.

OF SAN FRANCISCO 94-1704765 Page 10 Form 990 (2023)

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 (D) Do not include amounts reported on lines 6b. Total expenses Management and general expenses Program service Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 1,136,146. trustees, and key employees 1,746,697 449,388 161,163. Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 13,658,103. 9,482,699. 2,850,895. 1,324,509. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 1,078,559 752,140 219,058 107,361. 2,013,391 1,521,004 288,834 203,553. 9 Other employee benefits 1,105,349 790,952. 196,868 117,529. 10 Payroll taxes Fees for services (nonemployees): Management 7,415. 29,659 22,244 Legal 138,391 34,598. 103,793 Accounting Lobbying Professional fundraising services. See Part IV, line 17 183,692. 183,692. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 2,840,022 1,846,506 518,624 474,892. column (A), amount, list line 11g expenses on Sch O.) 132,534 132,534, Advertising and promotion 12 299,843 853,120. 553,277. 13 Office expenses 588,042 293,272 288,849 5,921. 14 Information technology Royalties 15 2,052,474 1,038,825 1,011,599 2,050. 16 Occupancy 360,375 352,698, 7.677 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 15,085 9,456. Conferences, conventions, and meetings 4,119 1,510. 19 3,398,051 2,343,604, 727,214 327,233. 20 Payments to affiliates 21 5,083,727 3,506,199 1,087,964 489,564. 22 Depreciation, depletion, and amortization 1,065,428. 925,396. 140,032 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) SHIPPING/FREIGHT 1,576,851. 1,570,710. 6,141 ACQUISITION 667,383 654,801 9,382 3,200. PARTICIPATION FEE 552,036. 552,036, С SUPPLIES 494,283. 435,141. 53,124 6,018. 167,793 135,875 31,588 All other expenses е 39,801,045 28,258,976 8,317,236 3,224,833. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Page **11**

Form 990 (2023) Part X Balance Sheet

Part	X	Balance Sneet					
		Check if Schedule O contains a response or no	te to any	/ line in this Part XI			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			8,873.	1	7,765
	2	Savings and temporary cash investments			3,536,381.	2	3,825,126
	3	Pledges and grants receivable, net			4,884,400.	3	4,541,606
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the	ese perso	ons		5	
	6	Loans and other receivables from other disqua					
		under section 4958(f)(1)), and persons describe		6			
က္	7	Notes and loans receivable, net			7		
Assets	8	Inventories for sale or use			861,853.	8	568,000
₹	9	Down and design and de			692,188.	9	498,271
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D					
	b	Less: accumulated depreciation	10b	88,020,284.	114,926,958.	10c	112,744,157
	11	Investments - publicly traded securities		79,351,820.	11	92,704,280	
	12	Investments - other securities. See Part IV, line	38,787,242.	12	28,064,716		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			24,649.	15	24,649
	16	Total assets. Add lines 1 through 15 (must equal to 15)			243,074,364.	16	242,978,570
	17	Accounts payable and accrued expenses		4,115,219.	17	3,928,627	
	18	Grants payable		18			
	19	Deferred revenue	172,460.	19	217,554		
	20	Tax-exempt bond liabilities		73,877,012.	20	71,155,850	
	21	Escrow or custodial account liability. Complete			21		
မွ	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, subs					
ia B		controlled entity or family member of any of the				22	
	23	Secured mortgages and notes payable to unre				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, p	•				
		parties, and other liabilities not included on line	s 17-24).	Complete Part X			
		of Schedule D			70 164 601	25	75,302,031
-	26	Total liabilities. Add lines 17 through 25		X	78,164,691.	26	75,302,031
ړي		Organizations that follow FASB ASC 958, ch	eck nere				
ا <u>د</u>	07	and complete lines 27, 28, 32, and 33.			86,771,059.	07	78 683 864
<u>a</u>	27	Net assets without donor restrictions	78,138,614.	27	78,683,864 88,992,675		
9 B	28	Net assets with donor restrictions			70,130,014.	28	00,332,013
5		Organizations that do not follow FASB ASC	958, cne	ck nere			
<u></u>	00	and complete lines 29 through 33.				00	
jts	29	Capital stock or trust principal, or current funds				29	
1886	30	Paid-in or capital surplus, or land, building, or e				30	
-	31 22	Retained earnings, endowment, accumulated in			164,909,673.	31	167,676,539
	32	Total liabilities and not assets fund balances			243,074,364.	32 33	242,978,570
	33	Total liabilities and net assets/fund balances			210,074,004.	აა	Eorm 990 (202

Page **12**

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	35,	272,	288.
2	Total expenses (must equal Part IX, column (A), line 25)	2	39,	801,	045.
3	Revenue less expenses. Subtract line 2 from line 1	3	-4,	528,	757.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	164,	909,	673.
5	Net unrealized gains (losses) on investments 5		7,	295,	623.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	coluṃn (B))	10	167,	676,	539.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
			0.5		I

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

ASIAN ART MUSEUM FOUNDATION

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

OF SAN FRANCISCO 94-1704765 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

Schedule A (Form 990) 2023 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	` ,	, ,	, ,	` ,	` ,	,,
	membership fees received. (Do not						
	include any "unusual grants.")	37,746,835.	24,997,838.	28,174,980.	26,166,275.	26,422,773.	143,508,701.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	37,746,835.	24,997,838.	28,174,980.	26,166,275.	26,422,773.	143,508,701.
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)						4,355,270.
6	Public support. Subtract line 5 from line 4.						139,153,431.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	37,746,835.	24,997,838.	28,174,980.	26,166,275.	26,422,773.	143,508,701.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	2,260,764.	1,584,345.	1,885,162.	2,493,055.	3,228,157.	11,451,483.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	14,053.	17,747.	16,720.	15,966.	16,957.	81,443.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	38,105.	712.	46,830.	188,073.	222,997.	496,717.
11	Total support. Add lines 7 through 10						155,538,344.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	14,392,664.
13	First 5 years. If the Form 990 is for th	e organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2023 (li	ine 6, column (f), di	vided by line 11, c	olumn (f))		14	89.47 %
15	Public support percentage from 2022	Schedule A, Part I	I, line 14			15	89.23 %
16a	33 1/3% support test - 2023. If the o	organization did not	t check the box on	line 13, and line 1	4 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2022. If the o	organization did no	t check a box on li	ne 13 or 16a, and I	ine 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			
17a	10% -facts-and-circumstances test	- 2023. If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10%	or more,
	and if the organization meets the facts	s-and-circumstance	es test, check this	box and stop her	e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organization	n qualifies as a pul	olicly supported or	ganization		
b	10% -facts-and-circumstances test	- 2022. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	stances test, chec	k this box and sto	op here. Explain in	n Part VI how the	
	organization meets the facts-and-circu	umstances test. The	e organization qua	lifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	, 16b, 17a, or 17b,	check this box ar	nd see instructions	
						Calaaduda A	(Form 990) 2023

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.)

Se	ction A. Public Support		•				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 per- formed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5						
78	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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support	Т			T	ı	_
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						
102	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
r	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business						
••	activities not included on line 10b,						
	whether or not the business is						
12	regularly carried on Other income. Do not include gain						
12	or loss from the sale of capital						
12	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)					01(a)(0) augustisatis	
14	First 5 years. If the Form 990 is for the	-					
Sec	check this box and stop here ction C. Computation of Publi						
	Public support percentage for 2023 (I			column (f))		15	%
	Public support percentage from 2022	, (,,				16	%
	ction D. Computation of Inves					,	
	Investment income percentage for 20			ne 13, column (f))		17	%
	Investment income percentage from					18	%
	33 1/3% support tests - 2023. If the						
	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2022. If the						
_	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
	2		,	,			

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

Section A. All Supporting Organizations

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

	Yes	No
4		
1		
2		
_		
За		
3b		
3c		
4a		
4h		
4b		
4c		
5a		
5b		
5c		
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J		
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8		
9a		
OF		
9b		
9с		
10a		
10b		
ule A (Forn	n 990)	2023

Pai	rt IV	Supporting Organizations (continued)			
				Yes	No
11	Has th	ne organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
		elow, the governing body of a supported organization?	11a		
b		ily member of a person described on line 11a above?	11b		
		6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	112		
•		in Part VI.	11c		
Sec	tion E	B. Type I Supporting Organizations			
		<i>y</i> 11 5 5		Yes	No
1	Did th	e governing body, members of the governing body, officers acting in their official capacity, or membership of one or		100	110
•		supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		ors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
		ively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
		ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		e organization operate for the benefit of any supported organization other than the supported			
_		ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		, , , , , , , , , , , , , , , , , , , ,	2		
Sec	tion C	vised, or controlled the supporting organization. C. Type II Supporting Organizations			
				Yes	No
1	Wora.	a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	140
•		stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
		· · · · · · · · · · · · · · · · · · ·			
		nagement of the supporting organization was vested in the same persons that controlled or managed	1		
Sec	tion C	pported organization(s). D. All Type III Supporting Organizations			
		<i>y</i>		Yes	No
1	Did th	e organization provide to each of its supported organizations, by the last day of the fifth month of the		103	140
•		ization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	-	(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	•	ization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	-	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
_					
		ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2		
3	•	ganization maintained a close and continuous working relationship with the supported organization(s). ason of the relationship described on line 2, above, did the organization's supported organizations have a			
3		cant voice in the organization's investment policies and in directing the use of the organization's			
	-	· · · · · · · · · · · · · · · · · · ·			
		e or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3		
Sec	<u>suppo</u> tion E	rted organizations played in this regard. E. Type III Functionally Integrated Supporting Organizations			
1 a		the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below.	ı		
b		The organization satisfied the Activities rest. <i>Complete line 2 below.</i> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
C		The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins		اء	
2		ties Test. Answer lines 2a and 2b below.	struction	Yes	No
a		ubstantially all of the organization's activities during the tax year directly further the exempt purposes of		103	140
u		apported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
		supported organization(s) to which the organization was responsive: If Tes, then if I art Vindentity supported organizations and explain how these activities directly furthered their exempt purposes,			
		he organization was responsive to those supported organizations, and how the organization determined	2a		
b		nese activities constituted substantially all of its activities. e activities described on line 2a, above, constitute activities that, but for the organization's involvement,	<u> </u>		
D		r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
		If the reasons for the organization's position that its supported organization(s) would have engaged in	2h		
2		activities but for the organization's involvement.	2b		
3		t of Supported Organizations. Answer lines 3a and 3b below.			
а		e organization have the power to regularly appoint or elect a majority of the officers, directors, or	За		
b		es of each of the supported organizations? If "Yes" or "No" provide details in Part VI. e organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
D		supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		
	U1 160 0				

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organ	izations		
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 mu	st complete	Sections A through E.		
Sect	ion 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			
Sect	ion 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):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
	see instructions).	4			
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Year	
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-function	ally integrate	ed Type III supporting orga	nization (see	
	instructions).	-			

Sche	edule A (Form 990) 2023 OF SAN FRANCISCO				94-1704765	Page 7
Pa	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations _{(continu}	ied)		
Sect	ion D - Distributions				Current Y	ear
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported				
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3		
4	Amounts paid to acquire exempt-use assets			4		
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
6	Other distributions (describe in Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	ne organization is responsive				
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2023 from Section C, line 6			9		
<u>10</u>	Line 8 amount divided by line 9 amount	<u> </u>		10		
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	ıs	(iii) Distributa Amount for	
1	Distributable amount for 2023 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2023 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2023					
a	From 2018					
b	From 2019					
c	From 2020					
d	From 2021					
e	From 2022					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
<u>h</u>	Applied to 2023 distributable amount					
<u>_i</u>	Carryover from 2018 not applied (see instructions)					
<u>_i</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2023 from Section D,					
	line 7: \$					
a	Applied to underdistributions of prior years					
b	Applied to 2023 distributable amount					
c	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2024. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
<u>a</u>	Excess from 2019					
<u>b</u>	Excess from 2020					
c	Excess from 2021					
	Excess from 2022					
е	Excess from 2023				hadula A /Farma	

ASIAN ART MUSEUM FOUNDATION

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Schedule B (Form 990) (2023)

Employer identification number

OF	SAN FRANCISCO	94-1704765				
Organization type (check o	nne):					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions				
General Rule						
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's	· · · · · · · · · · · · · · · · · · ·				
Special Rules						
sections 509(a)(1) a contributor, during	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support that described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support that described in the section of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Figure 1. Complete Parts I and II.	d that received from any one				
-	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a	-				
	the year, total contributions of more than \$1,000 exclusively for religious, charitable, so					
	onal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (en b) instead of the contributor name and address), II, and III.	ntering				
year, contributions is checked, enter h purpose. Don't cor	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a section section section, charitable, etc., purposes, but no such contributions totaled manere the total contributions that were received during the year for an exclusively religious amplete any of the parts unless the General Rule applies to this organization because it is e, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc., received <i>nonexclusively</i>				
answer "No" on Part IV, line	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (For 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, g requirements of Schedule B (Form 990).	• •				

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

Schedule B (Form 990) (2023) Page **2**

Name of organization
ASIAN ART MUSEUM FOUNDATION

OF SAN FRANCISCO

Employer identification number

94-1704765

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		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d) Type of contribution
No. 2	Name, address, and ZIP + 4	\$\$ 3,987,571.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 3	Name, address, and ZIP + 4	* 2,233,261.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions \$	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
110.	Haine, audi 655, and Zir + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions \$	Person Payroll Complete Part II for noncash contributions.

Schedule B (Form 990) (2023) Page **3**

Name of organization
ASIAN ART MUSEUM FOUNDATION
OF SAN FRANCISCO

Employer identification number

94-1704765

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

Schedule B (Form 990) (2023) Page **4**

Employer identification number Name of organization ASIAN ART MUSEUM FOUNDATION OF SAN FRANCISCO 94-1704765 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

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

Name of the organization

ASIAN ART MUSEUM FOUNDATION

OF SAN FRANCISCO

Employer identification number 94 - 1704765

Pa	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		ar Funds or Ad	Counts. Complete if the
		(a) Donor advised fund	ds	(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 w	riting that the assets held in c	donor advised fund	ds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ac			
	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?			Yes No
Pai				
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).		
	Preservation of land for public use (for example, recreat		servation of a histo	orically important land area
	Protection of natural habitat	· —		ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualification	ed conservation contribution i	n the form of a co	nservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а				2a
b	-			2b
c	Number of conservation easements on a certified historic stru			2c
	Number of conservation easements included on line 2c acquir	•••		
-	on a historic structure listed in the National Register	• • • •		2d
3	Number of conservation easements modified, transferred, rele			
Ü	year	asca, extinguished, or termin	ated by the organi	zation during the tax
4	Number of states where property subject to conservation ease	ament is located		
5	Does the organization have a written policy regarding the peri		andling of	
3	violations, and enforcement of the conservation easements it	• • • • • • • • • • • • • • • • • • • •	•	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h			
Ū	etan and volunteen neare develous to membering, mepeeting, r	ianamig of violations, and only	oromig comportation	on eacomonic daring the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing	a conservation ea	sements during the year
-	, under the expenses meaned in monitoring, indposting, marian	ing of violations, and officions	g concervation ca	comente dannig the year
8	Does each conservation easement reported on line 2d above	satisfy the requirements of se	ction 170(h)(4)(B)(i)
_	and section 170(h)(4)(B)(ii)?	· ·		· — —
9	In Part XIII, describe how the organization reports conservatio			
·	balance sheet, and include, if applicable, the text of the footnote		•	
	organization's accounting for conservation easements.	oto to the organization o infant		
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasur	es, or Other S	Similar Assets.
	Complete if the organization answered "Yes" on Form		•	
	If the organization elected, as permitted under FASB ASC 958		statement and hala	ance sheet works
	of art, historical treasures, or other similar assets held for public	, .		
	service, provide in Part XIII the text of the footnote to its finance			ice of public
b	If the organization elected, as permitted under FASB ASC 958			sheet works of
-	art, historical treasures, or other similar assets held for public			
	provide the following amounts relating to these items.	exhibition, education, or resea		or public service,
				¢
	(i) Revenue included on Form 990, Part VIII, line 1			
2	If the organization received or held works of art, historical trea	curse or other similar assets		
2				provide
_	the following amounts required to be reported under FASB AS			c
	Revenue included on Form 990, Part VIII, line 1			
	Assets included in Form 990, Part X			
LHA	For Paperwork Reduction Act Notice, see the Instructions	IUI FUIIII 99U.		Schedule D (Form 990) 2023

Par	rt III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Othe	er Sir	milar Asse	s (contil	nued)	
3	Using the organization's acquisition, accession	on, and other records	s, check any of the fo	ollowing that make	signific	cant use of its			
	collection items (check all that apply).								
а	X Public exhibition	d	X Loan or exch	nange program					
b	X Scholarly research	е	Other						
С	X Preservation for future generations								
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's exe	empt p	ourpose in Par	t XIII.		
5	During the year, did the organization solicit or	r receive donations o	of art, historical treas	ures, or other simila	ar asse	ets			
	to be sold to raise funds rather than to be ma						Yes	Х	No
Par	rt IV Escrow and Custodial Arrang		te if the organization	answered "Yes" or	Form	n 990, Part IV,	line 9, or		
	reported an amount on Form 990, Par	t X, line 21.							
1a	Is the organization an agent, trustee, custodia					_	_	_	_
	on Form 990, Part X?					L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	lowing table:		_				
					⊢		Amoun	t	
	Beginning balance					1c			
d	Additions during the year				⊢	1d			
е	Distributions during the year				├	1e			
f	Ending balance				L	1f	٦.,		٦
	Did the organization include an amount on Fo	· ·	·		ility?	L	Yes	F	_ No
Par	If "Yes," explain the arrangement in Part XIII. rt V Endowment Funds Complete if	the examination and	planation has been p	orovided in Part XIII					
ı aı	Endownient i dias Complete ii	(a) Current year	(b) Prior year	(c) Two years back		hree years back	(e) Fou	r veare	s hack
4.	Deginning of year belongs	78040731.	78956377.	82553706.	(u) 1	71538541	_		8984.
	Beginning of year balance	6,289,327.	2,770,393.	6,345,697.		-1479384	-		
b	Contributions	5,626,678.	-804,129.	-6697440.		14753858	_	-1826979	
c d	Net investment earnings, gains, and losses Grants or scholarships	0,020,070	001,125.	0037110.		11/0000	•		
e	Other expenditures for facilities						1		
·									
f	Administrative expenses	2,891,734.	2,881,910.	3,246,586.		2,259,309	. 1	162	,552.
g g	End of year balance	87065002.	78040731.	78955377.		82553706	_		8541.
2	Provide the estimated percentage of the curr	ent vear end balance	(line 1g. column (a)) held as:	•		_ !		
– a	Board designated or quasi-endowment	4.2600	%	,					
b	Permanent endowment 25.8300	%							
С	Term endowment 69.9100	 . %							
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.							
За	Are there endowment funds not in the posses	ssion of the organiza	tion that are held an	d administered for t	:he				
	organization by:							Yes	No
	(i) Unrelated organizations?						3a(i)		Х
	(m) D						la ()		Х
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R?				. 3b		
4	Describe in Part XIII the intended uses of the		wment funds.						
Par	rt VI Land, Buildings, and Equipm								
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. Se	ee Form 990, Part X	(, line	10.			
	Description of property	(a) Cost or or basis (investm	, , ,	1 , ,	Accun epreci	nulated lation	(d) Boo	k valu	ıe
1a	Land	,	,	, ,					
	Buildings		183	,519,619.	72,	091,948.	111	,427	,671.
	Leasehold improvements		,	,		<u> </u>			
	Equipment	I	13	,276,115.	12,	126,911.	1	,149	,204.
				,968,707.		801,425.			,282.
	I. Add lines 1a through 1e. (Column (d) must e						112		,157.
	<u> </u>		<u></u>	- ,,			e D (Forn		

94-1704765

OF SAN FRANCISCO

Part VII Investments - Other Securities			
Complete if the organization answered "Yes" o			
(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) INVESTMENTS - LIMITED PARTNERSHIP	4,252,843.	END-OF-YEAR MARKET VALUE	
(A) INVESTMENTS - LIMITED PARTNERSHIP (B) INVESTMENTS - HELD IN TRUST	801,674.	END-OF-YEAR MARKET VALUE	
(C) INVESTMENTS - HEDGE FUND INVESTMENTS	653,451.	END-OF-YEAR MARKET VALUE	
(D) INVESTMENTS - OTHER INVESTMENTS	22,356,748.	END-OF-YEAR MARKET VALUE	
(E)	. , ,		
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	28,064,716.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	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, line 13, col. (B))			
Part IX Other Assets Complete if the organization answered "Yes" of	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) (9)			
(8) (9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col.	(D))		
Part X Other Liabilities	(D))		
Complete if the organization answered "Yes" o	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability	· · · · ·		(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25, col.	· //		
2. Liability for uncertain tax positions. In Part XIII, provide		· · · · · · · · · · · · · · · · · · ·	
organization's liability for uncertain tax positions under	FASB ASC 740. Check he	ere if the text of the footnote has been pro-	vided in Part XIII X

Page 4

OF SAN FRANCISCO

Par		Reconciliation of Revenue per Audited Financial Statemen	its With Revenue per Re	eturn	
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1				1	
2		nts included on line 1 but not on Form 990, Part VIII, line 12:	1 1		
а		realized gains (losses) on investments			
b		ed services and use of facilities			
С		eries of prior year grants	I I		
d		(Describe in Part XIII.)	2d		
е		nes 2a through 2d		2e	
3		ct line 2e from line 1		3	
4		nts included on Form 990, Part VIII, line 12, but not on line 1:	1 . 1		
а		ment expenses not included on Form 990, Part VIII, line 7b		-	
b		(Describe in Part XIII.)		-	
		nes 4a and 4b		4c	
5 Par	rt XII	evenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) Reconciliation of Expenses per Audited Financial Stateme	nts With Expenses per	5 Return	
ı uı		Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	into with Expenses per	Hetuin	
_					
1		expenses and losses per audited financial statements		1	
2		nts included on line 1 but not on Form 990, Part IX, line 25:	0-		
a		ed services and use of facilities	I I	-	
b		ear adjustments	I I	-	
C		OSSES	I I	-	
d		(Describe in Part XIII.)		+	
_		nes 2a through 2d		2e	
3	Subtra	ct line 2e from line 1		3	
4		nts included on Form 990, Part IX, line 25, but not on line 1:	1.1		
а		nent expenses not included on Form 990, Part VIII, line 7b		_	
b		(Describe in Part XIII.)	4b		
		nes 4a and 4b		4c	
5 Dai	Total e	expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Supplemental Information		5	
				4.5	0.0.134
		descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV		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 addit	ional information.		
חס גם	י דדד	LINE 1A:			
FARI		LINE IX:			
тнг	MUSEUM	M'S PERMANENT COLLECTIONS REPRESENT MORE THAN 40 ASIAN CO	IINTRIES		
	МОВПОІ	TO THE PARTY COMMONICATIONS REPRESENT MORE THAN 40 RETURN CO.	ONTRIBB		
AND	SPAN 6	,000 YEARS OF ASIAN HISTORY. OBJECTS ARE HELD FOR EDUCAT	TONAL		
		.,	,		
RESE	ARCH	AND CURATORIAL PURPOSES. UNDER THE MUSEUM'S COLLECTIONS			
MANA	GEMEN	F POLICY, ALL OBJECTS ARE CATALOGUED, PRESERVED, AND PROV	IDED		
		, , ,			
WITH	ONGO	ING CARE. ACTIVITIES VERIFYING THEIR EXISTENCE AND ASSESS	ING		
THEI	R CONI	DITION ARE PERFORMED REGULARLY. TITLE TO THE PERMANENT CO	LLECTION		
OF W	ORKS (OF ART RESTS WITH THE CITY. IF ACCEPTED INTO THE PERMANENT	T		
COLL	ECTIO	N, DONATED ART OBJECTS BECOME THE PROPERTY OF THE CITY AND	D ARE		
TON	RECORI	DED IN THE MUSEUM'S COMBINED FINANCIAL STATEMENTS. PURCHA	SES OF		
ART	ARE RI	ECORDED AS AN EXPENSE IN THE MUSEUM'S COMBINED STATEMENT	OF		
ACTI	VITIES	S AND CHANGES IN NET ASSETS. THE MUSEUM DEACCESSIONS OBJE	CTS		

OF SAN FRANCISCO

Part XIII Supplemental Information (continued) DEEMED NO LONGER RELEVANT TO THE PERMANENT COLLECTION IN ACCORDANCE WITH THE MUSEUM'S COLLECTIONS MANAGEMENT POLICY. PROCEEDS FROM DEACCESSIONS ARE USED TO ACQUIRE OTHER OBJECTS FOR THE COLLECTION. PART III, LINE 4: THE MUSEUM'S PERMANENT COLLECTIONS REPRESENT MORE THAN 40 ASIAN COUNTRIES AND SPAN 6,000 YEARS OF ASIAN HISTORY, OBJECTS ARE FOR EDUCATIONAL, RESEARCH, AND CURATORIAL PURPOSES. UNDER THE MUSEUM'S COLLECTIONS MANAGEMENT POLICY, ALL OBJECTS ARE CATALOGUED, PRESERVED, AND PROVIDED WITH ONGOING CARE. PART V, LINE 4: THE MUSEUM'S ENDOWMENT FUND CONSISTS OF INDIVIDUAL DONOR-RESTRICTED ENDOWMENT FUNDS. THE NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS. AMOUNTS WITHDRAWN FROM THE ENDOWMENT UNDER THE ENDOWMENT SPENDING POLICY ARE FOR THE MUSEUM'S PROGRAMS AND OPERATING EXPENSES ALLOCATED IN ACCORDANCE WITH THE RESTRICTIONS PERTAINING TO THOSE FUNDS. THE TIMING AND AMOUNTS OF WITHDRAWALS ARE DETERMINED BY THE MUSEUM'S MANAGEMENT IN CONSULTATION WITH THE BUDGET AND FINANCE COMMITTEE AND THE EXECUTIVE COMMITTEE. INVESTMENT-RELATED EXPENSES ARE CHARGED SEPARATELY AGAINST THE ENDOWMENT. PART X, LINE 2: THE MUSEUM HAS BEEN CLASSIFIED AS A PUBLICLY SUPPORTED TAX-EXEMPT ORGANIZATION THAT IS EXEMPT FROM FEDERAL TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND FROM CALIFORNIA FRANCHISE AND/OR INCOME TAXES UNDER REVENUE AND TAXATION CODE SECTION 23701(D). THE MUSEUM Schedule D (Form 990) 2023

ASIAN ART MUSEUM FOUNDATION

Schedule D (Form 990) 2023 OF SAN FRANCISCO	94-1704765	Page 5
Schedule D (Form 990) 2023 OF SAN FRANCISCO Part XIII Supplemental Information (continued)		
BELIEVES THAT NO LIABILITIES ARE REQUIRED TO ACCRUE FOR UNCERTAIN TAX		
DOCTOTONG AG OF TIME 20 2024		
POSITIONS AS OF JUNE 30, 2024.		

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Open to Public

Department of the Treasury Internal Revenue Service

Inspection

Name of the organization **Employer identification number** ASIAN ART MUSEUM FOUNDATION OF SAN FRANCISCO 94-1704765

Par	τl	General Infor	mation on A	ctivities Out	side the United States. Comple	te if the organization answered "	Yes" on		
		Form 990, Part IV							
1	·								
	the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No								
2	2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the								
	United	d States.							
3	Activi	ties per Region. (Th	ne following Part	I, line 3 table ca	n be duplicated if additional space is ne	eeded.)			
	(a) Region	(b) Number of		(d) Activities conducted in the region	(e) If activity listed in (d)	(f) Total		
			offices	employees, agents, and	(by type) (such as, fundraising, pro-	is a program service,	expenditures for and		
			in the region	independent contractors	gram services, investments, grants to recipients located in the region)	describe specific type of service(s) in the region	investments		
				in the region	recipients located in the region)	or service(s) in the region	in the region		
EAST	ASIA	AND THE							
PACI	FIC -	AUSTRALIA,							
BRUN	EI, E	URMA,							
CAMB	ODIA,		0	0	INVESTMENTS		1415485.		
EURO	PE (I	NCLUDING							
ICEL	AND &	GREENLAND)							
- AL	BANIA	, ANDORRA,							
AUST	RIA,	BELGIUM	0	0	INVESTMENTS		1562687.		
NORT	H AME	RICA -							
CANA	DA AN	D MEXICO,							
BUT	NOT I	HE UNITED							
STAT	ES		0	0	INVESTMENTS		7984366.		
SOUT	H AME	RICA -							
ARGE	NTINA	, BOLIVIA,							
BRAZ	IL, C	HILE,							
		ECUADOR,	0	0	INVESTMENTS		210,574.		
	H ASI	-					<u> </u>		
AFGH	ANIST	AN .							
		H, BHUTAN,							
		LDIVES,	0	0	INVESTMENTS		1142011.		
		ST AND					<u> </u>		
NORT	H AFR	ICA -							
ALGE	RIA	BAHRAIN,							
	•	EGYPT,	0	0	INVESTMENTS		10,470.		
							+		
3 2	Subto	tal .	0	0			12325593		
		raifrom continuation					1 22323333		
D			0	0			0.		
_		s to Part I	-	0			 "		
С		s (add lines 3a	0	0			12325593		
	and 3	(1)	ı	ı			14343333		

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

OF SAN FRANCISCO

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

94-1704765

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Page 2

³ Enter total number of other organizations or entities

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.								
	Part III can be duplicated if a	dditional space is needed				_		
(a) T	ype of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Sched	ule F (Form 990) 2023 OF SAN FRANCISCO	94-1704765	Page 4
Part	IV Foreign Forms	foreign corporation during the tax year? If "Yes," Imply a U.S. Transferor of Property to a Foreign Yes X No during the tax year? If "Yes," the organization may To Report Transactions With Foreign Trusts and Annual Information Return of Foreign Trust With a 520-A; don't file with Form 990) Teign corporation during the tax year? If "Yes," Tormation Return of U.S. Persons With Respect to Torm 5471) Tyes No Torm 5471) X Yes No The property to a Foreign Trust With a Tyes X No The property to a Foreign Tyes X No Tyes X No The property to a Foreign Tyes X No T	
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 the Instructions for Form 926)	Yes	X 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 the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X 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 the Instructions for Form 5471)	X 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 the Instructions for Form 8621)	X 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 the Instructions for Form 8865)	X Yes	☐ No

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

the Instructions for Form 5713; don't file with Form 990)

Schedule F (Form 990) 2023

Yes X No

6

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 G (Form 990)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.											
Name of the organization	ASIAN ART 1	MUSEUM FOUNDATION					Employer id	lentification number				
	OF SAN FRAN						94-17047					
Part I Fundrais	ing Activities.	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, li	ine 17	. Form 990-E	Z filers are not				
	complete this part		~ aati	ition (Charle all that apply							
a Mail solicitati		ed funds through any of the followin e Solicitat			overnment grants							
	email solicitations				nment grants							
c Phone solicit		g Special										
d In-person sol	icitations			Ū								
2 a Did the organizatio	n have a written o	or oral agreement with any individual	(includ	ding of	ficers, directors, trust	tees, o	or					
key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes In No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be												
			ant to	agreei	ments under which th	ne fun	draiser is to b	be				
compensated at lea	ast \$5,000 by the	organization.										
			(iii) fundr	Did	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(v) A	Amount paid	(vi) Amount paid				
(i) Name and address or entity (fund		(ii) Activity	fundr have c or cor	ustody	(iv) Gross receipts from activity	to (o	r retained by) undraiser	to (or retained by)				
or orning (laria	raidery		contributions?		I om donvicy	listed in col. (i)		organization				
			Yes	No								
Total												
List all states in which or licensing.	ch the organizatio	n is registered or licensed to solicit o	ontrib	utions	or has been notified	it is e	xempt from r	egistration				

332081 09-13-23

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

Schedule G (Form 990) 2023

		e G (Form 990) 2023 OF SAN FRA				-1704765 Page 2
Pa	rt I					
_		of fundraising event contributions and gro			, 	ts greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			GALA		NONE	(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
ne			(event type)	(event type)	(total number)	
Revenue	4	Grass receipts	1,200,453.			1,200,453.
Re	•	Gross receipts	2,200,200.			2,200,100.
	2	Less: Contributions	1,083,228.			1,083,228.
	_	Loss. Contributions				= 7 : : : 7 = = : 1
	3	Gross income (line 1 minus line 2)	117,225.			117,225.
		,				· ·
	4	Cash prizes				
	5	Noncash prizes				
ses						
ens	6	Rent/facility costs				
Direct Expenses						
ect	7	Food and beverages	74,656.			74,656.
Ę						
	8	Entertainment				600 001
	9	Other direct expenses		•		678,331.
	10	Direct expense summary. Add lines 4 through				752,987. -635,762.
Pa	rt I	Net income summary. Subtract line 10 from li Gaming. Complete if the organization		000 Part IV line 10 or		-035,702.
		\$15,000 on Form 990-EZ, line 6a.	answered res on Form	990, Fait IV, line 19, Or	reported more triair	
		ψ10,000 0111 01111 000 EE, 11110 0α.		(b) Pull tabs/instant		(d) Total gaming (add
ne			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue						
Ä	1	Gross revenue				
S	2	Cash prizes				
ct Expenses						
кре	3	Noncash prizes				
Ή						
Direc	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %		
	6	Volunteer labor	L No	L No	No	
	_	Direct consequences Add lives Office	- F in a share (d)			
	1	Direct expense summary. Add lines 2 through	ı ə iri column (a)			
	Ω	Net gaming income summary. Subtract line 7	from line 1 column (d)			
		Net garning income summary. Subtract line r	nonnine i, column (a)			
9	Fnt	ter the state(s) in which the organization condu	icts gaming activities:			
		the organization licensed to conduct gaming a		states?		Yes No
		No," explain:				
		,				
	_					
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	rminated during the tax	year?	Yes No
b	lf "	Yes," explain:				
	_					
33208	2 09	P-13-23			Sche	dule G (Form 990) 2023

ASIAN ART MUSEUM FOUNDATION

Sch	edule G (Form 990) 2023 OF SAN FRANCISCO 9	4-17	0476	5	Page 3
11	Does the organization conduct gaming activities with nonmembers?			Yes	No No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed				
	to administer charitable gaming?			Yes	No
13	Indicate the percentage of gaming activity conducted in:				
	The organization's facility	1	13a		%
	An outside facility		13b		/ %
		L	IJU		70
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:				
	Name				
	Address				
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?			Yes	☐ No
r	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount	r			
~	of gaming revenue retained by the third party \$				
_	If "Yes," enter name and address of the third party:				
	The Tes, enter hame and address of the tillid party.				
	News				
	Name				
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation \$				
	Description of services provided				
	Director/officer Employee Independent contractor				
	birector/officer Employee independent contractor				
47	Mandatow diatributions				
	Mandatory distributions:				
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			.,	┌
	retain the state gaming license?			Yes	∟ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the)			
	organization's own exempt activities during the tax year \$				
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	Part	III, lin	es 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.				
			_		

ASIAN ART MUSEUM FOUNDATION

Schedule (G (Form 990) OF SAN FRANCISCO	94-1704765	Page 4
Part IV	G (Form 990) OF SAN FRANCISCO Supplemental Information (continued)		<u> </u>
	Continued		
		<u> </u>	

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

ASIAN ART MUSEUM FOUNDATION

Employer identification number Name of the organization OF SAN FRANCISCO 94-1704765 Part I Questions Regarding Compensation

			Yes	No			
1 a	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.						
	First-class or charter travel						
	Travel for companions Payments for business use of personal residence						
	Tax indemnification and gross-up payments Health or social club dues or initiation fees						
	Discretionary spending account Personal services (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 organization used to establish the compensation of the organization's						
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to						
	establish compensation of the CEO/Executive Director, but explain in Part III.						
	X Compensation committee X Written employment contract						
	Independent compensation consultant X Compensation survey or study						
	X 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:						
а	Receive a severance payment or change-of-control payment?	4a		Х			
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х			
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х			
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.						
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation						
	contingent on the revenues of:						
а	The organization?	5a		X			
b	Any related organization?	5b		Х			
	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:						
	The organization?	6a		X			
b	Any related organization?	6b		X			
	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			х			
not described on lines 5 and 6? If "Yes," describe in Part III							
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the						
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х			
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in						
	Regulations section 53.4958-6(c)?	9					

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

Schedule J (Form 990) 2023

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.

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) JAY XU	(i)	536,675.	79,717.	0.	42,853.	4,874.	664,119.	0.
DIRECTOR & CEO		0.	0.	0.	0.	0,	0.	0.
DIRECTOR & CEO (2) ROB MINTZ		233,312.	0.	0.	37,652.	4,531.	275,495.	0.
DEPUTY DIR OF ART & PROGRAMS	(i) (ii)	0.	0.	0.	0.	0.	0.	0.
(3) SARA LEE	(i)	261,890.	0.	0.	13,337.	0.	275,227.	0.
CHIEF FIN & ADMIN OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KO KO ZIN	(i)	198,798.	0.	0.	28,295.	24,462.	251,555.	0.
BUILDING & GROUNDS MAINTENANCE SUPER	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) BANAFSHEH PERRONE	(i)	222,786.	0.	0.	11,176.	16,873.	250,835.	0.
CHIEF IMPACT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) CALEN MCELDOWNEY	(i)	174,895.	0.	0.	30,625.	11,641.	217,161.	0.
DIRECTOR OF SECURITY & FACILITIES		0.	0.	0.	0.	0.	0.	0.
(7) FORREST MCGILL		173,441.	0.	0.	25,049.	10,969.	209,459.	0.
SENIOR CURATOR	("")		0.	0.	0.	0.	0.	0.
(8) LIA M. MAKSOUD			0.	0.	8,696.	10,864.	192,935.	0.
DIRECTOR OF HUMAN RESOURCES	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) ALISON H. MUNDY	(i)	170,639.	0.	0.	8,536.	10,864.	190,039.	0.
SENIOR DIRECTOR OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) YAEL EYTAN	(i)	169,587.	0.	0.	8,577.	10,589.	188,753.	0.
CHIEF MARKETING & COMMUNICATIONS OFF	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2023

SCHEDULE K (Form 990) Department of the Treasury Internal Revenue Service

Part I

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

2023
Open to Public Inspection

Name of the organization

Bond Issues

ASIAN ART MUSEUM FOUNDATION

OF SAN FRANCISCO

Employer identification number 94-1704765

(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	d (e) Issu	ie price	(f) Descript	on of purpose	(g) De	feased	(h) On of is:		(i) Po	
								Yes	No	Yes		Yes	
CALIFORNIA ENTERPRISE DEVELOPMENT						REFUND BONDS	ISSUED						
A AUTHORITY	35-2273601	NONE	02/11/11	96,9	85,000.	2/3/2005			Х		х		Х
В													<u> </u>
<u>C</u>													<u> </u>
D													
Part II Proceeds							T _						
				<u>4</u> 5,610,000.		В	С			D			
				5,610,000.									
2 Amount of bonds legally defeased				5,985,000.									
	Total proceeds of issue			5,473,584.									
•	Gross proceeds in reserve funds Capitalized interest from proceeds			, ,									
7 Issuance costs from proceeds				1,439.	1,439.								
				•									
9 Working capital expenditures from proceeds													
10 Capital expenditures from proceeds													
11 Other spent proceeds				5,983,561.									
12 Other unspent proceeds													
13 Year of substantial completion				2016									
			Yes	No	Yes	No	Yes	No		Yes		No	
14 Were the bonds issued as part of a refunding													
if issued prior to 2018, a current refunding is			Х										
15 Were the bonds issued as part of a refunding	•	• •											
	issued prior to 2018, an advance refunding issue)?			X							_		
16 Has the final allocation of proceeds been ma			х								_		
17 Does the organization maintain adequate bo final allocation of proceeds?	ooks and records to su		х										

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

Schedule K (Form 990) 2023

b If "Yes" to line 8a, enter the percentage of bond-financed property sold or

c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations

sections 1.141-12 and 1.145-2? **9** Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the

requirements under Regulations sections 1.141-12 and 1.145-2?

94-1704765 Schedule K (Form 990) 2023 OF SAN FRANCISCO Page 2 Part III Private Business Use В С D Was the organization a partner in a partnership, or a member of an LLC, No Yes No Yes No Yes Yes No which owned property financed by tax-exempt bonds? 2 Are there any lease arrangements that may result in private business use of Х bond-financed property? **3a** Are there any management or service contracts that may result in private Х business use of bond-financed property? b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? c Are there any research agreements that may result in private business use of Х bond-financed property? d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities .00 other than a section 501(c)(3) organization or a state or local government % Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, .00 another section 501(c)(3) organization, or a state or local government % .00 % % % 6 Total of lines 4 and 5 Does the bond issue meet the private security or payment test? 8a Has there been a sale or disposition of any of the bond-financed property to a non-Х governmental person other than a 501(c)(3) organization since the bonds were issued?

Part IV Arbitrage

disposed of

	Α		В		С)
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
Penalty in Lieu of Arbitrage Rebate?		X						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		Х						
b Exception to rebate?		Х						
c No rebate due?	Х							
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
performed								
3 Is the bond issue a variable rate issue?		Х						

%

Х

%

OF SAN FRANCISCO

Part IV Arbitrage (continued)									
		A	E	3		0	ı	D	
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No	
hedge with respect to the bond issue?		Х							
b Name of provider									
c Term of hedge									
d Was the hedge superintegrated?									
e Was the hedge terminated?									
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?	Х								
b Name of provider	MORGAN GU	ARANTY TRU							
c Term of GIC		29.0000000							
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	Х								
6 Were any gross proceeds invested beyond an available temporary period?		Х							
7 Has the organization established written procedures to monitor the									
requirements of section 148?	Х								
Part V Procedures To Undertake Corrective Action									
		Ą	E	3	С		D		
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No	
of federal tax requirements are timely identified and corrected through the									
voluntary closing agreement program if self-remediation isn't available under									
applicable regulations?	Х								
Part VI Supplemental Information. Provide additional information for responses to questions	s on Schedule	e K. See instru	ıctions.						
SCHEDULE K, PART IV:									
INTERIM ARBITRAGE REBATE COMPUTATION WAS PERFORMED: 7/25/24									
SCHEDULE K, PART IV, LINE 5:									
THE GROSS PROCEEDS WERE INVESTED INTO 2 GICS.									
NAME OF THE PROVIDER: .MORGAN GUARANTY TRUST CO; BANK OF AMERICA									
TERM OF GIC: RESERVE-29YR; CONSTRUCTION-2YR									
								-	

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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.

ASIAN ART MUSEUM FOUNDATION

OF SAN FRANCISCO

Employer identification number 94-1704765

Pai	rt I Types of Property						
		(a)	(b) Number of	(c)	(d)		
		Check if applicable	contributions or	Noncash contribution amounts reported on	Method of de noncash contribu	•	te
		арріюцью	items contributed	Form 990, Part VIII, line 1g	Tioriodori contribu	LIOIT AITICAIT	
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property		_				
9	Securities - Publicly traded	X	8	348,068.	PUBLICLY TRADED E	EXCHANGE	
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 20	Food inventory						
21	Drugs and medical supplies						
22	Taxidermy Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ()						
26	Other ()						
27	Other ()						
28	Other (
29	Number of Forms 8283 received by the organiz	ation during	the tax year for co	ontributions			
	for which the organization completed Form 828	-	•			0	
	-		_			Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it		
	must hold for at least 3 years from the date of t	he initial co	ntribution, and whi	ch isn't required to be used	for		
	exempt purposes for the entire holding period?					30a	Х
b	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance p	olicy that re	equires the review of	of any nonstandard contribut	ions?	31 X	<u>↓</u>
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash			
	contributions?					32a	Х
b	If "Yes," describe in Part II.						
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	for which column (a) is chec	ked,		
	describe in Part II.						

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

Schedule M (Form 990) 2023

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):
THIS NUMB	ER REPRESENTS THE NUMBER OF CONTRIBUTIONS, NOT THE NUMBER OF
ITEMS CON	TRIBUTED.

332142 09-11-23

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury Internal Revenue Service Name of the organization

ASIAN ART MUSEUM FOUNDATION

Employer identification number

OF SAN FRANCISCO	94-1/04/05
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
ASIAN AMERICAN ART AND CULTURES FOR LOCAL AND GLOBAL AUDIENCES. WE	
PROVIDE A DYNAMIC FORUM FOR EXCHANGING IDEAS, INVITING COLLABORATION,	
AND FUELING IMAGINATION TO DEEPEN UNDERSTANDING AND EMPATHY AMONG	
PEOPLE OF ALL BACKGROUNDS.	
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
PEOPLE OF ALL BACKGROUNDS.	
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:	
DEC 15, 2022 - OCT 9, 2023	
HIGHLIGHTS FROM THE COLLECTION DEMONSTRATE THE CROSS-CULTURAL	
INFLUENCES BROUGHT BY MODERN MASTERS TO TRADITIONAL CHINESE INK	
PAINTING.	
PAST CONTINUOUS TENSE	
DEC 16, 2022 - DEC 11, 2023	
IN A GALLERY-SPANNING INSTALLATION, VANCOUVER-BASED ARTIST LAM TUNG	
PANG SYNTHESIZES A MILLENNIUM OF CHINESE, KOREAN, AND JAPANESE NATURE	
SCENES SCALED UP FROM THE PICTURE PAGE TO NEAR LIFE SIZE.	
BEYOND BOLLYWOOD: 2000 YEARS OF DANCE IN ART	
MAR 31, 2023 - JUL 10, 2023	
A JOURNEY FOR THE MIND, BODY, AND SENSES THROUGH TWO MILLENNIA OF ART	
INSPIRED BY DANCE FROM SOUTH AND SOUTHEAST ASIA AND THE HIMALAYAS.	

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

Schedule O (Form 990) 2023

<u>Schedule O (Form 990) 2023</u> Page **2**

Name of the organization

ASIAN ART MUSEUM FOUNDATION

OF SAN FRANCISCO

Employer identification number

94-1704765

HELL: ARTS OF ASIAN UNDERWORLDS

JUN 16, 2023 - SEP 18, 2023

FROM THE HUMOROUS TO THE GROTESQUE, SEE THE MANY WAYS THAT ASIAN

CULTURES HAVE ENVISIONED THE REALM OF THE CONDEMNED OVER TIME.

BERNICE BING: OPEN CALL

JUN 16, 2023 - DEC 11, 2023

25 ARTISTS AND WRITERS HONOR BERNICE BING'S LEGACY BY EXPLORING THE

ASIAN AND ASIAN AMERICAN INFLUENCES IN CONTEMPORARY ART.

THE HEART OF ZEN

NOV 17, 2023 - DEC 31, 2023

DISCOVER THE DELICATE BRUSHWORK AND PROFOUND SIMPLICITY OF TWO STILL

LIFE INK PAINTINGS THAT HAVE BEEN TREASURED AT A ZEN BUDDHIST TEMPLE

FOR CENTURIES.

RESILIENT TRADITIONS: KOREAN AMERICAN STORIES TOLD THROUGH PAPER

APR 13, 2023 - FEB 5, 2024

WORKS INCORPORATING HANDMADE PAPER HIGHLIGHT THE UNIQUE PERSPECTIVES

AND LIVED EXPERIENCES OF KOREAN AND KOREAN AMERICAN ARTISTS.

MURAKAMI: MONSTERIZED

SEP 15, 2023 - FEB 12, 2024

IN SPECTACULAR FASHION, A LUMINARY OF ART AND POPULAR CULTURE IMAGINES

THE MONSTERS THAT PERVADE OUR REAL AND VIRTUAL WORLDS.

JAPANESE TASTES IN CHINESE CERAMICS

DEC 21, 2023 - MAY 6, 2024

EXQUISITE CHINESE AND CHINESE-INFLUENCED CERAMICS FROM THE KYOTO

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page 2 ASIAN ART MUSEUM FOUNDATION **Employer identification number** Name of the organization 94-1704765 OF SAN FRANCISCO NATIONAL MUSEUM DEMONSTRATE THE IMPORTANCE OF CHINESE ART TO JAPANESE TEA CULTURE. JAKHODO TODAY AUG 24, 2023 - AUG 18, 2024 A BELOVED AND MEANINGFUL MOTIF FROM KOREAN FOLK ART, REIMAGINED FOR THE 21ST CENTURY. DEITIES, PARAGONS, AND LEGENDS: STORYTELLING IN CHINESE PICTORIAL ARTS OCT 13, 2023 - JUL 8, 2024 DEPICTIONS OF INTRIGUING TALES THAT HAVE INFORMED, ENTERTAINED, AND ENGAGED AUDIENCES FOR CENTURIES. JAPANESE INK PAINTINGS DEC 21, 2023 - JUN 10, 2024 HIGHLIGHTS FROM THE COLLECTION ILLUSTRATE HOW JAPANESE ARTISTS FROM THE 15TH TO THE EARLY 17TH CENTURY ENGAGED WITH CHINESE INK PAINTING STYLES. INTO VIEW: NEW VOICES, NEW STORIES JAN 19, 2024 - AUG 5, 2024 RECENTLY ACQUIRED WORK BY FOURTEEN CONTEMPORARY ARTISTS WHOSE ALTERNATIVE NARRATIVES OF MYTHOLOGY, HISTORY, AND IDENTITY SPEAK TO A RADICALLY REIMAGINED FUTURE. RAD (RESEARCH AND DEVELOPMENT) JAN 18, 2024 - OCT 31, 2024

AN EXPERIMENTAL, ATELIER-STYLE SPACE AT THE INTERSECTION OF ART AND

Schedule O (Form 990) 2023 Page 2 Name of the organization ASIAN ART MUSEUM FOUNDATION **Employer identification number** OF SAN FRANCISCO 94-1704765 TECHNOLOGY. PHOENIX KINGDOMS: THE LAST SPLENDOR OF CHINA'S BRONZE AGE APR 19, 2024 - JUL 22, 2024 RISING FROM THE ASHES OF CONQUEST, TWO BRILLIANT BUT FORGOTTEN CULTURES CLAIM THEIR RIGHTFUL PLACES IN CHINA'S HISTORY. FUKUSA JUN 13, 2024 - FEB 3, 2025 GET LOST IN THE INTRICATE DETAILS AND EXPERT TECHNIQUES OF FUKUSA. USED TO ADORN SPECIAL GIFTS IN JAPAN. MAYUMI ODA JUN 13, 2024 - FEB 3, 2025 PRINTS BY MAYUMI ODA HONOR GODDESSES WITH LIVELY COMPOSITIONS, VIVID COLORS, AND BOLD OUTLINES. FORM 990, PART VI, SECTION B, LINE 11B: THE FINANCE OFFICE MAKES AVAILABLE AND SENDS THE PUBLIC DISCLOSURE COPY OF THE FORM 990 TO THE AUDIT COMMITTEE OF THE FOUNDATION BOARD FOR REVIEW AND APPROVAL BEFORE FILING. WE ALSO SEND THE PUBLIC DISCLOSURE COPY OF THE FORM 990 TO THE FULL FOUNDATION BOARD FOR REVIEW PRIOR TO FILING.

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

THE POLICY COVERS BOARD MEMBERS AND STAFF. TRUSTEES ARE ASKED TO INFORM THE

BOARD IN ADVANCE AND AS FULLY AS PRACTICABLE OF ANY TRANSACTIONS WITH THE

MUSEUM OR THROUGH A BUSINESS RELATIONSHIP WITH AN ASIAN ART COMMISSIONER OR

A FOUNDATION TRUSTEE IN WHICH THEY HAVE AN ECONOMIC INTEREST IN ORDER FOR

Schedule O (Form 990) 2023 Page **2**

Name of the organization ASIAN ART MUSEUM FOUNDATION **Employer identification number** OF SAN FRANCISCO 94-1704765 THE TRUSTEES TO REVIEW AND APPROVE OR DISAPPROVE THE TRANSACTION. IF A CONFLICT IS DETERMINED TO EXIST, THE CHAIRPERSON OF THE GOVERNING BOARD 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 GOVERNING BOARD OR COMMITTEE SHALL DETERMINE WHETHER THE ORGANIZATION CAN 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 REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST. THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'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. IF THE GOVERNING BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT SHALL INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORD THE MEMBER AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. IF, AFTER HEARING THE MEMBER'S RESPONSE AND AFTER MAKING FURTHER INVESTIGATION AS WARRANTED BY THE CIRCUMSTANCES, THE GOVERNING BOARD OR COMMITTEE DETERMINES THE MEMBER HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION. FORM 990, PART VI, SECTION B, LINE 15A: THE INDEPENDENT BOARD'S COMPENSATION COMMITTEE MEMBERS REVIEW EXTERNAL

Schedule O (Form 990) 2023	Page 2
Name of the organization ASIAN ART MUSEUM FOUNDATION OF SAN FRANCISCO	Employer identification number 94-1704765
OF SAN FRANCISCO	34-1/04/03
BENCHMARKS, DELIBERATE AND DISCUSS THE DETAILS OF RENEWAL CONTRACTS, AND	
DOCUMENT ALL DECISIONS ON THE CEO'S COMPENSATION.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE AUDITED FINANCIAL STATEMENTS AND THE PUBLIC DISCLOSURE COPY OF FORM	
990s ARE POSTED TO THE ASIAN ART MUSEUM WEBSITE. ALL OTHER INFORMATION IS	
The first in the first included wasting the other information is	
PROVIDED TO THE PUBLIC UPON REQUEST.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

Department of the Treasury Internal Revenue Service

Open to Public Inspection

OMB No. 1545-0047

Go to www.irs.gov/Form990 for instructions and the latest information. ASIAN ART MUSEUM FOUNDATION

Name of the organization **Employer identification number** OF SAN FRANCISCO 94-1704765

Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state o foreign country)	r Total inco	me End-of-year		ontrollin	g
				I			
Identification of Related Tax-Exempt Organiz organizations during the tax year.	eations. Complete if the organization	n answered "Yes" on Form 990	, Part IV, line 34, b	ecause it had one	or more related tax-exe	mpt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	Section 51 control entity	
				501(c)(3))		Yes	ı
	_						
							_

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

Schedule R (Form 990) 2023

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of end-of-year assets	Disprop	ortionata	Code V-UBI	General c	Percentage
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes No	<u> </u>
	1										
	1										
	1										
	1			1					1		

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(l contr ent	tion b)(13) rolled tity?
		country)		or tracty		400010		Yes	No
CHARITABLE REMAINDER TRUSTS (3)	INVESTMENT	CA	N/A		N/A	N/A	N/A		x
emicrimon reminder room (5)	- INVESTMENT	Cri	14/21		14/21	14/11	14721		
	_								
	_								
	-								
	-								

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

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
	Gift, grant, or capital contribution to related organization(s)	1b		Х
С	Gift, grant, or capital contribution from related organization(s)	1c		Х
	Loans or loan guarantees to or for related organization(s)	1d		Х
е	Loans or loan guarantees by related organization(s)	1e		Х
f	Dividends from related organization(s)	1f		Х
g	Sale of assets to related organization(s)	1g		Х
	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		х
	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		Х
	Sharing of paid employees with related organization(s)	10		Х
р	Reimbursement paid to related organization(s) for expenses	1p		х
	Reimbursement paid by related organization(s) for expenses	1q		Х
·				
r	Other transfer of cash or property to related organization(s)	1r		х
	Other transfer of cash or property from related organization(s)	1s		Х
	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
<u>(4)</u>			
<u>(5)</u>			
<u>(6)</u>			

94-1704765

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

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

(a)	(b)	(c)	(d)	(e) Are all	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec	Share of	Share of	Dispro	por-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General	or Percentage
of entity		(state or foreign	related, unrelated,	partners sec 501(c)(3) orgs.?	total	end-of-year	allocati	ite ons?	amount in box 20	managi	ownership
·		country)	sections 512-514)	Yes No		assets	Yes	No	(Form 1065)	Yes N	j
			000000000000000000000000000000000000000	Tes No			1165	INO	(1 01111 1000)	Tes IV	-
							++			\vdash	+
							I				
							+			\vdash	
							T				
							\sqcup			$\sqcup \bot$	
							+			\vdash	+