Form **990** 

# \*\* 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)

2023

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.						Open to Public Inspection		
AF	or the	e 2023 calend	ar year, or tax year beginning	JUL 1, 2023	and	ending J	JN 30, 2024	
<b>В</b> с а	heck if pplicabl	e: C Name of	organization				D Employer identified	cation number
	Addre chang	WHITNEY MUSEUM OF AMERICAN ART						
	Name Chang	12, 1700210						
	Initial return	Number	and street (or P.O. box if mail is	not delivered to street address	;)	Room/suite	E Telephone number	r
	Final return termir	/	SEVOORT STREET		,		212-570-3600	
	ated Amen	City or t	own, state or province, country	, and ZIP or foreign postal	code		G Gross receipts \$	184,593,000.
	_return	NEW IO	RK, NY 10014				H(a) Is this a group re	
	tion pendi	F Name a	nd address of principal officer: C ABOVE	SCOTT ROTHKOPF			for subordinates <b>H(b)</b> Are all subordinates ir	? Yes X No
I Tax-exempt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527 If "No," attach a list. Se								
	Vebsi						H(c) Group exemptio	n number
κF	orm of	organization:	X Corporation Trust	Association Other	r	L Year	of formation: 1936	A State of legal domicile: NY
	<b>rt I</b>	Summary						
	1	Briefly describ	e the organization's mission or	most significant activities:	WHITNE	Y MUSEUM	OF AMERICAN ART	
nce			1 DEVOTED TO AMERICAN A					
rna	2	Check this bo	x if the organization	discontinued its operations	s or dispos	sed of more	than 25% of its net ass	sets.
Activities & Governance	3	Number of vot	ing members of the governing	body (Part VI, line 1a)			3	45
	4	Number of ind	ependent voting members of t	he governing body (Part VI,	line 1b)		4	44
	5	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5						511
/itie			of volunteers (estimate if neces					116
ctiv			d business revenue from Part V				7a	190,000.
A	b	Net unrelated	business taxable income from	Form 990-T, Part I, line 11			7b	262,605.
							Prior Year	Current Year
ø	8	Contributions	and grants (Part VIII, line 1h)				60,650,000.	54,217,000.
Revenue	9	Program servi	ce revenue (Part VIII, line 2g)				11,119,000.	8,389,000.
eve	10	Investment ind	come (Part VIII, column (A), line	es 3, 4, and 7d)			23,639,000.	49,663,000.
Я	11	Other revenue	(Part VIII, column (A), lines 5, 6	6d, 8c, 9c, 10c, and 11e)			5,478,000.	4,471,000.
	12	Total revenue	- add lines 8 through 11 (must	equal Part VIII, column (A),	line 12)		100,886,000.	116,740,000.
	13	Grants and sir	nilar amounts paid (Part IX, col	lumn (A), lines 1-3)			392,000.	526,000.
	14	Benefits paid	o or for members (Part IX, colu	umn (A), line 4)			0.	0.
s	15	Salaries, other	compensation, employee ben	efits (Part IX, column (A), lir	nes 5-10)		38,784,000.	44,749,000.
Expenses	16a	Professional fu	undraising fees (Part IX, columr	n (A), line 11e)			0.	0.
ibei	b		ng expenses (Part IX, column (		3,702,			
ŵ	17	Other expense	es (Part IX, column (A), lines 11	a-11d, 11f-24e)			47,532,000.	46,624,000.
	18	Total expense	s. Add lines 13-17 (must equal	Part IX, column (A), line 25)	)		86,708,000.	91,899,000.
	19	Revenue less	expenses. Subtract line 18 fror	m line 12			14,178,000.	24,841,000.
or						Be	ginning of Current Year	End of Year
sets	20	Total assets (F	Part X, line 16)				972,809,000.	1,017,309,000.
ASS	21	Total liabilities	(Part X, line 26)				125,806,000.	117,621,000.
Net Assets or Fund Balances	22		fund balances. Subtract line 21	1 from line 20			847,003,000.	899,688,000.
Pa	rt II	Signature	Block					
Unde	er pena	alties of perjury,	declare that I have examined this	return, including accompanyin	g schedules	s and stateme	nts, and to the best of my	knowledge and belief, it is
true,	correc	ct, and complete.	Declaration of preparer (other that	n officer) is based on all inform	nation of wh	nich preparer		
			line Woo				5/2/2025	
Signature of officer Date								

Sign	Signature of offi	cer			Date				
Here	JACQUELINE N	NOO, CFO							
	Type or print na	me and title							
	Print/Type prepa	arer's name	Preparer's signature	Date	Check	PTIN			
Paid	SCOTT THOMP:	SETT	Scott Thom	pseff 4/24/2	025 self-employed	P00741490			
Preparer	Firm's name	GRANT THORNTON ADVISORS LI	C	1	Firm's EIN 99-	-1856619			
Use Only	Firm's address	757 THIRD AVENUE, 3RD FLOO	DR						
		NEW YORK, NY 10017-2013			Phone no. (212)	599 - 0100			
May the IF	May the IRS discuss this return with the preparer shown above? See instructions								
LHA For	HA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)								

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

(Rev. January 2024)

# Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service

Form 1041-A

## File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information.

**Electronic filing (e-file).** You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

<u>Part I - Id</u>	entification								
Type or	Name of exempt organization, employer, or other filer, see instructions.			Taxpayer identification number	er (TIN)				
Print	WHITNEY MUSEUM OF AMERICAN ART	13-1789318							
File by the due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, see instructions. 99 GANSEVOORT STREET								
instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10014								
Enter the	Return Code for the return that this application is for (fil	le a separa	te application for each return)		0 1				
Applicatio	on Is For	Return	Application Is For		Return				
		Code			Code				
Form 990	or Form 990-EZ	01	Form 4720 (other than individual)		09				
Form 472	0 (individual)	03	Form 5227		10				
Form 990-	PF	04	Form 6069		11				
		05	Form 8870		12				
Form 990	T (trust other than above)	06	Form 5330 (individual)		13				
Form 990	T (corporation)	07	Form 5330 (other than individual)		14				

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

08

• If this application is for an extension of time to file Form 5330, you must enter the following information.

	Plan Name			
	Plan Number			
	Plan Year Ending (MM/DD/YYYY)			
Part II	- Automatic Extension of Time To File for Exempt Organizations (see instructions)			
Th	e books are in the care of JACQUELINE WOO, CFO			
	99 GANSEVOORT STREET - NEW YORK, NY 10014			
Te	lephone No. 212-570-3670 Fax No			
● If t	he organization does not have an office or place of business in the United States, check this box			
● If t	his is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN)	s is foi	r the who	le group, check this
box .	If it is for part of the group, check this box and attach a list with the names and TINs of all r	nembe	ers the ex	tension is for.
1	I request an automatic 6-month extension of time until MAY 15 , 20 25 , to file the	e exem	ipt organ	ization return for
	the organization named above. The extension is for the organization's return for:			
	calendar year 20 or			
	tax year beginning JUL 1, 20 23, and ending JUN 3	30		, 2024
2	If the tax year entered in line 1 is for less than 12 months, check reason:	l retur	n	
	Change in accounting period			
3a	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less			
	any nonrefundable credits. See instructions.	3a	\$	0.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and			
	estimated tax payments made. Include any prior year overpayment allowed as a credit.	Зb	\$	0.
с	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by			
	using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.
			• •	

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form	1990 (2023) WHITNEY MUSEUM OF AMERICAN ART	13-1789318 Page <b>2</b>
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	Х
1	Briefly describe the organization's mission:	
	THE WHITNEY SEEKS TO BE THE DEFINING MUSEUM OF 20TH AND 21ST CENTURY	
	AMERICAN ART. THE MUSEUM COLLECTS, EXHIBITS, PRESERVES, RESEARCHES AND	
	INTERPRETS ART OF THE U.S. IN THE BROADEST GLOBAL, HISTORICAL AND	
	INTERDISCIPLINARY CONTEXTS. (SEE SCHEDULE O)	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes X No
	prior Form 990 or 990-EZ? 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 m	leasured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others	
	revenue, if any, for each program service reported.	
4a	(Code:         ) (Expenses \$	* <u>8,216,000.</u> )
	EXHIBITIONS AND PERMANENT COLLECTION	
	IN FY24, THE WHITNEY MUSEUM OF AMERICAN ART PRESENTED 14 EXHIBITIONS.	
	THESE INCLUDED: THE WHITNEY'S COLLECTION: SELECTIONS FROM 1900 TO 1965	
	(JUNE 28, 2019 - PRESENT; ILANA SAVDIE: RADICAL CONTRACTIONS (JULY 14, 2023 - SEPTEMBER 5, 2023); TRUST ME (AUGUST 19, 2023 - FEBRUARY 25,	
	2024); RUTH ASAWA THROUGH LINE (SEPTEMBER 16, 2023 - JANUARY 1, 2024);	
	HENRY TAYLOR: B SIDE (OCTOBER 4, 2023 - JANUARY 28, 2024); FRAGMENTS OF	
	A FAITH FORGOTTEN THE ART OF HARRY SMITH (OCTOBER 2, 2023 - JANUARY	
	28, 2024); NATALIE BALL: BILWI NAATS GA'NIIPCI (NOVEMBER 17, 2023 -	
	FEBRUARY 19, 2024); (SEE SCHEDULE O)	
4b	(Code:) (Expenses \$ 5,965,000. including grants of \$ 0. ) (Revenue	•\$ <u> </u>
	CURATORIAL AND RELATED SUPPORT	
	IN FY24, THE WHITNEY MUSEUM OF AMERICAN ART CONTINUED ITS ONGOING STUDY	
	INTO THE MORE THAN 26,000 OBJECTS IN THE COLLECTION BY OVER 6,000 ARTISTS. THE WHITNEY COMPLETED ITS WORK ON A MULTI-YEAR.	
	CROSS-DEPARTMENTAL, AND CROSS-INSTITUTIONAL RESEARCH PROJECT TO	
	UNDERSTAND THE ORIGIN, SCOPE, EVOLUTION, USE, AND IMPACT OF THE	
	MUSEUM'S COLLECTION. THE PROJECT, WHICH CULMINATED IN THE WHITNEY'S	
	FIRST EVER COLLECTION STRATEGIC PLAN, WILL OFFER RECOMMENDATIONS,	
	GOALS, AND OBJECTIVES FOR THE FUTURE OF THE WHITNEY'S COLLECTION THAT	
	IS INFORMED BY THE INSTITUTION'S HISTORY AND ENRICHED BY ITS DESIRE TO	
	MAKE ITS HOLDINGS USEFUL, DYNAMIC, (SEE SCHEDULE O)	
4c	(Code:) (Expenses \$ 5,818,000. including grants of \$ 526,000. ) (Revenue	e\$)
	EDUCATION PROGRAMS	
	THE WHITNEY EDUCATION DEPARTMENT SERVED A TOTAL OF 75,253 VISITORS IN	
	PERSON AND ONLINE THROUGH SCHOOL, YOUTH, FAMILY, PUBLIC, AND ACCESS AND COMMUNITY PROGRAMS. AN ADDITIONAL 80,199 ASYNCHRONOUS USERS ENGAGED	
	DIGITALLY WITH INTERPRETIVE CONTENT SUCH AS AUDIO GUIDES, RECORDED	
	VIDEOS OF PROGRAMS ON YOUTUBE AND PODCASTS. A TOTAL OF 13,970 OF THESE	
	IN PERSON AND ONLINE VISITORS WERE K-12 STUDENTS. EDUCATION STAFF	
	WORKED WITHIN AND ACROSS PROGRAM AREAS ON ZOOM TO PRESENT DYNAMIC	
	PROGRAMMING THAT EXPLORED CRITICAL QUESTIONS ABOUT AMERICAN ART,	
	CULTURE AND SOCIETY. THE SCHOOL PROGRAM TEAM COMPLETED 134 ONLINE	
_	LESSONS AND (SEE SCHEDULE O)	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ 2,462,000. including grants of \$ ) (Revenue \$	-949,000.)
4e	Total program service expenses 56,945,000.	
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Form 990 (2023)

Part IV Checklist of Required Schedules

WHITNEY MUSEUM OF AMERICAN ART

			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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in 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			
	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?			
	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			
	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, VII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	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	х	
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
.e 14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			<u> </u>
-	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			<u> </u>
	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			<u> </u>
	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."			<u> </u>
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		x
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			<u> </u>
	domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21		х
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				, /

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Form 990 (2	
Part IV	Che

Pa	rt 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	1		
		23	х	
24 2	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	20		
270	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1		
		24a	х	
h	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		x
		240		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040		x
	any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		-
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	0.5		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	1		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	1		
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	1		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	1		
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	1		
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	1		
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	1		
	"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		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		
00	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
57	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	31		<u> </u>
30		38	x	1
Pa	Note: All Form 990 filers are required to complete Schedule O Tt V Statements Regarding Other IRS Filings and Tax Compliance	1 30		L
	Chaoly if Cahadyla O containe a reconcise or note to any line in this Dart V			
	Check in Schedule O contains a response of hote to any line in this Part V		Yes	
			162	140

1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	468			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
с	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming					
	(gambling) winnings to prize winners?			1c	Х	
32004	12-21-23			Form	990	(2023)

332004 12-21-23

5 2023.05070 WHITNEY MUSEUM OF AMERICA 01986051

13-1789318

	990 (2023) WHITNEY MUSEUM OF AMERICAN ART	1	178931	8	P	age <b>5</b>
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)					
			1		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	2a	511			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	is?		2b	X	
3a				3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule of			3b	X	<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over, a	L			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	count)?		4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts (FBAR)				
				5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact		1	5b		X
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	organization s	solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	•				
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for \$75 made partly as a contribution and \$75 made partly as a contributi	vices provided to	the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s required				
	to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ntract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	ct?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file For	m 8899 as req	uired?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ion file a Form	1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the				
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а				9a		<b> </b>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	I				
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	I.				
	Gross income from members or shareholders	<u>11a</u>				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	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.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1				
	organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				
14a				14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b		<b> </b>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner				v	
	excess parachute payment(s) during the year?			15	X	
	If "Yes," see the instructions and file Form 4720, Schedule N.					v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?		16		X
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.			-	000	
332005	12-21-23			Form	990	(2023)

# 14470418 153424 0198605-00006

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instruct				X
Sec	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>			<u> </u>
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	45		105	
	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.				
b	Enter the number of voting members included on line 1a, above, who are independent <b>1b</b>	44			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any officer.	ner			
	officer, director, trustee, or key employee?		2	х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supe				
	of officers, directors, trustees, or key employees to a management company or other person?		3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed		4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		Х
6	Did the organization have members or stockholders?		6		Х
7a					
	more members of the governing body?		7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,				
	persons other than the governing body?		7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow				
а		-	8a	х	
b			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the				
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O		9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.				
		•		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	[·	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affilia				
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	y the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х	
b			12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe	e 🗌			
	on Schedule O how this was done	L·	12c	Х	
13	Did the organization have a written whistleblower policy?		13	Х	
14	Did the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent	dent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official	L.	15a	Х	
b	Other officers or key employees of the organization		15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a				
	taxable entity during the year?		16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its particip	ation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's				
	exempt status with respect to such arrangements?		16b		
Sec	ction C. Disclosure				
	List the states with which a copy of this Form 990 is required to be filed <u>SEE SCHEDULE O</u>				
17	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (sec	tion 501(c)(3)s o	only) a	availat	ole
	for public inspection. Indicate how you made these queilable. Check all that apply				
17 18	for public inspection. Indicate how you made these available. Check all that apply.				
	X       Own website       Another's website       X       Upon request       Other (explain on Schedule)	- 0)		ial	
			inanc	alai	
18	X         Own website         Another's website         X         Upon request         Other (explain on Schedule)		inanc	iai	
18	X         Own website         Another's website         X         Upon request         Other (explain on Schedule           Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of inter	est policy, and fi	inanc	iai	
18 19	X       Own website       Another's website       X       Upon request       Other (explain on Schedule         Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interstatements available to the public during the tax year.       Image: Content of the public during the tax of tax	est policy, and fi	nanc		
18 19	X       Own website       Another's website       X       Upon request       Other (explain on Schedule         Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of inter 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 record	est policy, and fi		<b>990</b>	

Form 990 (		13-1789318	Page 1						
Part VII	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								
<b>1a</b> 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.									

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-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	not c		ition		ne	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer ar	ia a a	Irecto	r/trus	lee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	e or di	ee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the
	related organizations	rustee	trust		ee	npens		1099-NEC)	1099-NEC)	organization and related
	below	dual ti	itiona		nploy	st cor	-	1000 NEO)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			o.gam_anono
(1) ADAM D. WEINBERG	35.00									
ALICE PRATT BROWN DIR. (THRU 10/2023)	0.00	х		х				2,888,922.	0.	22,875.
(2) SCOTT ROTHKOPF	35.00									
ALICE PRATT BROWN DIRECTOR	0.00	х		х				785,337.	0.	31,841.
(3) AMY ROTH	35.00									
CO-CHIEF OPERATING OFFICER	0.00			х				411,184.	0.	49,139.
(4) IDEHEN ARUEDE	35.00									
DEPUTY DIRECTOR	0.00			х				415,782.	0.	40,077.
(5) PAMELA BESNARD	35.00									
CHIEF ADVANCEMENT OFFICER	0.00			Х				404,998.	0.	40,077.
(6) NICHOLAS S. HOLMES	35.00									
GENERAL COUNSEL/ASSISTANT SECRETARY	0.00			х				279,105.	0.	54,811.
(7) ANGELA RUBIN	35.00									
CHIEF COMMS AND CONTENT OFFICER	0.00					x		293,233.	0.	27,789.
(8) MARILOU AQUINO	35.00									
CHIEF PHILANTHROPIC OFFICER	0.00					X		245,457.	0.	45,727.
(9) BRIDGET MENDOZA	35.00									
CHIEF INFORMATION OFFICER	0.00					X		219,582.	0.	43,234.
(10) EUNICE LEE	35.00									
DIR., STRG. PARTNERSHIPS & EVENTS	0.00					X		233,406.	0.	27,362.
(11) JENNIFER LEVENTHAL	35.00									
CHIEF OF STAFF (THRU 12/2023)	0.00					X		220,787.	0.	23,348.
(12) MAURA HEFFNER	35.00									
CHIEF EXHIBITIONS & COLLECTIONS OFF	0.00				X			181,087.	0.	40,510.
(13) CHRISTY L. PUTNAM - ASSO. DIR.	35.00									
EXHIBITIONS & COLLECTIONS (THRU 7/23	0.00				X			156,480.	0.	14,323.
(14) FERN KAYE TESSLER	1.00									
BOARD PRESIDENT	0.00	Х		Х				0.	0.	0.
(15) RICHARD M. DEMARTINI	1.00									
CHAIRMAN	0.00	х		х				0.	0.	0.
(16) ROBERT J. HURST	1.00									
CO-CHAIR OF EXECUTIVE COMMITTEE	0.00	х		х				٥.	0.	0.
(17) MIYOUNG LEE	1.00									
VICE PRESIDENT	0.00	х		х				0.	0.	0.
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Form 990 (2023) WHITNEY MUSEU	JM OF AMERI	CAN	AR	Т					13-178	9318	3	Pa	age <b>8</b>
Part VII Section A. Officers, Directors, Trust	tees, Key Emp	oloy	ees,	anc	d Hig	ghes	t C	ompensated Employee	s (continued)				
(A) Name and title	<b>(B)</b> Average			(C Pos	<b>C)</b> ition			(D) Reportable	(E) Reportable			<b>(F)</b> imate	d
	hours per	box	, unles	ss per	rson i	s both	an	compensation	compensation		am	ount c	of
	week		cer an	id a d	Irecto	r/trus I	ee)	from	from related			other	
	(list any	rector						the	organizations		comp		
	hours for related	or di	ee			ated		organization	(W-2/1099-MISC	<i>;</i> /		m the	
	organizations	ustee	trustee		Ð	pens		(W-2/1099-MISC/	1099-NEC)		•	nizati	
	below	ual tri	ional		ploye	t com		1099-NEC)				relate	
	line)	Individual trustee or director	Institutional t	Officer	Key employee	Highest compensated employee	Former				orgai	nizatio	115
(18) NANCY POSES	1.00	5	드	ð	¥	Ξ 9 Ξ	Ŗ			$\rightarrow$			
VICE CHAIRMAN		x		x				0.		٥.			0
	0.00	^		^				0.		<u>•                                    </u>			0.
(19) PAUL C. SCHORR, IV	1.00												•
TREASURER/TRUSTEE	0.00	Х		х				0.		0.			٥.
(20) ANNE-CECILIE ENGELL SPEYER	1.00	_											
CO-CHAIR OF EXECUTIVE COMMITTEE	0.00	X		х				0.		٥.			0.
(21) GAURAV K. KAPADIA	1.00												
VICE CHAIRMAN	0.00	Х		Х				0.		٥.			0.
(22) JULIE OSTROVER	1.00												
VICE PRESIDENT	0.00	Х		х				0.		٥.			0.
(23) SCOTT RESNICK	1.00												
TRUSTEE	0.00	х		х				0.		0.			Ο.
(24) ROBERT ROSENKRANZ	1.00												
VICE PRESIDENT	0.00	х		x				0.		٥.			0.
(25) BENNETT GOODMAN	1.00									-+			
TRUSTEE	0.00	x		x				0.		٥.			Ο.
(26) LAURIE M. TISCH	1.00									<u> </u>			<u> </u>
SECRETARY/TRUSTEE	0.00	x		x				0.		٥.			٥
	-									0.		161 1	$\frac{0}{112}$
1b Subtotal								6,735,360.				461,1	
c Total from continuation sheets to Part VI								0.		0.			0.
d Total (add lines 1b and 1c)								6,735,360.		0.		461,1	113.
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable				
compensation from the organization											<u> </u>		67
										г		Yes	No
<b>3</b> Did the organization list any <b>former</b> officer,	director, trust	ee, k	ey e	empl	oye	e, or	hig	hest compensated empl	oyee on				
line 1a? If "Yes," complete Schedule J for se	uch individual										3		X
4 For any individual listed on line 1a, is the su	m of reportabl	e co	mpe	ensa	tion	and	oth	ner compensation from th	ne organization				
and related organizations greater than \$150	,000? If "Yes,	" со	mple	ete S	Sche	dule	Jf	or such individual			4	х	
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes," com	plete Schedule	e J fo	or su	ich i	oers	on .					5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest cor	npensated inc	lepe	nder	nt co	ontra	actor	's th	nat received more than \$	100,000 of compe	nsat	ion fror	n	
the organization. Report compensation for t													
(A)								(B)			(C)	)	
Name and business	address							Description of s	ervices	C	ompen		ı
VANGUARD CONSTRUCTION & DEVELOPMENT													
350 5TH AVE STE 5500, NEW YORK, NY 10								CONSTRUCTION SERVI	CES		1.	173,2	277.
TEMPORARY WALLS, INC.												,	
412 STONE ROW LANE, BANGOR, PA 18013							k	CONSTRUCTION SERVI	CES			996,1	150.
RICHTER + RATNER CONTRACTING CORPORAT	TON												
45 W 36TH ST. 12 FL, NEW YORK, NY 100								CONSTRUCTION SERVI	CEG		,	922,6	675
FRIED, FRANK, HARRIS, SHRIVER, & JACO							-	CONSTRUCTION SERVI				, 22,	575.
801 17TH ST NW #600, WASHINGTON, DC 2							-	LEGAL SERVICES				,200	,00
DOYLE SECURITY SERVICES, INC, 371 MER													
ROAD - STE 301, ROCKVILLE CENTRE, NY							_	SECURITY SERVICES				444,8	589.
2 Total number of independent contractors (ir		ot lin	nited	d to			ted	above) who received mo	ore than				
\$100,000 of compensation from the organiz					53	3					_		
SEE PART VII, SECTION A CONTINU	JATION SHEE	TS								1	Form 9	<b>90</b> (2	2023)

332008 12-21-23

Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee			ligh	est		es (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(C	heck	all	that	app	ly)	compensation	compensation	amount of
	per week							from the	from related organizations	other compensatior
	(list any	tor				ploye		organization	(W-2/1099-MISC)	from the
	hours for	r direc				ed en		(W-2/1099-MISC)	(	organization
	related	stee o	rustee			oen sat				and related
	organizations	al trus	onal ti		ployee	comp				organizations
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) JUDY HART ANGELO	1.00	-	=	9	¥	Ξ	5 F			
TRUSTEE	0.00	x						0.	0.	
(28) PAUL ARNHOLD	1.00							· · ·	<b>``</b> •	
rrustee	0.00	x						0.	0.	
(29) JILL BIKOFF	1.00									
TRUSTEE	0.00	х						0.	0.	
(30) LESLIE BLUHM	1.00									
TRUSTEE	0.00	х						٥.	0.	
(31) NEIL G. BLUHM	1.00									
TRUSTEE	0.00	х						0.	0.	
(32) DAVID CANCEL	1.00									
RUSTEE	0.00	х						0.	0.	
(33) DAVID CAREY	1.00									
TRUSTEE	0.00	х						0.	0.	
(34) JOANNE LEONHARDT CASSULLO	1.00									
TRUSTEE	0.00	х						0.	0.	
(35) HENRY CORNELL	1.00									
TRUSTEE (THRU 12/2023)	0.00	х						0.	0.	
(36) NANCY CARRINGTON CROWN TRUSTEE	1.00	x						0.	0.	
(37) PAMELLA G. DEVOS	1.00	~						U.	· · ·	
IRUSTEE	0.00	x						0.	0.	
(38) BETH RUDIN DEWOODY	1.00							·.	<u>.</u>	
TRUSTEE	0.00	x						0.	0.	
(39) FIONA IRVING DONOVAN	1.00							<b>```</b>	<b>·</b> ··	
TRUSTEE (THRU 05/2024)	0.00	x						0.	0.	
(40) FAIRFAX N. DORN	1.00							-		
TRUSTEE	0.00	х						0.	0.	
(41) LISE EVANS	1.00									
TRUSTEE	0.00	х						0.	0.	
(42) VICTOR F. GANZI	1.00									
RUSTEE	0.00	х						0.	0.	
(43) HENRY LOUIS GATES, JR.	1.00									
TRUSTEE	0.00	х						0.	0.	
(44) KATJA GOLDMAN	1.00									
TRUSTEE	0.00	х					L	0.	0.	
(45) SUSAN K. HESS	1.00	-								
RUSTEE	0.00	х			<b> </b>			0.	0.	
(46) MICHAEL E. KASSAN, EX OFFICO	1.00	-								
RUSTEE	0.00	Х						0.	0.	

332201 04-01-23

Part VII Section A. Officers, Directors,	Trustees, Key Er	nplo	yee	s, aı	nd H	ligh	est (	Compensated Employe	es (continued)	
(A)	(B)								(E)	(F)
Name and title	Average			Pos	ition	ľ		Reportable	Reportable	Estimated
	hours	(c	heck	all	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week (list any	٩				loyee		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direct				d em l		(W-2/1099-MISC)	(00-2/1099-10130)	organization
	related	tee or	istee			en sate				and related
	organizations	l trust	nal tru		oyee	ompe				organizations
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pen sated em ployee	Former			
	line)	pul	lns	0ff	Key	Hig	For			
(47) NEAL K. KATYAL	1.00								_	
	0.00	Х						0.	0.	0
(48) CLAUDIA LAVIADA	1.00								0	
TRUSTEE	0.00	X						0.	0.	0
(49) JONATHAN O. LEE TRUSTEE	0.00	x						0.	0.	c
(50) RAYMOND J. MCGUIRE	1.00	^						<u>0.</u>	0.	0
TRUSTEE	0.00	x						0.	0.	0
(51) JULIE MEHRETU	1.00							· · ·		
TRUSTEE	0.00	x						0.	0.	0
(52) ERIC L. MOTLEY	1.00							·		
TRUSTEE (THRU 05/2024)	0.00	x						0.	0.	C
(53) BROOKE GARBER NEIDICH	1.00									
TRUSTEE	0.00	x						0.	0.	C
(54) JOHN C. PHELAN	1.00									
TRUSTEE	0.00	х						0.	0.	C
(55) JEN RUBIO	1.00									
TRUSTEE	0.00	х						0.	0.	0
(56) MARY E. BUCKSBAUM SCANLAN	1.00									
TRUSTEE (THRU 05/2024)	0.00	х						0.	0.	0
(57) RICHARD D. SEGAL	1.00									
TRUSTEE (THRU 05/2024)	0.00	х						0.	0.	C
(58) JONATHAN S. SOBEL	1.00									-
TRUSTEE (THRU 05/2024)	0.00	х						0.	0.	0
(59) THOMAS E. TUFT	1.00									
TRUSTEE	0.00	X						0.	0.	C
(60) DAVID W. ZALAZNICK TRUSTEE	1.00	x						0.	0.	c
(61) STEPHANIE MARCH	1.00	^						0.	0.	0
TRUSTEE (AS OF 03/2024)	0.00	x						0.	0.	C
(62) KU-LING YURMAN	1.00							· · ·		
TRUSTEE (AS OF 03/2024)	0.00	x						0.	0.	C
(63) MARCIA DUNN	1.00									
TRUSTEE (AS OF 05/2024)	0.00	x						0.	0.	C
		1								

332201 04-01-23

ar	t VII									F
		Check if Schedule O	conta	ains a respo	nse	or note to any line I	e in this Part VIII (A)	(B)	(C)	<u>(</u> D)
							Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue exclu from tax und sections 512 -
Ś	1 a	Federated campaigns		1a						
In		Membership dues				8,974,000.				
Bo		Fundraising events				5,576,000.				
arA		Related organizations								
mil		Government grants (contr				463,000.				
ŝ	f	All other contributions, gifts,	grant	ts, and						
and Other Similar Amounts		similar amounts not included	l abov	/e <b>1f</b>		39,204,000.				
0 P	-	Noncash contributions included in	lines 1	la-1f <b>1g</b> \$		5,195,000.				
an	h	Total. Add lines 1a-1f					54,217,000.			
						Business Code				
		ADMISSION INCOME				900099	7,738,000.	7,738,000.		
ne	b	TRAVELING EXHIBITIO	NS			900099	478,000.	478,000.		
/eni	с.	ART LOAN FEES				900099	173,000.	173,000.		
Be	d									
Revenue	e f	All other program service	reve	nue						
		Total. Add lines 2a-2f					8,389,000.			
	3	Investment income (includ					, , , .			
	-						4,546,000.		-279,000.	4,825,0
	4	Income from investment of					· · ·			
	5	Royalties				ſ	1,171,000.			1,171,0
				(i) Real		(ii) Personal				
	6 a	Gross rents	6a	4,714,0	00.					
	b	Less: rental expenses	6b	257,0	00.					
	с	Rental income or (loss)	6c	4,457,0	00.					
		Net rental income or (loss	)				4,457,000.			4,457,0
	7 a	Gross amount from sales of		(i) Securit		(ii) Other				
		assets other than inventory	7a	108,843,0	00.					
	b	Less: cost or other basis	_	62 726 0	0.0					
	_	and sales expenses		63,726,0 45,117,0						
		Gain or (loss)					45,117,000.			45,117,0
		Net gain or (loss) Gross income from fundraisi			·····		10,117,000.			10,11,0
	0 4			000. of						
1		contributions reported on								
		Part IV, line 18			8a	124,000.				
	b	Less: direct expenses			8b	1,096,000.				
		Net income or (loss) from			ts		-972,000.			-972,0
	9 a	Gross income from gamin				7				
		Part IV, line 19			9a					
		Less: direct expenses			9b					
		Net income or (loss) from	-	-						
	10 a	Gross sales of inventory, I				2 040 000				
		and allowances			10a					
		Less: cost of goods sold			10b	2,774,000.	-725,000.	-949,000.	224,000.	
+	С	Net income or (loss) from	sales	s of inventor	у	Business Code	725,000.	545,000.	224,000.	
	11 -	MISCELLANEOUS INCOM	Œ			900099	295,000.			295,0
Jue	n a b	CATERING/EVENT INCO				900099	245,000.		245,000.	,0
Revenue	c b						,,			
Be		All other revenue								
		Total. Add lines 11a-11d					540,000.			
_	12	Total revenue. See instruction					116,740,000.	7,440,000.	190,000.	54,893,0

12

2023.05070 WHITNEY MUSEUM OF AMERICA 01986051

WHITNEY MUSEUM OF AMERICAN ART

13-1789318 Page 10

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 (B) (C) (D) (A) 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 1 and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 526,000. 526,000. individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 4 5 Compensation of current officers, directors, 1,866,000. trustees, and key employees 5,140,000 2,196,000. 1,078,000. Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)30,828,000. 18,132,000. 11,629,000. 1,067,000. Other salaries and wages 7 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 1,753,000 994,000 654,000 105,000. 4,758,000 2,414,000 2,106,000 238,000. Other employee benefits 9 2,270,000 792,000 136,000. 1,342,000 10 Payroll taxes 11 Fees for services (nonemployees): Management а 704,000 23,000. 681,000 b Legal 243,000 243,000 Accounting С Lobbying d Professional fundraising services. See Part IV, line 17 е 659,000 659,000. Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, g 4,130,000 2,389,000 1,689,000 52,000. column (A), amount, list line 11g expenses on Sch 0.) 2,340,000 2,115,000 215,000 10,000. Advertising and promotion 12 1,763,000 11,000. 1,730,000. 22,000 13 Office expenses Information technology 14 15 Royalties 4,136,000. 1,917,000 6,053,000 16 Occupancy 1,197,000 727,000, 344,000 126,000. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials ... Conferences, conventions, and meetings ..... 19 1,187,000, 792,000, 339,000 56,000. 20 Interest Payments to affiliates 21 10,721,000 7,157,000 3,055,000 509,000. 22 Depreciation, depletion, and amortization ..... 1,351,000 1,351,000 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) ART ACQUISITIONS 7,145,000. 7,145,000. а 2,359,000 2,359,000 EXHIBITION EXPENSES b BUILDING SUPPLIES & REP 2,289,000. 121,000. 2,168,000. С 886,000 ART PACKING/SHIPPING 886,000. d 3,597,000 2,091,000 1,192,000 314,000. All other expenses е 91,899,000 56,945,000 3,702,000. 31,252,000 Total functional expenses. Add lines 1 through 24e 25 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

332010 12-21-23

Check here

if following SOP 98-2 (ASC 958-720)

2023.05070 WHITNEY MUSEUM OF AMERICA 01986051

Form 990 (2023)

13

14470418 153424 0198605-00006

		Check in Schedule O contains a response or hou			<b>(A)</b> Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			21,846,700.	1	16,623,000.
	2	Savings and temporary cash investments			29,565,300.	2	113,759,000.
	3	Pledges and grants receivable, net			18,938,000.	3	21,438,000.
	4	Accounts receivable, net			12,816,000.	4	2,183,000.
	5	Loans and other receivables from any current or			, ,		, ,
	-	trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes				5	
	6	Loans and other receivables from other disqualif					
		under section 4958(f)(1)), and persons described				6	
6	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			4,348,000.	8	4,118,000
As	9	<b>–</b>			2,639,000.	9	3,067,000
		Land, buildings, and equipment: cost or other			, , , -		
	lou	basis. Complete Part VI of Schedule D	10a	486,811,000.			
	Ь	Less: accumulated depreciation		112,621,000.	371,102,000.	10c	374,190,000,
	11	Investments - publicly traded securities			105,400,000.	11	86,817,000.
	12	Investments - other securities. See Part IV, line 1			392,470,000.	12	379,736,000.
	13	Investments - program-related. See Part IV, line 1				13	
	14					14	
	15	Intangible assets			13,684,000.	15	15,378,000
	16	Total assets. Add lines 1 through 15 (must equa			972,809,000.	16	1,017,309,000
	17	Accounts payable and accrued expenses			11,908,000.	17	7,333,000.
	18	Grants payable and aborded expenses				18	
	19	Deferred revenue			2,829,000.	19	1,916,000
	20	Tax-exempt bond liabilities			94,028,000.	20	91,538,000
	21	Escrow or custodial account liability. Complete F				21	
	22	Loans and other payables to any current or form				21	
Liabilities	~~	trustee, key employee, creator or founder, subst					
bili		controlled entity or family member of any of thes				22	
Lia	23	Secured mortgages and notes payable to unrela				23	
	23 24	Unsecured notes and loans payable to unrelated				23	
	25	Other liabilities (including federal income tax, pay				27	
	25	parties, and other liabilities not included on lines					
		- Colorado da D			17,041,000.	25	16,834,000.
	26	Total liabilities. Add lines 17 through 25			125,806,000.	26	117,621,000.
	20	Organizations that follow FASB ASC 958, che		X	, , ,	20	
es		and complete lines 27, 28, 32, and 33.					
Net Assets or Fund Balances	27				400,751,000.	27	396,094,000.
3ala	28	Net assets with donor restrictions			446,252,000.	28	503,594,000.
Ыd	20	Organizations that do not follow FASB ASC 9			, , , -	20	, , -
Fur		and complete lines 29 through 33.	50, 01100				
P	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or eq				30	
Ass	31	Retained earnings, endowment, accumulated inc				31	
et/	32	Total net assets or fund balances			847,003,000.	32	899,688,000.
Ż	33				972,809,000.	33	1,017,309,000.
	33	Total liabilities and net assets/fund balances			5,2,005,000.	33	Form <b>990</b> (2023

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

Form 990 (2023)

X

Form	990 (2023) WHITNEY MUSEUM OF AMERICAN ART	13-17893	18	Pa	<sub>ge</sub> 12			
	rt XI Reconciliation of Net Assets				2			
	Check if Schedule O contains a response or note to any line in this Part XI				X			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	116	,740,	000.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	91,899,00					
3	Revenue less expenses. Subtract line 2 from line 1	3	24	,841,	000.			
4	4	847	,003,	000.				
5	Net unrealized gains (losses) on investments	5	25	,876,	000.			
6	Donated services and use of facilities	6						
7								
8	Prior period adjustments	8						
9	9 Other changes in net assets or fund balances (explain on Schedule O) 9							
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10	899	,688,	000.			
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	Ο.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
	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	X				
	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:							
	X Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.						
3a	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?		3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000				

Form **990** (2023)

332012 12-21-23

SCHEDULE A	١
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Department of the Treasury Internal Revenue Service

(Form 990)

Total

# **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.

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

OMB No. 1545-0047	
2023	

	organization

on		2023			
		Open to Public Inspection			
	Employer	identification number			
		13-1789318			
tion	IS.				

		WHITNE	Y MUSEUM OF AME	RICAN ART					13-1789318
Pa	rt I	Reason for Public (	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	S.	
The	organ	ization is not a private found	ation because it is: (I	For lines 1 through 12, cl	heck only	one box.)			
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).							
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)							
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).							
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:							
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in							
		section 170(b)(1)(A)(iv).	Complete Part II.)						
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	X	An organization that norma	lly receives a substa	ntial part of its support fr	om a gove	ernmental	unit or from th	e general	public described in
		section 170(b)(1)(A)(vi). (C							
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Part	t II.)				
9		An agricultural research org	-			-		-	-
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	e or
		university:							
10		An organization that norma							
		activities related to its exen		•					•
		income and unrelated busin		(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	after June 30, 1975.
		See section 509(a)(2). (Con	• •				O(-)(A)		
11 12	H	An organization organized a						n out the	purpassa of one or
12		An organization organized a more publicly supported or	-	•	-			•	
		lines 12a through 12d that	-						
а		<b>Type I.</b> A supporting orga	• •					-	aivina
u	L	the supported organization	-	-	• • • •	-			
		organization. You must o							
b		<b>Type II.</b> A supporting org	-		ion with it:	s supporte	d organizatior	n(s), by hav	vina
	-	control or management o							
		organization(s). You mus			•			,	
с		Type III functionally inte			in connect	tion with, a	and functional	y integrate	ed with,
		its supported organization	n(s) (see instructions)	). You must complete I	Part IV, Se	ctions A,	D, and E.		
d		Type III non-functionally	vintegrated. A supp	orting organization oper	ated in co	nnection w	ith its suppor	ted organiz	zation(s)
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	uirement and	an attentiv	veness
		requirement (see instructi	ions). <b>You must con</b>	nplete Part IV, Sections	A and D,	and Part	<b>V</b> .		
е		Check this box if the orga	anization received a v	written determination from	m the IRS	that it is a	Type I, Type I	I, Type III	
		functionally integrated, or	Type III non-function	nally integrated supporting	ng organiz	ation.			
f		er the number of supported o	•						
g		vide the following information			(iv) Is the orac	anization listed	( ) )		
	(	i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ng document?	(v) Amount of support (see in	,	(vi) Amount of other support (see instructions)
		organization		above (see instructions))	Yes	No		3110010113)	
			1						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	82,725,000.	48,648,000.	66,182,000.	60,650,000.	54,217,000.	312,422,000.
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	82,725,000.	48,648,000.	66,182,000.	60,650,000.	54,217,000.	312,422,000.
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)						46,094,045.
6	Public support. Subtract line 5 from line 4.						266,327,955.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	82,725,000.	48,648,000.	66,182,000.	60,650,000.	54,217,000.	312,422,000.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	8,403,000.	6,483,000.	6,301,400.	9,453,000.	10,710,000.	41,350,400.
9	Net income from unrelated business				· ·		
	activities, whether or not the						
	business is regularly carried on	Ο.	0.	Ο.	132,624.	0.	132,624.
10	Other income. Do not include gain						,
	or loss from the sale of capital						
	assets (Explain in Part VI.)	707,000.	720,000.	301,700.	232,000.	419,000.	2,379,700.
11	Total support. Add lines 7 through 10	,	,	,	,	,	356,284,724.
	Gross receipts from related activities,	etc. (see instructio	uns)			12	37,978,253.
	<b>First 5 years.</b> If the Form 990 is for th	i i	,	ourth, or fifth tax v	ear as a section 5	I	
	organization, check this box and <b>stop</b>	•					
Sec	tion C. Computation of Publi	<u> </u>					
14	Public support percentage for 2023 (li	ine 6, column (f), di	ivided by line 11, c	olumn (f))		14	74.75 %
	Public support percentage from 2022					15	75.20 %
	33 1/3% support test - 2023. If the c					ore, check this bo	( and
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2022. If the c	organization did no	t check a box on li				
	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts						
	meets the facts-and-circumstances te			-	-	5	
b	10% -facts-and-circumstances test	-			-		
~	more, and if the organization meets th	-					
	organization meets the facts-and-circu						
18	<b>Private foundation.</b> If the organizatio						
				.,,,	,		/Earm 990) 2022

Schedule A (Form 990) 2023

332022 12-21-23

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

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 202	3 (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						
<b>3</b> Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
<b>4</b> 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 $\dots$						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 202	3 (f) Total
9 Amounts from line 6			(0) = 0 = 1	(,	(0) = 0 =	<u> </u>
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the	he organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) orga	nization,
check this box and stop here						
Section C. Computation of Publ	ic Support Per	rcentage				
15 Public support percentage for 2023 (	line 8, column (f), d	livided by line 13,	column (f))		15	%
16 Public support percentage from 2022					16	%
Section D. Computation of Inves						
17 Investment income percentage for 2					17	%
<b>18</b> Investment income percentage from						%
<b>19a 33 1/3% support tests - 2023.</b> If the						line 1 / is not
more than 33 1/3%, check this box a						
<b>b 33 1/3% support tests - 2022.</b> If the	-					
line 18 is not more than 33 1/3%, che						ation
20 Private foundation. If the organization	JII GIG NOT CHECK A	box on line 14, 19	a, or 190, check t	inis box and see in		
332023 12-21-23		18	}		Sche	dule A (Form 990) 2023

<sup>2023.05070</sup> WHITNEY MUSEUM OF AMERICA 01986051

1

2

Yes No

# Part IV Supporting Organizations

(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")? *If* "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? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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).*
- 8 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.)

19

332024 12-21-23

3a 3b 3c 4a 4b 4c 5a 5b <u>5c</u> 6 7 8 9a 9b 9c 10a 10b Schedule A (Form 990) 2023

Concutic A (i

Schedule A (Form 990) 2023
----------------------------

### WHITNEY MUSEUM OF AMERICAN ART

Yes

1

2

No

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

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

organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

### upervised, or controlled the supporting organization. Section C. Type II Supporting Organizations

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

## Section D. All Type III Supporting Organizations

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

# Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the	e organization used to satisf	w the Integral Part Test duri	ng the year (see instructions).
•		e organization used to satisf	y ine milegiai rait iest uun	

- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. h

c 🗌	The organization supported a governmental entity	Describe in Part VI how	you supported a governm	ental entity (see instruction <u>s).</u>
-----	--	-------------------------	-------------------------	--

20

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard. 332025 12-21-23

3b Schedule A (Form 990) 2023

2a

2b

3a

Yes No

14470418 153424 0198605-00006

Sche	dule A (Form 990) 2023 WHITNEY MUSEUM OF AMERICAN ART			13-1789318	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	izations		
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	Nov. 20, 1970 ( <i>explain in</i>	Part VI). See instr	ructions.
	All other Type III non-functionally integrated supporting organizations mu		•		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current (optiona	
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 (optiona	
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 Y	'ear
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	d Type III supporting org	anization (see	

instructions).

Schedule A (Form 990) 2023

332026 12-21-23

1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	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	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	าร	(iii) Distributable Amount for 2023
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				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	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				
b	Excess from 2020				
C	Excess from 2021				
d	Excess from 2022				
e	Excess from 2023				

Schedule A (Form 990) 2023

**Current Year** 

Section D - Distributions

Schedule A (Form 990) 2023	WHITNEY MUSEUM OF AMERICAN ART	13-1789318 Page <b>8</b>
Part IV, Section A, lines 1 line 1; Part IV, Section D,	rmation. Provide the explanations required by Part II, line 10; 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Pa 8; and Part V, Section E, lines 2, 5, and 6. Also complete this p	Section B, lines 1 and 2; Part IV, Section C, art V, line 1; Part V, Section B, line 1e; Part V,
	, EXPLANATION FOR OTHER INCOME:	
GROSS INCOME FROM FUNDRAISIN	G EVENTS	
2019 AMOUNT: \$ 415,000.		
2020 AMOUNT: \$ 720,000.		
2021 AMOUNT: \$ 144,000.		
2022 AMOUNT: \$ 224,000.		
2023 AMOUNT: \$ 124,000.		
INSURANCE RECOVERY		
2019 AMOUNT: \$ 0.		
2020 AMOUNT: \$ 0.		
2021 AMOUNT: \$ 150,000.		
2022 AMOUNT: \$ 0.		
2023 AMOUNT: \$ 0.		
MISCELLANEOUS INCOME		
2019 AMOUNT: \$ 292,000.		
2020 AMOUNT: \$ 0.		
2021 AMOUNT: \$ 7,700.		
2022 AMOUNT: \$ 8,000.		
2023 AMOUNT: \$ 295,000.		
		Sahadula A (Farm 000) 200

332028 12-21-23

SC		al Financial Statements		OMB No. 154	<u>15-0047</u>	
(Forr	n 990) Complete if the orga Part IV, line 6, 7, 8, 9, 10	nization answered "Yes" on Form 990, ), 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		<b>ZU</b> 2	.3	
	ment of the Treasury A	Attach to Form 990. 00 for instructions and the latest information.	Open to Public Inspection			
	e of the organization		Employer	identification		
	WHITNEY MUSEUM OF AMERICAN			L3-1789318		
Pa	t I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		counts.	Complete if the	9	
			(b) Funds and	l other accour	uts.	
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4						
5	5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds					
	are the organization's property, subject to the organization's			Yes	No	
6	Did the organization inform all grantees, donors, and donor a		•			
	for charitable purposes and not for the benefit of the donor o		-	Vee		
Pa		nanization answered "Yes" on Form 990 Part IV	line 7	Yes	No	
1	Purpose(s) of conservation easements held by the organization					
-	Preservation of land for public use (for example, recrea		orically import	ant land area		
	Protection of natural habitat	Preservation of a certi	ified historic s	tructure		
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form of a co				
	day of the tax year.			t the End of the	Tax Year	
a	Total number of conservation easements		2a			
b			2b			
с С	Number of conservation easements on a certified historic stru Number of conservation easements included on line 2c acqu		2c			
d	on a historic structure listed in the National Register	• • •	2d			
3	Number of conservation easements modified, transferred, rel		<u> </u>	the tax		
	year	, , , , ,	5			
4	Number of states where property subject to conservation eas	sement is located				
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of				
	violations, and enforcement of the conservation easements it			Yes	No No	
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conservation	on easements	during the yea	ar	
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation ea	sements durir	ng the year		
•				ig the your		
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170(h)(4)(B)(i	)			
	and section 170(h)(4)(B)(ii)?			Yes	🗌 No	
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense statem	nent and			
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the					
Dai	organization's accounting for conservation easements. t III Organizations Maintaining Collections of	f Art Historical Treasures or Other S	imilar Ase	ote		
1 4	Complete if the organization answered "Yes" on Form			C13.		
19	If the organization elected, as permitted under FASB ASC 95		ance sheet w	orke		
ia	of art, historical treasures, or other similar assets held for put	· ·				
	service, provide in Part XIII the text of the footnote to its finar					
b	If the organization elected, as permitted under FASB ASC 95		e sheet works	of		
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in furtherance	e of public ser	vice,		
	provide the following amounts relating to these items.					
	(i) Revenue included on Form 990, Part VIII, line 1					
2	If the organization received or held works of art, historical tree		provide			
~	the following amounts required to be reported under FASB A Revenue included on Form 990, Part VIII, line 1	-	\$			
a b	Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X		•			
	Assets included in Form 990, Part X \$ For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990				990) 2023	

LHA	For Paperwork Reduction Act Notice	, see the	Instructions	for Form 9	9
332051	09-28-23				

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Sche	dule D (Form 990) 2023 WHITNEY MUS	SEUM OF AMERICAN	N ART				1	3-1789	9318	Pa	ige <b>2</b>
Par	t III Organizations Maintaining C	ollections of Ar	t, Histo	rical Tre	asures, or	r Other	Similar A	ssets	(contin	ued)	
3	Using the organization's acquisition, accessi	on, and other records	s, check	any of the f	ollowing that	make sig	gnificant use	of its			
	collection items (check all that apply).				C C		-				
а	X Public exhibition	d	I X L	oan or exc	hange progra	am					
b	X Scholarly research	e			51 5						
c	X Preservation for future generations										
4	Provide a description of the organization's co	lections and explain	how the	y further th	e organizatio	n's exem	not ouroose ii	n Part )	an		
5	During the year, did the organization solicit o										
Ŭ	to be sold to raise funds rather than to be ma		,		,			X	Yes		No
Par	t IV Escrow and Custodial Arran								-		110
	reported an amount on Form 990, Pa			ngamzation	answered		0111 000, 1 a	· · · · · ·	10 0, 01		
10	Is the organization an agent, trustee, custodi		hiany for c	ontribution	e or other as	eete not i	included				
Ia									Yes		No
h	on Form 990, Part X?							ட	Tes		NO
D	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing ta	DIE:					Amount		
									Amount		
	Beginning balance										
	Additions during the year										
	Distributions during the year										
	Ending balance						1f		1		1
	Did the organization include an amount on Fe						ty?	L	Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Par	<b>t V</b> Endowment Funds Complete if								() [		
		(a) Current year		ior year	(c) Two year		(d) Three years		(e) Four	-	
1a	Beginning of year balance	439,708,000.		832,000.	481,944	-	371,839,			314,0	
b	Contributions	7,668,000.		657,000.		-	9,199,			530,0	
С	Net investment earnings, gains, and losses	71,791,000.	46,	176,000.	-66,710	0,000.	108,663,	000.	11,	834,0	)00.
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs	24,337,000.	20,	957,000.	15,046	5,000.	7,757,	000.	15,	839,0	)00.
f	Administrative expenses										
g	End of year balance	494,830,000.	439,	708,000.	410,832	2,000.	481,944,	000.	371,	839,0	)00.
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g,	column (a)	) held as:						
а	Board designated or quasi-endowment	11.3500	%								
b	Permanent endowment 57.7500	%	_								
с	Term endowment 30.9000	%									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
3a	Are there endowment funds not in the posse	•	tion that	are held ar	nd administer	ed for the	Э				
	organization by:	5							ſ	Yes	No
	(i) Unrelated organizations?								3a(i)		Х
									3a(ii)		Х
h	If "Yes" on line 3a(ii), are the related organization								3b		
4	Describe in Part XIII the intended uses of the										
Par	t VI Land, Buildings, and Equipm		WINCHEIG	143.							
	Complete if the organization answere		). Part IV.	line 11a. S	ee Form 990	Part X	ine 10.				
			· · ·							( voluo	
	Description of property	(a) Cost or o basis (investn		• •	or other (other)	• •	ccumulated		(d) Booł	value	,
4.	Land	`			,662,000.				21	662,0	100
	Land				,327,000.	1	05 027 000		,	400,0	
	Buildings			420	, 327,000.	1	05,927,000	′•	520,	±00,0	
	Leasehold improvements				000 000		4 600 000		10	100 0	
	Equipment			23	<u>,820,000.</u>		4,692,000	_	тя,	128,0	
	Other		2,000.				2,002,000	·•	254	100 -	0.
Tota	. Add lines 1a through 1e. (Column (d) must e	<u>qual Form 990. Part .</u>	<u>X. line 10</u>	<u>c, column</u>	<u>(B))</u>					190,0	
							Scł	nedule	D (Form	990) (	2023

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## Part VII Investments - Other Securities

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) ALTT. INV.: MULTI-STRATEGY & OTHER	143,115,000.	END-OF-YEAR MARKET VALUE
(B) EQUITY INVESTMENT FUNDS	133,846,000.	END-OF-YEAR MARKET VALUE
(C) PRIVATE EQUITY	63,320,000.	END-OF-YEAR MARKET VALUE
(D) EQUITY LONG/SHORT	34,878,000.	END-OF-YEAR MARKET VALUE
(E) INVESTMENT REDEMPTION RECEIVABLES	4,577,000.	END-OF-YEAR MARKET VALUE
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	379,736,000.	

## Part VIII Investments - Program Related.

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

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

## Part IX Other Assets

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

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

Part X Other Liabilities

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	OPERATING LEASE LIABILITIES	16,466,000.
(3)	ACCRUED PENSION OBLIGATION	368,000.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, line 25, col. (B))	16,834,000.

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

Schedule D (Form 990) 2023

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Sche	dule D (Form 990) 2023 WHITNEY MUSEUM OF AMERICAN ART			13-17	89318 Page <b>4</b>
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With I	Revenue per Ret	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.			
1	Total revenue, gains, and other support per audited financial statements			1	144,126,000.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	25,876,000.		
b	Donated services and use of facilities	2b	245,000.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	. 2d	1,968,000.		
е	Add lines 2a through 2d			2e	28,089,000.
3	Subtract line 2e from line 1			3	116,037,000.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	659,000.		
b	Other (Describe in Part XIII.)	4b	44,000.		
С	Add lines 4a and 4b			4c	703,000.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	116,740,000.
Pa	t XII Reconciliation of Expenses per Audited Financial Statem	nents With	Expenses per R	eturn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 123	a.			
1	Total expenses and losses per audited financial statements			1	91,441,000.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	245,000.		
b	Prior year adjustments	2b			
С	Other losses	<b>2</b> c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	245,000.
3	Subtract line 2e from line 1			3	91,196,000.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	659,000.		
b	Other (Describe in Part XIII.)	. 4b	44,000.		
с	Add lines 4a and 4b			4c	703,000.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	91,899,000.
Pa	t XIII Supplemental Information				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par			; Part X,	line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	ditional inform	nation.		
PART	III, LINE 1A:				
COLI	ECTIONS OF ART, HISTORICAL TREASURES OR OTHER SIMILAR ASSETS:				
THE	MUSEUM HAS AN EXTENSIVE COLLECTION OF ART, INCLUDING PAINTING	GS,			
SCUI	PTURE, PHOTOGRAPHS, DRAWINGS, PRINTS, AND FILMS AND VIDEOS.	ГНЕ			
COLI	ECTION IS MAINTAINED UNDER THE CARE OF THE REGISTRATION DEPAR	RTMENT			
STAF	F AND IS HELD FOR RESEARCH, EDUCATION AND PUBLIC EXHIBITION I	IN			
FURI	HERANCE OF PUBLIC SERVICE, RATHER THAN FOR FINANCIAL GAIN. PF	ROCEEDS			
FROM	THE SALE OF COLLECTION ITEMS ARE USED TO ACQUIRE OTHER ITEMS	5 FOR THE			
COLI	ECTION. THE MUSEUM DOES NOT INCLUDE EITHER THE COST OR THE VA	ALUE OF			

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ITS COLLECTION IN THE STATEMENT OF FINANCIAL POSITION, NOR DOES IT

RECOGNIZE GIFTS OF COLLECTION ITEMS AS REVENUES IN THE STATEMENT OF

ACTIVITIES. SINCE ITEMS ACQUIRED FOR THE COLLECTION BY PURCHASE ARE NOT

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Schedule D (Form 990) 2023

 $14470418\ 153424\ 0198605-00006$ 

# Part XIII Supplemental Information (continued)

CAPITALIZED, THE COST OF THOSE ACQUISITIONS IS REPORTED AS DECREASES IN

NET ASSETS IN THE STATEMENT OF ACTIVITIES.

PART III, LINE 4:

COLLECTIONS OF ART. HISTORICAL TREASURES OR OTHER SIMILAR ASSETS:

THE WHITNEY MUSEUM OF AMERICAN ART SEEKS TO BE THE DEFINING MUSEUM OF THE

20TH & 21ST CENTURY AMERICAN ART. THE MUSEUM COLLECTS, EXHIBITS,

PRESERVES, RESEARCHES AND INTERPRETS ART OF THE UNITED STATES IN THE

BROADCAST GLOBAL, HISTORICAL AND INTERDISCIPLINARY CONTEXTS. AS THE

PREEMINENT ADVOCATE FOR AMERICAN ART, WE FOSTER THE WORK OF LIVING ARTISTS

AT THE CRITICAL MOMENTS IN THEIR CAREERS. THE WHITNEY EDUCATES A DIVERSE

PUBLIC THROUGH DIRECT INTERACTION WITH ARTISTS, OFTEN BEFORE THEIR WORK

HAS ACHIEVED GENERAL ACCEPTANCE.

PART V, LINE 4:

ORGANIZATION'S ENDOWMENT FUNDS:

THE MUSEUM'S ENDOWMENT CONSISTS OF 153 INDIVIDUAL FUNDS ESTABLISHED FOR A

VARIETY OF PURPOSES, PRIMARILY TO SUPPORT THE GENERAL OPERATIONS AND

EXHIBITION PROGRAMS OF THE MUSEUM, AS WELL AS THE SUPPORT OF THE BIENNIAL

EXHIBITION PROGRAM, PERMANENT COLLECTION ACQUISITIONS, AND CURATORIAL

SUPPORT.

PART X, LINE 2:

FIN 48 OVERVIEW

THE MUSEUM FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY

IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. INCLUDING

ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT. THIS

GUIDANCE PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN

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Schedule D (Form 990) 2023

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# ONLY BE RECOGNIZED IN THE FINANCIAL STATEMENTS IF THE POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION. WITHOUT REGARD TO THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED. THE MUSEUM IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE CODE (THE "CODE") SECTION 501(C)(3), THOUGH IT IS SUBJECT TO TAX ON INCOME UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE EXCLUDED BY THE CODE. THE MUSEUM HAS PROCESSES PRESENTLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS; TO IDENTIFY AND REPORT UNRELATED BUSINESS INCOME; TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT HAS NEXUS; AND TO IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS. THE MUSEUM HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN ITS FINANCIAL STATEMENTS. IN ADDITION. THE MUSEUM HAS NOT RECORDED A PROVISION FOR INCOME TAXES. AS IT HAS NO MATERIAL TAX LIABILITY FROM UNRELATED BUSINESS INCOME ACTIVITIES. PART XI, LINE 2D - OTHER ADJUSTMENTS: CHANGE IN POST-RETIREMENT HEALTH AND OTHER BENEFITS OTHER THAN NET PERIODIC 1,909,000. PENSION CHARGES AND SERVICE COST NET PERIODIC PENSION CHARGES OTHER THAN SERVICE COST 59,000. TOTAL TO SCHEDULE D, PART XI, LINE 2D 1,968,000. PART XI, LINE 4B - OTHER ADJUSTMENTS: RECLASSED RESTAURANT EXPENSES TO OFFSET REVENUES 44,000. Schedule D (Form 990) 2023 332055 09-28-23 34 14470418 153424 0198605-00006 2023.05070 WHITNEY MUSEUM OF AMERICA 01986051

(Form 990) 2023	WHITN

WHITNEY MUSEUM OF AMERICAN ART

Part All Supplemental Information (continued)	
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
RECLASSED RESTAURANT EXPENSES TO OFFSET REVENUES	44,000.
	Schedule D (Form 990) 20
332055 09-28-23	

14470418 153424 0198605-00006

Name of the organization  Employer identification number IIIITENER MORENCEN ART  IIIITENER MORENCEN ART IIIIITENER MORENCEN ART IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	Department of the Treasury Internal Revenue Service         Attach to Form 990.         Open to Public           Go to www.irs.gov/Form990         for instructions and the latest information.         Inspection									
Part I         General Information on Activities Outside the United States. Complete if the organization answered 'Yes' on Form S00, Part IV, line 14b.           For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance?         Yes Info           2         For grantmakers. Does the organization animitain records to substantiate the amount of its grants and other assistance?         Yes Info           3         Activities per Region. (The following Part L, line 3 table can be duplicated if additional space is needed).         (9) Floativity listed in (d) (b) type) (such as, fundrating, pro- deminet for and complexes, investments, grants to a service (a) in the region of the region for an intervesion or the region for an intervesion or the region of the regi								-		
Form 980, Part V. line 14b.           1         For grantmakers. Does the organization maintain records to substantistic the amount of its grants and other assistance. If the grantes or assistance, and the selection criteria used to award the grants or assistance outside the United States.           2         For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.           3         Activities per Region. The following Part I, line 3 table can be duplicated if additional space is needed.           (a) Region         (b) Number of (c) Number of (c) Number of (c) Number of (c) Additives conducted in the region of its a program service, investments, grants to ordinario, program services, investments, grants to ordinario, program services, investments, grants to ordinario of service(s) in the region	WHITNEY MUSEUM OF AMERICAN ART 13-1789318									
1       For grantmakers. Describe in organization maintain records to substantiate the amount of its grants and other assistance, mile selection oriteria used to award the grants or assistance?       Image: Construction of the grants or assistance, mile selection oriteria used to award the grants or assistance?       Image: Construction of the grants or assistance, mile selection oriteria used to award the grants or assistance, mile selection oriteria used to award the grants or assistance.       Image: Construction of the grants or assistance, mile selection oriteria used to award the grants or assistance.       Image: Construction of the grants or assistance, mile selection oriteria used to award the grants or assistance, mile selection oriteria used to award the grants or assistance.       Image: Construction of the grants or assistance, mile selection oriteria used to award the grants or assistance.         2       For grantmakers. Describe in Part V the organization's proceedures for monotring the use of its grants and other assistance.       Image: Construction of the grants or assistance, mile selection oriteria used to award the grants or assistance.         3. Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed.)       If Total Selection origination or the region or the assistance, and the region or the regi	Part									
the grantese' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?		Form 990, Part	IV, line 14b.							
United States: 3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed). (a) Region (The following Part I, line 3 table can be duplicated if additional space is needed). (b) Number of offices in the region of the								Yes No		
(a) Region       (b) Number of offices in the region       (c) Number of offices in the region       (c) Number of exployees contractors in the region       (d) Activity listed in (d) is a program service, describe spacific type of service(s) in the region       (f) Total expenditures for and investments in the region         CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARUDA, ARUBA, BAHAMAS,       0       0       INVESTMENTS       79, 268, 982.         EAST ASIA AND THE PACIFIC       0       0       INVESTMENTS       79, 268, 982.         EAST ASIA AND THE PACIFIC       0       0       TOURING EXHIBITION       50, 225.         Image: Caribor of the region       0       0       TOURING EXHIBITION       1         Image: Caribor of the region       0       0       TOURING EXHIBITION       1         Image: Caribor of the region       0       0       TOURING EXHIBITION       1         Image: Caribor of the region       0       0       1       1       1         Image: Caribor of the region       0       0       1       1       1       1         Image: Caribor of the region       0       0       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1		-	scribe in Part V the	e organization's	procedures for monitoring the use of its	grants and ot	her assistance ou	itside the		
Software       in the region       imployees, agents, and agents,	<b>3</b> A									
THE CARIBBEAN - ANTIGUA & BARBUDA, ANUBA, BAHAMAS,     0     0     INVESTMENTS     179,268,982.       EAST ASIA AND THE PACIFIC     0     0     FOURING EXHIBITION     50,225.       Image: Constraint of the state of the stat		(a) Region	offices	agents, and independent contractors	(by type) (such as, fundraising, pro- gram services, investments, grants to	is a pro describe	gram service, specific type	expenditures for and investments		
ANTIGUA & BARBUDA, ARUBA, BARAMAS, 0 0 INVESTMENTS	CENTR	AL AMERICA AND								
ARUBA, BAHAMAS,         0         0         INVESTMENTS         179,268,982.           EAST ASIA AND THE PACIFIC         0         0         TOURING EXHIBITION         50,225.           Image: Image										
EAST ASIA AND THE PACIFIC 0 0 POURING EXHIBITION 50,225.										
PACIFIC         0         0         POURING EXHIBITION         50,225.           Image: Constraint of the state of	ARUBA	, BAHAMAS,	0	0	INVESTMENTS			179,268,982.		
PACIFIC         0         0         POURING EXHIBITION         50,225.           Image: Constraint of the state of										
PACIFIC         0         0         POURING EXHIBITION         50,225.           Image: Constraint of the state of	FAST	ASTA AND THE								
3 a Subtotal         0         0         79,319,207.           b Total from continuation sheets to Part I         0         0         0.			0	0	TOURING EXHIBITION			50 225.		
b     Total from continuation sheets to Part I     0     0     0.       c     Totals (add lines 3a     0     0     0.										
b     Total from continuation sheets to Part I     0     0     0.       c     Totals (add lines 3a     0     0     0.										
b     Total from continuation sheets to Part I     0     0     0.       c     Totals (add lines 3a     0     0     0.										
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b     Total from continuation sheets to Part I     0     0     0.       c     Totals (add lines 3a     0     0     0.										
b     Total from continuation sheets to Part I     0     0     0.       c     Totals (add lines 3a     0     0     0.										
b     Total from continuation sheets to Part I     0     0     0.       c     Totals (add lines 3a     0     0     0.										
b     Total from continuation sheets to Part I     0     0     0.       c     Totals (add lines 3a     0     0     0.										
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b     Total from continuation sheets to Part I     0     0     0.       c     Totals (add lines 3a     0     0     0.										
b     Total from continuation sheets to Part I     0     0     0.       c     Totals (add lines 3a     0     0     0.										
sheets to Part I         0         0         0.         0.           c Totals (add lines 3a         0	<b>3 a</b> S	Subtotal	0	0				179,319,207.		
c Totals (add lines 3a				_						
			0	0				0.		
			0	n				79 319 207		

**Statement of Activities Outside the United States** 

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

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OMB No. 1545-0047

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

LHA 332071 11-29-23

SCHEDULE F (Form 990)

Schedule F (Form 990) 2023

# Part II 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.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	<b>(h)</b> Description of noncash assistance	<b>(i)</b> 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

3 Enter total number of other organizations or entities .

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023

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Page 3

Т

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

(a) Type of grant or assistance	<b>(b)</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)

Schedule F (Form 990) 2023

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)	X Yes	No
2	Did the organization have an interest in a foreign trust during the tax year? <i>If</i> "Yes," <i>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)</i>	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "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? <i>If</i> "Yes," <i>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)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," <i>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)</i>	X Yes	No No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>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)</i>	Yes	X No

Schedule F (Form 990) 2023

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# 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.

FORM 990, SCHEDULE F, PART IV:

THE MUSEUM INVESTS IN DOMESTIC AND FOREIGN INVESTMENT VEHICLES THAT MAY

OWN AN INTEREST IN A FOREIGN CORPORATION, PASSIVE FOREIGN INVESTMENT

COMPANY, OR FOREIGN PARTNERSHIP. NEVERTHELESS, THE MUSEUM'S INVESTMENT

ACTIVITIES MAY NOT REACH THE THRESHOLDS REQUIRED FOR FILING THE FORMS

926, 5471, 8621 OR 8865. TO THE EXTENT SUCH A FORM WAS COMPLETED, IT

HAS BEEN FILED WITH THE ORGANIZATION'S FORM 990-T.

Schedule F (Form 990) 2023

332075 11-29-23

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctivit	ties	OMB No. 1545-0047		
(Form 990)	Complete if the	2023								
Department of the Treasury Internal Revenue Service	Attach to Form 990 or Form 990-EZ. Open to Public Inspection									
Name of the organization	do to www.iis.gowr of instructions and the latest information.									
Ũ	WHITNEY MUS	SEUM OF AMERICAN ART					13-17893			
Part I Fundrais	ing Activities.	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, lii	ne 17.	. Form 990-E	Z filers are not		
·	required to complete this part.									
<ul> <li>1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.</li> <li>a Mail solicitations</li> <li>b Internet and email solicitations</li> <li>c Phone solicitations</li> <li>d In-person solicitations</li> <li>g Special fundraising events</li> <li>d In-person solicitations</li> <li>g Special fundraising events</li> <li>d In-person solicitations</li> <li>f Solicitation of ficers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?</li> <li>b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be</li> </ul>										
compensated at le	ast \$5,000 by the	organization.	·							
(i) Name and addres or entity (fund		(ii) Activity	(iii) C fundrai have cus or contri contributi		(iv) Gross receipts to ( from activity		mount paid retained by undraiser ed in col. <b>(i)</b>	(vi) Amount paid to (or retained by) organization		
			Yes	No						
Total										
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.										

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

Schedule G (Form 990) 2023

LHA 332081 09-13-23

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		GALA AND STUDIO		NONE	(add col. (a) through
		PARTY	ART PARTY		col. (c)
		(event type)	(event type)	(total number)	
Hevenue	Gross receipts	5,405,000.	295,000.		5,700,000.
2	2 Less: Contributions	5,348,000.	228,000.		5,576,000.
	Gross income (line 1 minus line 2)	57,000.	67,000.		124,000.
4	Cash prizes				
	5 Noncash prizes				
	Rent/facility costs	173,000.	64,000.		237,000
	7 Food and beverages	196,000.	66,000.		262,000.
5  ع	B Entertainment	3,000.	15,000.		18,000.
9		507,000.	72,000.		579,000.
10	Direct expense summary. Add lines 4 through	n 9 in column (d)			1,096,000.
11	Net income summary. Subtract line 10 from I	ine 3. column (d)			-972,000

\$15,000 on Form 990-EZ, line 6a.

Revenue		<b>(a)</b> Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Reve	1 Gross revenue				
ss	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
lirect E	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	└── Yes % └── No	└── Yes % └── No	Yes %	
	7 Direct expense summary. Add lines 2 through	5 in column (d)			
	8 Net gaming income summary. Subtract line 7	from line 1, column (d)			
	Enter the state(s) in which the organization conduct Is the organization licensed to conduct gaming ac If "No," explain:	tivities in each of these s	states?		
	Were any of the organization's gaming licenses real If "Yes," explain:				Yes No
33204	  32_09-13-23			Sche	dule G (Form 990) 2023

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Sch	edule G (Form 990) 2023	WHITNEY MUSEUM OF AMERICAN ART	13-1789318	Page 3
11		aming activities with nonmembers?	Yes	No
12		eficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?		Yes	No No
	Indicate the percentage of gamin			
				%
				%
14	Enter the name and address of th	e person who prepares the organization's gaming/special events books and records:		
	Name			
	Address			
	Address			
15a	Does the organization have a con	tract with a third party from whom the organization receives gaming revenue?	Yes	🗌 No
	5	1, 5, 5, 5, 5,		
k	If "Yes," enter the amount of gam	ing revenue received by the organization \$ and the amou	unt	
	of gaming revenue retained by the	e third party \$		
c	If "Yes," enter name and address	of the third party:		
	Name			
	Address			
16	Gaming manager information:			
10	Gaming manager mormation.			
	Name			
	Gaming manager compensation	\$		
	Description of services provided			
	Director/officer	Employee Independent contractor		
17	Mandatory distributions:			
a	Is the organization required under	r state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?		Yes	No No
k	Enter the amount of distributions	required under state law to be distributed to other exempt organizations or spent in t	the	
Da	organization's own exempt activit rt IV Supplemental Infor	ties during the tax year \$		0, 40,
Fd		mation. Provide the explanations required by Part I, line 2b, columns (iii) and (v); a	nd Part III, lines 9,	9b, 10b,
	150, 15C, 16, and 17D, as	s applicable. Also provide any additional information. See instructions.		
_				
3320	83 09-13-23		Schedule G (Form	n 990) 2023
		43		

Part IV	Supplemental Inform	nation (continued)		
332084 04-01-2	23			Schedule G (Form 990)

44 2023.05070 WHITNEY MUSEUM OF AMERICA 01986051

SCHEDULE I		G	arants and Oth	er Assistan	ce to Organ	izations,		OMB No. 1545-0047
(Form 990)		Go	vernments, an ete if the organizatio	d Individual	ls in the Ŭni	ted States		2023
Department of the Treasury		Comple		Attach to Forn		1 1 1 V, III C Z I OI ZZ.		Open to Public
Internal Revenue Service			Go to www.irs	.gov/Form990 for		ation.		Inspection
Name of the organizat	ion			•				Employer identification number
	WHITNEY MUSEU	M OF AMERICAN	ART					13-1789318
Part I General I	nformation on Grants a	nd Assistance						
-	zation maintain records t		amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selecti	
criteria used to a	award the grants or assis	tance?						X Yes No
	IV the organization's pro							
	d Other Assistance to I hat received more than \$					anization answered "Y	es" on Form 990, Part	t IV, line 21, for any
1 (a) Name and ad	ddress of organization vernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
						other		
-				1				

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

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

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

Schedule I (Form 990) 2023

Schedule I (Form 990) 2023

WHITNEY MUSEUM OF AMERICAN ART

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
	110	506 000			
TERNS	116	526,000.	0.		
art IV Supplemental Information. Provide the information red	uired in Part I, lin	l le 2; Part III, column	(b); and any other ac	l Iditional information.	
	·		· · · ·		
RT I, LINE 2:					
HE WHITNEY MUSEUM'S INTERN PROGRAM OFFERS TRAININ	G AND DIRECT	EXPERIENCE			

WORKING IN ONE OF NEW YORK CITY'S MOST EXCITING MUSEUMS. INTERNS ARE PLACED

IN DEPARTMENTS ACROSS THE MUSEUM WHERE THEY ASSIST PROFESSIONAL STAFF,

INTERACT WITH THE PUBLIC, CONDUCT RESEARCH, AND LEARN ABOUT MODERN AND

CONTEMPORARY AMERICAN ART. INTERNS ALSO GAIN VALUABLE TRAINING, SKILLS, AND

WORK EXPERIENCE AS WELL AS AN OPPORTUNITY TO BUILD A NETWORK OF

PROFESSIONAL CONTACTS. INTERNS ARE ASSIGNED TO A SPECIFIC MUSEUM DEPARTMENT

FOR THE DURATION AND ARE PARTNERS WITH A MENTOR FOR THE DURATION OF THEIR

Part IV Supplemental Information

INTERNSHIP. THE WHITNEY MUSEUM OFFERS SUMMER AND ACADEMIC YEAR INTERNSHIPS.

THE SUMMER INTERNSHIP IS A FULL-TIME, PAID, NINE-WEEK SESSION PRIMARILY FOR

UNDERGRADUATE STUDENTS. THE PROGRAM INCLUDES TRAINING, DIRECT WORK

EXPERIENCE, PROFESSIONAL DEVELOPMENT, AND A WEEKLY SPEAKER SERIES. THE

ACADEMIC YEAR INTERNSHIP PROGRAM OFFERS A SEMESTER LONG INTERNSHIP FOR

UNDERGRADUATE AND GRADUATE STUDENTS CURRENTLY ENROLLED IN AN ACCREDITED

ACADEMIC PROGRAM. THE MUSEUM IS NOT REQUIRED TO UNDERTAKE ANY MONITORING ON

THE USE OF THE FUNDS, SINCE ALL FELLOWSHIP RECIPIENTS RECEIVE THE AWARD IN

EXCHANGE FOR THE INTERN SERVICES RENDERED.

Schedule I (Form 990)

332291 04-01-23

SC	HEDULE J	Compensation Information		OMB No.	1545-004	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	27	2
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		LU	Ľυ	,
	tment of the Treasury	Attach to Form 990.		Open to	Publ	
	al Revenue Service ne of the organizatior	Go to www.irs.gov/Form990 for instructions and the latest information.	Employer ide			
	ie er ute ergamzanet	WHITNEY MUSEUM OF AMERICAN ART	13-178			
Pa	rt I Question	s Regarding Compensation	<u> </u>			
					Yes	No
1a	Check the appropri-	ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c	harter travel X Housing allowance or residence for perso	nal use			
	Travel for com	panions Payments for business use of personal re	sidence			
	Tax indemnific	ation and gross-up payments Health or social club dues or initiation fee	S			
	Discretionary s	spending account Personal services (such as maid, chauffer	ır, chef)			
b	•	on line 1a are checked, did the organization follow a written policy regarding payment or				
		rovision of all of the expenses described above? If "No," complete Part III to explain		1b	Х	
2	Did the organization	require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2	Х	
_						
3		y, of the following the organization used to establish the compensation of the organization's				
		ctor. Check all that apply. Do not check any boxes for methods used by a related organizati	on to			
		tion of the CEO/Executive Director, but explain in Part III.				
	X Compensation					
		ompensation consultant				
	X Form 990 of of	ther organizations	ommittee			
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 re					
а	-	e payment or change-of-control payment?		4a		x
		eive payment from a supplemental nonqualified retirement plan?		41	Х	
		eive payment from an equity-based compensation arrangement?				x
		es 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 of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	'n			
	contingent on the re	evenues of:				
а	The organization?			5a		x
		ation?		5b		X
		r 5b, describe in Part III.				
6	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n			
	contingent on the n	et earnings of:				
а	The organization?			<u>6a</u>		X
b	Any related organiz	ation?		6b		X
		r 6b, describe in Part III.				
7		n Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
		es 5 and 6? If "Yes," describe in Part III		7	Х	<b> </b>
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th	ıe			
				8		X
9		d the organization also follow the rebuttable presumption procedure described in				
	Regulations section			9		<u> </u>
For	Paperwork Reducti	on Act Notice, see the Instructions for Form 990.	Schedule	J (Forr	n 990)	2023

LHA 332111 11-06-23

13-1789318

#### 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) ADAM D. WEINBERG	(i)	806,465.	1,500,000.	582,457.	21,350.	1,525.	2,911,797.	232,436.
ALICE PRATT BROWN DIR. (THRU 10/2023)	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SCOTT ROTHKOPF	(i)	535,337.	250,000.	0.	21,350.	10,491.	817,178.	0.
ALICE PRATT BROWN DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) AMY ROTH	(i)	411,184.	0.	0.	21,350.	27,789.	460,323.	0.
CO-CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) IDEHEN ARUEDE	(i)	415,782.	0.	0.	21,350.	18,727.	455,859.	0.
DEPUTY DIRECTOR	(ii)	٥.	0.	0.	0.	0.	0.	0.
(5) PAMELA BESNARD	(i)	404,998.	0.	0.	21,350.	18,727.	445,075.	0.
CHIEF ADVANCEMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) NICHOLAS S. HOLMES	(i)	269,105.	10,000.	0.	20,125.	34,686.	333,916.	0.
GENERAL COUNSEL/ASSISTANT SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ANGELA RUBIN	(i)	293,233.	0.	0.	0.	27,789.	321,022.	0.
CHIEF COMMS AND CONTENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) MARILOU AQUINO	(i)	245,457.	0.	0.	17,938.	27,789.	291,184.	0.
CHIEF PHILANTHROPIC OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) BRIDGET MENDOZA	(i)	209,582.	10,000.	0.	15,445.	27,789.	262,816.	0.
CHIEF INFORMATION OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) EUNICE LEE	(i)	223,406.	10,000.	0.	15,871.	11,491.	260,768.	0.
DIR., STRG. PARTNERSHIPS & EVENTS	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) JENNIFER LEVENTHAL	(i)	210,787.	10,000.	0.	13,267.	10,081.	244,135.	0.
CHIEF OF STAFF (THRU 12/2023)	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) MAURA HEFFNER	(i)	181,087.	0.	0.	12,721.	27,789.	221,597.	0.
CHIEF EXHIBITIONS & COLLECTIONS OFF	(ii)	Ο.	0.	0.	0.	0.	0.	0.
(13) CHRISTY L. PUTNAM - ASSO. DIR.	(i)	156,480.	0.	0.	8,782.	5,541.	170,803.	0.
EXHIBITIONS & COLLECTIONS (THRU 7/23	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2023

#### Part III Supplemental Information

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

#### PART I, LINE 1A:

HOUSING ALLOWANCE:

THE WHITNEY MUSEUM PROVIDED A HOUSING ALLOWANCE TO ADAM D. WEINBERG DURING

HIS TENURE AS THE ALICE PRATT BROWN DIRECTOR PURSUANT TO THE TERMS OF HIS

WRITTEN EMPLOYMENT CONTRACT. TO THE EXTENT THAT HOUSING WAS TAXABLE, IT IS

INCLUDED IN HIS TAXABLE WAGES AND REPORTED IN SCHEDULE J, PART II, COLUMN

B(III).

PART I, LINE 4B:

NON-QUALIFIED RETIREMENT PLAN:

IN CALENDAR YEAR 2023, ADAM D. WEINBERG RECEIVED A DISTRIBUTION FROM THE

DEFERRED COMPENSATION PLAN IN THE AMOUNT OF \$232,436. THIS AMOUNT WAS

PREVIOUSLY REPORTED AS DEFERRED COMPENSATION ON EARLIER FORMS 990; IT IS

REPORTED IN BOTH COLUMNS (B)(III) AND (F) IN THIS YEAR'S 990 TO REFLECT

THAT THE COMPENSATION IS BEING REPORTED AGAIN IN THE YEAR IT IS TAXED.

PART I, LINE 7:

AMOUNTS REPORTED IN COLUMN B(II) REPRESENT BONUSES EMPLOYEES RECEIVED IN

CALENDAR YEAR 2023 TO RECOGNIZE THEM FOR MEETING CERTAIN PERFORMANCE

#### Part III Supplemental Information

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

RELATED OBJECTIVES.

IN RECOGNITION OF HIS 20 YEARS OF SERVICE TO THE WHITNEY MUSEUM OF AMERICAN

ART, AND ACCOMPLISHING KEY STRATEGIC GOALS, OUTGOING ALICE PRATT BROWN

DIRECTOR, ADAM WEINBERG, RECEIVED A ONE-TIME BONUS IN CALENDAR YEAR 2023.

THIS BONUS WAS GRANTED BY THE BOARD OF DIRECTORS, IN ITS SOLE DISCRETION,

AND MEMORIALIZED IN COMPENSATION COMMITTEE MEETING MINUTES.

Schedule J (Form 990) 2023

Departme Internal Re	evenue Service	Attach to Form 9	explanations, and 90. Go to www.irs.				est informatio	n.				Open t Inspec	to Publiction	lic
Name o	of the organization								Emp	loyer	identi	ficatio	on num	ber
	WHITNEY MUSEUM	OF AMERICAN ART	1							13-17	789318	8		
Part I	Bond Issues			1		r								
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issue	d (e) Issu	le price	(f) Descript	ion of purpose	<b>(g)</b> De	efeased		ı behalf ssuer	f <b>(i)</b> Po finan	
									Vos	No		No	Yes	
THI	E TRUST FOR CULTURAL RESOURCES	OF							103		103			
A THI	E CITY OF NEW YORK	13-1789318	649717VM4	01/07/21	101,2	13,818.	SEE PART V	BELOW		x		х		x
						,								[
в														l
С														ĺ
														1
D														1
Part II	Proceeds													
					Α		В	С				D		
<u>1</u> A	Amount of bonds retired													
<b>2</b> A	Mount of bonds legally defeased													
<b>3</b> T	otal proceeds of issue			10	1,213,818.									
4 0	Gross proceeds in reserve funds													
<b>5</b> C	Capitalized interest from proceeds													
<b>6</b> P	Proceeds in refunding escrows				27,145.									
<b>7</b> Is	ssuance costs from proceeds				859,470.									
<b>8</b> C	Credit enhancement from proceeds													
	Vorking capital expenditures from proceed													
	Capital expenditures from proceeds				0,354,348.									
	Other spent proceeds													
	Other unspent proceeds													
<b>13</b> Y	ear of substantial completion				2021			ļ						
				Yes	No	Yes	No	Yes	No		Yes	$\rightarrow$	No	
	Vere the bonds issued as part of a refundir	•												
	f issued prior to 2018, a current refunding i			X				┨───┤─				$\rightarrow$		
	Vere the bonds issued as part of a refundir	-												
	ssued prior to 2018, an advance refunding				X			┨───┤─				+		
	las the final allocation of proceeds been m			X				┨───┤─				+		
<b>17</b> D	Does the organization maintain adequate b	ooks and records to s	upport the											

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,

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

Schedule K (Form 990) 2023

OMB No. 1545-0047

2023

final allocation of proceeds?

SCHEDULE K

(Form 990)

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## Schedule K (Form 990) 2023 WHITNEY MUSEUM OF AMERICAN ART

13	-17	893	318

Page 2

Part III Private Business Use								
_		۹		β.		ç		<u>p</u>
1 Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
which owned property financed by tax-exempt bonds?		x						
2 Are there any lease arrangements that may result in private business use of								
bond-financed property?	Х							
3a Are there any management or service contracts that may result in private								
business use of bond-financed property?	Х							
<b>b</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?	Х							
c Are there any research agreements that may result in private business use of								
bond-financed property?		x						
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?								
4 Enter the percentage of financed property used in a private business use by entities				1		1		
other than a section 501(c)(3) organization or a state or local government		%		%		%		
5 Enter the percentage of financed property used in a private business use as a		/0		/0		/0		
result of unrelated trade or business activity carried on by your organization,								
another section 501(c)(3) organization, or a state or local government		%		%		%		
		<u>%</u>		%		%		
<ul> <li>6 Total of lines 4 and 5</li> <li>7 Does the bond issue meet the private security or payment test?</li> </ul>		70 X		70		70		
<b>8a</b> Has there been a sale or disposition of any of the bond-financed property to a non-		x						
governmental person other than a 501(c)(3) organization since the bonds were issued?		А						
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or								
disposed of		%		%		%		<u> </u>
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								
sections 1.141-12 and 1.145-2?								<b> </b>
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?	Х							
Part IV Arbitrage								
		<b>A</b>		B		C		D
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?								T
a Rebate not due yet?	Х							<b> </b>
b Exception to rebate?		X						<b> </b>
c No rebate due?		Х						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
performed								<b></b>
3 Is the bond issue a variable rate issue?		х						

## Schedule K (Form 990) 2023 WHITNEY MUSEUM OF AMERICAN ART

13-1789318
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Page 3

Part IV Arbitrage (continued)					1			
	<i>F</i>	-	E					
<b>4a</b> Has the organization or the governmental issuer entered into a qualified	Yes	No X	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		Δ						
b Name of provider	_				+		-	
c Term of hedge	_				+	1		
d Was the hedge superintegrated?	_				+			
e Was the hedge terminated?	_	x						
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Δ						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		x						
6 Were any gross proceeds invested beyond an available temporary period?		Α						
7 Has the organization established written procedures to monitor the requirements of section 148?		х						
Part V Procedures To Undertake Corrective Action		21						
	A	<u>،</u>	E	2		C	c	<u>,                                     </u>
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	103		103		103		103	
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?	x							
Part VI Supplemental Information. Provide additional information for responses to question	is on Schedule	K. See instru	uctions.		1			
SCHEDULE K, SUPPLEMENTAL INFORMATION:								
IN JANUARY 2021, THE TRUST FOR CULTURAL RESOURCES OF THE CITY OF NEW								
YORK (THE "TRUST") ISSUED SERIES 2021 REFUNDING REVENUE BONDS PURSUANT								
TO THE REFUNDING REVENUE BOND RESOLUTION (WHITNEY MUSEUM OF AMERICAN								
ART), AS SUPPLEMENTED BY THE SERIES 2021 RESOLUTION, EACH ADOPTED BY								
THE TRUST ON DECEMBER 7, 2020, THE PROCEEDS OF WHICH HAVE BEEN LOANED								
TO THE MUSEUM PURSUANT TO A LOAN AGREEMENT DATED AS OF JANUARY 1, 2021								
BY AND BETWEEN THE MUSEUM AND THE TRUST. SUCH PROCEEDS HAVE BEEN								
APPLIED TO THE REFINANCING OF THE MUSEUM'S 2011 REVENUE BONDS WHICH								
WERE USED TO FINANCE THE MUSEUM'S NEW DOWNTOWN FACILITY LOCATED IN THE								
MEATPACKING DISTRICT IN MANHATTAN, NEW YORK.								
SCHEDULE K, PART II, LINE 1:								
THE MUSEUM'S TAX-EXEMPT BOND IS AN INTEREST-ONLY BOND; THE MUSEUM WILL								
BE REQUIRED TO REPAY THE BOND IN FULL IN THE YEAR ENDING JUNE 30, 2032.								
3CHEDULE K, PART III, LINE 2:								
SCHEDULE K, PART III, LINE 2: THE MUSEUM ENTERS INTO VARIOUS LICENSE AGREEMENTS WHICH ARE ALLOCATED								

## SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

**Open to Public** 

Inspection

23

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.

Department of the Treasury Internal Revenue Service

## Employer identification number

Name of the organization

\_\_\_\_\_

13	8-17	893	18
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20

WHITNEY MUSEUM OF AMERICAN ART

Par	tl	Ту	pes of Property							
				(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermin	•	s
1	Art - Wo	nrks	s of art	x	18	<u> </u>	N/A			
2			ical treasures							
2			onal interests							
4										
			publications							
5			nd household goods							
6			other vehicles							
7			planes							
8			property		41	F 120 000				
9			- Publicly traded		41	5,138,000.	FAIR MARKET VALU	E		
10			- Closely held stock							
11	Securiti trust int		- Partnership, LLC, or ests							
12	Securiti	ies	- Miscellaneous							
13	Qualifie	d c	onservation contribution -							
	Historic	; str	ructures							
14	Qualifie	d c	onservation contribution - Other							
15	Real es	tate	e - Residential							
16	Real es	tate	e - Commercial							
17			e - Other							
18			s							
19			ntory							
20			medical supplies							
21										
22			artifacts							
23			specimens							
24			cal artifacts							
25	Other	(	LAPTOPS	) X	34	31,000.	FAIR MARKET VALU	Έ		
26	Other	(	FURNITURE	) X	2	26,000.	FAIR MARKET VALU	Έ		
27	Other	(		ý						
28	Other	(		ý						
29		r of	Forms 8283 received by the orga	anization durin	the tax vear for c	ontributions	•			
			he organization completed Form						18	
				,, _	g				Yes	No
30a	Durina	the	year, did the organization receive	e by contributio	on any property rep	orted in Part I, lines 1 throug	ih 28. that it			
			for at least 3 years from the date							
			rposes for the entire holding peri-					30a		x
h		·	escribe the arrangement in Part II					000		
31	,		rganization have a gift acceptance		auires the review (	of any nonstandard contribut	tions?	31	х	
			rganization hire or use third parti					- 31		<u> </u>
	contribu	utio	ns?		•			32a	x	
			escribe in Part II.							
33	If the or	rgar	nization didn't report an amount i	n column (c) fo	r a type of property	/ for which column (a) is cheo	cked,			
			n Part II.							
			Paduation Act Nation and the L	naturetiana fa	- Farm 000		Sebedule M	A (	- 000	0000

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

Schedule M (Form 990) 2023

LHA 332141 09-11-23

Schedule M (Form 990) 2023 WHITNEY MUSEUM OF AMERICAN ART

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.

TO THE EXTENT THE MUSEUM RECEIVES DONATIONS OF SECURITIES OR OTHER

INVESTMENT ASSETS, IT CONVERTS THOSE ASSETS, INTO CASH. IN ADDITION,

THE MUSEUM OCCASIONALLY COMMISSIONS LIMITED EDITION WORKS OF ART THAT

WILL BE SOLD TO SUPPLEMENT THE MUSEUM'S FUNDRAISING EFFORTS. THE MUSEUM

WILL ENGAGE THIRD PARTY VENDORS TO SELL THESE WORKS OF ART.

SCHEDULE M, LINE 33:

NO AMOUNT IS REPORTED ON FORM 990, PART VIII, STATEMENT OF REVENUE,

LINE 1G, BECAUSE THE WHITNEY DOES NOT CAPITALIZE ITS COLLECTIONS, AS

PERMITTED UNDER GENERALLY ACCEPTED ACCOUNTING PRINCIPLES.

Schedule M (Form 990) 2023

13-1789318

332142 09-11-23

SCHEDULE O (Form 990)	Supplemental Information to Form 990 or 99 Complete to provide information for responses to specific questions or Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ.		2023 Open to Public
Department of the Treasury Internal Revenue Service	Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.		Inspection
Name of the organization	WHITNEY MUSEUM OF AMERICAN ART		identification number 789318
FORM 990, PART III	, LINE 1 (ORGANIZATION'S MISSION CONTINUED):		
AS THE PREEMINENT	ADVOCATE FOR AMERICAN ART, WE FOSTER THE WORK OF		
LIVING ARTISTS AT	CRITICAL MOMENTS IN THEIR CAREERS. THE WHITNEY		
EDUCATES A DIVERSE	PUBLIC THROUGH DIRECT INTERACTION WITH ARTISTS,		
OFTEN BEFORE THEIR	WORK HAS ACHIEVED GENERAL ACCEPTANCE.		
FORM 990, PART III	, LINE 4A, DESCRIPTION OF PROGRAM SERVICE:		
HAROLD COHEN: AARO	N (FEBRUARY 3, 2024 - MAY 19, 2024); WHITNEY BIENNIAL		
2024: BETTER THAN	THE REAL THING (MARCH 20, 2024 - AUGUST 11, 2024);		
AND WANDA GG'S WOR	LD (MARCH 28, 2024 - DECEMBER 2, 2024).		
FY24 PERFORMANCES	AT THE MUSEUM INCLUDED: DELIA BEATRIZ: THE LONG COUNT		
(APRIL 27 - APRIL	28, 2024); SARAH HENNIES: MOTOR TAPES (JUNE 8, 2024),		
AND HOLLAND ANDREW	S: SPEAKER (JUNE 29, 2024 - JULY 1, 2024).		
FY24 FILM SCREENIN	GS AT THE MUSEUM INCLUDED: SPEAKING IN CAMOUFLAGE:		
MADELEINE HUNT-EHR	LICH CURATED BY GREG DE CUIR JR. (APRIL 12, 2024);		
THE LAND WANTS YOU	CURATED BY ASINNAJAQ (MAY 3, 2024) AND DEAR GHOST,		
IF A MEMORY IS FAL	SE DOES IT MEAN IT DOES NOT HAVE REAL CONSEQUENCES?		
CURATED BY KORAKRI	F ARNANONDCHAI (JUNE 21, 2024).		
AN ONGOING SERIES	OF OUTDOOR ART SHOWN ACROSS GANSEVOORT STREET FROM		
THE MUSEUM HAD TWO	INSTALLATIONS: ROSE B. SIMPSON AND RAZELLE BENALLY:		
ENCOUNTER (SEPTEMB	ER 20, 2023 - MARCH 29, 2024); AND WHITNEY BIENNIAL		
2024: EVEN BETTER	THAN THE REAL THING, PEOPLE WHO STUTTER CREATE (JIA		
BIN, DELICIA DANIE	LS, JJJJJEROME ELLIS, CONOR FORAN, KRISTEL KUBART):		
	ATE TIME (MARCH 20, 2024 - AUGUST 25, 2024).	Cab-	
LHA 332211 11-14-23	on Act Notice, see the Instructions for Form 990 or 990-EZ.	Sche	dule O (Form 990) 2023

57 2023.05070 WHITNEY MUSEUM OF AMERICA 01986051

ame of the organization	Employer identification numb
WHITNEY MUSEUM OF AMERICAN ART	13-1709310
N FY24, THE WHITNEY COMMISSIONED FOUR DIGITAL WORKS TO ADD TO ITS	
RTPORT SERIES, INCLUDING AURIEA HARVEY: SITE 1 (MARCH 3, 2023 -	
NGOING); NANCY BAKER CAHILL: CENTO (OCTOBER 3, 2023 - ONGOING); AND	
UNRISE/SUNSET: PETER BURR: SUNSHINE MONUMENT (JULY 25, 2023 -	
EPTEMBER 19, 2024); AND HOLLY HERNDON AND MAT DRYHURST: XHAIRYMUTANTX	
MARCH 20, 2024 - ONGOING).	
HE FOLLOWING THREE EXHIBITIONS TOURED NATIONALLY: AT THE DAWN OF A NEW	
GE (NORTON MUSEUM OF ART, WEST PALM BEACH, FL, MARCH 18, 2023 - JULY	
5, 2023); LABYRINTH OF FORMS (SONOMA VALLEY MUSEUM OF ART, SONOMA, CA,	
AY 13, 2023 - SEPTEMBER 3, 2023); AND JAUNE QUICK-TO-SEE SMITH (MODERN	
RT MUSEUM OF FORT WORTH, FORT WORTH, TX, OCTOBER 15, 2023 - JANUARY	
2, 2024, & SEATTLE ART MUSEUM, SEATTLE, WA, FEBRUARY 29, 2024 - MAY	
2, 2024). ONE EXHIBITION TOURED INTERNATIONALLY: EDWARD HOPPER'S NEW	
ORK (SEOUL MUSEUM OF ART, SEOUL, SOUTH KOREA, APRIL 20, 2023 - AUGUST	
0, 2023).	
DRM 990, PART III, LINE 4B, DESCRIPTION OF PROGRAM SERVICE:	
ND RELEVANT FOR TODAY AND THE FUTURE. DURING FY24, THE WHITNEY ADDED	
05 NEW WORKS TO THE COLLECTION, INCLUDING WORKS BY 59 ARTISTS ENTERING	
HE COLLECTION FOR THE FIRST TIME.	
HE WHITNEY CONTINUES TO REFINE AND EXPERIMENT WITH ITS STRATEGIES FOR	
ISPLAYING MORE OF THE COLLECTION WITHIN ITS GALLERY SPACES. THE	
SULTING COLLECTION DISPLAYS CREATE THEMATIC, ART HISTORICAL CONTEXTS	
ND COUNTERPOINTS TO THE ONGOING SPECIAL EXHIBITIONS PROGRAM AND	
XPLORE HOW THE INSTITUTION CAN CONTRIBUTE TO NEW NARRATIVES ABOUT	
MERICAN CULTURE AND HISTORY. IN AUGUST OF 2023, THE WHITNEY OPENED	

Name of the organization WHITNEY MUSEUM OF AMERICAN ART	Employer identification number 13-1789318
TRUST ME, AN EXHIBITION OF PHOTOGRAPHIC WORKS DRAWN FROM THE WHITNEY'S	
COLLECTION. THE EXHIBITION EXPLORED THEMES OF INTIMACY AND	
VULNERABILITY ALONGSIDE THE INHERENT PRECARITY AND UNSTABLE NATURE OF	
PHOTOGRAPHY AS A MEDIUM. IN FEBRUARY OF 2024, THE WHITNEY OPENED HAROLD	
COHEN: AARON, WHICH TRACED THE EVOLUTION OF THE EARLIEST ARTIFICIAL	
INTELLIGENCE PROGRAM FOR ARTMAKING. THE SHOW WAS DRAWN ENTIRELY FROM	
THE WHITNEY'S COLLECTION, INCLUDING WORKS ON PAPER, PAINTINGS, AND THE	
AARON SOFTWARE DEVELOPED BY COHEN. DURING FY24, THE WHITNEY ALSO	
COMMISSIONED AND ACQUIRED TWO SITE SPECIFIC WORKS WHICH ARE CURRENTLY	
ON DISPLAY IN THE MUSEUM'S DINING SPACES. NOURISH BY DYANI WHITE HAWK	
APPEARS IN THE 8TH FLOOR STUDIO BAR, WHILE NEW POETRY BY RASHID JOHNSON	
FEATURES PROMINENTLY IN THE FIRST-FLOOR RESTAURANT, FRENCHETTE BAKERY	
AT THE WHITNEY.	
WORK WAS ONGOING TO DIGITIZE THE MUSEUM'S COLLECTIONS, A PROJECT THAT	
IS A CRUCIAL ASPECT OF THE INCREASED SCOPE OF THE CURATORIAL,	
CONSERVATION, AND RESEARCH RESOURCES TEAMS IN THE MUSEUM'S ENLARGED	
FACILITY. THE WHITNEY'S COLLECTION IS AVAILABLE TO THE PUBLIC ONLINE AS	
A SEARCHABLE RESOURCE AND IS UPDATED REGULARLY AS NEW WORKS ENTER THE	
COLLECTION. IMPORTANT LIBRARY AND SPECIAL COLLECTIONS HOLDINGS ARE KEPT	
ON SITE, AS WELL AS ABOUT 16,000 WORKS ON PAPER THAT ARE STORED IN THE	
SONDRA GILMAN STUDY CENTER, FACILITATING ACCESS TO THEM FOR CURATORS	
CALARY AND ANALY ATTACK ATTACK AND ANALY AND ANALY AND	
CROSS-DISCIPLINARY RESEARCH, ALLOWING MUSEUM STAFF, ARTISTS, SCHOLARS,	
AND RESEARCHERS ACCESS TO THE COLLECTION AND OPPORTUNITY FOR CLOSE	
MATERIAL AND TECHNICAL EXAMINATION OF OBJECTS. AS SUCH, THE STUDY	
CENTER IS AN EXCEPTIONAL RESOURCE FOR HISTORIANS AND CURATORS OF MODERN	
AND CONTEMPORARY ART, MAKING THE WHITNEY'S WORLD-CLASS HOLDINGS	

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Name of the organization WHITNEY MUSEUM OF AMERICAN ART	Employer identification numb 13-1789318
AVAILABLE FOR PRIMARY RESEARCH AND IN-DEPTH CONSULTATION. DURING FY24,	
40 EXTERNAL VISITS, WITH 522 UNIQUE VISITORS WERE HELD IN THE STUDY	
CENTER.	
FORM 990, PART III, LINE 4C, DESCRIPTION OF PROGRAM SERVICE:	
SERVED 12,497 K-12 STUDENTS IN ONLINE AND IN-PERSON PROGRAMMING; OF	
THIS NUMBER 2,443 K-12 STUDENTS WERE FROM OUR ELEVEN PARTNERSHIP	
SCHOOLS.	
IN FY24, THE WHITNEY SERVED 135 UNIQUE TEENS WHO PARTICIPATED IN YOUTH	
INSIGHTS PROGRAMS. THE DROP-IN TEEN EVENTS CREATED AND HOSTED BY	
WHITNEY EDUCATORS AND YOUTH INSIGHTS LEADERS WERE WELL ATTENDED, WITH	
590 ATTENDEES FOR SPECIAL EVENTS, 212 PARTICIPANTS AT 2 TABLING EVENTS,	
AND 272 ATTENDEES FOR OPEN STUDIO FOR TEENS.	
THE MUSEUM ALSO CONTINUED ITS COMMITMENT TO ACCESSIBILITY FOR VISITORS	
WITH DISABILITIES TO EXPERIENCE THE RICHNESS AND COMPLEXITY OF AMERICAN	
ART IN AN ACCESSIBLE AND INCLUSIVE ENVIRONMENT THROUGH REMOTE AND	
ART IN AN ACCESSIBLE AND INCLUSIVE ENVIRONMENT THROUGH REMOTE AND	
IN-PERSON OFFERINGS. THIS INCLUDES VISITORS WHO IDENTIFY AS DISABLED,	
IN-PERSON OFFERINGS. THIS INCLUDES VISITORS WHO IDENTIFY AS DISABLED, D/DEAF, DEAF-BLIND, NEURODIVERGENT, AUTISTIC, LOW VISION AND/OR EXPERIENCE A RANGE OF COGNITIVE, INTELLECTUAL, AND DEVELOPMENTAL	
IN-PERSON OFFERINGS. THIS INCLUDES VISITORS WHO IDENTIFY AS DISABLED, D/DEAF, DEAF-BLIND, NEURODIVERGENT, AUTISTIC, LOW VISION AND/OR EXPERIENCE A RANGE OF COGNITIVE, INTELLECTUAL, AND DEVELOPMENTAL DISABILITY, PHYSICAL DISABILITY, CHRONIC ILLNESS AND/OR SENSORY	
IN-PERSON OFFERINGS. THIS INCLUDES VISITORS WHO IDENTIFY AS DISABLED, D/DEAF, DEAF-BLIND, NEURODIVERGENT, AUTISTIC, LOW VISION AND/OR EXPERIENCE A RANGE OF COGNITIVE, INTELLECTUAL, AND DEVELOPMENTAL DISABILITY, PHYSICAL DISABILITY, CHRONIC ILLNESS AND/OR SENSORY SENSITIVITIES. THE ACCESS TEAM FOCUSED ON EXPANDING ACCESS FEATURES ON	
IN-PERSON OFFERINGS. THIS INCLUDES VISITORS WHO IDENTIFY AS DISABLED,	
IN-PERSON OFFERINGS. THIS INCLUDES VISITORS WHO IDENTIFY AS DISABLED, D/DEAF, DEAF-BLIND, NEURODIVERGENT, AUTISTIC, LOW VISION AND/OR EXPERIENCE A RANGE OF COGNITIVE, INTELLECTUAL, AND DEVELOPMENTAL DISABILITY, PHYSICAL DISABILITY, CHRONIC ILLNESS AND/OR SENSORY SENSITIVITIES. THE ACCESS TEAM FOCUSED ON EXPANDING ACCESS FEATURES ON THE MOBILE GUIDE TO SUPPORT VISITORS WITH DISABILITIES AS THEY ENGAGED WITH WHITNEY EXHIBITIONS. DURING FY24, A TOTAL OF 569 PEOPLE ATTENDED	
IN-PERSON OFFERINGS. THIS INCLUDES VISITORS WHO IDENTIFY AS DISABLED, D/DEAF, DEAF-BLIND, NEURODIVERGENT, AUTISTIC, LOW VISION AND/OR EXPERIENCE A RANGE OF COGNITIVE, INTELLECTUAL, AND DEVELOPMENTAL DISABILITY, PHYSICAL DISABILITY, CHRONIC ILLNESS AND/OR SENSORY SENSITIVITIES. THE ACCESS TEAM FOCUSED ON EXPANDING ACCESS FEATURES ON THE MOBILE GUIDE TO SUPPORT VISITORS WITH DISABILITIES AS THEY ENGAGED	

Schedule O (Form 990) 2023 Name of the organization	Employer identification number 13-1789318
WHITNEY MUSEUM OF AMERICAN ART	13-1/03310
IN FY24, 10,035 PEOPLE ATTENDED ARTMAKING, TOURS AND COMMUNITY	
PROGRAMS. COMMUNITY PROGRAMS AT THE WHITNEY SERVED AS A FOCAL POINT FOR	
EXPLORATION, DIALOGUE, AND SELF-EXPRESSION FOR THE MUSEUM'S DIVERSE	
NEIGHBORS WHO DESIRE TO CONNECT TO ART. COMMUNITY PROGRAMS DEVELOPED	
INDIVIDUALIZED EXTENDED PROGRAMS DESIGNED TO MEET THE SPECIFIC NEEDS OF	
OUR DIVERSE PARTNERS OF 15 DIFFERENT ORGANIZATIONS AND TO PROVIDE	
EDUCATIONAL AND CULTURAL OPPORTUNITIES FOR UNDERSERVED AUDIENCES OF ALL	
AGES.	
THE PUBLIC PROGRAMS AND PUBLIC ENGAGEMENT IN FY24 PRESENTED PROVOCATIVE	
AND EXPERIMENTAL EVENTS THAT ENGAGED AUDIENCES IN CRITICAL DIALOGUES ON	
ART AND CULTURAL PRODUCTION. THE DIVISION OFFERED 32 PROGRAMS AND	
SERVED APPROXIMATELY 11,612 VISITORS, WITH 5,017 ATTENDING IN-PERSON AT	
THE WHITNEY AND 6,590 ATTENDING VIRTUALLY. THESE PROGRAMS INCLUDED	
CONVERSATIONS, LECTURES, WORKSHOPS AND SCREENINGS, IN CONJUNCTION WITH	
FRAGMENTS OF A FAITH FORGOTTEN: THE ART OF HARRY SMITH, RUTH ASAWA	
THROUGH LINE, AND INHERITANCE, AS WELL AS PROGRAMMING ORGANIZED IN	
COLLABORATION WITH WECAN MEMBER VISUALAIDS. HIGHLIGHTS INCLUDE A	
THREE-DAY GATHERING TO CELEBRATE HARRY SMITH'S ECLECTIC LIFE AND	
SERPENTINE ARTISTIC PURSUITS, ORGANIZED IN COLLABORATION WITH ARTIST	
AND CURATOR ANDREW LAMPERT AND FAMILY PROGRAMS.	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
PUBLICATION AND RETAIL SALES:	
MUSEUM RELATED AUXILLARY SERVICES THAT PROVIDE PRODUCTS RELATED TO THE	
MUSEUM'S COLLECTION AND EXHIBITIONS.	
EXPENSES \$ 2,462,000. INCLUDING GRANTS OF \$ 0. REVENUE \$ -949,000.	
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WHITNEY MUSEUM OF AMERICAN ART
FORM 990, PART VI, SECTION A, LINE 1A:
VOTING MEMBERS:
IN ACCORDANCE WITH THE MUSEUM'S BY-LAWS, THE EXECUTIVE COMMITTEE CONSISTS
ENTIRELY OF MUSEUM TRUSTEES. THE EXECUTIVE COMMITTEE CURRENTLY CONSISTS OF
23 MEMBERS AND IS COMPOSED OF CERTAIN TRUSTEE OFFICERS, CERTAIN TRUSTEE
COMMITTEE CHAIRS, AND OTHER TRUSTEES ELECTED BY RESOLUTION OF THE BOARD OF
TRUSTEES. BETWEEN MEETINGS OF THE BOARD OF TRUSTEES, AND SUBJECT TO THE
GENERAL POLICIES ESTABLISHED BY THE BOARD, THE EXECUTIVE COMMITTEE HAS ALL
THE POWERS OF THE FULL BOARD, EXCLUDING (I) THE REMOVAL OF TRUSTEES AND
OFFICERS, (II) APPOINTING OF COMMITTEE CHAIRS, AND (II) AMENDING THE
BY-LAWS.
FORM 990, PART VI, SECTION A, LINE 2:
FAMILY/BUSINESS RELATIONSHIPS:
NEIL BLUHM (TRUSTEE) AND LESLIE BLUHM (TRUSTEE) HAVE A FAMILY RELATIONSHIP.
FORM 990, PART VI, SECTION B, LINE 11B:
FORM 990 REVIEW PROCESS:
THE MUSEUM'S FORM 990 TAX FILING IS COMPILED BASED ON INFORMATION OBTAINED
FROM THE MUSEUM'S GENERAL LEDGER, AUDITED FINANCIAL STATEMENTS AND OTHER
FINANCIAL SYSTEMS. THE MUSEUM'S DEPUTY DIRECTOR, SENIOR FINANCE/ACCOUNTING
STAFF, GENERAL COUNSEL, DEPUTY GENERAL COUNSEL AND EXTERNAL TAX ADVISORS
PARTICIPATE IN A SERIES OF DETAILED REVIEWS OF ALL INFORMATION TO BE
INCLUDED IN THE FILING. ALL INFORMATION INCLUDED IN THE RETURN IS REVIEWED
BY THE GROUP FOR ACCURACY AND CONTENT. THE COMPLETED FORM 990 AND RELATED
SCHEDULES ARE ALSO PROVIDED TO THE MUSEUM'S SENIOR MANAGEMENT AND REVIEWED

IN DETAIL WITH THE DEPUTY DIRECTOR. FINALLY, A PUBLIC INSPECTION COPY IS

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Schedule O (Form 990) 2023 Name of the organization

WHITNEY MUSEUM OF AMERICAN ART

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Name of the organization WHITNEY MUSEUM OF AMERICAN ART	Employer identification number 13-1789318
PROVIDED TO EACH MEMBER OF THE BOARD OF TRUSTEES PRIOR TO FILING THE	
RETURN. THE MUSEUM'S EXTERNAL TAX ADVISORS FILE THE FORM 990 ELECTRONICALLY	
WITH THE INTERNAL REVENUE SERVICE.	
FORM 990, PART VI, SECTION B, LINE 12C:	
CONFLICT OF INTEREST POLICY MONITORING & ENFORCEMENT:	
THE MUSEUM'S CODE OF ETHICS CONTAINS DETAILED DISCLOSURE REQUIREMENTS WITH	
RESPECT TO THE CONFLICTS OF INTERESTS FOR ITS BOARD AND STAFF. ON A REGULAR	
BASIS, THE BOARD AND OFFICERS OF THE MUSEUM COMPLETE A CONFLICTS OF	
INTEREST QUESTIONNAIRE. RESPONSES ARE COMPILED, REVIEWED WITH GENERAL	
COUNSEL AND THE DEPUTY DIRECTOR, AND FORWARDED TO THE AUDIT COMMITTEE. IF A	
CONFLICT IS DISCLOSED, BOARD MEMBERS WITH POTENTIAL CONFLICTS MAY NOT	
PARTICIPATE IN DELIBERATIONS AND NEED TO RECUSE THEMSELVES FROM VOTING ON	
PARTICULAR MATTERS. IN ADDITION, OFFICERS AND KEY EMPLOYEES ARE ASKED	
FARICOLAR MATTERS. IN ADDITION, OFFICERS AND RET EMPLOTEES ARE ASKED	
ANNUALLY TO REVIEW AND ACKNOWLEDGE COMPLIANCE WITH THE MUSEUM'S CODE OF	
ETHICS.	
FORM 990, PART VI, SECTION B, LINE 15A:	
PROCESS FOR DETERMINING COMPENSATION:	
THE MUSEUM HAS A COMPENSATION COMMITTEE OF THE BOARD. THE COMMITTEE MEETS	
PERIODICALLY TO REVIEW PERFORMANCE AND COMPENSATION FOR THE DIRECTOR. AS	

PART OF THE PROCESS, THE COMMITTEE REVIEWS COMPARATIVE DATA OBTAINED FROM

SEVERAL INDEPENDENT SOURCES WHICH PROVIDE DATA FOR SIMILAR POSITIONS IN NEW

YORK CITY AND NATIONALLY.

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

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, MD, MA, MI, MN, MS, NH, NJ, NC, ND, OH, OK, OR, PA, RI

TN,VA,WA,WV,WI

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Schedule O (Form 990) 2023

Name of the organization	Pag Employer identification numb
WHITNEY MUSEUM OF AMERICAN ART	13-1789318
FORM 990, PART VI, SECTION C, LINE 19:	
HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC:	
AUDITED FINANCIAL STATEMENTS AND THE FORM 990 ARE MADE AVAILABLE ON THE	
MUSEUM'S WEBSITE. ALL OTHER DOCUMENTS ARE AVAILABLE UPON REQUEST AT	
MANAGEMENT'S DISCRETION.	
PART X, LINE 15:	
LEASE ACCOUNTING STANDARD THAT BECAME EFFECTIVE FOR WHITNEY MUSEUM OF	
AMERICAN ART IN THE YEAR ENDING JUNE 30, 2021. THIS ACCOUNTING STANDARD	
WAS EFFECTUATED TO IMPROVE THE TRANSPARENCY SURROUNDING KEY INFORMATION	
PERTAINING TO AN EXEMPT ORGANIZATION'S LEASING ARRANGEMENTS (AND TO	
ENSURE THAT ALL ORGANIZATIONS WERE RECORDING THE TRANSACTIONS UNIFORMLY	
ON THEIR BALANCE SHEETS).	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN POST-RETIREMENT HEALTH AND OTHER BENEFITS OTHER THAN NET PERIODIC	
PENSION CHARGES AND SERVICE COST 1,909,000.	
NET PERIODIC PENSION CHARGES OTHER THAN SERVICE COST 59,000.	
TOTAL TO FORM 990, PART XI, LINE 9 1,968,000.	
FORM 990 - GENERAL:	
AMOUNTS REFLECTED IN THE 2023 FORM 990 FOR THE YEAR ENDED JUNE 30, 2024	
HAVE BEEN ROUNDED TO THE NEAREST THOUSAND TO CONFORM WITH THE	
PRESENTATION IN THE MUSEUM'S AUDITED FINANCIAL STATEMENTS.	

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# **CARRYOVER DATA TO 2024**

Name WHITNEY MUSEUM OF AMERICAN ART	Employer Identification Number 13–1789318
Based on the information provided with this return, the following are possible carryover amounts to next year.	
FEDERAL POST-2017 NET OPERATING LOSS - INVESTMENT IN LIMITED	830,005.
MA NET OPERATING LOSS	87,851.
SC NET OPERATING LOSS	1,292.

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