Financial Statements
Year Ended August 31, 2018

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INDEPENDENT AUDITORS' REPORT

To the Board of Directors
The Danish Immigrant Musuem
dba The Museum of Danish America
Elk Horn, Iowa

We have audited the accompanying financial statements of The Museum of Danish America (a nonprofit organization), which comprise the statement of assets, liabilities, and net assets – modified cash basis as of August 31, 2018, and the related statements of revenues, expenses and changes in net assets – modified cash basis, and functional expenses – modified cash basis for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the modified cash basis of accounting as described in Note 1; this includes determining that the modified cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion the financial statements referred to above present fairly, in all material respects, the assets, liabilities, and net assets of The Museum of Danish America as of August 31, 2018, and its support, revenue, and expenses for the year then ended in accordance with the modified cash basis of accounting as described in Note 1.

Emphasis of a Matter - Basis of Accounting

We draw attention to Note 1 of the financial statements, which describes the basis of accounting. The financial statements are prepared on the modified cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to that matter.

Report on Summarized Comparative Information

Olsen, Muhlbauer & Co, LLP

We have previously audited The Museum of Danish America's August 31, 2017, financial statements, and our report dated October 13, 2017, expressed an unmodified opinion on those audited financial statements. In our opinion, the summarized comparative information presented herein as of and for the year ended August 31, 2017, is consistent, in all material respects, with the audited financial statements from which it has been derived.

OLSEN, MUHLBAUER & CO., L.L.P.

Certified Public Accountants

Carroll, Iowa November 15, 2018

Statement of Assets, Liabilities, and Net Assets -Modified Cash Basis

August 31, 2018 with Comparative Totals as of August 31, 2017

	<u>2018</u>	<u>2017</u>
Assets		
Cash and Cash Equivalents	61,285	156,636
Design Shop Inventory	51,319	54,691
Exhibit Catalogue and Promotional Inventory	28,489	33,139
Property and Equipment (Net)	4,539,752	4,600,425
Cash and Investments Restricted for Long-term Purposes	5,546,156	5,367,122
Investments - Other	32,971	32,945
Collections (Note 1)	0	0
		-
Total Assets	10,259,972	10,244,958
Liabilities		
Accrued Payroll Taxes and Benefits	14,281	0
Line of Credit	100,000	200,000
Line of Credit		200,000
Total Liabilities	114,281	200,000
		
Net Assets		
Unrestricted		
Board Designated	1,136,928	1,134,314
Undesignated	4,768,733	4,721,670
Temporarily Restricted	253,179	204,736
Permanently Restricted	3,986,851	3,984,238
1 4		
Total Net Assets	10,145,691	10,044,958
A COMMA A TOP A ADDRESS		
Total Liabilities and Not Assats	10,259,972	10,244,958
Total Liabilities and Net Assets	10,233,372	10,444,730

Statement of Revenues, Expenses and Changes in Net Assets Modified Cash Basis For Year Ended August 31, 2018 with Comparative Totals for 2017

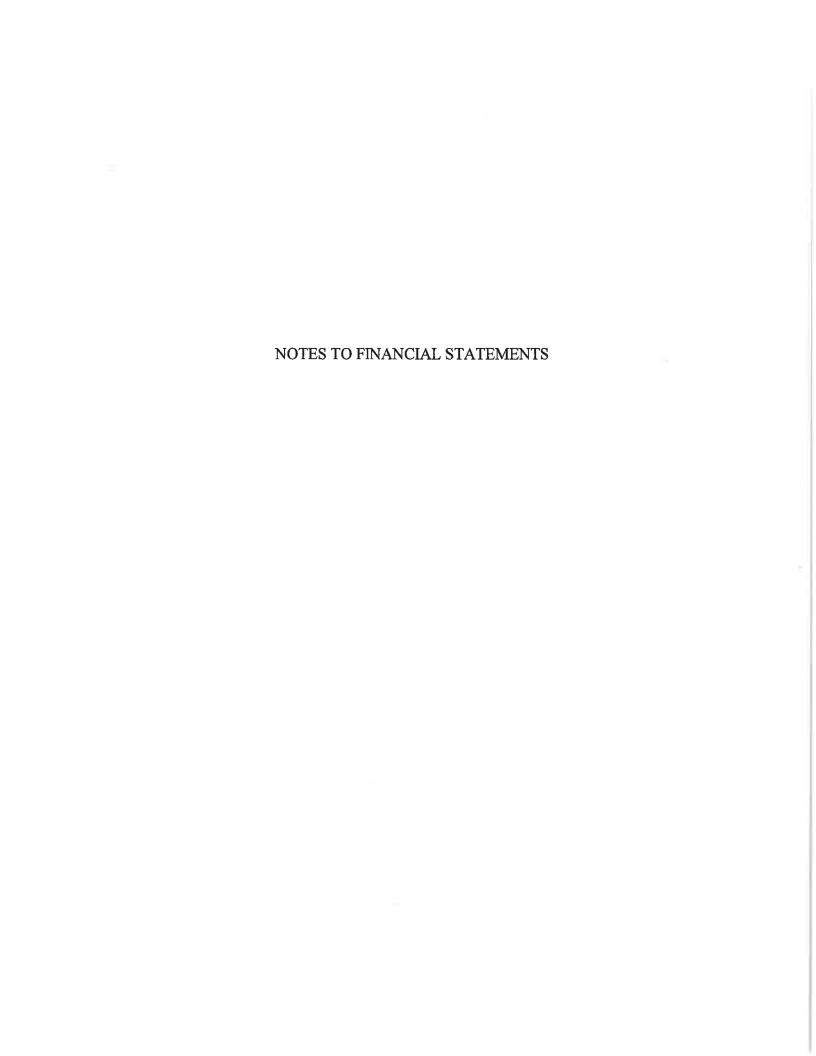
		Temporarily	Permanently		
	Unrestricted	Restricted	Restricted	Total	2017
Revenues, Gains and Net Assets					
Released from Restrictions:					
Contributions and Support	825,874	33,490	2,613	861,977	1,726,535
Admissions	17,103	0	0	17,103	16,015
Design Store Net Sales (Note 7)	52,422	0	0	52,422	52,921
Interest and Dividends	87,065	0	0	87,065	76,288
Realized Gain on Investments	143,301	0	0	143,301	74,898
Unrealized Gain on Investments	222,580	48,163	0	270,743	296,485
Loss on Disposal of Property					
& Equipment	(24,095)	0	0	(24,095)	(40,769)
Grants	28,517	30,920	0	59,437	171,241
Miscellaneous Income	33,929	0	0	33,929	45,526
Net Assets Released from					
Restrictions:	64,130	(64,130)	0	0	0
Total Revenues, Gains and Net					
Assets Released from Restrictions	1,450,826	48,443	2,613	1,501,882	2,419,140
Expenses					
Program Services					
Collection Care	484,063	0	0	484,063	427,617
Genealogy	129,545	0	0	129,545	122,846
Public Outreach	126,390	0	0	126,390	144,251
Design Store	136,833	0	0	136,833	140,449
Bedstemor's House	7,616	0	0	7,616	7,636
	884,447	0	0	884,447	842,799
Supporting Activities		=			
Management and General	393,142	0	0	393,142	422,078
Fund Raising	123,560	0	0	123,560	128,132
	516,702	0	0	516,702	550,210
Total Expenses	1,401,149	0	0	1,401,149	1,393,009
Change in Net Assets	49,677	48,443	2,613	100,733	1,026,131
Net Assets, Beginning of Year	5,855,984	204,736	3,984,238	10,044,958	9,018,827
Net Assets, End of Year	5,905,661	253,179	3,986,851	10,145,691	10,044,958

The accompanying notes are an integral part of these financial statements.

Statement of Functional Expenses Modified Cash Basis
For Year Ended August 31, 2018 with Comparative Totals for 2017

		ď	Program Services	8		Supporting Activities	ctivities		
	Collection Care	Genealogy	Public. Outreach	Design Store	Bedstemor's House	Management and General	<u>Fund</u> Raising	Total	2017 Total
Salaries Benefits and Taxes	153,094 45,962	61,810 16,141	84,404 12,372	53,741	4,030 307	146,517 15,269	49,826 10,655	553,422 116,233	512,130 121,222
Total Compensation	199,056	77,951	96,776	69,268	4,337	161,786	60,481	669,655	
2017 - Memo Only	143,745	74,481	106,745	63,815	4,008	174,628	65,930		633,352
Advertising	809	09	0	150	9	14,638	120	15,636	18,600
Bank Charges	41	0	0	207	0	48,232	0	48,780	44,717
Contract Labor/Outside Services	13,813	0	0	0	0	0	1,643	15,456	3,953
Depreciation	114,939	11,443	9,370	28,243	747	39,176	9,370	213,288	213,266
Donations	0	0	0	0	0	1,000	0	1,000	1,850
Equipment Expenses	0	5,440	0	0	0	4,663	0	10,103	14,824
Grounds Care	26,566	51	0	0	597	7,898	0	35,112	32,455
Insurance	6,505	1,943	2,914	2,429	486	5,828	1,943	22,048	34,449
Interest	0	0	0	0	0	2,332	0	2,332	1,256
Interns	9,650	0	0	0	0	0	0	9,650	12,000
Maintenance	20,353	400	1,850	5,551	240	7,401	1,850	37,645	61,653
Meetings	1,227	0	0	0	0	20,411	285	21,923	21,408
Memberships	1,020	238	0	0	0	1,675	0	2,933	2,569
Office & Computer	11,316	19,680	1,662	3,504	0	10,336	3,741	50,239	21,835
Other	12,349	1,212	0	1,525	0	5,827	5,455	26,368	33,391
Postage and Freight	5,511	251	0	6,812	0	2,193	7,800	22,567	28,967
Printing	2,689	0	0	11,190	0	18,033	18,613	50,525	56,166
Professional Fees	5,477	750	63	0	0	14,675	2,800	23,765	20,979
Reception and Events	0	0	5,000	10	0	3,914	1,002	9,926	9,495
Rent	6,255	3,000	0	0	0	0	0	9,255	19,200
Supplies	9,185	1,915	220	0	2	8,724	286	20,332	16,317
Travel	12,510	905	6,674	581	0	3,996	3,352	28,018	33,045
Telephone	1,958	1,880	0	1,479	0	2,958	2,958	11,233	12,003
Utilities	23,035	2,426	1,861	5,584	1,147	7,446	1,861	43,360	45,259
					1			077	
Total	484,063	129,545	126,390	136,833	7,616	393,142	123,560	1,401,149	
2017 - Memo Only	427,617	122,846	144,251	140,449	7,636	422,078	128,132		1,393,009

The accompanying notes are an integral part of these financial statements.



Notes to Financial Statements August 31, 2018

Note 1 - Nature of Activities and Significant Accounting Policies

Nature of Activities

The Danish Immigrant Museum (the Museum) was formed in 1983 to exhibit materials and to provide information to the public regarding the impact and contributions of immigrants from Denmark to the United States and is located in Elk Horn, Iowa. Artifacts and traditions are collected, preserved, studied and interpreted in order to preserve this rich heritage. During the fiscal year ended August 31, 2014, the Danish Immigrant Museum formally adopted a fictitious name, The Museum of Danish America, in order to embrace all aspects of Danish American culture and influence rather than focusing only on immigrants.

The Museum of Danish America's five program services are:

Collection Care - The Museum of Danish America celebrates Danish roots and American dreams through its curatorial activities. The department maintains a collection of approximately 40,000 artifacts, many of which are available on the museum's website through the "View Our Collection" extension.

Genealogy - The Genealogy Center collects print, microform and digital materials on Danish immigrants, Danish Americans, their communities and organizations, and provides information on relevant genealogical resources as well as research and translation services to the public in-house and long distance. In addition, a digital library provides the ability to browse collections and titles online.

Public Outreach - Public outreach activities bring the Museum's mission to its national audience and membership by engaging constituents at public festivals, lectures and presentations, workshops, and receptions across the country.

Design Store - The Design Store displays items reflecting the best in Danish design and books about Denmark and Danish-American relations.

Bedstemor's House - Maintenance, tours and promotion of a 19th century historical house.

Significant Accounting Policies

The financial statements of the Museum have been prepared on the modified cash basis of accounting, a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America. The modified cash basis of accounting reports transactions on a cash basis modified to reflect certain accrual basis accounting adjustments such as capitalizing fixed assets and recording annual depreciation along with recording debt owed to banks. Revenue is recognized when received and does not account for promises to give. In addition, expenses incurred but unpaid at August 31, 2018, are not reflected in the accompanying modified cash basis of accounting financial statements.

Notes to Financial Statements August 31, 2018

Note 1 – Nature of Activities and Significant Accounting Policies (Continued)

Significant Accounting Policies (Continued)

Use of Estimates. The preparation of financial statements in conformity with the modified cash basis of accounting requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, revenues, and expenses during the period and as of the date of the financial statements. Actual results could differ from those estimates.

Net Assets. The financial statements report net assets and changes in net assets in three classes that are based upon the existence or absence of restrictions on use that are placed by its donors, as follows:

Unrestricted net assets are resources available to support operations. The only limits on the use of unrestricted net assets are the broad limits resulting from the nature of the organization, the environment in which it operates, the purposes specified in its corporate documents and its application for tax-exempt status, and any limits resulting from contractual agreements with creditors and others that are entered into in the course of its operations.

Temporarily restricted net assets are resources that are restricted by a donor for a particular purpose or future period. Unspent contributions are classified in this class if the donor limited their use, as are the unspent appreciation of its donor-restricted endowment funds. When a donor's restriction is satisfied, either by usage of the resources or by the passage of time, the expiration of the restriction is reported by reclassifying the net assets from temporarily restricted to unrestricted net assets. If a restriction is fulfilled in the same time period in which the contribution is received, the Museum reports the contribution as unrestricted.

Permanently restricted net assets are resources whose use is limited by donor-imposed restrictions that neither expire by being used in accordance with a donor's restriction nor by the passage of time.

All revenues and gains are reported as increases in unrestricted net assets in the Statement of Revenues, Expenses, and Changes in Net Assets - Modified Cash Basis unless the use of the related resources is subject to temporary or permanent donor restrictions. All expenses and net losses other than losses on endowment investments are reported as decreases in unrestricted net assets. Net losses on endowment investments reduce temporarily restricted net assets to the extent that net gains of the fund from prior years are unspent and classified there; remaining losses are classified as decreases in unrestricted net assets. If an endowment fund has no net gains from prior years, such as when a fund is newly established, net losses are classified as decreases in unrestricted net assets.

Cash Equivalents. The Museum considers all unrestricted short-term investments with an original maturity of three months or less to be cash equivalents unless the investments are held for meeting restrictions of a capital or endowment nature.

Inventory. Inventory, consisting of design store merchandise and exhibit catalogues, is stated at the lower of cost or market determined on a first-in, first-out basis by the Museum's personnel.

Notes to Financial Statements August 31, 2018

Note 1 – Nature of Activities and Significant Accounting Policies (Continued)

Significant Accounting Policies (Continued)

Property and Equipment. Property and equipment are recorded at cost unless donated. Donated property and equipment are recorded at their fair value on the date of receipt. Gifts of property and equipment are recorded as unrestricted support unless the donor explicitly specifies how the donated assets must be used. Currently, the Museum has no policy implying time restrictions on donated property. Property and equipment with a cost of \$2,000 or more and a useful life when acquired of more than one year are capitalized. Repairs and maintenance that do not significantly increase the useful life of the asset are expensed as incurred. Depreciation is provided on the straight-line method over a five to fifteen-year period for furniture and equipment, fifteen to fifty years for buildings and permanent exhibits, and fifteen years for improvements.

Property and equipment are reviewed for impairment when a significant change in the asset's use or another indicator of possible impairment is present. An impairment loss of \$24,095 was recognized in the financial statements in the current period for a traveling exhibit that was retired this year.

Collections. The Museum's collections, which were acquired through purchases and contributions since the Museum's inception, are not recognized as assets on the Statement of Assets, Liabilities, and Net Assets - Modified Cash Basis. Purchases of collection items are recorded as decreases in unrestricted net assets in the year acquired. Proceeds from deaccessions or insurance claims are reflected as increases in the appropriate net asset classes.

The Museum's collections consist of historically significant artifacts and art held for educational, research, and curatorial purposes. The items are cataloged, 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 collection items, conserve existing collection items, or to benefit the Museum's operations and programs.

Contributions. Contributions are recognized when received. All contributions are reported as increases in unrestricted net assets unless use of the contributed assets is specifically restricted by the donor. Amounts received that are restricted by the donor to use in future periods or for specific purposes are reported as increases in either temporarily restricted or permanently restricted net assets, consistent with the nature of the restriction.

In-kind Donations. The museum receives a significant amount of support in the form of goods and services from donors and volunteers in the museum's operations, fund raising, admissions desk, design store, and museum tours. Services that do not require specialized knowledge are not required to be reported on financial statements prepared on the modified cash basis of accounting. Accordingly, these financial statements do not reflect these contributions. If these contributions were recorded, revenues would increase by the fair value of the contributions. During the fiscal year ended August 31, 2018, an in-kind contribution of \$130,000 for a building was required to be recorded.

Notes to Financial Statements August 31, 2018

Note 1 – Nature of Activities and Significant Accounting Policies (Continued)

Significant Accounting Policies (Continued)

Expense recognition and allocation. The cost of providing the museum's programs and other activities is summarized on a functional basis in the Statement of Revenues, Expenses and Changes in Net Assets - Modified Cash Basis and Functional Expenses - Modified Cash Basis. Expenses that can be identified with a specific program are charged directly to that program. Costs common to multiple functions have been allocated among the various functions benefited.

Management and general expenses include those costs that are not directly identifiable with any specific program, but which provide for the overall support and direction of the museum.

Fundraising costs are expensed as incurred, even though they may result in future contributions.

Additionally, advertising costs are expensed as incurred.

The Museum has elected to use the direct expensing method in accounting for planned major maintenance activities.

Tax status. The Museum is a not-for-profit organization that is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code. The Museum is also a public charity under the IRC Sections 509(a) and 170(b)(1)(A)(vi). This allows for donations to the Museum to be deductible as charitable contributions. Tax years ending prior to August 31, 2015, are considered closed years.

The Museum accounts for uncertainties in accounting for income taxes using the guidance included in Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) Topic 740, Income Taxes. The Museum recognizes the effect of income tax positions only if those positions are more likely than not of being sustained. At August 31, 2018, the Museum had no uncertain tax positions.

Note 2 – Investments and Fair Value of Financial Instruments

The Museum accounts for its assets measured at estimated fair value on a recurring and non-recurring basis in accordance with FASB ASC Topic 820, *Fair Value Measurements and Disclosures* (ASC 820). ASC 820 defines fair value, establishes a framework for measuring fair value, and enhances disclosures about fair value measurements.

ASC 820 defines the fair value as the price that would be received from selling as asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. When determining the fair value measurements for assets and liabilities required or permitted to be recorded at fair value, the Museum considers the principal or most advantageous market in which it would transact and it considers the assumptions that market participants would use when pricing the asset or liability.

Notes to Financial Statements August 31, 2018

Note 2 – Investments and Fair Value of Financial Instruments (Continued)

ASC 820 requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. ASC 820 establishes a fair value hierarchy based on the level of independent, objective evidence surrounding the inputs used to measure fair value.

A financial instrument's categorization within the fair value hierarchy is based upon the lowest level of input that is significant to the fair value measurement. ASC 820 prioritizes the inputs into three levels that may be used to measure fair value.

- Level 1: Fair value determined based on quoted prices in active markets for identical assets or liabilities.
- Level 2: Fair value determined using significant observable inputs, generally either quoted prices in active markets for similar assets or liabilities or quoted prices in markets that are not active.
- Level 3: Fair value determined using significant unobservable inputs, such as pricing models, discounted cash flows, or similar techniques.

The Museum's investments are classified as Level 1 as the instruments are actively traded and have quoted prices. The primary uses of fair value measures in the museum's financial statements are:

- Initial measurement of noncash gifts (e.g. investment assets).
- Recurring measurement of investments.

All investments held at August 31, 2018, have been classified as Level 1 investments. No Level 2 or Level 3 investments were held at August 31, 2018.

Investments shown on the next page consist of the following as of August 31, 2018:

Notes to Financial Statements August 31, 2018

Note 2 – Investments and Fair Value of Financial Instruments (Continued)

<u>ASSETS</u>	<u>Cost</u>	Fair Value (Level 1)	<u>Unrealized</u> <u>Appreciation</u> (Depreciation)
Unrestricted:			
Cash & Money Market Accounts	3,441	3,441	0
Certificate of Deposit	29,530	29,530	0
	32,971	32,971	0
Temporarily Restricted:			
Cash & Money Market Accounts	416,878	416,877	(1)
Fixed Income Funds	19,765	19,563	(202)
Equity Mutual Funds	65,558	86,990	21,432
	502,201	523,430	21,229
Less: Endowment Monies Invested in			
Temporarily Restricted Account	(28,000)	(28,000)	0
	474,201	495,430	21,229
Permanently Restricted:			
DBIA Endowment Fund	28,000	28,000	0
Holger Danske Endowment Fund			
Cash & Money Market Funds	27,961	27,961	0
Fixed Income Funds	211,010	210,247	(763)
Equity Mutual Funds	663,382	933,835	270,453
DIM Endowment Fund			
Cash & Money Market Funds	80,432	80,432	0
Fixed Income Funds	1,070,096	1,045,744	(24,352)
Equity Mutual Funds	2,198,149	2,724,507	526,358
	4,279,030	5,050,726	771,696
	4,786,202	5,579,127	792,925

Notes to Financial Statements August 31, 2018

Note 3 – Property and Equipment

Property and equipment consists of the following:

Land and improvements	979,294
Museum building	5,316,748
FHGC building	130,000
FHGC building improvements	26,901
Exhibit furniture	217,958
Design store furnishings and equipment	18,730
Office furniture and equipment	199,712
FHGC furniture and equipment	54,644
Historical house	65,410
Vehicles	22,378
Intangibles - Website and brand	44,214
	7,075,989
Less: Accumulated depreciation	(<u>2,536,237</u>)
Total	4 539 752
<u>10tai</u>	<u>-+,557,152</u>

Note 4 – Debt

During the year ended August 31, 2018, the Museum drew upon a \$400,000 line of credit with Shelby County State Bank which matures March 1, 2019. At August 31, 2018, \$100,000 was advanced against this credit line which bears interest at a variable rate currently at 6.00%.

Note 5 – Net Assets

Net assets consist of the following and are available for the purpose indicated.

Unrestricted Net Assets Board Designated Undesignated	1,136,928 4,768,733
Total Unrestricted Net Assets	5,905,661
Temporarily Restricted Net Assets Unappropriated endowment earnings Restricted to various projects	48,163
Total Temporarily Restricted Net Assets	253,179

Notes to Financial Statements August 31, 2018

Note 5 – Net Assets (Continued)

Permanently Restricted Net Assets	
Restricted to maintenance of artifacts	28,000
Restricted to Holger Danske endowment	1,299,609
Restricted to DIM endowment	2,659,242
Total Permanently Restricted Net Assets	<u>3,986,851</u>
Total Net Assets	10,145,691

Note 6 – Endowments

The museum's endowments consist of three funds consisting of resources provided by donors (referred to as donor-restricted endowment funds) and or by resources set aside by the Board of Directors to function as endowments (referred to as board-designated endowment funds). All donor restricted endowments are permanent endowments or funds that provide a perpetual source of support for the museum's activities. Net assets associated with endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions.

The state of Iowa enacted the Uniform Prudent Management of Institutional Funds Act (UPMIFA) effective April 11, 2008. UPMIFA establishes law for the management and investment of donor-restricted endowment funds. The Board of Directors of the museum has interpreted UPMIFA as requiring the preservation of the fair value of the original gift as of the gift date of the donor-restricted permanent endowment funds unless there are explicit donor stipulations to the contrary. As a result of this interpretation, the museum classifies the original value of gifts to donor-restricted permanent endowments as permanently restricted net assets. The remaining portion of a donor-restricted permanent endowment fund is classified as temporarily restricted net assets until those amounts are appropriated for expenditure by the museum.

In accordance with UPMIFA, the Museum considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

- The duration and preservation of the fund
- The purposes of the Museum and the donor-restricted endowment fund
- General economic conditions
- The possible effect of inflation and deflation
- The expected total return from income and the appreciation of investments
- Other resources of the Museum
- The investment policies of the Museum

Notes to Financial Statements August 31, 2018

Note 6 – Endowments (Continued)

The net asset composition of endowment funds as of August 31, 2018, is as follows:

•	<u>Unrestricted</u>	Temporarily Restricted	Permanently Restricted	<u>Total</u>
Donor-restricted				
permanent endowment funds				
- DBIA Artifact Endowment	0	0	28,000	28,000
- Holger Danske Endowment *	(140,345)	0	1,299,609	1,159,264
- DIM Endowment *	0	48,163	2,659,242	2,707,405
Total Donor-restricted funds	(140,345)	48,163	3,986,851	3,894,669
Board-designated endowment fund				
- Holger Danske Endowment *	12,779	0	0	12,779
- DIM Endowment *	1,143,278	0	0	1,143,278
Total Board-designated funds	1,156,057	0	0	1,156,057
Total Endowment Funds	1,015,712	48,163	3,986,851	5,050,726

^{*} The total balance in the Holger Danske Endowment of \$1,172,043 and in the DIM Endowment of \$3,850,683 consists of both donor-restricted funds and board-designated funds. The \$28,000 balance in the DBIA Artifact Endowment consists of all donor-restricted funds.

The Holger Danske donor-restricted permanent endowment fund currently has less value than the amount of the original gifts (the permanently restricted portion of the fund). The deficiency results from cumulative withdrawals in excess of cumulative income, of \$141,555 at August 31, 2018, and is reported in unrestricted net assets of both the donor-restricted permanent endowment and Board-designated endowment funds shown above.

The Holger Danske Endowment spending and investment policies adopted by the Board of Directors of the Museum attempt to provide a predictable stream of funding to the Museum while seeking to maintain the purchasing power of the endowment assets. The investment policy establishes an achievable return through diversification of asset classes. The spending policy is to distribute an amount equal to 50% of the net income of the fund with additional withdrawals allowable if deemed necessary. Essentially, the Museum's objective is to maintain the purchasing power of the endowment assets as well as to provide additional real growth through new gifts and investment return.

The DIM Endowment spending and investment policies adopted by the Board of Directors of the Museum attempt to achieve a reasonable and adequate rate of growth while not incurring significant risk, produce reasonable income, and achieve growth. The investment policy establishes an achievable return through use of a moderate portfolio approach. The spending policy allows distribution of the fund's entire investment income and provides for invasion of principal with Board or Executive Committee approval. The Museum's objective is to provide growth exceeding inflation.

Notes to Financial Statements August 31, 2018

Note 6 – Endowments (Continued)

The changes in endowment net assets for the year ended August 31, 2018, are as follows:

	Unrestricted	Temporarily Restricted	Permanently Restricted	<u>Total</u>
Endowment Net Assets -				
August 31, 2017	931,044	0	3,984,238	4,915,282
Investment Return -				
Investment Income	190,475	0	0	19 0,4 75
Realized Gains	35,106	0	0	35,106
Unrealized Gains	215,614	48,163	0	263,777
Fees	(40,051)	0	0	(40,051)
Total Investment Return	401,144	48,163	0	449,307
Contributions	2,614	0	2,613	5,227
Board Releases	(319,090)	0	0	(319,090)
Endowment Net Assets - August 31, 2018	1,015,712	48,163	3,986,851	5,050,726

Note 7 – Design Store

Design Store revenues are reported net of discounts and returns in the Statement of Revenues, Expenses and Changes in Net Assets - Modified Cash Basis. Gross profit information is as follows:

Gross Sales	111,384
Discounts	(<u>8,997</u>)
Net Sales	102,387
Cost of Goods Sold	(49,965)
Gross Profit	52,422

Shipping and handling costs on both incoming and outgoing orders are included on the Statement of Functional Expenses in the Design Store's postage and freight expense.

Notes to Financial Statements August 31, 2018

Note 8 - Leases

The Museum leases intern living quarters and storage units under automatically renewable month-to-month leases. The Museum also has certain office equipment under non-cancelable leases expiring in the fiscal year ending August 31, 2022. In addition, the Museum leased office space during the fiscal year ended August 31, 2018, for four months until the real estate was donated to the Museum. Rental expense amounted to approximately \$13.097 for the year ended August 31, 2018 and is reported on the Statement of Functional Expenses as Rent, Equipment Expenses and Other Expenses. The approximate minimum rental commitment under non-cancelable operating leases in effect is as follows as of August 31,:

2019	4,068
2020	4,068
2021	4,068
2022	3,338

Note 9 – Concentrations of Credit Risk

Amounts held in financial institutions are in excess of the Federal Deposit Insurance Corporation limits. At August 31, 2018, funds amounting \$407,131 were uninsured. The Museum's investments are subject to various risks, such as interest rate, credit and overall market volatility risks. Further, because of the significance of the investments to the museum's financial position and the level of risk inherent in most investments, it is reasonably possible that changes in the values of these investments could occur in the near term and such changes could materially affect the amounts reported in the financial statements. Management believes that its credit risk is not significant.

Note 10 – Related Party Transactions

During the year ended August 31, 2018, the Museum received \$67,035 from board members and staff.

Note 11 – Prior Year Information

Prior year information has been summarized and is not a complete presentation in conformity with the modified cash basis of accounting.

Note 12 – Subsequent Events

The Museum has considered subsequent events through November 15, 2018, which is the date the financial statements were available to be issued.

In September, 2018, the Museum swept earnings from the Holger Danske endowment account. The earnings sweep amounted to \$117,546. In addition, in November, 2018, the Museum swept \$401,493 from the DIM Endowment account.

Notes to Financial Statements August 31, 2018

Note 12 – Subsequent Events

Due to current market conditions, the Museum's investments have lost about 5% of their August 31, 2018, market value. Management is aware of the market and is monitoring the returns and will take action to limit future losses if deemed necessary.

The Museum also received the proceeds of a \$175,000 zero interest loan from a former Board member. A portion of these proceeds was used to pay down the remainder of the line of credit at Shelby County State Bank.

Department of the Treasury

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

OMB No. 1545-0047 2017 Open to Public

inter	nal Revenue				0 for instructions and the latest			inspection					
A	For the 2	2017 calendar year, c	or tax year beginning	09/01/17	, and ending 08/31/	18							
В	Check if appli					ı	Employe	r identification number					
Ē	Address char	l l	THE DAN	ISH IMMIGRA	NT MUSEUM								
님		Dolar husbess			SH AMERICA		42-1	204613					
Ш	Name change		et (or P.O. box if mail is not de			Room/suite	Telephon	e number					
П	Initial return	2212 WA	SHINGTON ST				<u>712-</u>	764-7001					
Ħ.	Final return/ City or town, state or province, country, and ZIP or foreign postal code												
<u></u>	terminated	ELK HOR		IA 51531		1,	Gross rec	elpts 2,210,241					
Ш	Amended ret		ess of principal officer:										
П	Application p		THOEGERSEN			H(a) is this a group	relurn for s	ubordinates? Yes X No					
	, ibbuonion b					H(b) Are all subor	dinatae incl	uded? Yes No					
			OUTH 19TH ST			1 ''		(see instructions)					
		OMAHA		NE	68102		illaci a ilst	(egg aleg gottons)					
1	Tax-exempt	status: X 501(c)(3	501(c) ()	(insert no.)	4947(a)(1) or 527	_							
J	Website:	WWW.DANIS	SHMUSEUM.ORG	3		H(c) Group exem		ır 🕨					
ĸ	Form of orga	nization: X Corporation	Trust Association	on Other 🕨	L.	Year of formation: 19	83	M State of legal domicile: IA					
	art	Summary	a says N										
مثلنسنة			nization's mission or m	ost significant act	vities:	•							
			ANISH ROOTS A			ING MODERN							
8							<i></i> .	**************************************					
ä	11				-ACRES IN WESTERN								
E	1 . 1	iouses extens	IVE ARTIFACT	COLLECTION	s, PERMANENT, AND	TRAVELING	EXHIB	rs.					
Governance	2 Ch	eck this box ▶ if t	he organization discont	linued its operation	ns or disposed of more than 2	5% of its net asse	ts.						
O NA	3 Nu	mber of voting member	ers of the governing bo	dy (Part VI, line 1	a)		3	25					
ģ					art VI, line 1b)	***************************************	4	25					
¥					V, line 2a)	************	5	25					
Activities &			ers (estimate if necessa				6	20					
ď	1		•	, , , , , , , , , , , , , , , , , ,	40	***	7a	0					
	1		revenue from Part VIII				7b	Ŏ					
	b Ne	t unrelated business to	axable income from Fo	rm 990-1, line 34		Prior Year		Current Year					
	0.00	atiliana and assaul	(Dad VIII line 46)		10.1	1,899		932,660					
91	8 00	ntributions and grants	(Part VIII, line III)		()			39,786					
Revenue	9 Pro	gram service revenue	(Part VIII, line 2g)				,167						
8			VIII, column (A), lines	TT0	,417	206,271							
Œ	11 Ott	ner revenue (Part VIII,	column (A), lines 5, 6d	I, 8c, 9c, 10c, and	11e)	52	,921	52,422					
	12 To	al revenue – add lines	s 8 through 11 (must ec	qual Part VIII, colu	ımn (A), line 12)	2,109	<u>,289</u>	1,231,139					
	13 Gr	ents and similar amou	nts paid (Part IX, colun	nn (A), lines 1-3)	The state of the s	- G	1 11 (8) 414	7 10 19 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	(embers (Part IX, colum			. 247	· 1 80	0					
	45 0-		•		1 (A), lines 5–10)	633	, 352	669,664					
Expenses	160 Dr	fossional fundraisina	face (Part IV column /	A) line 11e)	. (),	4.743		0 0					
ē	loar I	olessional lunuraising	fees (Part IX, column (123 561		10.13400, por						
봈	D 101	ai fundraising expens	es (Part IX, column (D)	, line 25)		716	,297	731,485					
ш	11, 00		* *										
		Programme and the second secon	es 13–17 (must equal P		*,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1,379							
		venue less expenses.	Subtract line 18 from I	ine 12		129	, 640	-170,010					
Net Assets or	2					Beginning of Curre		End of Year					
25.5	20 To	al assets (Part X, line			************************	10,244		10,259,972					
\$	21 To	al liabilities (Part X, li					,000	114,281					
2,	22 Ne	l assets or fund balan	ces. Subtract line 21 fro	om line 20		10,044	<u>, 958</u>	10,145,691					
7	art II	Signature Blo	ck			y dia Marka	1 8 3 44						
U	nder penal			return, including acc	companying schedules and statem	ents, and to the bea	at of my kr	owledge and belief, it is					
tr	ue, correct	and complete. Declarat	on of preparer (other than	officer) is based or	all information of which preparer	has any knowledge		N/00 115					
		Des mu	Moeger	24				11.26.2018					
ei.	-n	Signature of officer	- Virgo			,	Date						
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He	re		THOEGERSEN		EARC	DIK							
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_		rint/Type preparer's name		Preparer's signs	Mars Mark al D	Date 11/26/	Check	L					
Pal	<u></u>	AMMY M BRUCH		Ellmin	() ()	11/26/	18 self-er						
		irm's name 🕨 O	lsen, Muhlb	auer & Co	O, L.L.P.	Fir	m's EIN	42-0950074					
Us	e Only		O. Box 545										
	١,		arroll, IA	51401		Ph Ph	one no.	712-792-4314					
Ma			th the preparer shown a		ctions)			X Yes No					
	,		brakerer attentil 6			. , , , , , , , , , , , , , , , , , , ,	,,,,						

Form 990 (2017) THE DANISH IMMIGRANT MUSEUM 42-1204613 Page 2 **Statement of Program Service Accomplishments** Check if Schedule O contains a response or note to any line in this Part III 1 Briefly describe the organization's mission: CELEBRATING DANISH ROOTS AND AMERICAN DREAMS. A STRIKING MODERN HALF-TIMBERED BUILDING SITUATED ON 30-ACRES IN WESTERN IOWA'S ROLLING HILLS HOUSES EXTENSIVE ARTIFACT COLLECTIONS, PERMANENT, AND TRAVELING EXHIBITS. 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program 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. 484,063 including grants of \$) (Revenue \$) (Expenses \$ The Museum of Danish America celebrates Danish roots and American dreams through its curatorial activities. The curatorial department maintains a collection of approximately 30,000 artifacts and accepted 110 additional pieces during this past year. Over 43,500 artifact records are made available through "View Our Collection" on the museum's website. The museum (1) welcomed over 8200 visitors this year, (2) opened four new temporary exhibitions, and (3) provided nine different traveling exhibitions to 12 venues in 8 states plus Denmark, reaching an additional audience of over 60,000 people. A robust calendar of special events provided lunchtime speakers, holiday traditions, outdoor activities, and Danish films to visitors of all ages. The Genealogy Center of the Museum of Danish America, located on Main Street in Elk Horn Collects print 4b (Code: 10,965) Street in Elk Horn, collects print, visual, microform and digital materials on Danish immigrants and Danish Americans, their communities and organizations, and provides information on relevant genealogical resources as well as research and translation services to North American and Danish patrons both in-house and long-distance. The department also provides support services for the Curatorial and Exhibitions Departments. In FY 2017/2018, more than 600 people visited the Genealogy Center, while many others contacted the Center via phone, email, or mail. Outreach activities included newspaper vignettes, articles written for the America Letter, presentations, social media, and meetings with other Danish-American 126,390 including grants of \$) (Revenue \$ Public Outreach activities bring the museum's mission to its national audience and membership. Museum staff engage constituents at public festivals, lectures and presentations, workshops, and receptions across the country. During the past fiscal year, nearly 12,000 people participated in 28 off-site museum events in 8 states. The museum also engaged audience members through internet-based and electronic media. Over 314,000 unique visitors came to the museum's website, over 6200 people subscribe to the monthly e-newsletter, and 9500 people follow the museum's Facebook page.

4d Other program services (Describe in Schedule O.)

4e Total program service expenses ▶

144,448 including grants of \$

884,446

Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X complete Schedule A 1 X Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X candidates for public office? If "Yes," complete Schedule C, Part I 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II X Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, X 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If X "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X 8 complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or X debt negotiation services? If "Yes," complete Schedule D. Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted 10 X endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," X 11a complete Schedule D, Part VI Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more X of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII X d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets X reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 11d X Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D, Parts XI and XII **b** Was the organization included in consolidated, independent audited financial statements for the tax year? If X "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 13 13 14a Did the organization maintain an office, employees, or agents outside of the United States? X 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate X foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or X for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV X 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) X 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? X If "Yes," complete Schedule G, Part III

Checklist of Required Schedules (continued) Part IV Yes No 20a 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20b b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 X 21 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 X 22 Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated X 23 employees? If "Yes," complete Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b X through 24d and complete Schedule K. If "No," go to line 25a 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c to defease any tax-exempt bonds? 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 25a 2<u>5a</u> X transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? X 25b If "Yes." complete Schedule L. Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any 26 current or former officers, directors, trustees, key employees, highest compensated employees, or X 26 disqualified persons? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled X entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): X 28a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b X Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) X was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 conservation contributions? If "Yes," complete Schedule M 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 X 32 complete Schedule N. Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 X or IV. and Part V. line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 35a If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable X related organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, X 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38 X 19? Note. All Form 990 filers are required to complete Schedule O.

Form 990 (2017) THE DANISH IMMIGRANT MUSEUM 42-Part V Statements Regarding Other IRS Filings and Tax Compliance

. F. G	Check if Schedule O contains a response or note to any line in this Part	<u>/</u>		<u> </u>		
1-		1	5		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 1b	0	-		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and	10	<u> </u>	-		
С	reportable gaming (gambling) winnings to prize winners?			1c	200000000000000000000000000000000000000	
2a		1		10		
La	Statements, filed for the calendar year ending with or within the year covered by this return	2a	25			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	200000000000
~	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instruction					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	O)		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		it v			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin					
	account)?			4a	X	
b	If "Yes," enter the name of the foreign country: ▶ Denmark					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Accour	nts			
	(FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he				
	organization solicit any contributions that were not tax deductible as charitable contributions?	.,		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or				
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods				
	and services provided to the payor?			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as		1_		37
	required to file Form 8282?	γ		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year					v
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control to the organization received a contribution of realistical intelligence and did the organization file.			7f		X
g L	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g 7h	ļ	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz			/11		
0	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine sponsoring organization have excess business holdings at any time during the year?	eu by ti	ie	8		X
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the analysis against a second star and a second distribution and a section 4000			9a	0000000000	X
b	Did the sponsoring organization make any taxable distributions didnor section 4000? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		X
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	[
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	\				
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources					
	against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	n 1041	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					1
b	Enter the amount of reserves the organization is required to maintain by the states in which	ı	1			
	the organization is licensed to issue qualified health plans	13b		4		
С	Enter the amount of reserves on hand	13c				# -
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a	 	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	le O		14b		l

Form 990 (2017) THE DANISH IMMIGRANT MUSEUM 42-1204613 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI

Sec	tion A. Governing Body and Management					
	The second of th				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	25			
	If there are material differences in voting rights among members of the governing body, or		1 NATE 1			
	if the governing body delegated broad authority to an executive committee or similar		Program to Taylor			
	committee, explain in Schedule O.		a <u>Wil</u> nel Low			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	25			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		To wait			
	any other officer, director, trustee, or key employee?			2	تنسنت	X
3	Did the organization delegate control over management duties customarily performed by or under the direct		SURFERENCE OF	187		
	supervision of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed	?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Did the organization have members or stockholders?			6		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?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			14, 141	13 A	1
	stockholders, or persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	ar by 1	the following:			
а	The governing body?			8a	X	<u></u>
b	Each committee with authority to act on behalf of the governing body?			8b	X	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	L	X
Sec	tion B. Policies (This Section B requests information about policies not required by the Inter	nal F	<u>Revenue Co</u>	<u>de.)</u>		T
				r	Yes	
10a	• • • • • • • • • • • • • • • • • • • •			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	37	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	the f	orm?	11a	X	1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	1
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to c	onflicts?	12b		X
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			١.,	₹,	
	describe in Schedule O how this was done			12c	X	ļ
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	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?				v	
а	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b	X	-
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	1350		40		x
	with a taxable entity during the year?			16a		
þ	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			40.		
	organization's exempt status with respect to such arrangements?			16b	<u> </u>	
	ction C. Disclosure					
17					· · · · · ·	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 50) (C)(only)			
	available for public inspection. Indicate how you made these available. Check all that apply.					
	Own website X Another's website X Upon request Other (explain in Schedule O)	00t ==	liou and			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of inter	est po	moy, and			
00	financial statements available to the public during the tax year.	rde •	grade in the			
20 J	State the name, address, and telephone number of the person who possesses the organization's books and recommendate with the state of the person who possesses the organization's books and recommendate with the person who possesses the organization's books and recommendate with the person who possesses the organization's books and recommendate with the person who possesses the organization's books and recommendate with the person who possesses the organization's books and recommendate with the person who possesses the organization of the person who possesses the organization is books and recommendate with the person who possesses the organization is books and recommendate with the person who possesses the organization is books and recommendate with the person who possesses the organization is books and recommendate with the person who possesses the organization is books and recommendate with the person who possesses are person who possesses are person who	ius. P	CONSTRUCTION OF			

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A.A.A.E.E.E.E.E.E.E.E.E.E.E.E.E.E.E.E.E						
Part VII	Compensation of Officers, Directo	rs, Trustees	, Key Employees	, Highest (Compensated Employees	s, and
	Independent Contractors					

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest

compensated employees; and former such persons.

Check this box if neither the orga	anization nor an	y rela	ated	orga	niza	tion cor	mp	ensated any current office	er, director, or trustee.	
(A) Name and Title	Name and Title Average hours per week (list any					than one s both an r/trustee)	١.	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
, .	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	E	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) CINDY LARSEN ADA	MS	 					\dashv			· ·
•	1.00									
BOARD MEMBER	0.00	X						0	0	. 0
(2) PEDER HANSEN							\exists			
•	1.00									
BOARD MEMBER	0.00	X						0	0	0
(3) BETH BRO-ROOF							T			
	1.00									
BOARD MEMBER	0.00	X						0	0	0
(4) TIMOTHY BURCHILI							1			
	5.00						-			
VICE PRESIDENT	0.00	X		X			-	0	0	0
(5) BENTE ELLIS							\forall			
·	1.00									
BOARD MEMBER	0.00	X						0	0	0
(6) DAVID ESBECK							T			
	1.00									
BOARD MEMBER	0.00	X						0	0	0
(7) DOROTHY STADSVOI	D FEISE	L					T			
	1.00									
BOARD MEMBER	0.00	X						0	0	0
(8) DAVID HENDEE							T			
	1.00									
BOARD MEMBER	0.00	X						0	0	0
(9) GLENN HENRIKSEN										
	1.00									
BOARD MEMBER	0.00	X						0	. 0	0
(10) ANNA THOMSEN HOI							T			
	1.00									
BOARD MEMBER	0.00	X						0	0	0
(11) MARNIE JENSEN										
	1.00									
BOARD MEMBER	0.00	X						0	0	0
DAA										- 000

(A) Name and title Average hours per week (list any			o not o	Pos check ess pe	ition more rson i	than or s both r/truste	ne an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations		(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		from the organization and related organizations
(12) GAREY KNUDSEN	5.00	v	-	v					e e e e e e e e e e e e e e e e e e e	land a	ii Hybrid Marker III. Lima ya Melima III.
PRESIDENT (13) MERLYN KNUDSI	0.00 N	X		X				vy 1:	v		
BOARD MEMBER	1.00	x						0 () () () () () () () () () (i kalanga katapatan Marapatan	1.	
(14) CAROLYN LARSO SECRETARY	5.00 0.00	x		x	v			0			er de la company
(15) CRAIG MOLGAAI	1.00										
BOARD MEMBER	0.00	x						0	О		0
(16) DAGMAR MUTHAN	1.00										
BOARD MEMBER	0.00	x						0	<u> </u>)	0
(17) KAREN NIELSEI	1.00										
BOARD MEMBER (18) RANDY RUGGAA	0.00	X	-			-		0	C	1	0
(10) IGNOT ROCCHE	1.00										
BOARD MEMBER (19) ANDERS SAND	0.00	X	-					0	C	 	0
(19) ANDERS SAND	1.00										
BOARD MEMBER	0.00	X	<u></u>					0	C	 	0
1b Sub-total c Total from continuation she	ets to Part VII.	 Sect	ion /	 4			>	70,750			
d Total (add lines 1b and 1c)							<u> </u>	70,750	<u> </u>		- 1. 14.3 1. 14.87
Total number of individuals (ir reportable compensation from	ncluding but not leading the organization	imite n ▶	d to 0	thos	e lis	ted a	bov	e) who received more than	1 \$100,000 of		Yes No
 3 Did the organization list any for employee on line 1a? If "Yes, 4 For any individual listed on line 	" complete Sche	dule	J for	suc	h ind	dividu	ıal				3 X
organization and related orga	nizations greater	thar	າ \$15	50,00	00?	If "Ye	s,"	complete Schedule J for su	ıch		4 X
for services rendered to the o	rganization? If "	es,	com	plet	e Sc	hedu	le J	for such person	· · · · · · · · · · · · · · · · · · ·		5 X
Section B. Independent Contractor 1 Complete this table for your fi	ve highest comp	ensa	ated	inde	pend	dent o	conf	ractors that received more	than \$100,000 of	<u> </u>	
compensation from the organ	ization. Report o	omp	ensa	tion	for t	he ca	len	dar year ending with or witl	hin the organization's tax y (B) otion of services	rear.	(C) Compensation
Name and	(A) d business address						-	Descri	otion of services	<u> </u>	Compensation

				<u> </u>			-		<u> </u>	187	
	,						-		<u> </u>	<u> 400</u>	
									F-17	va a	Character
2 Total number of independent received more than \$100,000	contractors (incl	udin	g but	not	limit	ted to	tho	se listed above) who	0	. 18	
DAA	or compensatio	,1 110	111	J 0, C	141112				`		Form 990 (2017)

Form 990 (2017) THE DANISH IMMIGRANT MUSEUM

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue (C) Unrelated Total revenue excluded from tax under sections 512-514 exempt function business revenue revenue Giffs, Grants ilar Amounts 1a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d Contributions, and Other Simi 1e 28,517 Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 904,143 1f 132,017 g Noncash contributions included in lines 1a-1f: 932,660 h Total. Add lines 1a-1f Program Service Revenue Busn. Code RESEARCH, EXHIBIT & MTG FEES 33,929 33,929 ADMISSIONS 17,103 17,103 -11,246-11,246LESS: MTG FEES - DONATIONS f All other program service revenue 39,786 Þ g Total. Add lines 2a-2f 3 Investment income (including dividends, interest, 87,065 and other similar amounts) 87,065 Income from investment of tax-exempt bond proceeds ▶ Royalties ... (i) Real (ii) Personal 6a Gross rents **b** Less: rental exps. c Rental inc. or (loss) d Net rental income or (loss) (i) Securities (ii) Other sales of assets 942,938 105,405 other than inventory b Less: cost or other 905,042 24,095 basis & sales exps. 37,896 81,310 c Gain or (loss) 105,405 119,206 13,801 d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less 102,387 returns and allowances b Less: cost of goods sold b 49,965 52,422 52,422 c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn, Code 11a d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions. 1,231,139 106,009 0 192,470

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Form 990 (2017)

THE DANISH IMMIGRANT MUSEUM

Statement of Functional Expenses Part IX 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 (C) Management and (D) (B) Program service (A) Total expenses Do not include amounts reported on lines 6b. 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 49,835 357,079 146,517 553,431 Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 71,516 6,861 89,532 11,155 Other employee benefits 3,794 18,793 4,114 26,701 10 Payroll taxes Fees for services (non-employees): 11 Management 2,800 6,290 9,090 Legal b 14,675 14,675 Accounting C Lobbying Professional fundraising services. See Part IV, line 17 48,232 48,232 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column 1,643 25,106 23,463 (A) amount, list line 11g expenses on Schedule O.) 878 14,638 120 15,636 Advertising and promotion 12 30,154 30,562 63,162 123,878 13 Office expenses 4,663 5,440 10,103 Information technology 14 15 Royalties 104,233 25,703 6,669 136,605 Occupancy 16 20,670 3,996 3,352 28,018 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 1,287 31,849 6,237 24,325 Conferences, conventions, and meetings 19 2,332 2,332 20 Interest Payments to affiliates 21 39,176 9,362 213,280 164,742 Depreciation, depletion, and amortization 22 5,828 1,943 14,277 22,048 23 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 5,741 46,700 26,408 14,551 а MISCELLANEOUS 2,933 1,258 1,675 **MEMBERSHIPS** b 1,000 1,000 CONTRIBUTIONS c d e All other expenses 393,142 123,561 1,401,149 884,446 25 Total functional expenses. Add lines 1 through 24e 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 following SOP 98-2 (ASC 958-720) Form 990 (2017)

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 61,284 156,636 1 Cash—non-interest bearing 424,540 447,666 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 79,808 87,830 8 Inventories for sale or use Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 7,065,474 10a 2,532,965 4,592,481 10c 4,532,509 10b b Less: accumulated depreciation 4,975,527 5,131,462 11 Investments—publicly traded securities 11 12 Investments—other securities. See Part IV, line 11 12 Investments—program-related. See Part IV, line 11 13 13 7,243 7,944 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 10,244,958 10,259,972 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 14,281 Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, iabilities trustees, key employees, highest compensated employees, and 22 disqualified persons. Complete Part II of Schedule L 100,000 200,000 Secured mortgages and notes payable to unrelated third parties 23 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 114,281 200,000 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ Balances complete lines 27 through 29, and lines 33 and 34. 5,855,984 27 5,905,661 Unrestricted net assets 204,736 253,179 Temporarily restricted net assets 3,984,238 3,986,851 or Fund 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. Net Assets 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 32 10,044,958 33 10,145,691 Total net assets or fund balances 10,244,958 10,259,972 Total liabilities and net assets/fund balances

Schedule O.

the Single Audit Act and OMB Circular A-133?

624	11/29/2018 2:32 PM		Ç.		
orn	1 990 (2017) THE DANISH IMMIGRANT MUSEUM 42-1204613	wa Girin	Postania Postania	Pag	ge 12
	rt XI Reconciliation of Net Assets	SSERIE ALLEY	N. See		
	Check if Schedule O contains a response or note to any line in this Part XI			. 1016-10	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,23	31,:	139
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,40)1,:	149
3	Revenue less expenses. Subtract line 2 from line 1			70,0	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		10,04		
5	Net unrealized gains (losses) on investments	5	27	70,	743
6	Donated services and use of facilities	6.		<u> </u>	
7	Investment expenses	1 - 1			
8	Prior period adjustments	8	·	·	
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	5 14 65			
	33, column (B))	10	10,14	15,	<u>691</u>
Pŧ	rt XII Financial Statements and Reporting				r1
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>	· · · · · · · ·	Щ.
			F0000000000	Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	000000000000000000000000000000000000000
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	L

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3a

Part VII Section A. Officers	, Directors, Tru	ıstee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	d Employees (continued)	
(A) Name and title	(B) Average hours per week (list any hours for	bo	x, unl	Pos check ess pe	rson	than c is both or/trust	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(20) ERIC OLESEN	1.00									
BOARD MEMBER	0.00	X						0	0	0
(21) OLE SONNICHSE	1.00									
BOARD MEMBER	0.00	x						0	0	o
(22) CARL STEFFENS	1									
BOARD MEMBER	1.00	x						0	o	o
(23) LINDA STEFFEN	ISEN								A STATE OF THE STA	
BOARD MEMBER	1.00	x						0	o	o
(24) KAREN SUCHOME		1		<u> </u>				<u> </u>	<u> </u>	<u> </u>
TREASURER	5.00	v		v						
(25) CAROL SVENDSH		X	<u> </u>	X				0	0	0
BOADD MEMBER	1.00									
(26) RASMUS THOEGE		X						0	0	0
· <u>······</u>	40.00									
EXEC DIR	0.00	-		X				70,750	0	0
1b Sub-total	<u> </u>	<u> </u>	L	L	L			70,750		
c Total from continuation she							•			
d Total (add lines 1b and 1c)2 Total number of individuals (in	icluding but not l					tod a	boy	e) who received more than	\$100,000 of	
reportable compensation from				1103	C 113	icu a	DOV	e) who received more than	\$100,000 of	
3 Did the organization list any fo	ormer officer, dir	ecto	r, or	trust	ee, k	кеу е	mple	oyee, or highest compensa	ated	Yes No
employee on line 1a? <i>If "Yes,"</i> 4 For any individual listed on line	' complete Sched	dule	J for	suci	h ind	lividu	ıaİ			3
organization and related orgar	izations greater	than	\$15	0,00	0? /	f "Ye	s," c	complete Schedule J for su	ch	
individualDid any person listed on line 1	a receive or acc	rue o	comp	ens	ation	fron	n an	y unrelated organization or	· individual	4
for services rendered to the or Section B. Independent Contracto		/es,"	com	plete	Sci	hedu	le J	for such person		5
1 Complete this table for your fix	ve highest comp	ensa	ted i	ndep	end	ent c	ontr	ractors that received more	than \$100,000 of	
compensation from the organi	zation. Report co (A) business address	ompe	ensa	tion	for th	те са	lenc		in the organization's tax ye (B) tion of services	ear. (C) Compensation
Name and	business address							Descrip	tion of services	Compensation
	****		***************************************				<u> </u>	***************************************		
							<u> </u>			
2 Total number of independent of	contractors (incl	udina	but	not I	imite	ed to	thos	se listed above) who		
received more than \$100,000										

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number THE DANISH IMMIGRANT MUSEUM 42-1204613

Pa	rt J	Reas	on for Public Charity	Status (All organizations	must c	omplete	this part.) See instructio	ns.						
The o	rga			se it is: (For lines 1 through 12,				1.5						
1		A church, co	nvention of churches, or as	sociation of churches described	in sectio	n 170(b)(1)(A)(i).							
2		A school des	scribed in section 170(b)(1)	(A)(ii). (Attach Schedule E (For	m 990 or 9	990-EZ).)								
3				ice organization described in se		, ,	iii).							
4				ed in conjunction with a hospital				ospital's name.						
		city, and stat		,										
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in													
		section 170(b)(1)(A)(iv). (Complete Part II.)												
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).													
7		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)												
8	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)													
9	An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:													
10	X	receipts from support from	n activities related to its exer gross investment income a	(1) more than 33 1/3% of its supmpt functions—subject to certain unrelated business taxable in 30, 1975. See section 509(a)(2)	n exception ncome (le	ns, and (2 ss section	2) no more than 33 1/3% of its a 511 tax) from businesses	oss						
11		An organizat	ion organized and operated	exclusively to test for public saf	ety. See s	section 50	09(a)(4).							
12		An organizat	ion organized and operated	exclusively for the benefit of, to	perform t	he functio	ns of, or to carry out the purpo	ses						
		of one or mo	re publicly supported organi	zations described in section 50	9(a)(1) or	section 8	509(a)(2). See section 509(a)(3).						
		L		hat describes the type of suppo										
	Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV. Sections A and P.													
	supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by begins													
	b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.													
	С	Type III to	functionally integrated. A sorted organization(s) (see ins	supporting organization operated structions). You must complete	d in conne Part IV,	ection with Sections	i, and functionally integrated w A, D, and E.	ith,						
	d	that is no	ot functionally integrated. Th	 d. A supporting organization open e organization generally must sa 	atisfy a di	stribution	requirement and an attentivene	en(s) ess						
				must complete Part IV, Sectio										
	e	functiona	ally integrated, or Type III no	ceived a written determination fr n-functionally integrated suppor	om the IR ting orgar	S that it is nization.	s a Type I, Type II, Type III							
	f ~		mber of supported organizat											
			1	he supported organization(s).										
(1)		e of supported panization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in yo	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)						
		· · · · · · · · · · · · · · · · · · ·			Yes	No								
(A)														
(B)							· · ·							
(C)								The second secon						
(D)														
(E)														
Γotal														
- n-		and the second	on Act Notice see the Instruc	tions for Form 000 at 000 F7										

Schedule A (Form 990 or 990-EZ) 2017

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

Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (d) 2016 (e) 2017 (f) Total Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4. Section B. Total Support (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total Calendar year (or fiscal year beginning in) Amounts from line 4 Gross income from interest, dividends, payments received on securities loans. rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage from 2016 Schedule A, Part II, line 14 15 33 1/3% support test—2017. 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 33 1/3% support test-2016. 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 17a 10%-facts-and-circumstances test—2017. 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 10%-facts-and-circumstances test—2016. 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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

instructions Schedule A (Form 990 or 990-EZ) 2017

Page 3

Schedule A (Form 990 or 990-EZ) 2017

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.)

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,693,380	2,161,861	1,196,005	1,899,784	932,660	7,883,690
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	167,785			149,502	142,173	776,038
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	1,861,165	2,326,103	1,348,341	2,049,286	1,074,833	8,659,728
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	955,103	1,355,104	609,857	1,290,367	403,918	4,614,349
С	Add lines 7a and 7b	955,103	1,355,104	609,857	1,290,367	403,918	4,614,349
8	Public support. (Subtract line 7c from line 6.)						4,045,379
	tion B. Total Support						
Caler	idar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	1,861,165	2,326,103	1,348,341	2,049,286	1,074,833	8,659,728
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	55,528	61,905	70,552	76,288	87,065	351,338
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975				· .		
С	Add lines 10a and 10b	55,528	61,905	70,552	76,288	87,065	351,338
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		1,362				1,362
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.)	1,916,693	2,389,370	1,418,893	2,125,574	1,161,898	9,012,428
14	First five years. If the Form 990 is for the	organization's firs	t, second, third, for				
	organization, check this box and stop her						<u> </u>
	tion C. Computation of Public Si						
15	Public support percentage for 2017 (line 8	3, column (f) divided	d by line 13, colum	n (f))		15	44.89%
16	Public support percentage from 2016 Sch	edule A, Part III, Iir	ne 15			16	50.03%
	tion D. Computation of Investme			(0)			
17 18	Investment income percentage for 2017 (I	ine 10c, column (f)	divided by line 13	, column (f))	, , ,		4 %
19a	Investment income percentage from 2016					18	3 %
170	33 1/3% support tests—2017. If the orga 17 is not more than 33 1/3%, check this b						▶ X
b	33 1/3% support tests—2016. If the orga						
	line 18 is not more than 33 1/3%, check the						•
20	Private foundation. If the organization di						

Schedule A (Form 990 or 990-EZ) 2017

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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Schedu	ule A (Form 990 or 990-EZ) 2017 THE DANISH IMMIGRANT MUSEUM	42-1204613		Page 5
Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
Soct	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part Vition B. Type I Supporting Organizations	/l. 11c		
Seci	ion B. Type I Supporting Organizations	<u> </u>		NI -
1	Did the directors trustees or membership of one or more consisted executables to be a first trustees.		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	***************************************	
2	Did the organization operate for the benefit of any supported organization other than the supported			
-	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	200000000000000000000000000000000000000	2000000000000
Sect	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1	٦	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Sect	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior	·tax		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of th	e		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		***************************************
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI ho	w		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	.	***************
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
Cont	supported organizations played in this regard.			
	ion E. Type III Functionally-Integrated Supporting Organizations		 	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (s	see instructions).		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government of	entity (see instructions).		
2 /	Activities Test. Answer (a) and (b) below.	Г	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		169	NO
_	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b	000000000000000000000000000000000000000	
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of ea	distribution of		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organic	niza	#2-1204	Page 6
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on No			90
instructions. All other Type III non-functionally integrated supporting organizations mus			
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	SON CONTRACTOR NOT A STATE OF	es a Grand X - SS some - Gr
4 Add lines 1 through 3.	4	1,1 An	
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			gradina et al.
collection of gross income or for management, conservation, or		N. A. S. M. 188	
maintenance of property held for production of income (see instructions)	6	1. 184.34	
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	1 1 1 1	(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		De la companya da la
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	·	
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2	. A	
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8	· ·	
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		•
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally integrated	Type I	II supporting organization (see
instructions).	•		lande tribuja

Schedule A (Form 990 or 990-EZ) 2017

Par	Type III Non-Functionally Integrated 509(a)(3) S	Supporting Organiza	tions (continued)			
Sect	on D - Distributions			Current Year		
1	Amounts paid to supported organizations to accomplish exempt purpos	ses				
2	Amounts paid to perform activity that directly furthers exempt purposes	of supported				
	organizations, in excess of income from activity					
3	Administrative expenses paid to accomplish exempt purposes of suppo	orted organizations				
4	Amounts paid to acquire exempt-use assets	WW				
5	Qualified set-aside amounts (prior IRS approval required)					
6	Other distributions (describe in Part VI). See instructions.					
	Total annual distributions. Add lines 1 through 6.	4.4.				
8	Distributions to attentive supported organizations to which the organiza	tion is responsive				
	(provide details in Part VI). See instructions.					
9	Distributable amount for 2017 from Section C, line 6	<u></u>				
10	Line 8 amount divided by line 9 amount	T	T			
		(i)	(ii)	(iii)		
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable		
	Distribution of posterior		Pre-2017	Amount for 2017		
	Distributable amount for 2017 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in Part VI). See					
	instructions.					
3	Excess distributions carryover, if any, to 2017:					
а	7.5.4					
	From 2013					
	From 2014					
d	From 2015					
	From 2016					
f	Total of lines 3a through e					
g	g Applied to underdistributions of prior years					
h	Applied to 2017 distributable amount					
i	Carryover from 2012 not applied (see instructions)					
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.					
4	Distributions for 2017 from					
	Section D, line 7: \$					
a	Applied to underdistributions of prior years					
<u>b</u>	Applied to 2017 distributable amount					
<u>C</u>	Remainder. Subtract lines 4a and 4b from 4.					
5	Remaining underdistributions for years prior to 2017, if					
	any. Subtract lines 3g and 4a from line 2. For result					
	greater than zero, explain in Part VI . See instructions.					
6	Remaining underdistributions for 2017. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3					
	and 4c.					
	8 Breakdown of line 7:					
	Excess from 2013					
	Excess from 2014					
	Excess from 2015					
	Excess from 2016					
<u>e</u>	Excess from 2017					

Schedule A (Form 990 or 990-EZ) 2017

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Schedule A (Form 990 or 990-EZ) 2017

Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

Name of the organization Employer identification number

THE DANISH 1	IMMIGRANT MUSEUM	42-1204613
Organization type (check	cone):	**************************************
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foun	dation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	non
	501(c)(3) taxable private foundation	
	is covered by the General Rule or a Special Rule.	
note: Only a section 501(a instructions.	c)(7), (8), or (10) organization can check boxes for both the General Rule and	a Special Rule. See
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution or property) from any one contributor. Complete Parts I and II. See instruction contributions.	
Special Rules		
regulations under 13, 16a, or 16b, ar	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 on that received from any one contributor, during the year, total contributions of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Contributions of the amount on (ii) Form 990, Part VIII, line 1h, or (iii) Form 990-EZ, line 1.	or 990-EZ), Part II, line of the greater of (1)
contributor, during	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that require the year, total contributions of more than \$1,000 exclusively for religious, characteristic on the prevention of cruelty to children or animals. Complet	aritable, scientific,
contributor, during contributions totale	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that replace the year, contributions exclusively for religious, charitable, etc., purposes, but ed more than \$1,000. If this box is checked, enter here the total contributions or an exclusively religious, charitable, etc., purpose. Don't complete any of the	t no such that were received
General Rule app	olies to this organization because it received <i>nonexclusively</i> religious, charitab more during the year	le, etc., contributions
Caution: An organization 990-EZ, or 990-PF), but it	that isn't covered by the General Rule and/or the Special Rules doesn't file Somust answer "No" on Part IV, line 2, of its Form 990; or check the box on line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 99).	chedule B (Form 990, H of its Form 990-EZ or on its

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

THE DANISH IMMIGRANT MUSEUM

Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is nee	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PETER & IRMA ORUM PO BOX 506 SAINT CHARLIES IL 60174	\$ 15,300	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 2	Name, address, and ZIP + 4 IRVING & ELIZABETH JENSEN FOUNDATION LOUISE DEITLOFF, TRUST OFFICER SECRUTY NATIONAL BANK, TRUST DEPT PO BOX 147 SIOUX CITY IA 51102-0147	Total contributions \$ 10,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
3	Name, address, and ZIP + 4 HUMANITIES IOWA 100 MAIN LIBRARY, ROOM 4039 IOWA CITY IA 52242-1420	Total contributions \$ 8,517	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	ERIC & JOAN NORGAARD CHARITABLE TRST 3906 STEEPLE RUN DRIVE CHRYSTAL LAKE IL 60014-6568	\$ 12,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	IOWA DEPARTMENT OF CULTURAL AFFAIRS 600 E LOCUST STREET DES MOINES IA 50319	\$ 20,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	JAMES & MARGERY IVERSEN 1108 LINDEN STREET DECORAH IA 52101-2018	18,847	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
THE DANISH IMMIGRANT MUSEUM

Part I	Contributors (see instructions). Use duplicate copies of P	art I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	NILS & KATHLEEN JENSEN 1212 SW HESSLER DRIVE PORTLAND OR 97239-2807	\$ 5,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	RITA NEERGAARD HANSEN ESTATE C/O JOHNSON BANK 7500 GREEN BAY ROAD KENOSHA WI 53142	\$ 5,227	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c)	(d)
9	DANISH CLUB OF TUSCON MARILYN K. BUCKELEW, TREASURER 5880 W MARTINGDALE LANE TUCSON AZ 85743	Total contributions \$ 10,250	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	AUDREY KOFOED PO BOX 698 WEST BRANCH IA 52358-0698	\$ 10,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.11.	ERIK SORENSEN JOHNSTON HICKS GRIFFITH ATTNYS 109 N THIRD STREET KNOXVILLE IA 50138	\$ 221,082	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	BRUCE & GERRY LAURITZEN 608 FAIRACRES ROAD OMAHA NE 68132	\$ 10,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
THE DANISH IMMIGRANT MUSEUM

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
13	SCAN DESIGN 1001 4TH AVE, STE 4400 SEATTLE WA 98154-1192	\$ 30,920	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
14	OLE & EVA SINDBERG 290 FOX HARBOR DRIVE CARY IL 60013-2605	\$ 8,100	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a)	(b)	(c)	(d)				
15	Name, address, and ZIP + 4 CARROLL CONTROL SYSTEMS 2309 FOREST ST CARROLL IA 51401	Total contributions \$ 7,432	Type of contribution Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c)	(d) Type of contribution				
16	PAUL & BENEDIKTE EHLERS OLESEN 1375 OLIVE STREET EUGENE OR 97401	Total contributions \$ 6,314	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
17	DAVID & HELEN ESBECK 14083 CAMINITO VISTANA SAN DIEGO CA 92130	\$ 24,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
18	RANDALL & MARGARET RUGGARD 1877 E HAYMARKET WAY HUDSON OH 44236	\$ 6,030	Person X Payroll Noncash (Complete Part II for noncash contributions.)				

Page 4 of 4

Page 2

Name of organization
THE DANISH IMMIGRANT MUSEUM

Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	DANISH BROTHERHOOD LODGE #1 JANELLE PETERSEN, SECRETARY 13433 HILLSBOROUGH DRIVE OMAHA NE 68164-6015	\$ 6,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20	GARY & CINDY LARSEN 3 KILLDEER LANE LITTLETON CO 80127	\$ 5,500	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d)
21	DENNIS ANDERSEN 1028 LENOX VALLEY DRIVE ATLANTA GA 30324	\$ 130,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b)	(c)	(d)
22	Name, address, and ZIP + 4 ERIK & EVA ANDERSEN 75 LAUREL HILL ROAD CROTON-ON-HUDSON NY 10520	Total contributions \$ 26,118	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23	DORIS SORENSEN DECEASED TULSA OK 74008	\$ 21,841	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
24	DAVID & PAULETTE HENDEE PO BOX 71 NORTHFIELD MN 55057	\$ 5,090	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
THE DANISH IMMIGRANT MUSEUM

Part II	Noncash Property (see instructions). Use duplicate	copies of Part II if additional spa	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
21	COMMERCIAL BUILDING	\$ 130,000	11/23/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

SCHEDULE 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.

2017 Open to Public

OMB No 1545-0047

Name of the organization Employer identification number THE DANISH IMMIGRANT MUSEUM 42-1204613 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6, Total number at end of year 1 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year _____ Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

	rt III Organizations Maintaining C			asures, or C	Other Simi	lar Assets (continue	7)
-	Using the organization's acquisition, accession collection items (check all that apply):	, and other records,	check any of the follo	wing that are a	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		2947 329	
a b	X Public exhibition X Scholarly research		an or exchange progr her	rams			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
С	X Preservation for future generations	······		- 541 K 8 2001	e praagi		ere in	
4	Provide a description of the organization's colle XIII.	ctions and explain h	ow they further the or	ganization's exe	empt purpose	in Part		
5	During the year, did the organization solicit or re	eceive donations of	art, historical treasure	s, or other simil	ar			
	assets to be sold to raise funds rather than to b						Yes	X No
Pa	rt IV Escrow and Custodial Arrar							
	Complete if the organization a 990, Part X, line 21.					n amount o	n Form	
	Is the organization an agent, trustee, custodian included on Form 990, Part X?	and a second	*****	other assets no	t	. i	Yes	No
b	If "Yes," explain the arrangement in Part XIII an		wing table:				Amount	·····
С	Beginning balance					1c		
d	Additions during the year					1d		
	Distributions during the year					1e		
	Ending balance		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1f		
	Did the organization include an amount on Form						Yes	∐ No
******	If "Yes," explain the arrangement in Part XIII. C rt V Endowment Funds.							
	Complete if the organization a	inswered "Yes" o	on Form 990, Par	t IV, line 10.				
		(a) Current year	(b) Prior year	(c) Two years ba		ree years back	(e) Four yea	
1a	Beginning of year balance	4,915,282	4,004,970	3,687,		,146,431		5,830
b	Contributions	5,227	922,594	188,	705	802,709	42	4,269
С	Net investment earnings, gains, and							
	losses	489,358	437,557	227,	844	-32,521	41	1,506
d	Grants or scholarships							
е	Other expenditures for facilities and	114.44						
	programs	-319,090	-412,611	-66,		-198,907		8,827
f	Administrative expenses	-40,051	-37,228	-32,		-30,383		6,347
g	End of year balance	5,050,726	4,915,282	4,004,	970 3	,687,329	3,14	6,431
2	Provide the estimated percentage of the current		(line 1g, column (a)) h	eld as:				
	Board designated or quasi-endowment ▶ 2	0.11%						
b	Permanent endowment ► 78.94 %					,		
С		. 95 %						
	The percentages on lines 2a, 2b, and 2c should	d equal 100%.						
За	Are there endowment funds not in the possess	ion of the organization	on that are held and a	dministered for	the		Γ	
	organization by:						Ye	
	(i) unrelated organizations				in a salah perjejangan ana ara-			X
	(ii) related organizations			والمستعدية الألواديات			3a(ii)	<u> </u>
b	If "Yes" on line 3a(ii), are the related organizati	ons listed as require	d on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the o		ment funds.	<u> </u>		<u> </u>	<u></u>	<u> </u>
Pa	rt VI Land, Buildings, and Equip			. n. e	<u></u>	000 5	/ 15m = 40	
	Complete if the organization a							
	Description of property	(a) Cost or other bas	1	1	(c) Accumulate		(d) Book valu	ie
		(investment)	(other		depreciation	***********	070	OFA
	Land	<u> </u>		2,850	1 (1 (205		,850
þ	Buildings			6,747	1,813		3,633	, 362
	Leasehold improvements			6,901		,901	4 4 ~	AMA
đ	Equipment			1,044		,574		470
	Other			27,932	345	,105		,827
Гotа	I. Add lines 1a through 1e. (Column (d) must eq	ual Form 990, Part >	(, column (B), line 10d	5.) <u> </u>		<u></u> ▶L	4,532	
		the segment	A Section 1		Salah W. I Basa Salah Ba	Sched	ule D (Form	990) 201

Part VII	Investments—Other Securities. Complete if the organization answered "Yes	s" on Form 990 Part IV I	ing 11h See Form 990 Part X ling 12
<u> </u>	(a) Description of security or category	(b) Book value	(c) Method of valuation:
	(including name of security)	(b) book value	Cost or end-of-year market value
(1) Financial c	derivatives		
	eld equity interests		
(0) 041			
(A)	***************************************		
(B)	***************************************		
(C)			
(D)			
(E)			
(F)			
(G)	***************************************		
(H)	***************************************		
THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS O	n (b) must equal Form 990, Part X, col. (B) line 12.) ▶		
Part VIII	Investments—Program Related.		
	Complete if the organization answered "Yes	s" on Form 990, Part IV, I	ine 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)	a (h) must squal Form 000. Port V. sol. (P) line 12.)		
Part IX	n (b) must equal Form 990, Part X, col. (B) line 13.) ► Other Assets.		
	Complete if the organization answered "Yes	" on Form 990 Part IV I	ine 11d See Form 990 Part X line 15
	(a) Descripti		(b) Book value
(1)			, , , , , , , , , , , , , , , , , , , ,
(2)			
(3)			
(4)			
(5)			
(6)		***************************************	
(7)			
(8)			
(9)			
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 15.)		>
Part X	Other Liabilities.		
	Complete if the organization answered "Yes line 25.	s" on Form 990, Part IV, I	ine 11e or 11f. See Form 990, Part X,
1.	(a) Description of liability	(b) Book value	
(1) Federal	income taxes		
(2)			
(3)			
(4)			
(5)			_
(6)			_
(7)			_
(8)			_
(9)	4)		_
	n (b) must equal Form 990, Part X, col. (B) line 25.)		

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

1 7 7 7 1 7 7 7	Reconciliation of Revenue per Audited Financia	I Statements With F		record have
	Complete if the organization answered "Yes" on For	mi 990, Partiv, line	12a,	1,501,882
1	Total revenue, gains, and other support per audited financial statements			1,301,002
2.		2a	270,743	
a				
D	Donated services and use of facilities			r de de la estada en la companya de
c d		2d		
	Add lines 2a through 2d		2e	270,743
3	Subtract line 2e from line 1		3	1,231,139
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		
b	Other (Describe in Part XIII.)	4b		
C	Add lines 4a and 4b		4c	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			1,231,139
Pŧ	irt XII Reconciliation of Expenses per Audited Financi	al Statements With	Expenses per Return	•
000000000	Complete if the organization answered "Yes" on Fo			
1			1	1,401,149
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments			
С	Other losses	1 2-1		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	1,401,149
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b			1 101 110
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information.	ne 18.)	5	1,401,149
2; Pa P T	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a at XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part art V, Line 4 - Intended Uses for Ender TWO ENDOWMENT FUNDS MAINTAINED BY TEADY STREAM OF INCOME COMING FROM THE	t to provide any additional lowment Funds THE MUSEUM A	information. RE INTENDED TO	PROVIDE A
	HILE MAINTAINING THE PURCHASING POWER		RLYING INVEST	MENT ASSETS
				i
				. , , , , , , , , , , , , , , , , , , ,

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Noncash Contributions

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

Attach to Form 990.

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

OMB No. 1545-0047

2017

Open To Public Inspection

Employer identification number

42-1204613

THE DANISH IMMIGRANT MUSEUM

Pa	rt I Types of Property					
	go the time of	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts	
1	Art — Works of art					
2	Art — Historical treasures					
3	Art — Fractional interests					
4	Books and publications					
5	Clothing and household goods					
6	Cars and other vehicles					
7	Boats and planes					_
8	Intellectual property					
9	Securities — Publicly traded	х	1	2,017	QUOTED MARKET PRICE	
10	Securities — Closely held stock				200100 111111111 11111011	
11	Securities — Partnership, LLC,					
	or trust interests					
12	Securities — Miscellaneous					
13	Qualified conservation contribution — Historic structures					_
14	Qualified conservation contribution — Other					
15	Real estate — Residential					
16	Real estate — Commercial	х	1	130.000	QUALIFIED APPRAISAL	
17	Real estate — Other				201111111111111111111111111111111111111	
18	Collectibles				***************************************	
19	Food inventory					
20	Drugs and medical supplies		**************************************		**************************************	
21	Taxidermy					
22	Historical artifacts	·····	**************************************			
23	Scientific specimens					
24	Archeological artifacts					
25	Other ►(
26	Other ►(
27	Other ►()					
28	Other ►(
29	Number of Forms 8283 received by t				. 1	_
	which the organization completed Fo	лііі о∠б3, і	rait IV, Donee Acknowle	eagement [29 1	
30a	During the year, did the organization	racaiva hi	contribution and proper	furnamental in Dant I lines d	Yes No	3 ◎◎
oou	28, that it must hold for at least three					
	to be used for exempt purposes for t		aldina a sis dO		00 3	**** *
b	If "Yes," describe the arrangement in		olding period?		30a X	•
31	Does the organization have a gift acc		olicy that requires the re	view of any nanatandard		
٠.	contributions?				31 X	333
32a	Does the organization hire or use this	rd nartiee 4	or related organizations	o solicit process or sell n		
	contributions?					
b	If "Yes," describe in Part II.				32a X	
33	If the organization didn't report an an	nount in co	llumn (c) for a type of pr	onerty for which column (a)	is checked	
	describe in Part II.	uniciii oc	(o) for a type of pir	oporty for willon column (a)	is dieckeu,	
						<u> </u>

Part II

Schedule M (Form 990) 2017

42-1204613

the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Part I, Line 32b - Third Party Used to Process Noncash Contributions WHEN A DONOR APPROACHES THE ORGANIZATION REGARDING A DONATION OF SECURITIES, THE DONOR IS PROVIDED WITH THE MUSEUM'S SECURITIES ACCOUNT INFORMATION TO MAKE THE TRANSFER. ONCE RECEIVED, THE SECURITIES BROKER SELLS THE SECURITIES WHEN DIRECTED BY THE MUSEUM'S MANAGEMENT.

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

THE DANISH IMMIGRANT MUSEUM

42-1204613

Employer identification number

Form 990, Part I, Line 6

THE ORGANIZATION RECEIVES A SIGNIFICANT AMOUNT OF SUPPORT IN THE FORM OF GOODS AND SERVICES FROM DONORS AND VOLUNTEERS IN THE ORGANIZATION'S OPERATIONS, FUND RAISING, ADMISSIONS DESK, MUSEUM SHOP, AND MUSEUM TOURS.

Form 990, Part III, Line 4b - Second Accomplishment archives and organizations.

Staff consists of 1 full-time librarian/manager, a .6 FTE library assistant, occasional interns and over a dozen local and long-distance volunteers. In FY 2017/2018, Genealogy staff and volunteers completed 31 translation requests and 57 in-depth research projects, created several new in-house indexes and databases, added more than 200 new immigrant files to the vertical file collection and updated many more. With the assistance of a Danish archiving intern, over 300 new items were cataloged into the Genealogy Center's library and Special Collections, from books and reference materials to unique family documents and photographs.

Form 990, Part III, Line 4d - All Other Accomplishment

THE DESIGN STORE DISPLAYS ITEMS AND SELLS ITEMS REFLECTING THE BEST IN

DANISH DESIGN AND BOOKS ABOUT DENMARK AND DANISH-AMERICAN RELATIONS.

INVENTORY IS SELECTED THAT REFLECTS THE MUSEUM'S MISSION OF EDUCATING AND

INFORMING ITS PUBLIC AND INCLUDES ITEMS FROM FURNITURE TO LIGHTING TO

JEWELRY AND HOME INTERIOR DECORATION AND BOOKS RANGING FROM ACADEMIC

STUDIES TO ENTERTAINING FOLKLORE.

TOURS & PROMOTION OF A 19TH CENTURY HISTORICAL DANISH HOUSE.

Employer identification number

42-1204613

THE DANISH IMMIGRANT MUSEUM

Form 990, Part V, Line 4b - Financial Accounts in Foreign Countries

Denmark

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
RETURN IS EMAILED TO THE EXECUTIVE DIRECTOR AND BOARD MEMBERS BEFORE
BEING FILED IN ORDER FOR EVERYONE TO REVIEW AND COMMENT PRIOR TO FILING.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

BOARD MEMBERS ABSTAIN FROM ANY DECISIONS INVOLVING POTENTIAL CONFLICTS OF

INTEREST.

Form 990, Part VI, Line 15a - Compensation Process for Top Official EXECUTIVE DIRECTOR RECEIVES A REVIEW FROM THE BOARD OF DIRECTORS ANNUALLY. AT THAT TIME, THE BOARD DETERMINES HIS SALARY FOR THE COMING YEAR.

Form 990, Part VI, Line 15b - Compensation Process for Officers

REMAINING EMPLOYEES RECEIVE ANNUAL PERFORMANCE REVIEWS CONDUCTED BY THE

EXECUTIVE DIRECTOR AND ONE OR MORE BOARD MEMBERS AT WHICH TIME COMPENSATION

IS DETERMINED.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS
ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST. IN ADDITION, COPIES OF THE
MOST RECENTLY FILED FORMS 990 ARE AVAILABLE ON GUIDESTAR'S WEBSITE.

Page 1 of 1

Form 4562

Department of the Treasury

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Internal Revenue Service Name(s) shown on return

THE DANISH IMMIGRANT MUSEUM

Identifying number

42-1204613 Business or activity to which this form relates Indirect Depreciation Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount (see instructions) 510,000 2 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 2,030,000 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (a) Description of property 6 (b) Cost (business use only) Listed property. Enter the amount from line 29 7 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2016 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 Carryover of disallowed deduction to 2018. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 193,138 16 Part III MACRS Depreciation (Don't include listed property.) (See instructions.) MACRS deductions for assets placed in service in tax years beginning before 2017 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2017 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (a) Classification of property (business/investment use placed in (e) Convention (f) Method (a) Depreciation deduction period service only-see instructions) 19a 3-year property b 5-year property C 7-year property d 10-year property e 15-year property 20-year property 25-year property S/L 25 yrs. h Residential rental 27.5 yrs. MM S/L property 27.5 vrs MM S/L Nonresidential real MM 39 yrs. S/L property MM S/L Section C—Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs. S/L 40-year S/L 40 yrs. MM Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21

Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions

For assets shown above and placed in service during the current year, enter the

210,332

22

23

22

Form 4562 (2017	')
300000000000000000000000000000000000000	

Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

0.50		Note: For any ve	rtainment, recenticle for which you through (c) of S	ou are usin	a the sta	indard r	niléade i	ate or do	educting pplicable	lease ex	kpense,	complete	e only 2	24a,	11 127	**************************************
		Section A	—Depreciation	and Other	nforma	tion (Ca	ution: S	See the i	nstructio	ns for lin	nits for	passenge	er auton	nobiles.)		
24a	Do you hav	e evidence to support th	ne business/investmen	t use claimed?			Yes	No	24b	lf "Yes,"	is the e	vidence	written?)	Yes	No
	(a) of property ehicles first)	of property Date placed Business/ investment use Cost or of		Desig for depresiation		(f) Recovery period	1	(g) Method/ Convention		(h) Depreciation deduction			(i) Elected section 179 cost			
25	•	depreciation allow ear and used mor			Annual Control of	ed in service during		n e Majara	ana sahir ka		5		. 232227			
26		used more than 5				00 (000	motracti	01107								
	7 100011	about more than t	l l													
			%				1 -	3 575					44.			
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27	Property	used 50% or less	in a qualified bu	siness use:					T						100000000000000000000000000000000000000	*************
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			%							S/L					1	
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28		ounts in column (h												29	200000000000000000000000000000000000000	
29	Add am	ounts in column (i)	, line 26. Enter n						Vehicles				*.*.*.*.*. *.		l	
O	سلطة مقدات	section for vehicle	a waad by a aala								d noren	n If you	nrovide	d vehicle		
																
to yo	our employ	ees, first answer	the questions in a	section C to	T	ou mee a)		eption to	Complet			d)		e)	Ť (f)
30	Total bu	tal business/investment miles driven during		ina	1	icle 1	1	icle 2	1 ' ' 1		Veh	icle 4	Veh	icle 5	Veh	icle 6
30		(don't include co		iiig												
31		mmuting miles dri	•				 								†	
32		ner personal (nonc					1		<u> </u>						1	
JL	miles dr		ommung)													
33		les driven during t	he vear Add													
00		through 32														
34		vehicle available	for personal		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
•		ng off-duty hours?	•													
35		vehicle used prin														
		owner or related														
36	Is anoth	er vehicle availabl	e for personal us	e?												
			Section C—Que	stions for	Employ	ers Wh	o Provid	le Vehic	les for l	Jse by T	heir Er	nployees	\$			
Ansv	wer these	questions to deter	mine if you meet	an excepti	on to co	mpleting	Section	B for ve	ehicles u	sed by e	mploye	es who a	ren't			
more	e than 5%	owners or related	persons (see ins	structions).												
37	Do you	maintain a written	policy statement	that prohib	its all pe	rsonal u	ise of ve	hicles, ir	ncluding	commut	ing, by				Yes	No
	-	ployees?														<u> </u>
38	•	maintain a written		•	-										1	
		ees? See the instr	and the second s				rs, direct	tors, or 1	% or mo	re owne	rs				-	-
39		treat all use of veh														
40	-	provide more than				tain info	rmation	trom you	ır emplo	ees abo	out the					
		ne vehicles, and re														
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	.,	your answer to 37		is res,	don t coi	npiete 3	section t	s ioi the	covered	vernoles	>			<u></u>		
***	art VI	<u>Amortizatio</u>	[]			·····				Γ		(e)	T			
		(a)		(t Date amo			Amorti	(c)	nt	Code se		Amortiza		Amorti:	(f) zation for th	is vear
	Description of costs begin								1			period or Amortiz percentage				
42	Amortiz	ation of costs that	begins during vo	ur 2017 tax	year (se	e instru	uctions):			<u>*</u>						
	, ,,,,,,,,,,				<u> </u>	T										
				٠.											<u> </u>	
43	Amortiz	ation of costs that	began before yo	ur 2017 tax	year								43			,948
44		dd amounts in co											44		2	,948

THE DANISH IMMIGRANT MUSEUM 2212 WASHINGTON ST ELK HORN, IA 51531

Electing out of Bonus Depreciation Allowance for All Eligible Depreciable Property

The above named taxpayer elects out of the first-year bonus depreciation allowance under IRC Section 168(k)(7) for all eligible depreciable property placed in service during the tax year.