

PUBLIC INSPECTION COPY

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

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

2023

Department of the Treasury
Internal Revenue Service

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

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

Open to Public Inspection

A For the **2023** calendar year, or tax year beginning **JUL 1, 2023** and ending **JUN 30, 2024**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization SKIRBALL CULTURAL CENTER Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2701 NORTH SEPULVEDA BLVD. City or town, state or province, country, and ZIP or foreign postal code LOS ANGELES, CA 90049 F Name and address of principal officer: JESSIE KORNBURG SAME AS C ABOVE	D Employer identification number 95-4538371 E Telephone number 310-440-4500 G Gross receipts \$ 242,774,749. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: WWW.SKIRBALL.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1995
		M State of legal domicile: CA

Part I Summary

	1	Briefly describe the organization's mission or most significant activities: PLACE OF MEETING GUIDED BY THE JEWISH TRADITION AND INSPIRED BY AMERICAN DEMOCRATIC IDEALS.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)	3	23
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	21
	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	452
	6	Total number of volunteers (estimate if necessary)	6	150
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	4,798,186.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
	Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year
9		Program service revenue (Part VIII, line 2g)	Current Year	4,264,045.
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,671,224.
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,429,264.
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,294,173.
12				22,065,189.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		18,641,181.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		20,338,813.
	16b	Total fundraising expenses (Part IX, column (D), line 25) 2,028,846.		0.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		12,521,281.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		18,676,732.	
19	Revenue less expenses. Subtract line 18 from line 12		31,162,462.	
				-9,097,273.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	406,558,761.
	21	Total liabilities (Part X, line 26)	End of Year	425,227,990.
	22	Net assets or fund balances. Subtract line 21 from line 20		3,402,051.
				403,156,710.

Part II Signature Block

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

Sign Here	Signature of officer JESSIE KORNBURG, PRESIDENT & CEO Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name JOLANTA TUCK	Preparer's signature JOLANTA TUCK
	Firm's name COHNREZNICK LLP	Date 03/30/25
	Firm's address 621 CAPITOL MALL, SUITE 2150 SACRAMENTO, CA 95814	Check if self-employed <input type="checkbox"/> PTIN P01340068
		Firm's EIN 22-1478099
		Phone no. 916-442-9100

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: THE SKIRBALL CULTURAL CENTER IS A PLACE OF MEETING GUIDED BY THE JEWISH TRADITION OF WELCOMING THE STRANGER AND INSPIRED BY THE AMERICAN DEMOCRATIC IDEALS OF FREEDOM AND EQUALITY. WE WELCOME PEOPLE OF ALL COMMUNITIES AND GENERATIONS TO PARTICIPATE IN CULTURAL

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 12,967,688. including grants of \$) (Revenue \$ 7,133,608.) COMMUNITY GATHERINGS:

SKIRBALL SERVES AS A VENUE FOR 400+ COMMUNITY ORGANIZATION, LIFE CYCLE, AND CORPORATE EVENTS AND CELEBRATIONS.

4b (Code:) (Expenses \$ 8,327,790. including grants of \$) (Revenue \$ 400,832.) MUSEUM:

SKIRBALL PROTECTS AND CONSERVES 30,000 OBJECTS OF JUDAIC HISTORY AND CULTURE AND PRESENT 7 TO 10 EXHIBITIONS PRESENTING JEWISH STORIES AND AMERICAN EXPERIENCES TO BUILD A SENSE OF SHARED HUMANITY AND APPRECIATION FOR A PLURAL SOCIETY.

4c (Code:) (Expenses \$ 5,684,191. including grants of \$) (Revenue \$ 214,248.) EDUCATION:

SKIRBALL OFFERS K-12 SCHOOL TOURS TO ITS MUSEUM, ARTS EDUCATION CURRICULUM, AND TEACHER TRAININGS SERVING 40,000 LOCAL STUDENTS FREE OF CHARGE. ADULT EDUCATION PROGRAMS INCLUDE BOOK GROUPS, DOCENT LED MUSEUM TOURS, APPLIED ARTS CLASSES, AND LECTURE SERIES.

4d Other program services (Describe on Schedule O.) (Expenses \$ 5,390,047. including grants of \$) (Revenue \$ 255,154.)

4e Total program service expenses 32,369,716.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21, with sub-questions a-f for questions 11, 12, and 20. Marked 'X' in Yes/No columns indicate required schedules.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding organizational reporting, compensation, tax-exempt bonds, and business transactions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

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

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 23; 1b Enter the number of voting members included on line 1a... 21; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders... X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body... X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body... X; b Each committee with authority to act on behalf of the governing body... X; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O... X

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
REUBEN SANCHEZ - 310-440-4500
2701 NORTH SEPULVEDA BLVD., LOS ANGELES, CA 90049

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JESSICA KORBERG PRESIDENT & CEO	40.00	X		X			532,300.	0.	25,597.	
(2) ROBERT KIRSCHNER SENIOR SCHOLAR OF JEWISH STUDIES	40.00					X	411,684.	0.	9,027.	
(3) LESLIE JOHNSON EXECUTIVE VICE PRESIDENT	40.00			X			311,763.	0.	14,313.	
(4) PAMELA R KOHANCHI SECRETARY, SR VP, GEN. COUNSEL	40.00			X			206,691.	0.	70,961.	
(5) BENJAMIN ELISONDO SENIOR VICE PRESIDENT, OPERATIONS	40.00				X		247,096.	0.	19,873.	
(6) REUBEN SANCHEZ CFO	40.00			X			211,907.	0.	24,605.	
(7) SHERI BERNSTEIN MUSEUM DIRECTOR	40.00				X		187,951.	0.	42,435.	
(8) JERED SETH GOLD VP, COMMUNICATIONS AND MARKETING	40.00					X	171,480.	0.	40,982.	
(9) JOCELYN TETEL VICE PRESIDENT, ADVANCEMENT	40.00				X		193,216.	0.	18,599.	
(10) DOUGLAS PAUL JENZEN VP, ENGAGEMENT & ACCESS	40.00					X	194,579.	0.	16,621.	
(11) MARLENE BRAGA VICE PRESIDENT, PUBLIC PROGRAMS	40.00					X	177,242.	0.	9,572.	
(12) SEAN SHERIDAN EXECUTIVE CHEF	40.00					X	151,754.	0.	18,231.	
(13) DR. URI D. HERSCHER TRUSTEE	2.00	X					32,734.	0.	0.	
(14) PHILIP DE TOLEDO CHAIR	2.00	X		X			0.	0.	0.	
(15) ARTHUR H. BILGER VICE CHAIRMAN	2.00	X		X			0.	0.	0.	
(16) JAY S. WINTROB VICE CHAIR	2.00	X		X			0.	0.	0.	
(17) CINDY RUBY SECRETARY	2.00	X		X			0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) HOWARD M. BERNSTEIN TRUSTEE	2.00	X						0.	0.	0.
(19) GISELLE FERNANDEZ TRUSTEE	2.00	X						0.	0.	0.
(20) MELVIN GAGERMAN TRUSTEE	2.00	X						0.	0.	0.
(21) MARC H. GAMSIN TRUSTEE	2.00	X						0.	0.	0.
(22) JEFFREY GLASSMAN TRUSTEE (UNTIL 12/23)	2.00	X						0.	0.	0.
(23) MARCIE GOLDSTEIN TRUSTEE	2.00	X						0.	0.	0.
(24) ETHAN GOLDSTINE TRUSTEE	2.00	X						0.	0.	0.
(25) EMILIANA GUERCA-ZEIDENFELD TRUSTEE	2.00	X						0.	0.	0.
(26) DANA GUERIN TRUSTEE	2.00	X						0.	0.	0.
1b Subtotal								3,030,397.	0.	310,816.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								3,030,397.	0.	310,816.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 19

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
MITCHELL DEAN COLLINS, 12771 MONARCH STREET, GARDEN GROVE, CA 92841	INDOOR CUBICLE SPACES	704,556.
BEAR FLAG CONSTRUCTION SERVICES, INC., 16601 GOTHARD ST SUITE L, HUNTINGTON	WATERPROOFING	590,983.
ABM ENGINEERING SERVICES PO BOX 52609, LOS ANGELES, CA 90074	ENGINEERING	428,855.
FOUR SEASON LANDSCAPE & PROPERTY SERVICE 24647 ARCH STREET, SANTA CLARITA, CA 91321	LANDSCAPING	237,784.
LOFTON CONTRACTING INC. 18639 PARTHENIA ST, NORTHRIDGE, CA 91324	GALLERY INSTALLATION/DEINSTALLATION	218,443.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 8

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	509,638.				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	3,754,407.				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f			4,264,045.			
Program Service Revenue	2 a COMMUNITY GATHERINGS	Business Code					
		900099	11,920,351.	7,133,608.	4,786,743.		
	b MUSEUM ADMISSIONS	900099	400,832.	400,832.			
	c OTHER PROGRAM REVENUE	900099	255,154.	255,154.			
	d TEACHER TRAINING, PERF	900099	214,248.	214,248.			
	e _____						
	f All other program service revenue						
g Total. Add lines 2a-2f			12,790,585.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		3,553,299.			3,553,299.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	221,810,783.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	219,201,186.				
	c Gain or (loss)	7c	2,609,597.				
	d Net gain or (loss)			2,609,597.		2,609,597.	
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a		356,037.				
b Less: cost of goods sold	10b	213,004.					
c Net income or (loss) from sales of inventory			143,033.	131,590.	11,443.		
Miscellaneous Revenue	11 a _____	Business Code					
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			23,360,559.	8,135,432.	4,798,186.	6,162,896.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,170,071.	1,941,914.	96,134.	132,023.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	13,993,991.	12,515,184.	626,047.	852,760.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	474,927.	428,104.	18,506.	28,317.
9 Other employee benefits	2,511,202.	2,263,620.	97,853.	149,729.
10 Payroll taxes	1,188,622.	1,071,435.	46,316.	70,871.
11 Fees for services (nonemployees):				
a Management				
b Legal	65,882.		65,882.	
c Accounting	439,839.	439,839.		
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	940,177.		940,177.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	638,735.	410,601.	17,425.	210,709.
12 Advertising and promotion	434,783.	383,484.	95.	51,204.
13 Office expenses	1,181,973.	1,086,579.	32,219.	63,175.
14 Information technology				
15 Royalties				
16 Occupancy	3,400,945.	3,145,518.	170,284.	85,143.
17 Travel	85,788.	61,820.	8,586.	15,382.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	5,821.	3,078.		2,743.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	4,040,147.	3,738,488.	201,106.	100,553.
23 Insurance	552,216.	394,440.	78,888.	78,888.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a COST OF GOODS SOLD	2,102,111.	2,102,111.		
b LEGAL SETTLEMENT	2,093,800.		2,093,800.	
c EXHIBITS & COLLECTIONS	1,249,044.	1,249,044.		
d PERFORMANCES & LECTURES	596,601.	596,601.		
e All other expenses	848,870.	537,856.	123,665.	187,349.
25 Total functional expenses. Add lines 1 through 24e	39,015,545.	32,369,716.	4,616,983.	2,028,846.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	22,093.	1	399,627.
	2 Savings and temporary cash investments	25,065,618.	2	9,127,285.
	3 Pledges and grants receivable, net	5,337,035.	3	3,017,214.
	4 Accounts receivable, net	348,318.	4	479,440.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	264,386.	8	224,825.
	9 Prepaid expenses and deferred charges	130,396.	9	365,831.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 170,470,865.		
	b Less: accumulated depreciation	10b 66,968,350.	106,347,526.	10c 103,502,515.
	11 Investments - publicly traded securities	28,654,882.	11	33,994,880.
	12 Investments - other securities. See Part IV, line 11	240,015,496.	12	273,922,093.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets	156,766.	14	
	15 Other assets. See Part IV, line 11	216,245.	15	194,280.
16 Total assets. Add lines 1 through 15 (must equal line 33)	406,558,761.	16	425,227,990.	
Liabilities	17 Accounts payable and accrued expenses	2,705,488.	17	5,014,577.
	18 Grants payable		18	
	19 Deferred revenue		19	766,402.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	696,563.	25	0.
	26 Total liabilities. Add lines 17 through 25	3,402,051.	26	5,780,979.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	274,854,167.	27	287,632,400.
	28 Net assets with donor restrictions	128,302,543.	28	131,814,611.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	403,156,710.	32	419,447,011.
33 Total liabilities and net assets/fund balances	406,558,761.	33	425,227,990.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	23,360,559.
2	Total expenses (must equal Part IX, column (A), line 25)	2	39,015,545.
3	Revenue less expenses. Subtract line 2 from line 1	3	-15,654,986.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	403,156,710.
5	Net unrealized gains (losses) on investments	5	31,945,287.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	419,447,011.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____		

Form **990** (2023)

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	10,316,192.	10,918,933.	14,289,087.	10,670,528.	4,264,045.	50,458,785.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	10,316,192.	10,918,933.	14,289,087.	10,670,528.	4,264,045.	50,458,785.
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)						2,595,285.
6 Public support. Subtract line 5 from line 4.						47,863,500.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	10,316,192.	10,918,933.	14,289,087.	10,670,528.	4,264,045.	50,458,785.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4,820,710.	2,102,678.	2,283,458.	2,429,264.	3,553,299.	15,189,409.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						65,648,194.
12 Gross receipts from related activities, etc. (see instructions)					12	25,248,694.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	72.91 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	70.35 %
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Table with 7 columns: (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support. (Add lines 9, 10c, 11, and 12.)

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

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2022 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2022 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

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

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

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

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

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

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

Schedule A (Form 990) 2023

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization SKIRBALL CULTURAL CENTER Employer identification number 95-4538371

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two questions about donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, lines 2a-2d, number of easements modified, states where located, monitoring policy, staff hours, expenses, and section 170(h) requirements.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include 1a) election to not report, 1b) election to report with amounts, and 2) amounts required for financial gain.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2023

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	251,265,574.	238,912,676.	280,100,606.	238,384,428.	218,057,818.
b Contributions	4,428,931.	1,507,272.	11,181,722.		36,000,000.
c Net investment earnings, gains, and losses	35,119,937.	24,745,626.	-37,042,054.	56,458,178.	-1,313,390.
d Grants or scholarships					
e Other expenditures for facilities and programs	13,800,000.	13,900,000.	15,327,598.	14,742,000.	14,360,000.
f Administrative expenses					
g End of year balance	277,014,442.	251,265,574.	238,912,676.	280,100,606.	238,384,428.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 58.5452 %
 - b Permanent endowment 36.6777 %
 - c Term endowment 4.7771 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------------------------|-------------------------------------|
| (i) Unrelated organizations? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) Related organizations? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		6,951,705.		6,951,705.
b Buildings		150,956,575.	55,665,243.	95,291,332.
c Leasehold improvements				
d Equipment		7,157,579.	6,036,847.	1,120,732.
e Other		5,405,006.	5,266,260.	138,746.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				103,502,515.

Part VII Investments - Other Securities

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) POOLED VEHICLES W/O DAILY LIQUIDITY	232,356,674.	END-OF-YEAR MARKET VALUE
(B) OTHER INVESTMENTS	41,565,419.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	273,922,093.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets

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

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

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	54,705,861.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	31,945,287.
b	Donated services and use of facilities	2b	127,188.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	213,004.
e	Add lines 2a through 2d	2e	32,285,479.
3	Subtract line 2e from line 1	3	22,420,382.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	940,177.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	940,177.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	23,360,559.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

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

1	Total expenses and losses per audited financial statements	1	38,415,560.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	127,188.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	213,004.
e	Add lines 2a through 2d	2e	340,192.
3	Subtract line 2e from line 1	3	38,075,368.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	940,177.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	940,177.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	39,015,545.

Part XIII Supplemental Information

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

PART III, LINE 1A:

THE CENTER DOES NOT CAPITALIZE ITS COLLECTIONS. THE COLLECTIONS ARE MADE UP OF ARTIFACTS OF HISTORICAL SIGNIFICANCE AND ART OBJECTS THAT ARE HELD FOR EDUCATIONAL AND CURATORIAL PURPOSES. EACH OF THE ITEMS IS CATALOGUED, PRESERVED AND CARED FOR, AND ACTIVITIES VERIFYING THEIR EXISTENCE AND ASSESSING THEIR CONDITION ARE PERFORMED CONTINUOUSLY. THE COLLECTIONS ARE SUBJECT TO A POLICY THAT REQUIRES PROCEEDS FROM THEIR SALES TO BE USED TO ACQUIRE OTHER ITEMS FOR COLLECTIONS.

PART III, LINE 4:

THE CENTER IS A NATIONAL EDUCATIONAL AND MULTI-ARTS INSTITUTION INTENDED TO INTERPRET THE AMERICAN JEWISH EXPERIENCE, TO NURTURE AMERICAN JEWISH

Part XIII Supplemental Information *(continued)*

IDENTITY, AND TO STRENGTHEN THE FABRIC OF AMERICAN SOCIETY. THE

COLLECTIONS ARE MADE UP OF ARTIFACTS OF HISTORICAL SIGNIFICANCE AND ART

OBJECTS THAT ARE HELD FOR EDUCATIONAL AND CURATORIAL PURPOSES.

PART V, LINE 4:

THE SKIRBALL'S ENDOWMENT CONSISTS OF INDIVIDUAL FUNDS ESTABLISHED FOR A

VARIETY OF PURPOSES. THE ENDOWMENT INCLUDES BOTH DONOR-RESTRICTED FUNDS

AND FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS.

AS REQUIRED BY GAAP, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS, INCLUDING

FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS, ARE

CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED

RESTRICTIONS.

THE SKIRBALL HAS INTERPRETED THE STATE OF CALIFORNIA UNIFORM PRUDENT

MANAGEMENT OF INSTITUTIONAL FUNDS ACT ("UPMIFA") AS REQUIRING THE

PRESERVATION OF THE FAIR VALUE OF THE ORIGINAL GIFT AS OF THE GIFT DATE OF

THE DONOR RESTRICTED ENDOWMENT FUNDS ABSENT EXPLICIT DONOR STIPULATIONS TO

THE CONTRARY. AS A RESULT OF THIS INTERPRETATION, THE SKIRBALL CLASSIFIES

AS NET ASSETS WITH DONOR RESTRICTIONS: (A) THE ORIGINAL VALUE OF GIFTS

DONATED TO THE PERPETUAL ENDOWMENT, (B) THE ORIGINAL VALUE OF SUBSEQUENT

GIFTS TO THE PERPETUAL ENDOWMENT, AND (C) ACCUMULATIONS TO THE PERPETUAL

ENDOWMENT MADE IN ACCORDANCE WITH THE DIRECTION OF THE APPLICABLE DONOR

GIFT INSTRUMENT AT THE TIME THE ACCUMULATION IS ADDED TO THE FUND. IN

ACCORDANCE WITH UPMIFA, THE SKIRBALL CONSIDERS THE FOLLOWING FACTORS IN

MAKING A DETERMINATION TO APPROPRIATE OR ACCUMULATE DONOR-RESTRICTED

ENDOWMENT FUNDS: (1) THE DURATION AND PRESERVATION OF THE VARIOUS FUNDS,

(2) THE PURPOSES OF THE SKIRBALL AND DONOR-RESTRICTED ENDOWMENT FUNDS, (3)

GENERAL ECONOMIC CONDITIONS, (4) THE POSSIBLE EFFECT OF INFLATION AND

Part XIII Supplemental Information (continued)

DEFLATION, (5) THE EXPECTED TOTAL RETURN FROM INCOME AND THE APPRECIATION

OF INVESTMENTS, (6) OTHER RESOURCES OF THE SKIRBALL, AND (7) THE

SKIRBALL'S INVESTMENT POLICIES.

PART X, LINE 2:

THE SKIRBALL IS A NOT-FOR-PROFIT ORGANIZATION EXEMPT FROM INCOME TAXES

UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE ("IRC") AND SECTION

23101(D) OF THE REVENUE TAXATION CODE OF CALIFORNIA AND IS A PUBLICLY

SUPPORTED ORGANIZATION AS DESCRIBED IN SECTION 509(A) OF THE IRC.

THE SKIRBALL HAS NO UNRECOGNIZED TAX BENEFITS AT JUNE 30, 2024. THE

SKIRBALL'S FEDERAL AND STATE INCOME TAX RETURNS PRIOR TO THE 2021 AND 2020

FISCAL YEARS, RESPECTIVELY, ARE CLOSED AND MANAGEMENT CONTINUALLY

EVALUATES EXPIRING STATUTES OF LIMITATIONS, AUDITS, PROPOSED SETTLEMENTS,

CHANGES IN TAX LAW AND NEW AUTHORITATIVE RULINGS. MANAGEMENT HAS ANALYZED

THE TAX POSITIONS TAKEN BY THE SKIRBALL AND HAS CONCLUDED THAT, AS OF JUNE

30, 2024, THERE ARE NO UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE

TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY (OR ASSET) OR

DISCLOSURE IN THE FINANCIAL STATEMENTS.

IF APPLICABLE, THE SKIRBALL RECOGNIZES INTEREST AND PENALTIES ASSOCIATED

WITH TAX MATTERS AS PART OF INCOME TAX EXPENSE AND INCLUDES ACCRUED

INTEREST AND PENALTIES WITH ACCRUED EXPENSES IN THE STATEMENT OF FINANCIAL

POSITION.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD 213,004.

Part XIII Supplemental Information *(continued)*

PART XII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD 213,004.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

SKIRBALL CULTURAL CENTER

Employer identification number

95-4538371

Part I Questions Regarding Compensation

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

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

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

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

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

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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

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

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

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

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

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

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

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

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

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

Schedule J (Form 990) 2023

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JESSICA KORBERG PRESIDENT & CEO	(i)	470,500.	61,800.	0.	20,097.	5,500.	557,897.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ROBERT KIRSCHNER SENIOR SCHOLAR OF JEWISH STUDIES	(i)	161,684.	0.	250,000.	4,644.	4,383.	420,711.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) LESLIE JOHNSON EXECUTIVE VICE PRESIDENT	(i)	311,763.	0.	0.	0.	14,313.	326,076.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) PAMELA R KOHANCHI SECRETARY, SR VP, GEN. COUNSEL	(i)	186,691.	20,000.	0.	7,913.	63,048.	277,652.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) BENJAMIN ELISONDO SENIOR VICE PRESIDENT, OPERATIONS	(i)	247,096.	0.	0.	10,032.	9,841.	266,969.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) REUBEN SANCHEZ CFO	(i)	211,907.	0.	0.	8,657.	15,948.	236,512.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) SHERI BERNSTEIN MUSEUM DIRECTOR	(i)	187,951.	0.	0.	8,034.	34,401.	230,386.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) JERED SETH GOLD VP, COMMUNICATIONS AND MARKETING	(i)	171,480.	0.	0.	4,269.	36,713.	212,462.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) JOCELYN TETEL VICE PRESIDENT, ADVANCEMENT	(i)	193,216.	0.	0.	7,797.	10,802.	211,815.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) DOUGLAS PAUL JENZEN VP, ENGAGEMENT & ACCESS	(i)	194,579.	0.	0.	5,164.	11,457.	211,200.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) MARLENE BRAGA VICE PRESIDENT, PUBLIC PROGRAMS	(i)	177,242.	0.	0.	0.	9,572.	186,814.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) SEAN SHERIDAN EXECUTIVE CHEF	(i)	151,754.	0.	0.	0.	18,231.	169,985.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 1A:

PER CONTRACT, JESSICA KORNBURG, PRESIDENT & CEO, IS ENTITLED TO FLY BUSINESS CLASS FOR WHEN SUCH CLASS IS AVAILABLE OR, IF UNAVAILABLE, FIRST CLASS, AND SHALL AT HER OPTION BRING HER SPOUSE WITH HER IN THE SAME CLASS OF AIR TRAVEL AT THE EXPENSE OF SKIRBALL CULTURAL CENTER. THIS BENEFIT IS AVAILABLE WHEN TRAVELING FOR BUSINESS PURPOSES.

NO COMPANION TRAVEL BENEFITS WERE EXERCISED DURING 2023.

PART I, LINE 3:

THE ORGANIZATION PERIODICALLY COMPARES IT'S EMPLOYEES WAGES WITH INDUSTRY SALARY SURVEYS. THIS ENSURES THAT COMPENSATION IS COMPARABLE BASED ON EXPERIENCE AND LEVEL OF RESPONSIBILITY. THERE IS A WRITTEN CONTRACT TO WHICH THE FINANCE COMMITTEE APPROVES ANY CHANGES.

PART I, LINE 4A:

ROBERT KIRSCHNER, SENIOR SCHOLAR OF JEWISH STUDIES, RECEIVED A SEVERANCE PAYMENT OF \$250,000 PAID IN JUNE 2023.

Part III Supplemental Information

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

PART I, LINE 7:

THE BELOW INDIVIDUAL RECEIVED A BONUS IN CALENDAR YEAR 2023. THIS BONUS WAS

NOT CONTINGENT ON THE REVENUES OR NET EARNINGS OF THE ORGANIZATION:

JESSICA KORBERG - \$61,800

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

SKIRBALL CULTURAL CENTER

Employer identification number

95-4538371

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

EXPERIENCES THAT CELEBRATE DISCOVERY AND HOPE, FOSTER HUMAN

CONNECTIONS, AND CALL UPON US TO HELP BUILD A MORE JUST SOCIETY.

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

PERFORMANCE, FILM, & LITERARY ARTS:

SKIRBALL PRESENT 50+ DANCE, MUSIC, FILM, LECTURE, AND LITERARY ART

PROGRAMS, OFTEN FREE OF CHARGE.

EXPENSES \$ 5,390,047. INCLUDING GRANTS OF \$ 0. REVENUE \$ 255,154.

FORM 990, PART VI, SECTION A, LINE 2:

D. ZEKE ZEIDLER AND MARVIN ZEIDLER HAVE A FAMILIAL RELATIONSHIP.

CINDY RUBY AND KENNETH A. RUBY HAVE A FAMILIAL RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 4:

THE ORGANIZATION'S BYLAWS WERE AMENDED FOR THE FOLLOWING CHANGES:

THE ELECTION OF TRUSTEES HAS BEEN UPDATED TO ALLOW FOR ELECTIONS FROM TIME

TO TIME AT ANY DULY CALLED MEETING OF THE BOARD IN ADDITION TO THE ANNUAL

MEETING. FOR SUCH TRUSTEES, THEIR TERM OF OFFICE SHALL BE THE PERIOD OF

TIME AFTER THEIR ELECTION TO THE BOARD, PLUS THREE (3) YEARS BEGINNING AT

THE FIRST ANNUAL MEETING OF THE BOARD FOLLOWING SUCH TRUSTEE'S ELECTION TO

THE BOARD.

THE PLACE OF MEETINGS HAS BEEN UPDATED TO ALLOW THE EXECUTIVE COMMITTEE, IN

ITS DISCRETION AND SUBJECT TO ANY GUIDELINES AND PROCEDURES IT MAY ADOPT,

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Name of the organization SKIRBALL CULTURAL CENTER	Employer identification number 95-4538371
--	--

AUTHORIZE TRUSTEES NOT PHYSICALLY PRESENT AT A MEETING OF THE BOARD, TO PARTICIPATE IN AND VOTE AT THE MEETING THROUGH THE USE OF CONFERENCE TELEPHONE, ELECTRONIC VIDEO SCREEN COMMUNICATION, ELECTRONIC TRANSMISSION, OR OTHER MEANS OF REMOTE PARTICIPATION BY AND TO THE CORPORATION, AS LONG AS (A) EACH TRUSTEE PARTICIPATING IN THE MEETING CAN COMMUNICATE WITH ALL OF THE OTHER TRUSTEES CONCURRENTLY, AND (B) EACH TRUSTEE IS PROVIDED THE MEANS OF PARTICIPATING IN ALL MATTERS BEFORE THE BOARD, INCLUDING, WITHOUT LIMITATION, THE CAPACITY TO PROPOSE, OR TO INTERPOSE AN OBJECTION TO, A SPECIFIC ACTION TO BE TAKEN BY THE CORPORATION.

FORM 990, PART VI, SECTION B, LINE 11B:
THE RETURN IS PRESENTED AT A BOARD MEETING AND IS REVIEWED BY THE FINANCE COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 12C:
THE PRESIDENT ANNUALLY DISTRIBUTES THE CONFLICT OF INTEREST POLICY TO BOARD MEMBERS. THE BOARD MEMBERS ARE ASKED TO IDENTIFY CONFLICTS OF INTEREST. WHEN CONFLICTS OF INTEREST ARE IDENTIFIED, THE MEMBER OF THE GOVERNING BODY WITH THE CONFLICT IS PROHIBITED FROM PARTICIPATING IN DELIBERATIONS AND DECISIONS REGARDING SUCH CONFLICT.

FORM 990, PART VI, SECTION B, LINE 15A:
THE ORGANIZATION PERIODICALLY COMPARES ITS EMPLOYEES' WAGES WITH INDUSTRY SALARY SURVEYS. THIS ENSURES THAT COMPENSATION IS COMPARABLE BASED ON EXPERIENCE AND LEVEL OF RESPONSIBILITY. THERE IS A WRITTEN CONTRACT TO WHICH THE FINANCE COMMITTEE APPROVES ANY CHANGES.

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

Type and Entity: MUSEUM SHOP POST-2017 NOL FED
 Section 382 Annual Limitation Section 382 Carryover

DETAIL CARRYOVER SCHEDULE

Year Originated	Original Carryover Amount	Total Amount Used	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
			_____	_____	_____	_____	_____	_____	_____	_____	_____
A 2018	166,942.										
B 2019	275,420.										
C 2020	381,100.										
D 2021	446,815.										
E 2022	314,848.										
F 2023	75,041.										
G											
H											
I											
J											
K											
L											
M											
N											
O											
P											
Q											
R											
S											
T											
U											
V											
W											
Detail Type	E S B C	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A											
B											
C											
D											
E											
F											
G											
H											
I											
J											
K											
L											
M											
N											
O											
P											
Q											
R											
S											
T											
U											
V											
W											

Type and Entity: FOOD SERVICES POST-2017 NOL FED
 Section 382 Annual Limitation

DETAIL CARRYOVER SCHEDULE

Section 382 Carryover

Year Originated	Original Carryover Amount	Total Amount Used	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
			_____	_____	_____	_____	_____	_____	_____	_____	_____
A 2018	609,159.										
B 2019	1,995,377.										
C 2020	3,656,777.										
D 2021	3,788,360.										
E 2022	1,934,938.										
F 2023	1,586,380.										
G											
H											
I											
J											
K											
L											
M											
N											
O											
P											
Q											
R											
S											
T											
U											
V											
W											
Detail Type	E S B C	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A		_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
B											
C											
D											
E											
F											
G											
H											
I											
J											
K											
L											
M											
N											
O											
P											
Q											
R											
S											
T											
U											
V											
W											

Type and Entity: PRE-2018 NOL FED		DETAIL CARRYOVER SCHEDULE										
Section 382 Annual Limitation		Section 382 Carryover										
Year Originated	Original Carryover Amount	Total Amount Used	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A	2013	1,965,451.										
B	2014	998,901.										
C	2015	815,987.										
D	2016	660,932.										
E	2017	1,147,714.										
F												
G												
H												
I												
J												
K												
L												
M												
N												
O												
P												
Q												
R												
S												
T												
U												
V												
W												
Detail Type	ESBC	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A												
B												
C												
D												
E												
F												
G												
H												
I												
J												
K												
L												
M												
N												
O												
P												
Q												
R												
S												
T												
U												
V												
W												

Type and Entity: NOL CA

DETAIL CARRYOVER SCHEDULE

Section 382 Annual Limitation

Section 382 Carryover

Year Originated	Original Carryover Amount	Total Amount Used	Section 382 Carryover										
			Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	
A 2013	1,965,451.												
B 2014	998,901.												
C 2015	815,987.												
D 2016	660,932.												
E 2017	1,147,714.												
F 2018	776,101.												
G 2019	2,270,797.												
H 2020	4,037,877.												
I 2021	4,235,175.												
J 2022	1,859,834.												
K 2023	1,661,421.												
L													
M													
N													
O													
P													
Q													
R													
S													
T													
U													
V													
W													
Detail Type	E S B C	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A													
B													
C													
D													
E													
F													
G													
H													
I													
J													
K													
L													
M													
N													
O													
P													
Q													
R													
S													
T													
U													
V													
W													

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

For calendar year 2023 or other tax year beginning JUL 1, 2023, and ending JUN 30, 2024

2023

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Form sections A-F: A Check box if address changed; B Exempt under section 501(c)(3); C Book value of all assets at end of year 425,227,990; D Employer identification number 95-4538371; E Group exemption number; F Check box if an amended return.

G Check organization type: X 501(c) corporation; 501(c) trust; 401(a) trust; Other trust; State college/university; 6417(d)(1)(A) Applicable entity

H Check if filing only to claim: Credit from Form 8941; Refund shown on Form 2439; Elective payment amount from Form 3800

I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation

J Enter the number of attached Schedules A (Form 990-T) 2

K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No X

L The books are in care of REUBEN SANCHEZ Telephone number 310-440-4500

Part I Total Unrelated Business Taxable Income

Table with 11 rows for Part I: Total Unrelated Business Taxable Income. Line 11: Unrelated business taxable income 0.

Part II Tax Computation

Table with 7 rows for Part II: Tax Computation. Line 7: Total tax 0.

Part III Tax and Payments

Table with 5 main rows for Part III: Tax and Payments. Line 5: Current net 965 tax liability paid from Form 965-A, Part II, column (k) 0.

Part III Tax and Payments <i>(continued)</i>			
6 a	Payments: Preceding year's overpayment credited to the current year	6a	
b	Current year's estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b	
c	Tax deposited with Form 8868	6c	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d	
e	Backup withholding (see instructions)	6e	
f	Credit for small employer health insurance premiums (attach Form 8941)	6f	
g	Elective payment election amount from Form 3800	6g	
h	Payment from Form 2439	6h	
i	Credit from Form 4136	6i	
j	Other (see instructions)	6j	
7	Total payments. Add lines 6a through 6j	7	
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	8	
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	9	
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10	
11	Enter the amount of line 10 you want: Credited to 2024 estimated tax Refunded	11	

Part IV Statements Regarding Certain Activities and Other Information (see instructions)			
1	At any time during the 2023 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here _____		Yes No X
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
3	Enter the amount of tax-exempt interest received or accrued during the tax year \$ _____		
4	Enter available pre-2018 NOL carryovers here \$ <u>5,588,985.</u> Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
		Business Activity Code	Available post-2017 NOL carryover
		459420	\$ 1,585,125.
		722511	\$ 11,984,611.
		\$	
		\$	
6 a	Reserved for future use		
b	Reserved for future use		

Part V Supplemental Information

Provide any additional information. See instructions.

Sign Here	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 taxpayer) is based on all information of which preparer has any knowledge.				
	Signature of officer	Date	PRESIDENT & CEO Title	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	JOLANTA TUCK	JOLANTA TUCK	03/30/25		P01340068
	Firm's name	Firm's address		Firm's EIN	Phone no.
COHNREZNICK LLP	621 CAPITOL MALL, SUITE 2150 SACRAMENTO, CA 95814		22-1478099	916-442-9100	

FORM 990-T

PRE-2018 NET OPERATING LOSS DEDUCTION

STATEMENT 1

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/14	1,965,451.	0.	1,965,451.	1,965,451.
06/30/15	998,901.	0.	998,901.	998,901.
06/30/16	815,987.	0.	815,987.	815,987.
06/30/17	660,932.	0.	660,932.	660,932.
06/30/18	1,147,714.	0.	1,147,714.	1,147,714.
NOL CARRYOVER AVAILABLE THIS YEAR			5,588,985.	5,588,985.

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

A Name of the organization SKIRBALL CULTURAL CENTER B Employer identification number 95-4538371 C Unrelated business activity code (see instructions) 459420 D Sequence: 1 of 2

E Describe the unrelated trade or business MUSEUM SHOP

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales, Less returns and allowances, Cost of goods sold, Gross profit, Capital gain net income, Net gain (loss), Income (loss) from a partnership or an S corporation, Rent income, Unrelated debt-financed income, Interest, annuities, royalties, and rents from a controlled organization, Investment income of section 501(c)(7), (9), or (17) organizations, Exploited exempt activity income, Advertising income, Other income, and Total.

Part II Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

Table with 3 columns: Line number, Description, and Amount. Rows include Compensation of officers, directors, and trustees, Salaries and wages, Repairs and maintenance, Bad debts, Interest, Taxes and licenses, Depreciation, Less depreciation claimed in Part III and elsewhere on return, Depletion, Contributions to deferred compensation plans, Employee benefit programs, Excess exempt expenses, Excess readership costs, Other deductions, Total deductions, Unrelated business income before net operating loss deduction, Deduction for net operating loss, and Unrelated business taxable income.

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2023

Part III Cost of Goods Sold		Enter method of inventory valuation	LOWER OF COST OR MARKET
1	Inventory at beginning of year		0.
2	Purchases		0.
3	Cost of labor		0.
4	Additional section 263A costs (attach statement)		0.
5	Other costs (attach statement)	STATEMENT 4	17,040.
6	Total. Add lines 1 through 5		17,040.
7	Inventory at end of year		0.
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2		17,040.
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Part IV Rent Income (From Real Property and Personal Property Leased With Real Property)				
1	Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.			
A	<input type="checkbox"/>			
B	<input type="checkbox"/>			
C	<input type="checkbox"/>			
D	<input type="checkbox"/>			
2	Rent received or accrued	A	B	C
a	From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)			
b	From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)			
c	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D			
3	Total rents received or accrued. Add line 2c, columns A through D. Enter here and on Part I, line 6, column (A)			0.
4	Deductions directly connected with the income in lines 2a and 2b (attach statement)			
5	Total deductions. Add line 4, columns A through D. Enter here and on Part I, line 6, column (B)			0.

Part V Unrelated Debt-Financed Income (see instructions)				
1	Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.			
A	<input type="checkbox"/>			
B	<input type="checkbox"/>			
C	<input type="checkbox"/>			
D	<input type="checkbox"/>			
2	Gross income from or allocable to debt-financed property	A	B	C
3	Deductions directly connected with or allocable to debt-financed property			
a	Straight line depreciation (attach statement)			
b	Other deductions (attach statement)			
c	Total deductions (add lines 3a and 3b, columns A through D)			
4	Amount of average acquisition debt on or allocable to debt-financed property (attach statement)			
5	Average adjusted basis of or allocable to debt-financed property (attach statement)			
6	Divide line 4 by line 5	%	%	%
7	Gross income reportable. Multiply line 2 by line 6			
8	Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)			0.
9	Allocable deductions. Multiply line 3c by line 6			
10	Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)			0.
11	Total dividends-received deductions included in line 10			0.

Part VI Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization		2. Employer identification number	Exempt Controlled Organizations			6. Deductions directly connected with income in column 5
			3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	
(1)						
(2)						
(3)						
(4)						
Nonexempt Controlled Organizations						
7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10		
(1)						
(2)						
(3)						
(4)						
			Add columns 5 and 10. Enter here and on Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on Part I, line 8, column (B).		
Totals			0.	0.		

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A).		Add amounts in column 5. Enter here and on Part I, line 9, column (B).
Totals		0.		0.

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1	Description of exploited activity: _____		
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2	
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3	
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4	
5	Gross income from activity that is not unrelated business income	5	
6	Expenses attributable to income entered on line 5	6	
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7	

FORM 990-T (A)

OTHER DEDUCTIONS

STATEMENT 2

DESCRIPTION	AMOUNT
MEETINGS & CONFERENCES	19.
MEMBERSHIP	28.
PRINTING & SUPPLIES	252.
TELEPHONE	367.
TRAVEL	483.
SECURITY	595.
ADVERTISEMENT	595.
MISCELLANEOUS	1,396.
BANK & CARD FEES	1,576.
BUILDING SERVICES	2,355.
OFFICE SERVICES	2,401.
UTILITIES	3,606.
INSURANCE	4,418.
PROFESSIONAL FEES	4,578.
TOTAL TO SCHEDULE A, PART II, LINE 14	22,669.

990-T SCH A

POST-2017 NET OPERATING LOSS DEDUCTION

STATEMENT 3

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/19	166,942.	0.	166,942.	166,942.
06/30/20	275,420.	0.	275,420.	275,420.
06/30/21	381,100.	0.	381,100.	381,100.
06/30/22	446,815.	0.	446,815.	446,815.
06/30/23	314,848.	0.	314,848.	314,848.
NOL CARRYOVER AVAILABLE THIS YEAR			1,585,125.	1,585,125.

FORM 990-T (A)

COST OF GOODS SOLD - OTHER COSTS

STATEMENT 4

DESCRIPTION	AMOUNT
COST OF GOODS SOLD	17,040.
TOTAL TO FORM 990-T, SCHEDULE A, LINE 5	17,040.

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Table with 2 columns: A Name of the organization (SKIRBALL CULTURAL CENTER), B Employer identification number (95-4538371), C Unrelated business activity code (722511), D Sequence (2 of 2)

E Describe the unrelated trade or business FOOD SERVICES

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales, Less returns and allowances, Cost of goods sold, etc.

Part II Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

Table with 3 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include Compensation of officers, directors, and trustees, Salaries and wages, Repairs and maintenance, etc.

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2023

Part III Cost of Goods Sold		Enter method of inventory valuation	LOWER OF COST OR MARKET
1	Inventory at beginning of year		0.
2	Purchases		0.
3	Cost of labor		0.
4	Additional section 263A costs (attach statement)		0.
5	Other costs (attach statement)	STATEMENT 7	1,052,435.
6	Total. Add lines 1 through 5		1,052,435.
7	Inventory at end of year		0.
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2		1,052,435.
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part IV Rent Income (From Real Property and Personal Property Leased With Real Property)				
1	Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.			
A	<input type="checkbox"/>			
B	<input type="checkbox"/>			
C	<input type="checkbox"/>			
D	<input type="checkbox"/>			
2	Rent received or accrued	A	B	C
a	From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)			
b	From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)			
c	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D			
3	Total rents received or accrued. Add line 2c, columns A through D. Enter here and on Part I, line 6, column (A)			0.
4	Deductions directly connected with the income in lines 2a and 2b (attach statement)			
5	Total deductions. Add line 4, columns A through D. Enter here and on Part I, line 6, column (B)			0.

Part V Unrelated Debt-Financed Income (see instructions)				
1	Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.			
A	<input type="checkbox"/>			
B	<input type="checkbox"/>			
C	<input type="checkbox"/>			
D	<input type="checkbox"/>			
2	Gross income from or allocable to debt-financed property	A	B	C
3	Deductions directly connected with or allocable to debt-financed property			
a	Straight line depreciation (attach statement)			
b	Other deductions (attach statement)			
c	Total deductions (add lines 3a and 3b, columns A through D)			
4	Amount of average acquisition debt on or allocable to debt-financed property (attach statement)			
5	Average adjusted basis of or allocable to debt-financed property (attach statement)			
6	Divide line 4 by line 5	%	%	%
7	Gross income reportable. Multiply line 2 by line 6			
8	Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)			0.
9	Allocable deductions. Multiply line 3c by line 6			
10	Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)			0.
11	Total dividends-received deductions included in line 10			0.

Part VI Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

		Exempt Controlled Organizations			
1. Name of controlled organization	2. Employer identification number	3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					
Nonexempt Controlled Organizations					
7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)					
(2)					
(3)					
(4)					
			Add columns 5 and 10. Enter here and on Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on Part I, line 8, column (B).	
Totals			0.	0.	

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A).		Add amounts in column 5. Enter here and on Part I, line 9, column (B).
Totals		0.		0.

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1	Description of exploited activity: _____		
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2	
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3	
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4	
5	Gross income from activity that is not unrelated business income	5	
6	Expenses attributable to income entered on line 5	6	
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7	

FORM 990-T (A)

OTHER DEDUCTIONS

STATEMENT 5

DESCRIPTION	AMOUNT
UTILITIES	191,841.
TELEPHONE	6,888.
BUILDING SERVICES	250,574.
PROFESSIONAL SERVICES	85,947.
INSURANCE	82,941.
OFFICE SERVICES	94,441.
PRINTING & SUPPLIES	9,575.
BANK & CARD FEES	113,878.
TRAVEL	3,044.
MISCELLANEOUS	75,216.
SECURITY	22,358.
MEETINGS & CONFERENCES	81.
ADVERTISEMENT & PROMOTION	21,949.
MEMBERSHIP	391.
TOTAL TO SCHEDULE A, PART II, LINE 14	959,124.

990-T SCH A

POST-2017 NET OPERATING LOSS DEDUCTION

STATEMENT 6

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/19	609,159.	0.	609,159.	609,159.
06/30/20	1,995,377.	0.	1,995,377.	1,995,377.
06/30/21	3,656,777.	0.	3,656,777.	3,656,777.
06/30/22	3,788,360.	0.	3,788,360.	3,788,360.
06/30/23	1,934,938.	0.	1,934,938.	1,934,938.
NOL CARRYOVER AVAILABLE THIS YEAR			11,984,611.	11,984,611.

FORM 990-T (A)

COST OF GOODS SOLD - OTHER COSTS

STATEMENT 7

DESCRIPTION	AMOUNT
COST OF GOODS SOLD	1,052,435.
TOTAL TO FORM 990-T, SCHEDULE A, LINE 5	1,052,435.