Form 8879-EC

IRS e-file Signature Authorization for an Exempt Organization

2010	and	ending	
2013	2. allu	ending	

OMB No. 1545-1878

Department of the Treasury Internal Revenue Service

For calendar year 2019, or fiscal year beginning Do not send to the IRS. Keep for your records.

► Go to www.irs.gov/Form8879EO for the latest information.

Name of exempt organization SOLOMON R. GUGGENHEIM FOUNDATION Employer identification number 13-5562233

Name and title of officer

MARTHA WITHINGTON, CFO

Part I Type of Return and Return Information	(Whole Dollars Only)
--	----------------------

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a	Form 990 check here X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	84620075.
2a	Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here b b Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5).	4b	
5a	Form 8868 check here b Balance Due (Form 8868, line 3c)	5b	

Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they

are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.								
Office	r's PIN: check one box only							
X	I authorize GRANT THORNTON LLP ERO firm name	to enter my PIN	2 6 1 1 3 Enter five numbers, but do not enter all zeros	as my signature				
	on the organization's tax year 2019 electronically filed return. If I have being filed with a state agency(ies) regulating charities as part of the ERO to enter my PIN on the return's disclosure consent screen.	e indicated within th IRS Fed/State pro	is return that a copy gram, I also authorize	of the return is the aforementioned				
	As an officer of the organization, I will enter my PIN as my signature If I have indicated within this return that a copy of the return is being the IRS Fed/State program, I will enter my PIN on the return's disclosing	filed with a state ag	ency(ies) regulating	stronically filed return charities as part of				
	11////							

If I have indicated within this return that a copy of the return	is being filed with a state agency	(ies) regulating charities as part of
the IRS Fed/State program, I will enter my PIN on the return	's disclosure consent screen.	
NI VIIII.		
$\wedge V = V \wedge V $		1101010

Officer's signature Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

Date > 11/6/2020 ERO's signature ▶

> **ERO Must Retain This Form - See Instructions** Do Not Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form 8879-EO (2019)

Form 990

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

2019
Open to Public
Inspection

Form **990** (2019)

A For the 2019 calendar year, or tax year beginning 2019, and ending 20 D Employer identification number C Name of organization B Check if applicable SOLOMON R. GUGGENHEIM FOUNDATION 13-5562233 Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Name change 1071 FIFTH AVENUE (212) 423-3602 Initial return Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated Amended NEW YORK, NY 10128 G Gross receipts \$ 111,951,941. Application pending F Name and address of principal officer: RICHARD D ARMSTRONG H(a) Is this a group return for Yes Χ Nο subordinates' 1071 FIFTH AVENUE, NEW YORK, NY 10128 H(b) Are all subordinates included? No Yes X | 501(c)(3) If "No," attach a list. (see instructions) 501(c) (4947(a)(1) or Website: ▶ WWW.GUGGENHEIM.ORG H(c) Group exemption number NY Form of organization: X Corporation L Year of formation: 1937 M State of legal domicile: Other > Summary Part I 1 Briefly describe the organization's mission or most significant activities: COMMITTED TO INNOVATION, THE SOLOMON R. GUGGENHEIM FOUNDATION COLLECTS, PRESERVES, AND INTERPRETS MODERN AND Governance CONTEMPORARY ART, (CONTINUED ON SCHEDULE O) 2 Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 26. Number of voting members of the governing body (Part VI, line 1a) 3 Activities & 25. Number of independent voting members of the governing body (Part VI, line 1b) 613. 5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 100. Total number of volunteers (estimate if necessary) 6 1,195,673. 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 17,200. **b** Net unrelated business taxable income from Form 990-T, line 39 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 41,588,253. 31,680,309. Revenue 27,523,844. 31,033,652. Program service revenue (Part VIII, line 2g) 1,714,099. 2,986,264. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 18,919,850. 6,351,001. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 77,177,197. 84,620,075. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 0. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 14 35,766,419. 34,373,795. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 404,998. 311,602. **b** Total fundraising expenses (Part IX, column (D), line 25) 38,382,998. 36,440,485. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 74,554,415. 71,125,882. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 2,622,782. 13,494,193. Revenue less expenses. Subtract line 18 from line 12 s or **End of Year Beginning of Current Year** 211,321,255. 166,863,549. 20 Total assets (Part X, line 16) Total liabilities (Part X, line 26) 75,139,965. 96,633,690. 21 91,723,584. 114,687,565. 22 Net assets or fund balances. Subtract line 21 from line 20. Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Date Here MARTHA WITHINGTON CFO Type or print name and title Print/Type preparer's name Preparer's signature Date Check Paid 11/9/2020 DANIEL ROMANO self-employed P00504182 Preparer Firm's EIN ▶ 36-605558 Firm's name ▶GRANT THORNTON LLP Use Only 212-599-0100 Firm's address ▶757 THIRD AVENUE, 4TH FLOOR NEW YORK, NY 10017-2013 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

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

iling of this	form, visit www.irs.gov/e-file-providers/e-file-i	for-charities	-and-non-profits.	,					
Automatic	6-Month Extension of Time. Only subm	it original	(no copies needed).					—	
	ons required to file an income tax return other			O-C filers), partnerships,	REI	MICs, a	and trust	 s	
nust use Fo	orm 7004 to request an extension of time to f	file income	tax returns.						
Гуре or	Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN)								
orint	SOLOMON R. GUGGENHEIM FOUNDAT	ION		13-5562233	3				
File by the lue date for	Number, street, and room or suite no. If a P.O. box, see instructions.								
iling your	1071 FIFTH AVENUE								
eturn. See nstructions.	City, town or post office, state, and ZIP code. For NEW YORK, NY 10128	r a foreign ad	dress, see instructions.						
Enter the Re	eturn Code for the return that this application	is for (file	a separate application fo	or each return)			. 0	1	
Application		Return	Application				Retu		
s For	5 000 57	Code	Is For	`			Cod		
-orm 990 or -orm 990-Bl	Form 990-EZ	01	Form 990-T (corporati	on)			07		
		02	Form 1041-A Form 4720 (other than	o individual)			08	—	
orm 4720 (Form 990-PF	· · · · · · · · · · · · · · · · · · ·	03	Form 5227	i iliulviuuai)			10	—	
	(sec. 401(a) or 408(a) trust)	05	Form 6069				11	—	
	(trust other than above)	06	Form 8870				12		
Telephone If the orga If this is for	e No. ► 212 423-3602 anization does not have an office or place of or a Group Return, enter the organization's for e group, check this box e names and TINs of all members the extens	business ir ur digit Gro f it is for pa	Fax No. ▶ the United States, checoup Exemption Number (GEN)		If thank	his is		
1 I reque	st an automatic 6-month extension of time u	ntil	11/16_, 20 2	0 , to file the exempt	org	anizat	ion retur	n n	
for the organization named above. The extension is for the organization's return for: X calendar year 20 19 or tax year beginning , 20 , and ending , 20 .									
c	If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period								
	application is for Forms 990-BL, 990-PF, 9	90-T, 4720	0, or 6069, enter the	tentative tax, less any		١.		•	
	undable credits. See instructions.				3a	\$		0.	
	application is for Forms 990-PF, 990-T,	•	,			الم		0	
	ted tax payments made. Include any prior yea te due. Subtract line 3b from line 3a. Include				3b	\$		0.	
	e due. Subtract line 3b from line 3a. Include onic Federal Tax Payment System). See instru		ent with this form, if rec	duited, by using EF1P5		•		0.	
-	u are going to make an electronic funds withdrawa		it) with this Form 9969 as	e Form 8/53-FO and Form	3c		for noves		
nstructions.	a are going to make an electronic funds withdrawa	ıı (un ect deb	ıı <i>)</i> willi illis FUIII 0008, Se	e i oilli 0400-EO allu FOIII	1 00/	3-EU I	or payine	111	
	act and Paperwork Reduction Act Notice, see inst	ructions			Forn	8868	Rev. 1-2	020)	
							\···	/	

JSA 9F8054 2.000 **COPY**

P	art III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	COMMITTED TO INNOVATION, THE SOLOMON R. GUGGENHEIM FOUNDATION (THE
	"FOUNDATION") COLLECTS, PRESERVES, AND INTERPRETS MODERN AND
	CONTEMPORARY ART, (CONTINUED ON SCHEDULE O)
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	
Ū	services?
	If "Yes," describe these changes on Schedule O.
4	
•	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others
	the total expenses, and revenue, if any, for each program service reported.
40	(Code:) (Expenses \$ 13,951,356. including grants of \$ 0.) (Revenue \$ 0.)
4a	(Code:) (Expenses \$13,951,356. including grants of \$0) (Revenue \$0) IN FURTHERANCE OF ITS MISSION, THE FOUNDATION COLLECTS AND
	PRESERVES ART FOR THE BENEFIT OF THE PUBLIC. THE CURATORIAL STAFF
	STUDIES THE ART IN THE FOUNDATION'S COLLECTION, PLANS
	INTERNATIONAL EXHIBITIONS FOR PUBLIC VIEWING, AND PREPARES AND
	PUBLISHES SCHOLARLY CATALOGUES AND EDUCATIONAL TEXTS. THE
	FOUNDATION ALSO LENDS MANY OF THE WORKS OF ART IN ITS COLLECTION
	TO OTHER MUSEUMS ON THE OCCASION OF EXHIBITIONS THAT ARE OF
	SCHOLARLY MERIT OR THAT WILL BROADEN THE PUBLIC'S APPRECIATION OF
	ART. (CONTINUED ON SCHEDULE O)
4b	(Code:) (Expenses \$11,159,837. including grants of \$0.) (Revenue \$8,406,287.)
	EXHIBITIONS PRESENTED IN 2019 AT THE SOLOMON R. GUGGENHEIM MUSEUM
	IN NEW YORK ("GUGGENHEIM MUSEUM") INCLUDED: HILMA AF KLINT:
	PAINTINGS FOR THE FUTURE (OCTOBER 12, 2018 - APRIL 23, 2019); RH
	QUAYTMAN: +X (OCTOBER 12, 2018 - APRIL 23, 2019); BRANCUSI (MARCH
	17, 2017 - PRESENT); THANNHAUSER COLLECTION (FEBRUARY 1, 2019 -
	PRESENT); IMPLICIT TENSIONS: MAPPLETHORPE NOW (JANUARY 25, 2019 -
	JANUARY 5, 2020); LEARNING THROUGH ART (APRIL 26, 2019 - JANUARY
	5, 2020); (CONTINUED ON SCHEDULE O)
4c	(Code:) (Expenses \$ 6,674,092. including grants of \$ 0.) (Revenue \$ 21,889,261.)
	DURING 2019, THE FOUNDATION DIRECTLY OPERATED TWO MUSEUMS: THE
	SOLOMON R. GUGGENHEIM MUSEUM IN NEW YORK AND THE PEGGY GUGGENHEIM
	COLLECTION IN VENICE. BOTH OF THESE MUSEUMS ARE OPEN TO THE PUBLIC
	TO FULFILL THE FOUNDATION'S MISSION. THE FOUNDATION CONDUCTS TOURS
	OF ITS EXHIBITIONS, AND PROVIDES EDUCATIONAL TEXTS FREE OF CHARGE
	TO ALL MUSEUM VISITORS. DURING 2019, THE GUGGENHEIM MUSEUM WAS
	OPEN TO THE PUBLIC ONE EVENING OF EACH WEEK ON A PAY-WHAT-YOU-WISH
	BASIS. IN ADDITION, STUDENTS AND SENIOR CITIZENS ARE OFFERED
	REDUCED-PRICE TICKETS AND CHILDREN UNDER THE AGE OF 12 ARE
	ADMITTED FREE OF CHARGE. (2019 COMBINED ATTENDANCE AT THE
	GUGGENHEIM MUSEUM AND PGC WAS 1,517,038).
4d	Other program services (Describe on Schedule O.) ATTACHMENT 1
	(Expenses \$ 17,118,651. including grants of \$ 0.) (Revenue \$ 738,104.)
4e	Total program service expenses ▶ 48,903,936.

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? 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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? 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	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
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	X	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
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		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	1	3.5	
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	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	1	3.5	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		3.5	
	Schedule D, Parts XI and XII.	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			3.5
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	Λ
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	4.46	Х	
45	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	4.5		Х
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		- 1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	16		Х
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		21
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	17	Х	
10	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	10	Х	
10	Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		
19		10		Х
20 ~	If "Yes," complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		21
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
	demostic government on rate in, column (ry, line 1: ii ree, complete deficulte i, rand rand ii	1 4 1		

Part	V 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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			3.7
	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 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? <i>If</i> "Yes," complete Schedule L, Part IV	28a		Х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		
·	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	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? <i>If "Yes," complete Schedule N, Part I</i>	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O.	38	X	
Part				X
	Check if Schedule O contains a response or note to any line in this Part V		Vac	
٠.	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number of Ferme W 20 moraded in the fat. Enter of in the applicable 1.1.1.1.1			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Х	

Form 990 (2019) Page 5

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			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 613			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х	
b	If "Yes," enter the name of the foreign country ▶ <u>ATTACHMENT 2</u>			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts 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 services provided to the payor?	7a	Х	
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			
	required to file Form 8282?	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization 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		
	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
-	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			
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.		• • •	

Form 990 (2019) Page **6**

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

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 25			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
_	any other officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
•	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		X
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	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
, a	one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
b	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
Ü	the year by the following:			
_	The governing body?	8a	Х	
a b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
9	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	_	.)	
			Yes	No
102	Did the organization have local chapters, branches, or affiliates?	10a	Х	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	100		
D	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a		11a	Х	
_	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
b 12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
_	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	1 - 0.		
b	rise to conflicts?	12b	Х	
_	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
С	describe in Schedule O how this was done	12c	Х	
12	Did the organization have a written whistleblower policy?	13	X	
13	Did the organization have a written document retention and destruction policy?	14	X	
14	Did the process for determining compensation of the following persons include a review and approval by			
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_	The organization's CEO, Executive Director, or top management official	15a	Х	
a	Other officers or key employees of the organization	15b	Х	
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
iva	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			
D	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed ► ATTACHMENT 3			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-7	(Sec	tion 5	01(c)
10	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	(360	iioii 3	J 1 (U)
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of	f inter	est p	olicy,
20	and financial statements available to the public during the tax year.	lo b		
20	State the name, address, and telephone number of the person who possesses the organization's books and record SUSANNAH NAYLOR 1071 FIFTH AVENUE NEW YORK, NY 10128	5 🟲		

Form **990** (2019)

Form 990 (2019) Page **7**

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

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

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

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

		(C)								
(A)	(B)				Position			(D)	(E)	(F)
Name and title	Average	,	(do not check more than one				Reportable	Reportable	Estimated amount	
	hours per week	-			ex, unless person is both an icer and a director/trustee)			compensation from the	compensation from related	of other compensation
	(list any						<u> </u>	organization	organizations	from the
	hours for	r di	nstit	Officer	еу е	mple	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	related	ecto	utior	er	du	est c	er			related organizations
	organizations below	٦ <u>=</u>	nal t		Key employee	ÖM				
	dotted line)	Individual trustee or director	Institutional trustee		Ф	ens				
			e			Highest compensated employee				
(1) RICHARD ARMSTRONG	40.00									
TRUSTEE/DIR. OF MUSEUM & FDTN.	0.	X		Х				828,001.	0.	245,990.
(2) ELIZABETH DUGGAL TAGHIPOUR	40.00									
SENIOR DEPUTY DIRECTOR & COO	0.			Х				395,920.	0.	392.
(3) SARAH G. AUSTRIAN	40.00									
DEP DIR, GEN COUNSEL & SEC.	0.			Х				372,422.	0.	21,387.
(4)KAROLE VAIL	40.00									
DIR, PEGGY GUGGENHEIM COLL.	0.				Х			248,997.	0.	105,664.
(5) NANCY SPECTOR, ARTISTIC DIR. &	40.00									
STOCKMAN CURATOR	0.				Х			290,000.	0.	29,799.
(6) MARTHA WITHINGTON	40.00									
CFO	0.			Х				278,519.	0.	16,981.
(7) MARY ANN TALOTTA	40.00									
SR. DIR., IND. DEV. & CAMPAIGN	0.					X		208,637.	0.	17,766.
(8) CAROL STRINGARI	40.00									
DEPUTY DIRECTOR & CHIEF CONS.	0.					X		191,760.	0.	16,534.
(9) JUAN IGNACIO VIDARTE	20.00									
DEP. DIR & CO FOR GLOBAL STRAT	0.					X		198,349.	0.	5,950.
(10) SARAH EATON	40.00									
DIR. MEDIA & PUBLIC REL.	0.					Х		177,404.	0.	25,699.
(11) MARIANNA HORTON MERMIN	40.00									
SENIOR ASSOCIATE COUNSEL	0.					Х		180,739.	0.	10,333.
(12) DANA WALLACH JONES (AS OF 5/19	24.00									
ASST GEN COU/ASST SECRETARY	0.			Х				104,565.	0.	3,137.
(13) JON IMANOL AZUA	3.00									
TRUSTEE	0.	X						0.	0.	0.

3.00

0.

Χ

Χ

0.

0.

(14) ROBERT C. BAKER

TRUSTEE/TREASURER/VP

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)			(0	-			(D)	(E)	(F)
Name and title	Average hours per	(do r		Posi		e than o	ne	Reportable compensation	Reportable compensation from	Estimated amount of
	week (list any	box,	unles	s pe	rson	is both	an	from	related	other
	hours for	office		_		or/trust		the	organizations	compensation
	related organizations	Individual trustee or director	Institutional trustee	Officer	Key employee	ligh,	Forme	organization	(W-2/1099-MISC)	from the organization
	below dotted	idua	utio	e e	dme	est o	ᅙ	(W-2/1099-MISC)		and related
	line)	or tru	nalt		loye	mp				organizations
		stee	ruste		Φ	bens				
			9e			Highest compensated employee				
15) JOHN CALICCHIO	3.00									
TRUSTEE/VICE-PRESIDENT	0.	Х		Х				0	0.	0
16) CINDY CHUA-TAY	3.00									
TRUSTEE	0.	Х						0	0.	0
17) PAUL CRONSON	3.00									
TRUSTEE	0.	Х						0	0.	0
18) DIMITRIS DASKALOPOULOS	3.00									
TRUSTEE/VICE-PRESIDENT	0.	Х		Χ				0	0.	0
19) CHARLES M. DIKER	3.00									_
TRUSTEE/VICE-PRESIDENT	0.	X		Х				0	0.	0
20) CARL GUSTAF EHRNROOTH	3.00									0
TRUSTEE	0.	X						0	0.	0
21) GAIL MAY ENGELBERG	3.00	3.7							0	0
TRUSTEE 22) WENDY FISHER	8.00	X						0	0.	0
22) WENDY FISHER TRUSTEE/PRESIDENT	0.	X		Х				0	0.	0
23) J. TOMILSON HILL	3.00	Λ		Λ				0	0.	0
TRUSTEE (AS OF 05/2019)	 0.	X						0	0.	0
24) ELLIOT S. JAFFE	3.00	21								
TRUSTEE (THRU 02/2019)	- 0.	X						0	0.	0
25) RASHID JOHNSON	3.00									
TRUSTEE	† ₀ .	Х						0	0.	0
1b Sub-total							_	3,475,313.	0.	499,632.
c Total from continuation sheets to Part VII, S	ection A			•	• •		•	0.	0.	0.
d Total (add lines 1b and 1c)	-							3,475,313.	0.	499,632.
2 Total number of individuals (including but not							o re	ceived more than	\$100,000 of	
reportable compensation from the organization	n ►	56	5							
										Yes No
3 Did the organization list any former office										
employee on line 1a? If "Yes," complete Sched	ule J for su	ch ind	lividu	ıal						3 X
4 For any individual listed on line 1a, is the										
organization and related organizations gr										. 37
individual										4 X
5 Did any person listed on line 1a receive or										5 X
for services rendered to the organization? If "Y Section B. Independent Contractors	es, comple	ie SCI	ieau	iie J	ior	sucn	ρer	SUII		5 X
Complete this table for your five highest com	nensated i	ndene	nde	nt o	con	tracto	re t	hat received more	than \$100 000 o	ıf
compensation from the organization. Report of										

year.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 4		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 25

Estimated

(A)

Name and title

Part VII

	week (list any	box,	unles	ss pe	erson	is both tor/trust	an	from	related	other		
	related organizations below dotted line)	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	fi org an	npensati from the ganizatio nd related ganization	on d
26) FRANCESCA LAVAZZA	3.00											
TRUSTEE	0.	X						0 .	0.	<u> </u>		0
27) PETER LAWSON-JOHNSTON	3.00											
TRUSTEE/HONORARY CHAIR	0.	X		Х				0 .	0.			0
28) PETER LAWSON-JOHNSTON II	3.00									l		
TRUSTEE	0.	X						0 .	0.			0
29) WILLIAM L. MACK	8.00									l		
TRUSTEE/CHAIR OF THE BOARD	0.	X		Х				0 .	0.			0
30) LINDA MACKLOWE	3.00											
TRUSTEE/VICE-PRESIDENT	0.	Х		Х				0.	0.	l		0
31) WENDY L-J. MCNEIL	3.00											
TRUSTEE/VICE-PRESIDENT	0.	Х		Х				0.	0.	l		0
32) EDWARD H. MEYER	3.00											
TRUSTEE/VICE-PRESIDENT	0.	Х		Х				0.	0.	l		0
33) VLADIMIR O. POTANIN	2.00											
TRUSTEE	0.	Х						0.	0.	l		0
34) STEPHEN ROBERT	3.00											
TRUSTEE	0.	Х						0.	0.	l		0
35) DENISE SAUL	3.00											
TRUSTEE/VICE-PRESIDENT	0.	Х		Х				0.	0.	l		0
36) JAMES B. SHERWOOD	2.00											
TRUSTEE	0.	Х						0.	0.	l		0
1b Sub-total							•	0.	0.		-	0.
c Total from continuation sheets to Part VII,	Section A		• •		• •							
d Total (add lines 1b and 1c)							•					
2 Total number of individuals (including but no							o re	ceived more than	\$100.000 of	-	-	
reportable compensation from the organization		56				- /			,,			
											Yes	No
3 Did the organization list any former off	cer directo	or or	tri	iste	م	kev e	mn	olovee or highes	t compensated			
employee on line 1a? If "Yes," complete Sche										3		Х
4 For any individual listed on line 1a, is the organization and related organizations g												
individual								•		4	Х	
5 Did any person listed on line 1a receive o												
for services rendered to the organization? If "										5		Х
Section B. Independent Contractors						230.1	ادم					
Complete this table for your five highest cor	npensated i	ndene	ende	ent o	con	tracto	rs t	hat received more	than \$100,000 c	 of		
compensation from the organization. Report year.												

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

(B)

Average

(C)

Position

(D)

Reportable

(B)

Description of services

Reportable

(A)

Name and business address

(C)

Compensation

Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	nplo	ye	es,	and F	lig	hest Compensat	ed Employ	yees (c	ontinue	ed)	
(A) Name and title	(B) Average hours per week (list any hours for	box,	unles	Pos heck ss pe	erson	e than o is both or/trust	an	(D) Reportable compensation from the	(E) Reportable compensation fron related organizations	on from d	am	(F) stimated nount of other pensation	
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099		orga and	om the anization d related anization	ł
37) DAVID SHUMAN TRUSTEE (THRU 05/2019)	3.00	X						0		0.			0
38) BARBARA SLIFKA TRUSTEE	3.00	X						0		0.			0
39) MARK R. WALTER TRUSTEE	2.00	X						0		0.			0
40) EDWARD F. ROVER SECRETARY (THRU 05/2019)	2.00			Х				0.		0.			0
to Sub-total continuation sheets to Part VII, S	-						>	0.		0.			0.
d Total (add lines 1b and 1c)	limited to t		liste				o re	eceived more than	 \$100,000 (of			
reportable compensation from the organizatio		3(<u> </u>									Yes	No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched											3		X
4 For any individual listed on line 1a, is the organization and related organizations graindividual	eater than	\$15	50,0	00?	. If	"Yes	,"	complete Schedu	le J for	such	4	X	
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue co	mpen	sati	on i	fron	n any	un	related organization	on or indivi	idual	5		X
Section B. Independent Contractors													
1 Complete this table for your five highest com- compensation from the organization. Report of year.													
(A) Name and business add	dress							(B) Description of se	ervices	C	(C) Compens	sation	

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

Part VIII Statement of Revenue

	L VIII	Check if Schedule O contains a response	onse or note to any	y line in this Part \	/III		
		·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ıts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	4,883,560.				
	С	Fundraising events 1c	2,477,826.				
	d	Related organizations 1d					
s, c	е	Government grants (contributions) 1e	564,785.				
io Sign	f	All other contributions, gifts, grants,					
but		and similar amounts not included above . 1f	23,754,138.				
وَظِ	g	Noncash contributions included in					
Son		lines 1a-1f <u>1g</u>		31,680,309.			
	n	Total. Add lines 1a-1f	Business Code	31,680,309.			
Ö		ADMISSION INCOME	712110	22,693,734.	22,693,734.		
Σ, Sign	2a	EXHIBITIONS	712110	4,316,019.	4,316,019.		
Sel	b	MUSEUM AND PROGRAM COLLABORATIONS	712110	4,023,899.	4,023,899.		
E S	C	MODEON AND PROGRAM COLLABORATIONS	712110	4,023,033.	4,023,033.		
Regis	d						
Program Service Revenue	e	All other program service revenue					
	g	Total. Add lines 2a-2f		31,033,652.			
	3	Investment income (including dividends					
		other similar amounts)		1,263,638.			1,263,638.
	4	Income from investment of tax-exempt bor	. [0.			
	5	Royalties	·	1,854,126.		82,034.	1,772,092.
		(i) Real	(ii) Personal				
	6a	Gross rents 6a 16,369					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c 16,369					
	d	Net rental income or (loss)	<u> </u>	16,369.			16,369.
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a 22,952,774					
ne	b	Less: cost or other basis					
evenue		and sales expenses 7b 21,230,148					
	С	Gain or (loss)					
er	d	Net gain or (loss)		1,722,626.			1,722,626.
Other R	8a	Gross income from fundraising					
Ŭ		events (not including \$2,477,826.					
		of contributions reported on line	000 252				
		1c). See Part IV, line 18					
	b	Less: direct expenses		-1,221,676.			-1,221,676.
	C	` ,	3	1,221,070.			1,221,070.
	9a	Gross income from gaming activities. See Part IV, line 19 9a	0.				
		Less: direct expenses 9b					
	b	Net income or (loss) from gaming activities		0.			
	10a	Gross sales of inventory, less					
	· va	returns and allowances	9,880,936.				
	b	Less: cost of goods sold					
_	C	Net income or (loss) from sales of inventory		5,823,267.		1,095,260.	4,728,007.
S			Business Code				
e le	11a	ART SALE PROCEEDS	900099	11,579,127.			11,579,127.
ane	b	RESTAURANT INCOME	900099	454,268.		18,379.	435,889.
e e e	C	CORPORATE EVENTS	900099	406,500.			406,500.
Miscellaneous Revenue	d	All other revenue		7,869.			7,869.
	е	Total. Add lines 11a-11d	▶	12,447,764.			
	12	Total revenue. See instructions	▶	84,620,075.	31,033,652.	1,195,673.	20,710,441.

Part IX Statement of Functional Expenses

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

360	Check if Schedule O contains a resp	•		·	
Do	not include amounts reported on lines 6b, 7b,		(B)		
	9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations		5.40.1000	general expenses	G.(PG11000
·	and domestic governments. See Part IV, line 21	0.			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0.			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,	0 041 554	055 106	1 520 405	556 153
	trustees, and key employees	2,941,774.	855,126.	1,530,495.	556,153.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and	0.			
_	persons described in section 4958(c)(3)(B)	24,747,456.	18,353,346.	4,396,688.	1,997,422.
	Other salaries and wages	24,747,430.	10,333,340.	4,350,000.	1,001,422.
8	Pension plan accruals and contributions (include	522,774.	362,657.	111,905.	48,212.
^	section 401(k) and 403(b) employer contributions)	4,322,659.	2,998,699.	925,313.	398,647.
	Other employee benefits	1,839,132.	1,275,836.	393,686.	169,610.
10	Payroll taxes	_,,		373,7337	
	Management	777,507.	393,719.	383,788.	
	Legal	627,001.	213,394.	413,607.	
	Accounting	413,120.	3,215.	409,905.	
	Lobbying	0.			
	Professional fundraising services. See Part IV, line 17	311,602.			311,602.
	Investment management fees	1,515,668.		1,515,668.	
	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	3,851,409.	2,494,597.	1,078,930.	277,882.
12	Advertising and promotion	1,313,387.	875,584.	420,316.	17,487.
13	Office expenses	1,442,261.	933,785.	171,922.	336,554.
14	Information technology	593,911.	8,060.	585,851.	
15	Royalties	47,826.	47,826.	0.001.006	250 541
16	Occupancy	11,098,564.	8,544,927.	2,201,096.	352,541.
17	Travel	1,257,029.	592,190.	194,551.	470,288.
18	Payments of travel or entertainment expenses	0.			
	for any federal, state, or local public officials	298,658.	86,496.	31,805.	180,357.
19	Conferences, conventions, and meetings	864,454.	725,205.	107,240.	32,009.
20	Interest	0.	. 23 , 233 .	23,7210.	22,000.
21 22	Depreciation, depletion, and amortization	4,877,294.	4,094,632.	598,655.	184,007.
23	Insurance	566,166.	317,787.	248,379.	,
24	Other expenses. Itemize expenses not covered	,	,		
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	ART PURCHASES	3,661,868.	3,661,868.		
-	SUPPLIES AND MATERIALS	1,683,359.	800,281.	854,154.	28,924.
c	ART SHIPPING AND CRATING	472,275.	450,998.	19,149.	2,128.
d	·		0.7.2.2.2		
e	All other expenses	1,078,728.	813,708.	189,719.	75,301.
	Total functional expenses. Add lines 1 through 24e	71,125,882.	48,903,936.	16,782,822.	5,439,124.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	0.			
_	10110Willing 0.01 30-2 (A.O.O 330-120)	0.			Form 990 (2010)

Form 990 (2019) Page **11**

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this P	art X		
			(A) Beginning of year		(B) End of year
_	1	Cash - non-interest-bearing	12,435,687.	1	8,013,011.
	2	Savings and temporary cash investments	3,125,175.	2	4,772,890.
		Pledges and grants receivable, net	10,677,403.	3	11,164,238.
	3		587,099.	4	2,949,639.
	4	Accounts receivable, net	3077033.	4	277177037.
	5				
		trustee, key employee, creator or founder, substantial contributor, or 35%	0.	_	0.
		controlled entity or family member of any of these persons	0.	5	0.
	6	Loans and other receivables from other disqualified persons (as defined	0.		0
	_	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0.	6	0.
Assets	7	Notes and loans receivable, net		7	817,272.
1SS	8	Inventories for sale or use	1,276,010.	8	
^	9	Prepaid expenses and deferred charges	2,328,456.	9	3,027,116.
	10 a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 126,503,986.			
	b	Less: accumulated depreciation 10b 73,124,499.	57,541,092.		53,379,487.
	11	Investments - publicly traded securities	24,243,847.	11	38,941,053.
	12	Investments - other securities. See Part IV, line 11	54,360,250.	12	66,143,133.
	13	Investments - program-related. See Part IV, line 11	0.	13	0.
	14	Intangible assets	0.	14	0.
	15	Other assets. See Part IV, line 11	288,530.	15	22,113,416.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	166,863,549.	16	211,321,255.
	17	Accounts payable and accrued expenses	15,895,982.	17	12,528,163.
	18	Grants payable	0.	18	0.
	19	Deferred revenue	37,182,428.	19	33,229,425.
	20	Tax-exempt bond liabilities	0.	20	0.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
jab		controlled entity or family member of any of these persons	0.	22	0.
	23	Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24	Unsecured notes and loans payable to unrelated third parties	22,059,960.	24	22,101,343.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	1,595.	25	28,774,759.
	26	Total liabilities. Add lines 17 through 25	75,139,965.	26	96,633,690.
ces		Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
<u>a</u>	27	Net assets without donor restrictions	330,840.	27	-3,278,572.
Ba	28	Net assets with donor restrictions	91,392,744.	28	117,966,137.
Fund Balances		Organizations that do not follow FASB ASC 958, check here ▶ and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
Assets or	30	Paid-in or capital surplus, or land, building, or equipment fund.		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds		31	
بٍ	32	Total net assets or fund balances	91,723,584.	32	114,687,565.
Net	33	Total liabilities and net assets/fund balances	166,863,549.	33	211,321,255.
_	JJ	Total habilities and het assets/fund palatices,	100,000,040.	<u> </u>	Form 990 (2019)

Form **990** (2019)

Form 990 (2019) Page **12**

OIIII J	(2013)				ıα	9c • =
Part	XI Reconciliation of Net Assets					$\overline{}$
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		84,6		
2	Total expenses (must equal Part IX, column (A), line 25)	2		71,1		
3	Revenue less expenses. Subtract line 2 from line 1	3		13,4		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		91,7		
5	Net unrealized gains (losses) on investments	5		9,5	69,2	236.
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain on Schedule O)	9		_	99,4	148.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	1	14,6	87,5	65.
Part						
	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," ex	plain	ı in			
	Schedule O.					
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 com	piled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed o	n 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 ove	rsigh	t of			
	the audit, review, or compilation of its financial statements and selection of an independent accountar	_		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, ex					
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in	the			
	Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	ergo	the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	_		3b		
				Form	990	(2019)

JSA

SCHEDULE A (Form 990 or 990-EZ)

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

2019
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

SOLOMON R. GUGGENHEIM FOUNDATION

Employer identification number 13-5562233

Рa	rt I	Reason for Public Cha	rity Status (All c	organizations must c	omplet	e this pa	art.) See instructions					
The	org	anization is not a private fou	ndation because it	is: (For lines 1 through	gh 12, ch	eck only	one box.)					
1		A church, convention of chu	urches, or associa	tion of churches desc	ribed in s	ection 1	70(b)(1)(A)(i).					
2		A school described in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	90 or 990)-EZ).)					
3		A hospital or a cooperative	hospital service o	rganization described	n sectio	n 170(b)	(1)(A)(iii).					
4		A medical research organiz	zation operated in	conjunction with a hos	spital de	scribed in	n section 170(b)(1)(A)	(iii). Enter the				
		hospital's name, city, and st	tate:									
5		An organization operated t	for the benefit of	a college or universit	y owne	d or ope	erated by a governme	ntal unit described ir				
		section 170(b)(1)(A)(iv). (C	Complete Part II.)									
6		A federal, state, or local go	•				,,,,,,,,					
7	Х	An organization that norma			pport fr	om a go	vernmental unit or fro	om the general public				
		described in section 170(b)		· · · · · · · · · · · · · · · · · · ·								
8		A community trust describe										
9			anization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college grant college of agriculture (see instructions). Enter the name, city, and state of the college or									
		•	grant college of ag	griculture (see instruct	ions). E	nter the	name, city, and state of	the college or				
		university:										
10		receipts from activities rela support from gross investm acquired by the organizatio	zation that normally receives: (1) more than 331/3 % of its support from contributions, membership fees, and gross rom activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its rom gross investment income and unrelated business taxable income (less section 511 tax) from businesses by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) zation organized and operated exclusively to test for public safety. See section 509(a)(4).									
11			•	•	•							
12		An organization organized	•	•								
		of one or more publicly su										
	Г	Check the box in lines 12a t										
а		Type I. A supporting orga	•	•			• , , ,					
		the supported organization				ajority oi	the directors or truste	es of the				
h	Г	supporting organization.	-			. with ita	oupported organization	on(a) by baying				
b	_	Type II. A supporting org control or management or	•									
		organization(s). You must		=	ille Salli	e persor	is that control of man	age the supported				
С	Г	Type III functionally integ	•		ted in c	onnectio	n with and functional	ly integrated with				
·		its supported organization						iy integrated with,				
d	Г	Type III non-functionally	. , .	•				ted organization(s)				
_		that is not functionally inte			-							
		requirement (see instruct	-		-		•					
е		Check this box if the orga		-				I, Type III				
		functionally integrated, or										
f	En	ter the number of supported	• •		-	-						
g	Pro	ovide the following information	on about the suppo	orted organization(s).								
	(i) N	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10		organization	(v) Amount of monetary	(vi) Amount of				
				above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)				
					Yes	No						
(A)												
(B)												
(C)												
·												
(D)												
/E\												
(E)												
Tota	al											
							l .					

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)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	19,518,463.	26,737,613.	23,247,345.	41,588,253.	31,680,309.	142,771,983.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	19,518,463.	26,737,613.	23,247,345.	41,588,253.	31,680,309.	142,771,983.
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)						10,053,825.
6	Public support. Subtract line 5 from line 4						132,718,158.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	19,518,463.	26,737,613.	23,247,345.	41,588,253.	31,680,309.	142,771,983.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	9,696,939.	2,614,548.	2,831,682.	1,536,113.	3,052,099.	19,731,381.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	1,430,608.	1,631,597.	1,754,719.	1,621,366.	1,195,673.	7,633,963.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . ATCH. 1	3,175,569.	1,987,913.	2,200,611.	1,713,658.	13,251,758.	22,329,509.
11	Total support. Add lines 7 through 10						192,466,836.
12	Gross receipts from related activities, etc. (s	see instructions) .				12	167,030,667.
13	First five years. If the Form 990 is forganization, check this box and stop here						
	tion C. Computation of Public Sup						<u> </u>
14	Public support percentage for 2019 (li		•			14	68.96%
15	Public support percentage from 2018	•	•			15	72.59%
16a	331/3% support test - 2019. If the org	=					
	box and stop here. The organization q			-			
b	331/3% support test - 2018. If the org						
47-	this box and stop here. The organization			-			
17a	10%-facts-and-circumstances test - 2						
	10% or more, and if the organization					-	•
	Part VI how the organization meets t			-			
L	organization						
D		_	•		•		
	15 is 10% or more, and if the organization						-
	Explain in Part VI how the organizati supported organization						
18	Private foundation. If the organization						
-	instructions						

Schedule A (Form 990 or 990-EZ) 2019 Page 3

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

(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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for organization, check this box and stop here .	Ū	•		•		` ` ` ` _
Sec	tion C. Computation of Public Supp						
15	Public support percentage for 2019 (line 8,	column (f), divid	ded by line 13, colu	mn (f))		15	%
16	Public support percentage from 2018 Scheo	dule A, Part III, li	ne 15			16	%
Sec	tion D. Computation of Investment						
17	Investment income percentage for 2019 (lin			13, column (f))		17	%
18	Investment income percentage from 2018 S					18	%
	331/3% support tests - 2019. If the org		= = =				
	17 is not more than 331/3%, check this	_					
b	331/3% support tests - 2018. If the orga			•			
_	line 18 is not more than 331/3 %, check						
20	Private foundation. If the organization d		•	•			

Schedule A (Form 990 or 990-EZ) 2019 Page 4

Part IV **Supporting Organizations**

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

s

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
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).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
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.	3b		
С	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.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
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.	4b		
С	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.	4c		
5а		5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
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 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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 .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с		
10 a	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			

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

10a

10b

supporting organizations)? If "Yes," answer 10b below.

determine whether the organization had excess business holdings.)

Schedule A (Form 990 or 990-EZ) 2019 Page **5**

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Section	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations		I	
			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	on D. All Type III Supporting Organizations		V	NI -
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	NO
•	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 in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Section	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structi	ons).	
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions).	
_			Yes	No
2	Activities Test. Answer (a) and (b) below.			
а	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.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
D	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.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
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.	3b		

Schedule A (Form 990 or 990-EZ) 2019

Type III Non-Functionally Integrated 509(a)(3) Supporting Organ Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organizations.	g trust or	n Nov. 20, 1970 (expla		
Section A - Adjusted Net Income	24110115 1	(A) Prior Year	(B) Current Year (optional)	
1 Net short-term capital gain	1			
2 Recoveries of prior-year distributions	2			
3 Other gross income (see instructions)	3			
4 Add lines 1 through 3.	4			
5 Depreciation and depletion	5			
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or				
maintenance of property held for production of income (see instructions)	6			
7 Other expenses (see instructions)	7			
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):				
a Average monthly value of securities	1a			
b Average monthly cash balances	1b			
c Fair market value of other non-exempt-use assets	1c			
d Total (add lines 1a, 1b, and 1c)	1d			
e Discount claimed for blockage or other				
factors (explain in detail in Part VI):				
2 Acquisition indebtedness applicable to non-exempt-use assets	2			
3 Subtract line 2 from line 1d.	3			
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4			
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6 Multiply line 5 by .035.	6			
7 Recoveries of prior-year distributions	7			
8 Minimum Asset Amount (add line 7 to line 6)	8			
Section C - Distributable Amount			Current Year	
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2 Enter 85% of line 1.	2			
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4 Enter greater of line 2 or line 3.	4			
5 Income tax imposed in prior year	5			
6 Distributable Amount. Subtract line 5 from line 4, unless subject to				
emergency temporary reduction (see instructions).	6			
7 Check here if the current year is the organization's first as a non-functionall	y integra	ated Type III supporting	g organization (see	
instructions).	-	• • • •	•	

Schedule A (Form 990 or 990-EZ) 2019

Part		Supporting Organizat	ions (continuea)	
Sect	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exer			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organized	zations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
С	Excess from 2017			
d	Excess from 2018			
е	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

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

	<u> </u>	<u> </u>		<u> </u>		
					ATTACHMENT 1	
SCHEDULE A, PART II -	OTHER INCOM	E				
DESCRIPTION	2015	2016	2017	2018	2019	TOTAL
FUNDRAISING EVENTS	906,169.	661,209.	1,089,687.	919,190.	822,373.	4,398,628.
ART SALE PROCEEDS	1,367,342.		35,200.	11,650.	11,579,127.	12,993,319.
GODDODATE TURNING	441 858	000 006	501 515	460,000	406 500	0 000 560
CORPORATE EVENTS	441,757.	820,986.	701,517.	468,002.	406,500.	2,838,762.
RESTAURANT INCOME	460,301.	505,718.	371,689.	311,707.	435,889.	2,085,304.
125110101011 1110012	100,301.	303,710.	3,1,003.	311,707.	133,003.	2,003,301.
MISCELLANEOUS INCOME			2,518.	3,109.	7,869.	13,496.
TOTALS	3,175,569.	1,987,913.	2,200,611.	1,713,658.	13,251,758.	22,329,509.

SCHEDULE D (Form 990)

Part I

1 2

3

5

6

2

3

6

7

8

Part II

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Open to Public

OMB No. 1545-0047

► Go to www.irs.gov/Form990 for instructions and the latest information Internal Revenue Service Name of the organization SOLOMON R. GUGGENHEIM FOUNDATION

al Revenue Service	► Go to www.irs.gov/	<i>Form990</i> for instructions ar	na the latest informa	tion. Inspection
of the organization				Employer identification number
OMON R. GUGGE	NHEIM FOUNDATION			13-5562233
tl Organiza	tions Maintaining Donor Advi	sed Funds or Other Si	milar Funds or A	Accounts.
Complete	e if the organization answered	"Yes" on Form 990, Pa	rt IV, line 6.	
		(a) Donor advised	funds	(b) Funds and other accounts
Total number at e	nd of year			
	of contributions to (during year)			
Aggregate value of	of grants from (during year)			
Aggregate value a	it end of year			
Did the organizati	ion inform all donors and donor	advisors in writing that	the assets held in	n donor advised
funds are the orga	nization's property, subject to the	organization's exclusive I	legal control?	Yes . No
Did the organizati	on inform all grantees, donors, a	and donor advisors in writ	ing that grant fun	ids can be used
•	purposes and not for the benef			
	nissible private benefit?			Yes No
	tion Easements.	\/ F 000 D	1 1 / 1 lin - 7	
	e if the organization answered		· · · · · · · · · · · · · · · · · · ·	
	servation easements held by the	` `	7 ''''	Control of the Control of the Control
	n of land for public use (for example	, recreation or education)		f a historically important land area
	of natural habitat			f a certified historic structure
	n of open space through 2d if the organization he	old a qualified concernation	n contribution in t	he form of a conservation
-	ast day of the tax year.	eid a quaiilled conservatio		Held at the End of the Tax Year
	onservation easements			2a
	tricted by conservation easements			2b
	vation easements on a certified			2c
	rvation easements included in (c			
	isted in the National Register	•		2d
				ated by the organization during the
tax year ▶		, , , , , , , , , , , , , , , , , , ,	•	3
-	where property subject to conse	rvation easement is located	d ▶	
	ation have a written policy reg			n, handling of
violations, and enf	orcement of the conservation ea	sements it holds?		Yes No
Staff and volunteer	hours devoted to monitoring, inspe	ecting, handling of violation	s, and enforcing c	onservation easements during the year

balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)

and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and

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

- If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. 1a
- If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the
- following amounts required to be reported under FASB ASC 958 relating to these items: Revenue included on Form 990, Part VIII, line 1. ▶ \$

Pa	rt Organizations Maintaini	ng Collections of	Art, Historical Tre	asures, o	r Other S	Similar Assets (d	continued)				
3	Using the organization's acquisition	on, accession, and c	ther records, check	any of the	e followir	ng that make sigr	nificant use	of its			
	collection items (check all that app	ly):									
а	X Public exhibition		d X Loan o	or exchange	program						
b	X Scholarly research		e Other								
С											
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part										
	XIII.		·	•	· ·	•					
5	During the year, did the organization	on solicit or receive d	onations of art, histo	orical treasu	ures, or ot	ther similar					
	assets to be sold to raise funds rath					_	Yes	X No			
Pa	rt IV Escrow and Custodial A		·	<u> </u>							
	Complete if the organiza 990, Part X, line 21.		s" on Form 990, F	Part IV, line	9, or rep	ported an amour	nt on Form	1			
1a	Is the organization an agent, truste	ee, custodian or othe	er intermediary for c	ontributions	or other	assets not					
	included on Form 990, Part X?						Yes	No			
b	If "Yes," explain the arrangement i	n Part XIII and comp	lete the following tak	ole:				_			
	, ,	'	0			Amount					
С	Beginning balance			1c							
d	Additions during the year										
е	Distributions during the year										
f	Ending balance										
2a	Did the organization include an am				ustodial a	ccount liability?	Yes	No			
	If "Yes," explain the arrangement i						— ⊢				
	rt V Endowment Funds.										
	Complete if the organiza	ation answered "Ye	s" on Form 990. F	Part IV. line	10.						
	с сопрессо и иле содения	(a) Current year	(b) Prior year	(c) Two yea		(d) Three years back	(e) Four yea	rs back			
4.	Denimina of wear balance	85,538,857.	92,009,498.	84,312		77,862,814.	70,653				
1a	Beginning of year balance	8,770,359.	17,698,991.	7,377		15,883,154.	21,104				
b	Contributions			.,	, ====						
С	Net investment earnings, gains,	10,960,534.	-3,803,978.	9,226	.659.	-1,692,867.	-1,961	1.174.			
	and losses	10/200/0011	3700377701	7,220	70071						
	Grants or scholarships										
е	Other expenditures for facilities	2,600,645.	20,365,654.	8,907	333	7,740,412.	11,934	1 279			
_	and programs	2,000,015.	20,303,031.	0,007	, 555.	7,710,112.	11,00	1,2,5			
f	Administrative expenses	102,669,105.	85,538,857.	92,009	498	84,312,689.	77,862	2 814			
g	End of year balance					01,312,000.	77,002	2,011.			
2 a	Provide the estimated percentage Board designated or quasi-endown	nent > 13.0000	end balance (line 1g, _%	column (a))	held as:						
b	Permanent endowment ▶ 80.0	0000 %									
С	Term endowment ► 7.0000	_%									
	The percentages on lines 2a, 2b, a	and 2c should equal 1	00%.								
3a	Are there endowment funds not in	the possession of th	e organization that	are held an	d adminis	stered for the					
	organization by:						Yes	s No			
	(i) Unrelated organizations						3a(i)	X			
	(ii) Related organizations						3a(ii)	X			
b	If "Yes" on line 3a(ii), are the relate	ed organizations liste	d as required on Sch	edule R?			3b				
4	Describe in Part XIII the intended										
Pa	rt VI Land, Buildings, and Equal Complete if the organiz	uipment.	oo" on Form 000 I	Dort IV line	. 11. C	00 Form 000 Pa	wtV line 1	0			
	Description of property	(a) Cost or		or other basis	(c) Accu		ITLA, IITLE I I) Book value	0.			
	Description of property	(invest		ther)	depred) Book value				
1a	Land		3,1	.30,643.			3,130,	,643.			
b	Buildings		104,4	85,190.	67,55	6,704.	36,928,	,486.			
С	Leasehold improvements			87,114.	3,76	2,519.	10,824,	,595.			
d	Equipment		3,8	32,993.	1,78	8,122.	2,044	,871.			
е	Other		4	168,046.	1	7,154.	450	,892.			
Tota	I. Add lines 1a through 1e. (Column		n 990, Part X, columi	n (B), line 10	Oc.)		53,379	,487.			

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019			Page
Part VII Investments - Other Securities.			
Complete if the organization answer	ed "Yes" on Form 990, I	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 marke	
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) EQUITY FUNDS	42,832,048.	FMV	
(B) FIXED INCOME FUNDS	10,340,006.	FMV	
(C) EVENT/CREDIT ARBITRAGE FUNDS	5,731,348.	FMV	
(D) FUND OF HEDGE FUNDS	4,101,448.	FMV	
(E) INTERNATIONAL FUNDS	3,138,283.	FMV	
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	66,143,133.		
Part VIII Investments - Program Related.	LIIV II E 000 I	D . N . II	D ()(10
Complete if the organization answer			
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market	
		Cost of end-of-year marke	et value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answer	ed "Yes" on Form 990 I	Part IV line 11d See Form 990	Part X line 15
	Description	Tarry, mic Tra. Gee Form 550,	(b) Book value
(1) RIGHT-OF-USE ASSET	Безсприон		22,113,416
(2)			22/113/110
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (E	3) line 15.)		22,113,416
Part X Other Liabilities.	, , , , , , , , , , , , , , , , , , , ,		
Complete if the organization answer	ed "Yes" on Form 990, I	Part IV, line 11e or 11f. See Forr	n 990, Part X,
line 25.			
1. (a) Desc	ription of liability		(b) Book value
(1) Federal income taxes			
(2) LEASE LIABILITIY			28,774,759
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			<u> </u>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

28,774,759.

Part 2	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	۱.	
1	Total revenue, gains, and other support per audited financial statements	1	96,769,852.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
	Recoveries of prior year grants		
	Other (Describe in Part XIII.)		
	Add lines 2a through 2d	2e	9,607,776.
3	Subtract line 2e from line 1	3	87,162,076.
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 1,515,668.		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	-2,542,001.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	84,620,075.
Part 1	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	rn.	
1	Total expenses and losses per audited financial statements	1	73,805,871.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	Donated services and use of facilities		
	Prior year adjustments		
	Other losses		
	Other (Describe in Lart Alli.)	2e	4,195,657.
	Add lines 2a through 2d	3	69,610,214.
3	Subtract line 2e from line 1		,,
4 a	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIII.)		
	Add lines 4a and 4b	4c	1,515,668.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	5	71,125,882.
Provide 2; Part	Supplemental Information. The the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part II, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform PAGE 5		

Part XIII Supplemental Information (continued)

FORM 990, PART XIII SCHEDULE D, PART III, LINE 1

IN ACCORDANCE WITH INDUSTRY PRACTICE, ART OBJECTS PURCHASED, DONATED AND BEQUEATHED ARE INCLUDED IN PERMANENTLY RESTRICTED NET ASSETS AT A VALUE OF \$1. CONTRIBUTIONS FOR THE PURCHASE OF COLLECTION ITEMS, NET ASSETS RELEASED FROM RESTRICTIONS TO PURCHASE COLLECTION ITEMS, THE COST OF ALL COLLECTION ITEMS PURCHASED AND THE PROCEEDS FROM DEACCESSIONED AND NON-ACCESSIONED ART ARE REPORTED AS CHANGES IN NET ASSETS RELATED TO COLLECTION ITEMS PURCHASED AND SOLD IN THE STATEMENT OF ACTIVITIES.

SCHEDULE D, PART III, LINE 4

THE FOUNDATION'S PERMANENT COLLECTION IS AT THE HEART OF THE FOUNDATION'S IDENTITY. THIS COLLECTION WAS FORMED IN LARGE PART THROUGH THE ACQUISITION OF NOTABLE PRIVATE COLLECTIONS. AUGMENTED THROUGH NUMEROUS ACQUISITIONS UNDER THE LEADERSHIP OF THE FOUNDATION'S DIRECTORS AND CURATORS, AND WITH THE SUPPORT OF THE FOUNDATION'S ACQUISITION GROUPS, THESE COLLECTIONS FORM A UNIQUE GLOBAL COLLECTION THAT REFLECTS THE RICH TRAJECTORY OF ART FROM THE LATE 19TH CENTURY THROUGH THE PRESENT.

SCHEDULE D, PART V, LINE 4

THE FOUNDATION'S ENDOWMENT FUNDS ARE USED FOR EDUCATIONAL PROGRAMS, IN SUPPORT OF CURATORIAL CHAIRS, ART PURCHASES, PUBLICATIONS, EXHIBITIONS, PGC'S INTERNSHIP PROGRAM, CONSERVATION OF ART AND COLLECTION CARE, A CONSERVATION FELLOWSHIP, AND GENERAL SUPPORT OF THE FOUNDATION'S OPERATIONS.

Part XIII Supplemental Information (continued)

SCHEDULE D, PART X, LINE 2

THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE U.S. INTERNAL REVENUE CODE. CONTRIBUTIONS TO THE FOUNDATION ARE TAX DEDUCTIBLE TO CONTRIBUTORS, TO THE EXTENT PROVIDED BY LAW. THE FOUNDATION IS SUBJECT TO UNRELATED BUSINESS INCOME TAX ON SALES OF CERTAIN MERCHANDISE AND ACTIVITIES. THE FOUNDATION'S ITALIAN OPERATIONS ARE ALSO SUBJECT TO ITALIAN TAX.

THE FOUNDATION IS SUBJECT TO THE PROVISIONS OF THE FINANCIAL ACCOUNTING STANDARDS CODIFICATION ("ASC") TOPIC 740-10-05, RELATING TO ACCOUNTING AND REPORTING FOR UNCERTAINTY IN INCOME TAXES. BECAUSE OF THE FOUNDATION'S GENERAL TAX-EXEMPT STATUS, ASC TOPIC 740-10-05 HAS NOT HAD, AND IS NOT EXPECTED TO HAVE, A MATERIAL IMPACT ON THE FOUNDATION'S FINANCIAL STATEMENTS.

SCHEDULE D, PART XI, LINE 2D FOREIGN CURRENCY TRANSLATION \$(99,448)

SCHEDULE D, PART XI, LINE 4B

COST OF GOODS SOLD \$(4,057,669)

SCHEDULE D, PART XII, LINE 2D COST OF GOODS SOLD \$4,057,669

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

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

OMB No. 1545-0047 **Open to Public** Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

13-5562233 SOLOMON R. GUGGENHEIM FOUNDATION General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b.

	For grantmakers. Does the orgother assistance, the grantees' award the grants or assistance?	eligibility for t				Yes No
	For grantmakers. Describe in Foutside the United States.	Part V the orga	anization's pro	ocedures for monitoring t	the use of its grants and	d other assistance
3	Activities per Region. (The follow	ing Part I, line	3 table can be	e duplicated if additional sp	ace is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)	EAST ASIA AND THE PACIFIC	0.	0.	PROGRAM SERVICES	ART PURCHASE	1,570,000.
(2)	EUROPE	1.	40.	PROGRAM SERVICES	PEGGY GUGGENHEIM COLLE	2,920,000.
(3)	MIDDLE EAST AND NORTH AFRICA	0.	0.	PROGRAM SERVICES	GUGGENHEIM ABU DHABI	374,000.
(4)	NORTH AMERICA	0.	0.	PROGRAM SERVICES	ART PURCHASE	127,000.
(5)	RUSSIA/INDEPENDENT STATES	0.	0.	PROGRAM SERVICES	CONSERVATION TRAVEL	7,000.
(6)	SOUTH AMERICA	0.	0.	PROGRAM SERVICES	TRAVELING EXHIBITIONS	213,000.
(7)	SOUTH ASIA	0.	0.	PROGRAM SERVICES	ATTENDANCE AT SEMINAR	23,000.
(8)	CENTRAL AMERICA/CARIBBEAN	0.	0.	INVESTMENTS		50,556,000.
(9)	EUROPE	0.	0.	INVESTMENTS		29,220,000.
(10)	NORTH AMERICA	0.	0.	INVESTMENTS		10,076,000.
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Subtotal	1.	40.			95,086,000.
b	Total from continuation sheets to Part I					
С		1.	40.			95,086,000.

Schedule F (Form 990) 2019

Part II	Grants and Other Assist Part IV, line 15, for any re							red "Yes" on	Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
by t	er total number of recipient orga he IRS, or for which the grantee er total number of other organiz	or counsel has provi	ided a section 501(c)(3) ed	quivalency lette	er				

Schedule F (Form 990) 2019

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
_(1)							
_(2)							
_(3)							
_(4)							
_(5)							
_(6)							
_ (7)							
_(8)							
_(9)							
<u>(10)</u>							
<u>(11)</u>							
(12)							
(13)							
(14)							
<u>(</u> 15)							
<u>(</u> 16)							
<u>(</u> 17)							
(18)							

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

"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see

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

Schedule F (Form 990) 2019

Νo

X

Yes

Part V

Supplemental Information

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

SCHEDULE F, PART I, LINE 3

PROGRAM SERVICE ACTIVITY IN NORTH AMERICA

FOREIGN EXPENDITURES IN NORTH AMERICA WERE INCURRED FOR VARIOUS PROGRAM

SERVICES INCLUDING INVENTORY PURCHASES, SALARY FOR AN EXHIBITION

CONSULTANT, AND SHIPPING AND CRATING FOR TRAVELING EXHIBITIONS.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

SOLOMON R. GUGGENHEIM FOUNDATION

Inspection

Employer identification number

13-5562233

Form 990-EZ filers are not re					Yes" on Form 99	00, Part IV, line 17	7.		
1 Indicate whether the organization rai					activities Chack a	Il that apply			
77	e e			_					
V	V								
	f	\rightarrow				5			
c Phone solicitations	a — observe and a management								
d X In-person solicitations									
2a Did the organization have a written o or key employees listed in Form 990							X Yes No		
b If "Yes," list the 10 highest paid indi compensated at least \$5,000 by the	viduals or entities								
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	cus		Iraiser have control of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization		
		Ye	es	No					
1 COMMUNITY COUNSELLING	FUNDRAISING								
SERVICE CO LLC	CONSULTING			X	4,493,801.	311,602.	4,182,199.		
2									
3									
4									
5									
5									
6									
7									
8									
9									
10									
Total				▶	4,493,801.	311,602.			
3 List all states in which the organiza	tion is registered of	or lice	nsed	to solicit	contributions or	has been notified	it is exempt from		
registration or licensing.									
AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA									
KS, KY, LA, ME, MD, MA, MI, MN, MS, MO		NY,I	NC, N.	D,OH,					
OK, OR, PA, RI, SC, TN, TX, UT, VA, WA	, W∨ , W⊥ ,								

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.	

		events with gross receipts gre	eater than \$5,000.			
			(a) Event #1 FALL INT'L GALA	(b) Event #2 YEAR W/CHILD	(c) Other events	(d) Total events (add col. (a) through col. (c))
<u>e</u>			(event type)	(event type)	(total number)	coi. (c))
Revenue	1	Gross receipts	2,072,894.	281,804.	945,501.	3,300,199
æ		Less: Contributions Gross income (line 1 minus	1,993,565.	268,698.	215,563.	2,477,826
		line 2)	79,329.	13,106.	729,938.	822,373
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
t Exp	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses	1,201,529.	48,390.	794,130.	2,044,049
	10 11	Direct expense summary. Add lin Net income summary. Subtract li	es 4 through 9 in colu ne 10 from line 3, colu	mn (d) ımn (d)		2,044,049
Pa		Gaming. Complete if the org	anization answered "	Yes" on Form 990, I	Part IV, line 19, or	reported more than
_		\$15,000 on Form 990-EZ, lin	e 6a.	I		Τ
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
_	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes% No	Yes% No	
	7	Direct expense summary. Add lin	es 2 through 5 in colu	mn (d)	>	
	8	Net gaming income summary. Su	ubtract line 7 from line	1, column (d)		
9 a b	ì	Enter the state(s) in which the org Is the organization licensed to con If "No," explain:		in each of these state		. Yes No
10a b		Were any of the organization's gaminous of the organization of the				Yes No

SCHEDULE J (Form 990)

Compensation InformationFor certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SOLOMON R. GUGGENHEIM FOUNDATION

Employer identification number 13-5562233

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	X First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
_				
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	1b		Х
2	explain	10		21
2	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2	x	
_			21	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Х	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
3	compensation contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
-	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
•	compensation contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
•	payments not described on lines 5 and 6? If "Yes," describe in Part III.	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2019

Schedule J (Form 990) 2019

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 o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
RICHARD ARMSTRONG	(i)	828,001.	0.	0.	234,605.	11,385.	1,073,991.	0.
1 TRUSTEE/DIR. OF MUSEUM & FDTN.	(ii)	0.	0.	0.	0.	0.	0.	0.
ELIZABETH DUGGAL TAGHIP	(i)	395,920.	0.	0.	0.	392.	396,312.	0.
2 ^{SENIOR DEPUTY DIRECTOR & COO}	(ii)	0.	0.	0.	0.	0.	0.	0.
SARAH G. AUSTRIAN	(i)	372,422.	0.	0.	15,400.	5,987.	393,809.	0.
DEP DIR, GEN COUNSEL & SEC.	(ii)	0.	0.	0.	0.	0.	0.	0.
MARTHA WITHINGTON	(i)	278,519.	0.	0.	0.	16,981.	295,500.	0.
4 ^{CFO}	(ii)	0.	0.	0.	0.	0.	0.	0.
KAROLE VAIL	(i)	248,997.	0.	0.	18,003.	87,661.	354,661.	0.
5DIR, PEGGY GUGGENHEIM COLL.	(ii)	0.	0.	0.	0.	0.	0.	0.
NANCY SPECTOR, ARTISTIC	(i)	290,000.	0.	0.	12,750.	17,049.	319,799.	0.
6STOCKMAN CURATOR	(ii)	0.	0.	0.	0.	0.	0.	0.
JUAN IGNACIO VIDARTE	(i)	198,349.	0.	0.	5,950.	0.	204,299.	0.
PEP. DIR & CO FOR GLOBAL STRAT	(ii)	0.	0.	0.	0.	0.	0.	0.
MARY ANN TALOTTA	(i)	208,637.	0.	0.	11,475.	6,291.	226,403.	0.
8SR. DIR., IND. DEV. & CAMPAIGN	(ii)	0.	0.	0.	0.	0.	0.	0.
CAROL STRINGARI	(i)	191,760.	0.	0.	10,547.	5,987.	208,294.	0.
9 DEPUTY DIRECTOR & CHIEF CONS.	(ii)	0.	0.	0.	0.	0.	0.	0.
SARAH EATON	(i)	177,404.	0.	0.	9,757.	15,942.	203,103.	0.
10 DIR. MEDIA & PUBLIC REL.	(ii)	0.	0.	0.	0.	0.	0.	0.
MARIANNA HORTON MERMIN	(i)	180,739.	0.	0.	9,941.	392.	191,072.	0.
11 SENIOR ASSOCIATE COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2019

Part | 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.

SCHEDULE J, PART I, LINE 1A

(A) THE FOUNDATION PROVIDED ONE FIRST-CLASS ROUND-TRIP DOMESTIC FLIGHT FOR THE DIRECTOR WHEN THERE WAS NO BUSINESS CLASS.

SCHEDULE J, PART I, LINE 1B

(B) IN 2019, THE FOUNDATION'S WRITTEN EXPENSE REPORT AND REIMBURSEMENT POLICY PERMITTED THE DIRECTOR TO TRAVEL BY FIRST CLASS IF THE UPGRADE TO FIRST CLASS CAME AT NO COST TO THE FOUNDATION. ALL FIRST-CLASS TRAVEL BY THE DIRECTOR COMPLIED WITH THIS POLICY EXCEPT ONE ROUND-TRIP DOMESTIC FLIGHT WHEN THERE WAS NO BUSINESS CLASS.

NONQUALIFIED RETIREMENT PLAN

SCHEDULE J, PART I, LINE 4B

THE DIRECTOR OF THE MUSEUM AND FOUNDATION PARTICIPATES IN A SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLAN. AN ACCRUAL FOR FUTURE PAYMENTS HAS BEEN MADE AND IS REFLECTED ABOVE.

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number 13-5562233

SOL	OMON R. GUGGENHEIM FOUND	ATION			13	3-5562233			
Par	Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contributi amounts reported of Form 990, Part VIII, lii	on	Method o			
1	Art - Works of art	Х	22.		0.	N/A			
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household								
-	goods								
6	Cars and other vehicles.								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded		16.	444,9	47.	FMV			
10	Securities - Closely held stock								
11	Securities - Partnership, LLC,								
• •	or trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation								
	contribution - Historic								
	structures								
14	Qualified conservation								
17	contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ►(ATCH 1)		1.	130,6	07.				
26	Other ►()								
27	Other ►()								
28	Other ►(
29	Number of Forms 8283 received	hy the ora	anization during the tax v	ear for contributions	for				
23	which the organization completed F	, ,	,			29			
	which the organization completed i	01111 0200,	r art iv, Donee Acknowledg					Yes	No
30a	During the year, did the organizat	ion receive	by contribution any prope	rty reported in Part	l line	s 1 through			
oou	28, that it must hold for at least the		•	•		-			
	to be used for exempt purposes for	-					30a		Х
h	If "Yes," describe the arrangement i		ording poriou: , , , , , , ,				Ju		
31	Does the organization have a		tance nolicy that require	s the review of	anv r	nonstandard			
J 1	contributions?						31	Х	
322	Does the organization hire or use	third nart	ies or related organization	s to solicit process	Or s	ell noncash			
JEa	contributions?						32a	X	
h	If "Yes," describe in Part II.						u		
	If the organization didn't report an	amount in o	column (c) for a type of pro	nerty for which colur	nn (s)	is chacked			
~~	organization didn't lobolt dil	will could like the	, o . a	POLLY TOL WILLOUI COIGI	(U)	, io or ioonod.			

describe in Part II.

Schedule M (Form 990) (2019) Page **2**

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

SCHEDULE M, PART I, LINE 32B

THE FOUNDATION ENGAGES THIRD PARTIES TO SELL DEACCESSIONED WORKS OF ART AND WORKS OF ART THAT HAVE NOT BEEN ACCESSIONED.

SCHEDULE M, PART I, LINE 33

IN ACCORDANCE WITH INDUSTRY PRACTICE, ART OBJECTS PURCHASED, DONATED AND BEQUEATHED ARE INCLUDED IN PERMANENTLY RESTRICTED NET ASSETS AT A VALUE OF \$1. CONTRIBUTIONS FOR THE PURCHASE OF COLLECTION ITEMS, NET ASSETS RELEASED FROM RESTRICTIONS TO PURCHASE COLLECTION ITEMS, THE COST OF ALL ART PURCHASED AND THE PROCEEDS FROM THE SALE OF ART ARE REPORTED AS CHANGES IN NET ASSETS RELATED TO COLLECTION ITEMS PURCHASED AND SOLD IN THE STATEMENT OF ACTIVITIES.

SCHEDULE M, COLUMN B

THE FOUNDATION IS REPORTING THE NUMBER OF CONTRIBUTIONS RECEIVED.

Schedule M (Form 990) (2019) Page **2**

Part II Suppler

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.

ATTACHMENT 1 SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS (B) NUMBER OF (C) REVENUES (D) METHOD OF DESCRIPTION (A) CHECK CONTRIBUTIONS REPORTED DETERMINING RESTAURANT IMPROVEMENT Χ 130,607. COST 1. 1. TOTALS 130,607.

Schedule M (Form 990) (2019)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number 13-5562233

SOLOMON R. GUGGENHEIM FOUNDATION

FORM 990, PART I, LINE 1 & PART III, LINE 1 MISSION STATEMENT (CONTINUED)

AND EXPLORES IDEAS ACROSS CULTURES DYNAMIC CURATORIAL AND EDUCATIONAL INITIATIVES AND COLLABORATIONS. WITH ITS CONSTELLATION OF ARCHITECTURALLY AND CULTURALLY DISTINCT MUSEUMS, EXHIBITIONS, PUBLICATIONS, AND DIGITAL PLATFORMS, THE FOUNDATION ENGAGES BOTH LOCAL AND GLOBAL AUDIENCES.

FORM 990, PART III, LINE 4A (CONTINUED) THE FOUNDATION MAINTAINS EXTENSIVE CLIMATE-CONTROLLED, HIGHLY SECURE STORAGE FACILITIES FOR THE ART IN ITS COLLECTION. IT ALSO OPERATES A PHOTOGRAPHY STUDIO FOR THE DOCUMENTATION OF ART AND ARCHIVES TO STORE PHOTOGRAPHS OF ART AND MAKE THEM AVAILABLE TO THE PUBLIC FOR PUBLICATION OR STUDY. THE FOUNDATION MAINTAINS TWO ART CONSERVATION LABS TO PROPERLY CARE FOR THE ART IN ITS POSSESSION; IT ALSO CONDUCTS RESEARCH ON NEW TECHNIQUES IN ART CONSERVATION. THE FOUNDATION ACQUIRED MAJOR CONTEMPORARY PAINTINGS BY CHANTAL JOFFE, AD MINOLITI, R.H. QUAYTMAN, AND RIRKRIT TIRAVANIJA, AND SIGNIFICANT PAINTINGS FROM THE 1960S-80S BY RICHARD ARTSCHWAGER, JEAN DUBUFFET, JORGE EIELSON, ANNA BELLA GEIGER, SHIRAGA KAZUO, AND SHOZO SHIMAMOTO. THE FOUNDATION ALSO ACQUIRED MIXED MEDIA WORKS BY TAREK ATOUI, PIA CAMIL, FELICIANO CENTURION, SARA GREENBERGER RAFFERTY, LYLE ASHTON HARRIS, AND SARAH SZE, AS WELL AS SCULPTURES BY CHRYSSA, CHEN ZHEN, KAPWANI KIWANGA, SIMONE LEIGH, MARIELA SCAFATI, AND DANH VO. THE FOUNDATION ACQUIRED FILM AND VIDEO WORKS BY MERIEM BENANNI, CHIM-POM, CARLOS MARTIEL, KENNETH TAM, AND GILLIAN

FORM 990, PART III, LINE 4B (CONTINUED)

WEARING, AS WELL AS PHOTOGRAPHS BY DAWOUD BEY, JOHN EDMONDS, GAURI GILL, HERVE GUIBERT, MONA HATOUM, ZANELE MUHOLI, SENGA NENGUDI, LOTTY ROSENFELD, HANS ROSENSTROM, AND NAAMA TSABAR. THE FOUNDATION ALSO ACQUIRED WORKS ON PAPER BY POL BURY, RICHARD HAMILTON, MONA HATOUM, ZOE LEONARD, FRIDA ORUPABO, AND BETO SHWAFATY. THE TOTAL NUMBER OF WORKS ACQUIRED BY THE FOUNDATION IN 2019 WAS 68.

THE HUGO BOSS PRIZE 2018: SIMONE LEIGH, LOOPHOLE OF RETREAT (APRIL 19, 2019 - OCTOBER 27, 2019); ARTISTIC LICENSE: SIX TAKES ON THE GUGGENHEIM

COLLECTION (MAY 24, 2019 - JANUARY 12, 2020); BASQUIAT'S "DEFACEMENT": THE UNTOLD STORY (JUNE 21 - NOVEMBER 6, 2019); MARKING TIME: PROCESS IN

MINIMAL ABSTRACTION (DECEMBER 18, 2019 - PRESENT); AND THE FULLNESS OF

COLOR: 1960S PAINTING (DECEMBER 18, 2019 - PRESENT).

EXHIBITIONS PRESENTED IN 2019 AT THE PEGGY GUGGENHEIM COLLECTION IN VENICE INCLUDED: OSVALDO LICINI: LET SHEER FOLLY SWEEP ME AWAY (SEPTEMBER 22, 2018 - JANUARY 14, 2019); 1948: THE BIENNALE OF PEGGY GUGGENHEIM (MARCH 25, 2018 - JANUARY 14, 2019); THE NATURE OF ARP (APRIL 13 -SEPTEMBER 2, 2019); AND PEGGY GUGGENHEIM. THE LAST DOGARESSA (SEPTEMBER 21, 2019 - JANUARY 27, 2020). SELECTIONS FROM THE PEGGY GUGGENHEIM COLLECTION AND THE HANNELORE B. AND RUDOLPH B. SCHULHOF COLLECTION WERE ALSO ON VIEW. ADDITIONALLY, WORKS ARE EXHBITED IN THE NASHER SCULPTURE GARDEN. ALSO, THE PEGGY GUGGENHEIM COLLECTION HOSTED THE U.S. PAVILION FOR THE ARCHITECTURE BIENNALE (MAY 11 - NOVEMBER 24, 2019).

EXHIBITIONS PRESENTED IN 2019 AT THE GUGGENHEIM MUSEUM BILBAO INCLUDED:

DIANA THATER: A RUNAWAY WORLD (NOVEMBER 29, 2018 - MARCH 3, 2019);

ARCHITECTURE EFFECTS (DECEMBER 5, 2018 - APRIL 28, 2019); ALBERTO

GIACOMETTI: A RETROSPECTIVE (OCTOBER 19, 2018 - FEBRUARY 24, 2019);

ALLORA & CALZADILLA: THE TROPICAL PHARMACY (MARCH 15 - JUNE 23, 2019);

JENNY HOLZER: THING INDESCRIBABLE (MARCH 22 - SEPTEMBER 9, 2019); A

BACKWARD GLANCE: GIORGIO MORANDI AND THE OLD MASTERS (APRIL 12 - OCTOBER

6, 2019); LUCIO FONTANA: ON THE THRESHOLD (MAY 17 - SEPTEMBER 29, 2019);

GERHARD RICHTER: SEASCAPES (MAY 23 - SEPTEMBER 9, 2019); JESPER JUST:

THIS NAMELESS SPECTACLE (JULY 4 - OCTOBER 20, 2019); THOMAS STRUTH

(OCTOBER 2, 2019 - JANUARY 19, 2020); SOTO. THE FOURTH DIMENSION (OCTOBER 18, 2019 - FEBRUARY 9, 2020); MASTERPIECES OF THE KUNSTHALLE BREMEN: FROM DELACROIX TO BECKMANN (OCTOBER 25, 2019 - FEBRUARY 16, 2020); AND JESSE JONES: TREMBLE TREMBLE (OCTOBER 31, 2019 - MARCH 1, 2020). ADDITIONALLY SELECTIONS FROM THE GUGGENHEIM MUSEUM BILBAO WERE ALSO ON VIEW.

ORGANIZED BY THE FOUNDATION, SELECTIONS FROM THE THANNHAUSER COLLECTION

WERE PRESENTED AT THE GUGGENHEIM MUSEUM BILBAO (SEPTEMBER 21, 2018
MARCH 24, 2019), THE HÔTEL DE CAUMONT, AIX-EN-PROVENCE (MAY 1 - SEPTEMBER

29, 2019), AND THE PALAZZO REALE, MILAN (OCTOBER 17, 2019 - MARCH 1,

2020). ART AND CHINA AFTER 1989: THEATER OF THE WORLD WAS PRESENTED AT

THE SAN FRANCISCO MUSEUM OF MODERN ART (NOVEMBER 10, 2018 - FEBRUARY 24,

2019). AND JOSEF ALBERS IN MEXICO WAS PRESENTED AT THE HEARD MUSEUM

(FEBRUARY 1 - MAY 27, 2019).

Name of the organization

SOLOMON R. GUGGENHEIM FOUNDATION

13-5562233

FORM 990, PART III, LINE 4D

- (1) DISSEMINATING CURRENT SCHOLARSHIP AND PROMOTING LEARNING ARE THE PRIMARY GOALS OF THE MANY EXHIBITION AND COLLECTION CATALOGUES PRODUCED BY THE FOUNDATION. PUBLICATIONS PRESENT SCHOLARLY AND INSTRUCTIVE ART HISTORICAL INFORMATION IN THE FORM OF ESSAYS THAT CONTEXTUALIZE ART WITHIN LARGER MOVEMENTS OR DISCIPLINES; IN-DEPTH DISCUSSIONS OF INDIVIDUAL ARTWORKS; INTERVIEWS WITH ARTISTS; AS WELL AS UP-TO-DATE REFERENCE TOOLS SUCH AS BIBLIOGRAPHIES, BIOGRAPHIES, CHRONOLOGIES, AND EXHIBITION HISTORIES. PUBLICATIONS IN 2019 INCLUDED GUGGENHEIM MUSEUM COLLECTION A TO Z (4TH EDITION), BASQUIAT'S "DEFACEMENT": THE UNTOLD STORY; AND REPRINTS OF HILMA AF KLINT: PAINTINGS FOR THE FUTURE AND JOSEF ALBERS IN MEXICO.
- (2) SIGNIFICANT EXHIBITION, COLLECTIONS, EDUCATION, AUDIO, VIDEO, AND CATALOGUES ARCHIVES CONTENT IS AVAILABLE TO THE PUBLIC, FREE OF CHARGE, ON GUGGENHEIM.ORG, INCLUDING APPROXIMATELY 1,700 ARTWORKS BY MORE THAN 625 ARTISTS IN THE COLLECTION ONLINE. IN 2019 THE FOUNDATION PUBLISHED, ON A VARIETY OF TOPICS, 17 VIDEOS AND 32 AUDIO TRACKS, BRINGING THE TOTAL VIDEOS AVAILABLE ON THE SITE TO MORE THAN 420 AND AUDIO TRACKS TO MORE THAN 1,000. ALSO IN 2019, THE FOUNDATION PUBLISHED 16 BLOG POSTS THAT PROVIDE INSIGHTS INTO EXHIBITIONS, CONTEMPORARY ART, GLOBAL CULTURE, AND MUSEUM ARCHIVES AND HISTORY, BRINGING THE TOTAL NUMBER AVAILABLE ONLINE TO MORE THAN 1,020. IN 2019, GUGGENHEIM.ORG HAD APPROXIMATELY 6,778,000 USER SESSIONS, 4,770,000 USERS AND 14,478,000 PAGE VIEWS.

Name of the organization SOLOMON R. GUGGENHEIM FOUNDATION

Employer identification number

13-5562233

IN 2019, THE FOUNDTATION LAUNCHED A NEW DIGITAL GUIDE AS PART OF THE BLOOMBERG CONNECTS APP, PROVIDING VISITORS WITH ACCESSIBLE INFORMATION, BUILDING GUIDES, COLLECTION RESOURCES, AND SPECIAL EXHIBITION CONTENT. IN LATE 2019, THE BLOOMBERG CONNECTS APP WAS MADE AVAILABLE FOR DOWNLOAD ON THE APPLE APP AND GOOGLE PLAY STORES. THE DIGITAL GUIDE WAS ALSO AVAILABLE ON FREE "RENTAL" DEVICES TO VISITORS TO THE GUGGENHEIM MUSEUM FROM FEBRUARY 2019 THROUGH THE END OF THE YEAR. THIS MULTIFACETED TECHNOLOGY HAS SUPPORTED DEEP ENGAGEMENT FOR DIVERSE AUDIENCES WITH THE MODERN AND CONTEMPORARY ART EXHIBITED AT THE GUGGENHEIM MUSEUM. IN ADDITION TO THE 74,367 VISITORS BETWEEN APRIL AND DECEMBER, 2019, WHO USED A FREE, MUSEUM-PROVIDED DEVICE TO ACCESS THE DIGITAL GUIDE DURING THEIR VISIT, THE DOWNLOADABLE APP WAS USED NEARLY 2,800 TIMES BETWEEN NOVEMBER 19, 2019 (WHEN IT BECAME AVAILABLE IN APP STORES), AND DECEMBER 31, 2019.

(3) THE FOUNDATION EDUCATED THE GENERAL PUBLIC THROUGH FREE WITH

ADMISSION DAILY EDUCATOR LED TOURS, THE GALLERY GUIDE PROGRAM, WEEKLY

IN-GALLERY FAMILY PROGRAMS AND FILM SCREENINGS, COURSES, LECTURES,

SYMPOSIA, PERFORMANCES, AND OTHER PROGRAMS. THE GUGGENHEIM MUSEUM

WELCOMES STUDENTS AT ALL PUBLIC PROGRAMS AND OFFERS DISCOUNTED OR

COMPLIMENTARY TICKETS TO STUDENTS WITH VALID ID. THE FOUNDATION'S MIND'S

EYE PROGRAM EXPLORED CURRENT EXHIBITIONS THROUGH VERBAL IMAGING AND TOUCH

FOR VISITORS WHO ARE BLIND OR HAVE LOW VISION. VISITORS WHO ARE DEAF OR

HARD OF HEARING WERE SERVED THROUGH ASL-INTERPRETED CURATOR'S AND

CONSERVATOR'S EYE TOURS. THE FOUNDATION'S LEARNING THROUGH ART PROGRAM

SPONSORED ARTIST RESIDENCIES IN PUBLIC SCHOOLS IN ALL FIVE BOROUGHS OF
NEW YORK CITY AND MOUNTED A MONTH LONG EXHIBITION OF STUDENT WORK IN THE
MUSEUM'S GALLERIES. EDUCATORS PARTICIPATED IN WEEKEND WORKSHOPS FOCUSED
ON CLASSROOM APPLICATIONS AND FREE OPEN HOUSE EVENTS WHERE THEY WERE ABLE
TO VIEW NEW EXHIBITIONS. FAMILY PROGRAMS WERE AVAILABLE TO VISITORS,
ENCOURAGING THEM TO DISCOVER THE MUSEUM THROUGH FAMILY TOURS, ART MAKING
WORKSHOPS AND THE DISTRIBUTION OF FREE GUIDES AND ACTIVITY PACKS. K-12
SCHOOL GROUPS PARTICIPATED IN INTERACTIVE MUSEUM TOURS THAT WERE
CUSTOMIZED FOR BOTH TYPICALLY DEVELOPING CHILDREN AND THOSE WITH SPECIAL
NEEDS.

(4) THE GUGGENHEIM ABU DHABI WILL BE LOCATED IN THE CULTURAL DISTRICT OF SAADIYAT ISLAND IN ABU DHABI, THE CAPITAL OF THE UNITED ARAB EMIRATES (UAE). DESIGNED BY INTERNATIONALLY RENOWNED ARCHITECT FRANK GEHRY, THE FUTURE MUSEUM WILL HOUSE ITS OWN MAJOR MODERN AND CONTEMPORARY ART COLLECTION AND PRESENT SPECIAL EXHIBITIONS THAT WILL INCLUDE WORKS FROM THE FOUNDATION'S EXTENSIVE COLLECTION. IN 2019, THE GUGGENHEIM ABU DHABI ACQUIRED 69 ARTWORKS ACROSS ALL MEDIA WITH A FOCUS ON NORTH AFRICAN AND LATIN AMERICAN ARTISTS FOR THE GUGGENHEIM ABU DHABI COLLECTION.

ADDITIONALLY, TWO PUBLIC PROGRAMS, ONE FOCUSING ON THE GUGGENHEIM ABU DHABI COLLECTION ARTWORK, JEAN-MICHEL BASQUIAT'S CABRA (1981-82), AND ONE FOCUSING ON THE GUGGENHEIM ABU DHABI COLLECTION ARTIST HASSA HAJIAJ, WERE HELD IN THE SPRING AND FALL RESPECTIVELY AS PART OF A NEW STRATEGY TO PRESENT IMMERSIVE, INTERACTIVE PROGRAMS CENTERING ON AN ARTIST'S PRACTICE.

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

THE FOUNDATION'S BY-LAWS PROVIDE THAT THE EXECUTIVE COMMITTEE MAY

EXERCISE ALL OF THE POWERS OF THE BOARD DURING THE INTERVALS BETWEEN

MEETINGS OF THE BOARD OF TRUSTEES, EXCEPT: (1) THE POWER TO ELECT OR

REMOVE TRUSTEES OR OFFICERS ELECTED BY THE TRUSTEES, (2) THE POWER TO

FILL VACANCIES WHICH MAY OCCUR IN THE BOARD OF TRUSTEES OR IN ANY

COMMITTEE, (3) THE FIXING OF COMPENSATION OF TRUSTEES FOR SERVING ON THE

BOARD OF TRUSTEES OR ANY COMMITTEE, (4) THE AMENDMENT OR REPEAL OF THE

BY-LAWS OR THE ADOPTION OF NEW BY-LAWS, (5) THE AMENDMENT OR REPEAL OF

ANY RESOLUTION OF THE BOARD OF TRUSTEES WHICH BY ITS TERMS SHALL NOT BE

SO AMENDABLE OR REPEATABLE, (6) THE APPROVAL OF A MERGER OR PLAN OF

DISSOLUTION, (7) THE AUTHORIZATION OF THE SALE, LEASE, EXCHANGE OR OTHER

DISPOSITION OF ALL OR SUBSTANTIALLY ALL OF THE ASSETS OF THE FOUNDATION,

AND (8) THE APPROVAL OF AMENDMENTS TO THE CHARTER OF THE FOUNDATION. ON

DECEMBER 31, 2019, THERE WERE 11 MEMBERS OF THE EXECUTIVE COMMITTEE.

FORM 990, PART VI, SECTION A, LINE 2

PETER LAWSON-JOHNSTON, WENDY L-J. MCNEIL AND PETER LAWSON-JOHNSTON II,

FAMILY AND BUSINESS RELATIONSHIPS; MARK WALTER, PETER LAWSON-JOHNSTON,

WENDY L-J MCNEIL AND PETER LAWSON-JOHNSTON II, BUSINESS RELATIONSHIPS;

ROBERT BAKER AND WILLIAM MACK, BUSINESS RELATIONSHIP.

THERE ARE NO MEMBERS OF THE EXECUTIVE COMMITTEE WHO ARE NOT TRUSTEES.

FORM 990, PART VI, SECTION A, LINE 4

THE FOUNDATION'S BY-LAWS WERE AMENDED TO (1) AUTHORIZE THE CREATION OF AN

ADVANCEMENT COMMITTEE, (2) PROVIDE THAT ALL COMMITTEES OF THE CORPORATION

HAVE THREE TRUSTEE MEMBERS AND ELECT THEIR MEMBERS BY RESOLUTION ADOPTED BY A MAJORITY OF THE ENTIRE BOARD, AND (3) STREAMLINE THE PROCESS FOR REMOVAL FOR CAUSE AND SUSPENSION OF TRUSTEES, OFFICERS AND COMMITTEE MEMBERS.

FORM 990, PART VI, SECTION B, LINE 11B THE FOUNDATION'S FORM 990 IS PREPARED BY AN EXTERNAL CPA FIRM WITH THE COOPERATION OF THE FOUNDATION'S FINANCE AND LEGAL DEPARTMENTS. IT IS THEN REVIEWED BY THE CONTROLLER, CHIEF FINANCIAL OFFICER, DEPUTY DIRECTOR, GENERAL COUNSEL AND SECRETARY AND SENIOR DEPUTY DIRECTOR AND CHIEF OPERATING OFFICER. THE DRAFT OF FORM 990 IS THEN DISTRIBUTED TO THE AUDIT AND EXECUTIVE COMMITTEE MEMBERS FOR REVIEW. A MEETING IS HELD WITH THE AUDIT AND EXECUTIVE COMMITTEES FOR FURTHER REVIEW AND APPROVAL. THE FORM 990 IS THEN DISTRIBUTED TO THE BOARD OF TRUSTEES PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C PURSUANT TO THE CONFLICT OF INTEREST POLICY FOR TRUSTEES AND OFFICERS, TRUSTEES AND OFFICERS (INCLUDING THE DIRECTOR AND DEPUTY DIRECTOR, GENERAL COUNSEL AND SECRETARY) DISCLOSE ANNUALLY IN WRITING ANY POTENTIAL OR ACTUAL CONFLICTS AND ARE REQUIRED TO DISCLOSE ANY CONFLICTS THAT ARISE DURING THE YEAR. PROSPECTIVE TRUSTEES ARE ALSO REQUIRED TO DISCLOSE ANY POTENTIAL CONFLICTS. THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES REVIEWS THE DISCLOSURES TOGETHER WITH THE DEPUTY DIRECTOR, GENERAL COUNSEL AND SECRETARY. PURSUANT TO THE CODE OF ETHICS, EMPLOYEES COMPLETE AN ANNUAL CERTIFICATION IN WHICH THEY MUST DISCLOSE ANY TRANSACTIONS OR RELATIONSHIPS THAT MAY GIVE RISE TO A POTENTIAL OR ACTUAL CONFLICT OF

INTEREST WITH THE FOUNDATION. IN ADDITION, EMPLOYEES CONSIDERING ENTERING INTO ANY SUCH TRANSACTION OR RELATIONSHIP MUST OBTAIN APPROVAL IN ADVANCE FROM THE EMPLOYEE'S SUPERVISOR AND, IN PRESCRIBED CASES, THE ETHICS COMMITTEE, IN ACCORDANCE WITH THE CODE OF ETHICS. ALL NEW HIRES ARE PRESENTED WITH THE CODE OF ETHICS, WHICH IS ALSO AVAILABLE ELECTRONICALLY ON THE FOUNDATION'S INTRANET. HIGHLIGHTS OF THE POLICY ARE DISCUSSED DURING NEW HIRE ORIENTATION AND EXAMPLES ARE GIVEN. ALL NEW EMPLOYEES ARE ASKED TO SIGN A STATEMENT ATTESTING TO THE FACT THAT THEY HAVE BEEN GIVEN A COPY OF THE CODE OF ETHICS, THAT IT HAS BEEN EXPLAINED TO THEM, AND THAT THEY ARE RESPONSIBLE FOR ADHERING TO IT. THE DIRECTOR, THE SENIOR DEPUTY DIRECTOR AND CHIEF OPERATING OFFICER, AND THE DEPUTY DIRECTOR, GENERAL COUNSEL AND SECRETARY MUST DISCLOSE TO THE AUDIT COMMITTEE ANY TRANSACTION OR RELATIONSHIP THAT MAY GIVE RISE TO A CONFLICT OF INTEREST.

THE CHARTER FOR THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES

DESCRIBES THE PROCESS THE COMMITTEE USES FOR DETERMINING THE COMPENSATION

OF THE DIRECTOR OF THE MUSEUM AND FOUNDATION AND OTHER MEMBERS OF THE

EXECUTIVE STAFF OF THE FOUNDATION. IN 2019, THE EXECUTIVE STAFF OF THE

FOUNDATION INCLUDED THE DIRECTOR OF THE MUSEUM AND FOUNDATION, SENIOR

DEPUTY DIRECTOR AND CHIEF OPERATING OFFICER; DEPUTY DIRECTOR, GENERAL

COUNSEL AND SECRETARY; DEPUTY DIRECTOR, ADVANCEMENT; DEPUTY DIRECTOR,

GLOBAL COMMUNICATIONS; DIRECTOR OF THE PEGGY GUGGENHEIM COLLECTION; AND

ARTISTIC DIRECTOR AND JENNIFER AND DAVID STOCKMAN CHIEF CURATOR. THAT

PROCESS INCLUDES: (1) REVIEW AND APPROVAL BY THE COMPENSATION COMMITTEE;

(2) THE USE OF COMPARABILITY DATA; AND (3) CONTEMPORANEOUS SUBSTANTIATION

Name of the organization

SOLOMON R. GUGGENHEIM FOUNDATION

13-5562233

OF THE DELIBERATIONS AND DECISIONS, REFLECTED IN THE MINUTES OF THE
COMPENSATION COMMITTEE. THE COMPENSATION COMMITTEE CONSISTS ENTIRELY OF
TRUSTEES WHO ARE NOT EMPLOYEES. IN 2019, THE COMMITTEE USED THIS PROCESS
TO DETERMINE THE COMPENSATION OF ALL MEMBERS OF THE EXECUTIVE STAFF.

FORM 990, PART VI, SECTION C, LINE 19

THE FOUNDATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY FOR

TRUSTEES AND OFFICERS, AND FORMS 1023 AND 990-T ARE AVAILABLE UPON

WRITTEN REQUEST OR A REQUEST MADE IN PERSON. THE FOUNDATION'S FORM 990

AND AUDITED FINANCIALS ARE AVAILABLE ON THE FOUNDATION'S WEBSITE.

FORM 990, PART XI, LINE 9

OTHER CHANGES IN NET ASSETS

FOREIGN CURRENCY TRANSLATION (99,448)

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES			ATTACHMENT 1	
DESCRIPTION	GRANTS		EXPENSES	REVENUE
EDUCATION		0.	4,472,061.	738,104.
PUBLICATIONS, WEBSITE, PRODUCTS AND RETAIL OPS		0.	12,646,590.	0.
TOTALS	-	0.	17,118,651.	738,104.

ATTACHMENT 2

FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

BERMUDA

CANADA

CAYMAN ISLANDS

IRELAND

Schedule O (Form 990 or 990-EZ) 2019 Page **2**

Name of the organization

SOLOMON R. GUGGENHEIM FOUNDATION

13-5562233

ATTACHMENT 2 (CONT'D)

FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

ITALY

LUXEMBOURG

UNITED KINGDOM

BRITISH VIRGIN ISLANDS

CURACAO

ATTACHMENT 3

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AZ, AR, CA, CO, CT,

 ${\tt DC}$, ${\tt FL}$, ${\tt GA}$, ${\tt HI}$, ${\tt IL}$, ${\tt KS}$, ${\tt KY}$, ${\tt LA}$, ${\tt ME}$, ${\tt MD}$, ${\tt MA}$, ${\tt MI}$,

 $\verb"MN", \verb"MS", \verb"MO", \verb"NV", \verb"NH", \verb"NJ", \verb"NM", \verb"NY", \verb"NC", \verb"ND", \verb"OH", \verb"OK", \verb"OR", \verb"PA",$

RI, SC, TN, TX, UT, VA, WA, WV, WI,

ATTACHMENT 4

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS DESCRIPTION OF SERVICES COMPENSATION CROTHALL HEALTHCARE JANITORIAL 1,042,442. 1500 LIBERTY RIDGE DR #210 WAYNE, PA 19087 ALLIED UNIVERSAL SECURITY 977,129. 85 BROAD STREET NEW YORK, NY 10004 RESTAURANT ASSOCIATES CATERING SERVICES 536,677. 132 W 31ST ST., SUITE 601

Name of the organization

SOLOMON R. GUGGENHEIM FOUNDATION

13-5562233

ATTACHMENT 4 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS DESCRIPTION OF SERVICES COMPENSATION

NEW YORK, NY 10001

OUTFRONT MEDIA MEDIA SERVICES 470,094.

405 LEXINGTON AVE, 17TH FL.

NEW YORK, NY 10174

CONTI TIPOCOLOR PRINTING 379,950.

VIA GUIDO GUINIZELLI, 20

CALENZANO

FL

ITALY 50041

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

 \blacktriangleright Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

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

OMB No. 1545-0047
2019
Open to Public Inspection

Name of the organization
SOLOMON R. GUGGENHEIM FOUNDATION

Employer identification number 13-5562233

(a) Name, address, and EIN (if applicable) of disregarded entit	ty	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
Part II Identification of Related Tax-Exempt Organizations du	ions. Complete if the or iring the tax year.	ganization answ	vered "Yes" on Fo	orm 990, Part IV,	line 34, because	e it had
(a)	(6)	(a)	(4)	(0)	(6)	(a)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 contr	12(b)(13) rolled
						Yes	No
<u>(1)</u>							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2019

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

(a)	(b)	(c)	(d)	(e) Predominant	(f)	(g)	(h)	(i)		(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	Share of total income	Share of end-of- year assets		oortionate ations?	Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	man	eral or aging tner?	Percentage ownership
		, , ,		,			Yes	No		Yes	No	
(1)												
(2)												
	_											
(3)												
	_											
(4)												
(5)												
(6)												
	1											
(7)												
	1											

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreigr country)		(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(1 controlle entity?	n 13) led ?
								Yes No	0
(1) GUGGENHEIMCOM INC 13-4113	3745								
1071 FIFTH AVENUE NEW YORK, NY 10128	CEASED OPS	DE	N/A	C CORP	0.	0.	55.0000	Х	_
_(2)									
									_
(3)									
(4)									
(5)									_
<u> </u>									
(6)									_
(7)									_
` '									

Schedule R (Form 990) 2019 Page 3

Yes No

Χ

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

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

b	Gift, grant, or capital contribution to related organization(s)				1b	X
	Gift, grant, or capital contribution from related organization(s)				1c	X
	Loans or loan guarantees to or for related organization(s)				1d	X
e	Loans or loan guarantees by related organization(s)				1e	X
	254115 61 15411 guarante 55 57 1514154 5194112411511(5)					
f	Dividends from related organization(s)				1f	Х
	Sale of assets to related organization(s)				1g	X
	Purchase of assets from related organization(s).				1h	X
ï	Exchange of assets with related organization(s).				1i	X
i	Lease of facilities, equipment, or other assets to related organization(s).				1j	X
,	Lease of facilities, equipment, of other assets to related organization(s).					
k	Lease of facilities, equipment, or other assets from related organization(s)				1k	Х
ï	Performance of services or membership or fundraising solicitations for related organization(s)				11	X
	Performance of services or membership or fundraising solicitations by related organization(s)				1m	X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).				1n	X
	Sharing of paid employees with related organization(s)				10	X
Ü	onaring of paid employees with related organization(s)					
n	Reimbursement paid to related organization(s) for expenses				1p	Х
	Reimbursement paid by related organization(s) for expenses				1q	X
ч	Troiling all of the state of th				-	
r	Other transfer of cash or property to related organization(s)				1r	Х
s	Other transfer of cash or property from related organization(s)				1s	Х
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this	is line, including cove	red relationships and trans	action thre	sholds.	
	(a)	(b)	(c)		(d)	
	Name of related organization	Transaction type (a-s)	Amount involved		of determ ant involve	
		type (a-s)		amot	int involv	ou .
(1)						
(2)						
(3)						
(4)						
(4)						
(4) (5)						
(4)				hedule R (

Schedule R (Form 990) 2019

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

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

(a) Name, address, and EIN of en	tity	(b) Primary activity	(c) Legal domicile (state or foreign country)	income (related, unrelated, excluded from tax under	Are all sec 501(organiz	c)(3) ations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop	h) ortionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner? Yes No		(k) Percentage ownership	
				sections 512-514)	Yes	No			Yes	No	,	Yes	No		
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
(7)															
(8)															
(9)															
(10)															
(11)															
(12)															
(13)															
(14)															
(15)															
<u>(16)</u>															

Schedule R (Form 990) 2019 Page 5

Part VII

Supplemental Information
Provide additional information for responses to questions on Schedule R. See instructions.