

For calendar year 2023 or tax year beginning

, and ending

Name of foundation		A Employer identification number 43-1187852			
NATIONAL MUSEUM OF TOYS AND MINIATURES		B Telephone number 816-235-8000			
Number and street (or P.O. box number if mail is not delivered to street address) 5235 OAK STREET		Room/suite			
City or town, state or province, country, and ZIP or foreign postal code KANSAS CITY, MO 64112					
G Check all that apply:		<input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change			
H Check type of organization:		<input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 42,060,905.		J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____			
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	891,288.			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	819,369.	819,369.	819,369.	STATEMENT 1
	5a Gross rents	2,191.	2,191.	2,191.	STATEMENT 2
	b Net rental income or (loss) 2,191.				
	6a Net gain or (loss) from sale of assets not on line 10	-290,284.			
	b Gross sales price for all assets on line 6a 3,417,450.				
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances 106,840.				STATEMENT 3
b Less: Cost of goods sold 49,032.					
c Gross profit or (loss) 57,808.		57,808.			
11 Other income	251,840.	0.	251,840.	STATEMENT 4	
12 Total. Add lines 1 through 11	1,732,212.	821,560.	1,131,208.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	110,849.	0.	15,608.	76,983.
	14 Other employee salaries and wages	560,705.	5,607.	84,555.	389,401.
	15 Pension plans, employee benefits	257,429.	2,574.	38,821.	178,781.
	16a Legal fees STMT 5	219.	0.	31.	189.
	b Accounting fees STMT 6	19,642.	0.	2,765.	16,975.
	c Other professional fees STMT 7	114,603.	69,184.	75,579.	53,091.
	17 Interest				
	18 Taxes				
	19 Depreciation and depletion	453,410.	500.	64,341.	
	20 Occupancy	396,495.	1,217.	57,044.	328,202.
	21 Travel, conferences, and meetings	18,466.	0.	2,600.	15,958.
	22 Printing and publications	13,457.	269.	2,164.	11,630.
	23 Other expenses STMT 8	323,083.	1,201.	46,692.	294,993.
	24 Total operating and administrative expenses. Add lines 13 through 23	2,268,358.	80,552.	390,200.	1,366,203.
25 Contributions, gifts, grants paid	0.			0.	
26 Total expenses and disbursements. Add lines 24 and 25	2,268,358.	80,552.	390,200.	1,366,203.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-536,146.				
b Net investment income (if negative, enter -0-)		741,008.			
c Adjusted net income (if negative, enter -0-)			741,008.		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash - non-interest-bearing	2,764,170.	738,492.	738,492.
	2 Savings and temporary cash investments	970,721.	990,134.	990,134.
	3 Accounts receivable	10,592.		
	Less: allowance for doubtful accounts		10,592.	10,592.
	4 Pledges receivable	193,650.		
	Less: allowance for doubtful accounts	352,500.	193,650.	193,650.
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use	10,092.	5,961.	5,961.
	9 Prepaid expenses and deferred charges	4,667.	16,013.	16,013.
	10a Investments - U.S. and state government obligations	STMT 10	819,588.	788,385.
	b Investments - corporate stock	STMT 11	19,345,954.	22,583,793.
	c Investments - corporate bonds	STMT 12	5,071,186.	5,608,881.
	11 Investments - land, buildings, and equipment: basis			
	Less: accumulated depreciation			
	12 Investments - mortgage loans			
	13 Investments - other	STMT 13	1,259,073.	2,157,781.
	14 Land, buildings, and equipment: basis	13,018,769.		
	Less: accumulated depreciation	4,720,328.	7,493,693.	8,298,441.
	15 Other assets (describe)	STATEMENT 14)	821,002.	668,782.
	16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	38,912,646.	42,060,905.	42,060,905.
	17 Accounts payable and accrued expenses	99,117.	280,168.	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe)	STATEMENT 15)	710,711.	674,005.
	23 Total liabilities (add lines 17 through 22)	809,828.	954,173.	
	Foundations that follow FASB ASC 958, check here	<input checked="" type="checkbox"/>		
	and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions	9,635,217.	10,564,882.	
	25 Net assets with donor restrictions	28,467,601.	30,541,850.	
	Foundations that do not follow FASB ASC 958, check here	<input type="checkbox"/>		
	and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 Total net assets or fund balances	38,102,818.	41,106,732.	
	30 Total liabilities and net assets/fund balances	38,912,646.	42,060,905.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	38,102,818.
2 Enter amount from Part I, line 27a	2	-536,146.
3 Other increases not included in line 2 (itemize)	3	3,540,060.
4 Add lines 1, 2, and 3	4	41,106,732.
5 Decreases not included in line 2 (itemize)	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	41,106,732.

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a SALE OF SECURITIES					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))		
a 3,417,450.		3,707,734.	-290,284.		
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any			
a			-290,284.		
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2	-290,284.	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8			3	N/A	

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1.	1	10,300.
Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)	2	0.
b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b)	3	10,300.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	0.
3 Add lines 1 and 2	5	10,300.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	6a	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	6b	0.
6 Credits/Payments:	6c	0.
a 2023 estimated tax payments and 2022 overpayment credited to 2023	6d	0.
b Exempt foreign organizations - tax withheld at source	7	0.
c Tax paid with application for extension of time to file (Form 8868)	8	599.
d Backup withholding erroneously withheld	9	10,899.
7 Total credits and payments. Add lines 6a through 6d	10	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	11	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 16		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		
11 Enter the amount of line 10 to be: Credited to 2024 estimated tax	Refunded	

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Part VI-A Statements Regarding Activities

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?

1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition

If the answer is "Yes" to **1a** or **1b**, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.

c Did the foundation file **Form 1120-POL** for this year?

d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:
(1) On the foundation. \$ 0. (2) On foundation managers. \$ 0.

e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0.

2 Has the foundation engaged in any activities that have not previously been reported to the IRS?

If "Yes," attach a detailed description of the activities.

3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes

4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?

b If "Yes," has it filed a tax return on **Form 990-T** for this year?

N/A

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?

If "Yes," attach the statement required by *General Instruction T*.

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:
• By language in the governing instrument, or
• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?

7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV

8a Enter the states to which the foundation reports or with which it is registered. See instructions. MO
MO

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by *General Instruction G*? If "No," attach explanation

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions

12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions

13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?

Website address TOYANDMINIATUREMUSEUM.ORG

14 The books are in care of THE FOUNDATION Telephone no. 816-235-8000
Located at 5235 OAK STREET, KANSAS CITY, MO ZIP+4 64112

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** - check here and enter the amount of tax-exempt interest received or accrued during the year

16 At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?

See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country

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Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a During the year, did the foundation (either directly or indirectly):

(1) Engage in the sale or exchange, or leasing of property with a disqualified person?

(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?

(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?

(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?

(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?

(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)

b If any answer is "Yes" to 1a(1)-(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions

N/A

c Organizations relying on a current notice regarding disaster assistance, check here

d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2023?

2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):

a At the end of tax year 2023, did the foundation have any undistributed income (Part XII, lines

6d and 6e) for tax year(s) beginning before 2023?

If "Yes," list the years _____, _____, _____, _____

b Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement - see instructions.)

N/A

c If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here.

_____, _____, _____, _____, _____

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?

b If "Yes," did it have excess business holdings in 2023 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2023.)

N/A

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2023?

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Part VI-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year, did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

(3) Provide a grant to an individual for travel, study, or other similar purposes?

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

	Yes	No
5a(1)	X	
5a(2)	X	
5a(3)	X	
5a(4)	X	
5a(5)	X	
5b		
5d		
6a	X	
6b	X	
7a	X	
7b		
8	X	

b If any answer is "Yes" to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions

N/A

c Organizations relying on a current notice regarding disaster assistance, check here **d** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?**Part VII | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, and foundation managers and their compensation.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 18		110,849.	37,492.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
AMY MCKUNE - 5235 OAK STREET, KANSAS CITY, MO 64112	SR MANAGER OF 40.00	COLLECTIONS 82,838.	29,185.	0.
JILL GROTZINGER - 5235 OAK STREET, KANSAS CITY, MO 64112	DIRECTOR OF DEVELOPMENT 40.00	70,125.	24,052.	0.
MADELINE RISLOW - 5235 OAK STREET, KANSAS CITY, MO 64112	SR MANAGER OF 40.00	LEARNING & ENGAGEMENT 67,872.	26,039.	0.
ASHLEY WOOD - 5235 OAK STREET, KANSAS CITY, MO 64112	EARNED REVENUE & VISITOR SVCS MGR 40.00	52,766.	22,659.	0.
CALLEEN CARVER - 5235 OAK STREET, KANSAS CITY, MO 64112	COLLECTIONS MANAGER 40.00	51,603.	21,955.	0.
Total number of other employees paid over \$50,000				0

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Part VII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

0

Part VIII-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

1		
2	SEE STATEMENT 19	1,117,441.
2	EDUCATIONAL PROGRAMS	
3		261,141.
3	RETAIL AND VISITOR SERVICES	
4		204,153.
4		

Part VIII-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

1	N/A	
2		
3	All other program-related investments. See instructions.	
Total. Add lines 1 through 3		0.

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Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	29,276,793.
b Average of monthly cash balances	1b	2,272,749.
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1d	31,549,542.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	31,549,542.
4 Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	473,243.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3	5	31,076,299.
6 Minimum investment return. Enter 5% (0.05) of line 5	6	1,553,815.

Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

1 Minimum investment return from Part IX, line 6	1	
2a Tax on investment income for 2023 from Part V, line 5	2a	
b Income tax for 2023. (This does not include the tax from Part V.)	2b	
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	

Part XI Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	1,366,203.
b Program-related investments - total from Part VIII-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	1,366,203.

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Part XII Undistributed Income (see instructions)

N/A

	(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
1 Distributable amount for 2023 from Part X, line 7				
2 Undistributed income, if any, as of the end of 2023:				
a Enter amount for 2022 only				
b Total for prior years:				
3 Excess distributions carryover, if any, to 2023:				
a From 2018				
b From 2019				
c From 2020				
d From 2021				
e From 2022				
f Total of lines 3a through e				
4 Qualifying distributions for 2023 from Part XI, line 4: \$				
a Applied to 2022, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2023 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2023 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount - see instructions				
e Undistributed income for 2022. Subtract line 4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2023. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2024				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2018 not applied on line 5 or line 7				
9 Excess distributions carryover to 2024. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2019				
b Excess from 2020				
c Excess from 2021				
d Excess from 2022				
e Excess from 2023				

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9)

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2023, enter the date of the ruling	07/24/80																																																																									
b Check box to indicate whether the foundation is a private operating foundation described in section	<input checked="" type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)																																																																									
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed	<table border="1"> <thead> <tr> <th>Tax year</th> <th colspan="3">Prior 3 years</th> <th rowspan="2">(e) Total</th> </tr> <tr> <th>(a) 2023</th> <th>(b) 2022</th> <th>(c) 2021</th> <th>(d) 2020</th> </tr> </thead> <tbody> <tr> <td>741,008.</td> <td>651,389.</td> <td>734,457.</td> <td>56,565.</td> <td>2,183,419.</td> </tr> <tr> <td>629,857.</td> <td>553,681.</td> <td>624,288.</td> <td>48,080.</td> <td>1,855,906.</td> </tr> <tr> <td>1,366,203.</td> <td>1,126,666.</td> <td>1,226,405.</td> <td>1,359,721.</td> <td>5,078,995.</td> </tr> <tr> <td>0.</td> <td>0.</td> <td>0.</td> <td>0.</td> <td>0.</td> </tr> <tr> <td>1,366,203.</td> <td>1,126,666.</td> <td>1,226,405.</td> <td>1,359,721.</td> <td>5,078,995.</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>0.</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>0.</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>0.</td> </tr> <tr> <td>1,249,968.</td> <td>1,031,805.</td> <td>1,067,458.</td> <td>37,710.</td> <td>3,386,941.</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>0.</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>0.</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>0.</td> </tr> </tbody> </table>					Tax year	Prior 3 years			(e) Total	(a) 2023	(b) 2022	(c) 2021	(d) 2020	741,008.	651,389.	734,457.	56,565.	2,183,419.	629,857.	553,681.	624,288.	48,080.	1,855,906.	1,366,203.	1,126,666.	1,226,405.	1,359,721.	5,078,995.	0.	0.	0.	0.	0.	1,366,203.	1,126,666.	1,226,405.	1,359,721.	5,078,995.					0.					0.					0.	1,249,968.	1,031,805.	1,067,458.	37,710.	3,386,941.					0.					0.					0.
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3 Complete 3a, b, or c for the alternative test relied upon:																																																																										
a "Assets" alternative test - enter:																																																																										
(1) Value of all assets	0.																																																																									
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	0.																																																																									
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed	0.																																																																									
c "Support" alternative test - enter:																																																																										
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)																																																																										
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)																																																																										
(3) Largest amount of support from an exempt organization	0.																																																																									
(4) Gross investment income	0.																																																																									

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XIV **Supplementary Information** *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NONE				
Total				3a 0.
b <i>Approved for future payment</i>				
NONE				
Total				3b 0.

Part XV-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income
	(a) Business code	(b) Amount			
1 Program service revenue:					
a ENTRANCE FEES	541900				235,975.
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments	541900				15,865.
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	819,369.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property			16	2,191.	
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	-290,284.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					57,808.
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	0.			531,276.	309,648.
13 Total. Add line 12, columns (b), (d), and (e)				13	840,924.

(See worksheet in line 13 instructions to verify calculations.)

Part XV-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
1A ENTRANCE FEES TO THE MUSEUM	
2 MEMBERSHIP FEES	
10 SALES OF MUSEUM STORE INVENTORY THAT CONSIST OF EDUCATIONAL MATERIALS RELATED TO THE MUSEUM'S EXHIBITS; AN EXTENSION OF THE MUSEUM'S EDUCATIONAL MISSION OFFERING ITEMS THAT DEEPEN ENGAGEMENT WITH THE MUSEUM THEMES AND EXHIBITIONS WITH A FOCUS ON ART, HISTORY, AND CULTURE.	
	EACH OF THE ABOVE ACTIVITIES SERVE TO DRAW PEOPLE TO THE MUSEUM, TEACH AND INFORM PEOPLE ABOUT THE MUSEUM, AND INTEREST PEOPLE IN LEARNING ABOUT THE MUSEUM, WHICH IN TURN BRINGS REVENUE INTO THE MUSEUM TO HELP SUPPORT OPERATIONS.

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

OMB No. 1545-0047

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

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

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

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

Part I - Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions. NATIONAL MUSEUM OF TOYS AND MINIATURES	Taxpayer identification number (TIN) 43-1187852
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 5235 OAK STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. KANSAS CITY, MO 64112	

Enter the Return Code for the return that this application is for (file a separate application for each return) **04**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

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

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

Plan Name
Plan Number
Plan Year Ending (MM/DD/YYYY)

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)The books are in the care of **THE FOUNDATION****5235 OAK STREET - KANSAS CITY, MO 64112**Telephone No. **816-235-8000**

Fax No.

• If the organization does not have an office or place of business in the United States, check this box
 • If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15**, 20 **24**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

calendar year 20 **23** or
 tax year beginning , 20 , and ending , 20

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

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

Form **8868** (Rev. 1-2024)

Schedule B
(Form 990)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization

Employer identification number

NATIONAL MUSEUM OF TOYS AND MINIATURES**43-1187852****Organization type** (check one):**Filers of:**

Form 990 or 990-EZ

 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2023)

Name of organization

NATIONAL MUSEUM OF TOYS AND MINIATURES

Employer identification number

43-1187852

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GREATER KANSAS CITY COMMUNITY FOUNDATION 1055 BROADWAY, SUITE 130 KANSAS CITY, MO 64105	\$ 355,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	HALLMARK CORPORATE FOUNDATION 2501 MCGEE, PO BOX 419580, MAIL DROP 288 KANSAS CITY, MO 64151-6580	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	JANET LONG TRUST PO BOX 15715 LENEXA, KS 66285	\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	MURIEL MCBRIEN KAUFFMAN FOUNDATION 4801 ROCKHILL ROAD KANSAS CITY, MO 64110-2046	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	UNIVERSITY OF MISSOURI-KANSAS CITY 5000 HOLMES ST KANSAS CITY, MO 64110-2046	\$ 243,332.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

NATIONAL MUSEUM OF TOYS AND MINIATURES

Employer identification number

43-1187852

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
5	STAFF, UTILITIES, MATERIALS, AND SUPPLIES	\$ 243,332.	12/31/23
	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Name of organization

NATIONAL MUSEUM OF TOYS AND MINIATURES

Employer identification number

43-1187852

Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) \$ _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

Underpayment of Estimated Tax by Corporations

FORM 990-PF

OMB No. 1545-0123

Attach to the corporation's tax return.
Go to www.irs.gov/Form2220 for instructions and the latest information.**2023**

Name

NATIONAL MUSEUM OF TOYS AND MINIATURES

Employer identification number

43-1187852

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment

1 Total tax (see instructions)	1	10,300.
2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a	
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b	
c Credit for federal tax paid on fuels (see instructions)	2c	
d Total. Add lines 2a through 2c	2d	
3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty	3	10,300.
4 Enter the tax shown on the corporation's 2022 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5	4	13,214.
5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3	5	10,300.

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

6 The corporation is using the adjusted seasonal installment method.
 7 The corporation is using the annualized income installment method.
 8 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9 05/15/23	06/15/23	09/15/23	12/15/23
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	10 2,575.	2,575.	2,575.	2,575.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	11			
Complete lines 12 through 18 of one column before going to the next column.	12			
12 Enter amount, if any, from line 18 of the preceding column	13			
13 Add lines 11 and 12	14	2,575.	5,150.	7,725.
14 Add amounts on lines 16 and 17 of the preceding column	15	0.	0.	0.
15 Subtract line 14 from line 13. If zero or less, enter -0-	16	2,575.	5,150.	
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	17	2,575.	2,575.	2,575.
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	18			
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column				

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2023)

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19			
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2023 and before 7/1/2023	21			
22 Underpayment on line 17 x <u>Number of days on line 21 x 7% (0.07)</u> 365	22 \$	\$	\$	\$
23 Number of days on line 20 after 6/30/2023 and before 10/1/2023	23			
24 Underpayment on line 17 x <u>Number of days on line 23 x 7% (0.07)</u> 365	24 \$	\$	\$	\$
25 Number of days on line 20 after 9/30/2023 and before 1/1/2024	25			
26 Underpayment on line 17 x <u>Number of days on line 25 x 8% (0.08)</u> 365	26 \$	\$	\$	\$
27 Number of days on line 20 after 12/31/2023 and before 4/1/2024	27	SEE ATTACHED WORKSHEET		
28 Underpayment on line 17 x <u>Number of days on line 27 x 8% (0.08)</u> 366	28 \$	\$	\$	\$
29 Number of days on line 20 after 3/31/2024 and before 7/1/2024	29			
30 Underpayment on line 17 x <u>Number of days on line 29 x %</u> 366	30 \$	\$	\$	\$
31 Number of days on line 20 after 6/30/2024 and before 10/1/2024	31			
32 Underpayment on line 17 x <u>Number of days on line 31 x %</u> 366	32 \$	\$	\$	\$
33 Number of days on line 20 after 9/30/2024 and before 1/1/2025	33			
34 Underpayment on line 17 x <u>Number of days on line 33 x %</u> 366	34 \$	\$	\$	\$
35 Number of days on line 20 after 12/31/2024 and before 3/16/2025	35			
36 Underpayment on line 17 x <u>Number of days on line 35 x %</u> 365	36 \$	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37 \$	\$	\$	\$
38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns			38 \$	599.

* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter.

These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 800-829-4933 to get interest rate information.

FORM 990-PF
UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Penalty Due (Sum of Column F).

599.

- * Date of estimated tax payment, withholding credit date or installment due date.

FORM 990-PF

DIVIDENDS AND INTEREST FROM SECURITIES

STATEMENT 1

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INTEREST/DIVIDENDS	819,369.	0.	819,369.	819,369.	819,369.
TO PART I, LINE 4	819,369.	0.	819,369.	819,369.	819,369.

FORM 990-PF

RENTAL INCOME

STATEMENT 2

KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
	1	2,191.
TOTAL TO FORM 990-PF, PART I, LINE 5A		2,191.

FORM 990-PF

INCOME AND COST OF GOODS SOLD
INCLUDED ON PART I, LINE 10

STATEMENT 3

INCOME

1. GROSS RECEIPTS	106,840
2. RETURNS AND ALLOWANCES	
3. LINE 1 LESS LINE 2	106,840
4. COST OF GOODS SOLD (LINE 15)	49,032
5. GROSS PROFIT (LINE 3 LESS LINE 4)	57,808
6. OTHER INCOME	
7. GROSS INCOME (ADD LINES 5 AND 6)	57,808

COST OF GOODS SOLD

8. INVENTORY AT BEGINNING OF YEAR	
9. MERCHANDISE PURCHASED	49,032
10. COST OF LABOR	
11. MATERIALS AND SUPPLIES	
12. OTHER COSTS	
13. ADD LINES 8 THROUGH 12	49,032
14. INVENTORY AT END OF YEAR	
15. COST OF GOODS SOLD (LINE 13 LESS LINE 14)	49,032

FORM 990-PF

OTHER INCOME

STATEMENT 4

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ENTRANCE FEES	235,975.	0.	235,975.
MEMBERSHIP DUES AND ASSESSMENTS	15,865.	0.	15,865.
TOTAL TO FORM 990-PF, PART I, LINE 11	251,840.	0.	251,840.

FORM 990-PF

LEGAL FEES

STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL EXPENSES	219.	0.	31.	189.
TO FM 990-PF, PG 1, LN 16A	219.	0.	31.	189.

FORM 990-PF

ACCOUNTING FEES

STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING EXPENSES	19,642.	0.	2,765.	16,975.
TO FORM 990-PF, PG 1, LN 16B	19,642.	0.	2,765.	16,975.

FORM 990-PF

OTHER PROFESSIONAL FEES

STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CONTRACT SERVICES	45,419.	0.	6,395.	53,091.
INVESTMENT FEES	69,184.	69,184.	69,184.	0.
TO FORM 990-PF, PG 1, LN 16C	114,603.	69,184.	75,579.	53,091.

FORM 990-PF

OTHER EXPENSES

STATEMENT 8

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OFFICE EXPENSES	30,932.	619.	4,974.	31,780.
EXHIBIT DEVELOPMENT AND FEES	49,100.	0.	6,913.	42,434.
PROGRAM EVENTS	16,696.	0.	2,351.	23,079.
MISCELLANEOUS	8,561.	0.	1,205.	7,399.
INSURANCE	29,123.	582.	4,683.	28,541.
ADVERTISING	45,288.	0.	6,377.	37,843.
COLLECTION ITEMS PURCHASED	143,383.	0.	20,189.	123,917.
TO FORM 990-PF, PG 1, LN 23	323,083.	1,201.	46,692.	294,993.

FORM 990-PF

OTHER INCREASES IN NET ASSETS OR FUND BALANCES

STATEMENT 9

DESCRIPTION	AMOUNT
UNREALIZED GAINS	3,520,710.
CAPITALIZED DONATED SERVICES	19,350.
TOTAL TO FORM 990-PF, PART III, LINE 3	3,540,060.

FORM 990-PF

U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS

STATEMENT 10

DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
COMMERCE SHORT-TERM TREASURY BILL	X		788,385.	788,385.
TOTAL U.S. GOVERNMENT OBLIGATIONS			788,385.	788,385.
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS				
TOTAL TO FORM 990-PF, PART II, LINE 10A			788,385.	788,385.

FORM 990-PF

CORPORATE STOCK

STATEMENT 11

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
ISHARES US PREFERRED STOCK ETF	106,826.	106,826.
ISHARES RUSSELL MIDCAP ETF	2,891,945.	2,891,945.
ISHARES RUSSELL 2000 ETF	743,631.	743,631.
SPDR S&P 500 ETF TRUST	9,194,872.	9,194,872.
ISHARES MSCI EAFE ETF	1,833,642.	1,833,642.
VANGUARD FTSE EMERGING MARKETS ETF	1,504,877.	1,504,877.
DODGE & COX INCOME FUND	4,473,387.	4,473,387.
TIAA-CREF INSTITUTIONAL EQUITY INDEX	1,834,613.	1,834,613.
TOTAL TO FORM 990-PF, PART II, LINE 10B	22,583,793.	22,583,793.

FORM 990-PF

CORPORATE BONDS

STATEMENT 12

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
VANGUARD INTERMEDIATE INVESTMENT FUND	1,214,270.	1,214,270.
COMMERCE BOND FUND	3,983,883.	3,983,883.
PIMCO EMERGING MKTS BOND FUND	197,154.	197,154.
VANGUARD TOTAL INTERNATIONAL BOND INDEX FUND	213,574.	213,574.
TOTAL TO FORM 990-PF, PART II, LINE 10C	5,608,881.	5,608,881.

FORM 990-PF

OTHER INVESTMENTS

STATEMENT 13

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
GREATER KANSAS CITY COMMUNITY FOUNDATION	FMV	277.	277.
JP MORGAN ALERIAN MLP INDEX	FMV	210,742.	210,742.
JP MORGAN HEDGED EQUITY FUND-R6	FMV	1,185,417.	1,185,417.
FINANCIAL SQUARE TR GOVERNMENT FD	FMV		
ADMIN CI FUND 466	FMV	706,249.	706,249.
ENDOWMENT	FMV	55,096.	55,096.
TOTAL TO FORM 990-PF, PART II, LINE 13		2,157,781.	2,157,781.

FORM 990-PF OTHER ASSETS STATEMENT 14

DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
RIGHT OF USE ASSET - FACILITY LEASE	708,783.	668,782.	668,782.
IMPROVEMENTS IN PROCESS	112,219.	0.	0.
TO FORM 990-PF, PART II, LINE 15	821,002.	668,782.	668,782.

FORM 990-PF OTHER LIABILITIES STATEMENT 15

DESCRIPTION	BOY AMOUNT	EOY AMOUNT
LEASE LIABILITY - OFFSITE FACILITY	710,711.	674,005.
TOTAL TO FORM 990-PF, PART II, LINE 22	710,711.	674,005.

FORM 990-PF INTEREST AND PENALTIES STATEMENT 16

TAX DUE FROM FORM 990-PF, PART V	10,300.
UNDERPAYMENT PENALTY	599.
LATE PAYMENT INTEREST	423.
TOTAL AMOUNT DUE	11,322.

FORM 990-PF LATE PAYMENT INTEREST STATEMENT 17

DESCRIPTION	DATE	AMOUNT	BALANCE	RATE	DAYS	INTEREST
TAX DUE	05/15/24	10,300.	10,300.	.0800	184	423.
DATE FILED	11/15/24		10,723.			
TOTAL LATE PAYMENT INTEREST						423.

FORM 990-PF

PART VII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 18

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
COREY ZIEGLER 5235 OAK STREET KANSAS CITY, MO 64112	BOARD CHAIR 2.00	0.	0.	0.
LORI BEAM 5235 OAK STREET KANSAS CITY, MO 64112	PAST BOARD CHAIR 1.00	0.	0.	0.
WILLIAM HALL 5235 OAK STREET KANSAS CITY, MO 64112	TREASURER 1.00	0.	0.	0.
RACHEL STERBENZ 5235 OAK STREET KANSAS CITY, MO 64112	SECRETARY 0.50	0.	0.	0.
WOLFE BRACK 5235 OAK STREET KANSAS CITY, MO 64112	DIRECTOR 1.00	0.	0.	0.
SARALYN REECE HARDY 5235 OAK STREET KANSAS CITY, MO 64112	DIRECTOR 1.00	0.	0.	0.
ANNE MANNING 5235 OAK STREET KANSAS CITY, MO 64112	DIRECTOR 1.00	0.	0.	0.
TERESA MARTINEZ 5235 OAK STREET KANSAS CITY, MO 64112	DIRECTOR 1.00	0.	0.	0.
MARGARET MCGUINNESS 5235 OAK STREET KANSAS CITY, MO 64112	DIRECTOR 1.00	0.	0.	0.
JEAN-PAUL WONG 5235 OAK STREET KANSAS CITY, MO 64112	DIRECTOR 1.00	0.	0.	0.

NATIONAL MUSEUM OF TOYS AND MINIATURES

43-1187852

TROY LILLEBO
5235 OAK STREET
KANSAS CITY, MO 64112

DIRECTOR
1.00

0. 0. 0.

SUSAN STANTON
5235 OAK STREET
KANSAS CITY, MO 64112

DIRECTOR
1.00

0. 0. 0.

PETRA KRALICKOVA
5235 OAK STREET
KANSAS CITY, MO 64112

EXECUTIVE DIRECTOR
40.00 110,849. 37,492.

0.

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII

110,849. 37,492. 0.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 19

ACTIVITY ONE

TO PROCURE, PRESERVE, RESTORE, MAINTAIN, STUDY, PROMOTE AND EXHIBIT MODERN AND ANTIQUE TOYS AND FINE SCALE MINIATURES INCLUDING ROOM BOXES, FURNITURE, DECORATIONS, HOUSES AND OTHER ITEMS, AND TO PRESERVE AND MAKE AVAILABLE BOTH TOYS AND MINIATURES FOR PUBLIC VIEWING AND APPRECIATION.

EXPENSES

TO FORM 990-PF, PART VIII-A, LINE 1

1,117,441.

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))Department of the Treasury
Internal Revenue Service

For calendar year 2023 or other tax year beginning _____, and ending _____.

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

2023

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

A <input type="checkbox"/> Check box if address changed.	Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) NATIONAL MUSEUM OF TOYS AND MINIATURES	D Employer identification number 43-1187852
B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a) <input type="checkbox"/> 529A	Print or Type Number, street, and room or suite no. If a P.O. box, see instructions. 5235 OAK STREET	E Group exemption number (see instructions)
	City or town, state or province, country, and ZIP or foreign postal code KANSAS CITY, MO 64112	F <input type="checkbox"/> Check box if an amended return.
G Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust <input type="checkbox"/> State college/university <input type="checkbox"/> 6417(d)(1)(A) Applicable entity	C Book value of all assets at end of year 42,060,905.	
H Check if filing only to claim <input type="checkbox"/> Credit from Form 8941 <input type="checkbox"/> Refund shown on Form 2439 <input type="checkbox"/> Elective payment amount from Form 3800	I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation <input type="checkbox"/>	
J Enter the number of attached Schedules A (Form 990-T) 1	K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," enter the name and identifying number of the parent corporation	
L The books are in care of THE ORGANIZATION	Telephone number 816-235-8000	

Part I Total Unrelated Business Taxable Income

1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	0.
2 Reserved	2	
3 Add lines 1 and 2	3	
4 Charitable contributions (see instructions for limitation rules)	4	0.
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5	
6 Deduction for net operating loss. See instructions	6	0.
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	
8 Specific deduction (generally \$1,000, but see instructions for exceptions)	8	1,000.
9 Trusts. Section 199A deduction. See instructions	9	
10 Total deductions. Add lines 8 and 9	10	1,000.
11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	0.

Part II Tax Computation

1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	0.
2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11, from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	2	
3 Proxy tax. See instructions	3	
4 Other tax amounts. See instructions	4	
5 Alternative minimum tax	5	
6 Tax on noncompliant facility income. See instructions	6	
7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7	0.

Part III Tax and Payments

1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a	
1b Other credits (see instructions)	1b	
1c General business credit. Attach Form 3800 (see instructions)	1c	
1d Credit for prior-year minimum tax (attach Form 8801 or 8827)	1d	
1e Total credits. Add lines 1a through 1d	1e	
2 Subtract line 1e from Part II, line 7	2	0.
3a Amount due from Form 4255	3a	
3b Amount due from Form 8611	3b	
3c Amount due from Form 8697	3c	
3d Amount due from Form 8866	3d	
3e Other amounts due (see instructions)	3e	
3f Total amounts due. Add lines 3a through 3e	3f	0.
4 Total tax. Add lines 2 and 3f (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here	4	0.
5 Current net 965 tax liability paid from Form 965-A, Part II, column (k)	5	0.

Part III Tax and Payments (continued)

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

Part IV Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2023 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here	Yes	No
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		X
If "Yes," see instructions for other forms the organization may have to file.		
3 Enter the amount of tax-exempt interest received or accrued during the tax year	\$	
4 Enter available pre-2018 NOL carryovers here \$ <u>56,575.</u> Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
5 Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
Business Activity Code	Available post-2017 NOL carryover	
<u>455000</u>	\$	<u>146,383.</u>
	\$	
	\$	
	\$	
6 a Reserved for future use		
b Reserved for future use		

Part V Supplemental Information

Provide any additional information. See instructions.

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer	Date	EXECUTIVE DIRECTOR	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Paid Preparer Use Only	Print/Type preparer's name RHONDA L. CARLSON CPA	Preparer's signature RHONDA L. CARLSON CPA	Date 11/12/24	Check <input type="checkbox"/> if self-employed PTIN P00297658
	Firm's name KELLER & OWENS, LLC		Firm's EIN 48-1195228	
	10955 LOWELL AVE, STE 800			
	Firm's address OVERLAND PARK, KS 66210		Phone no. (913) 338-3500	

Form 990-T (2023)

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

OMB No. 1545-0047

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

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

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

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

Part I - Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions. NATIONAL MUSEUM OF TOYS AND MINIATURES	Taxpayer identification number (TIN) 43-1187852
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 5235 OAK STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. KANSAS CITY, MO 64112	

Enter the Return Code for the return that this application is for (file a separate application for each return) **07**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

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

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

Plan Name
Plan Number
Plan Year Ending (MM/DD/YYYY)

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)The books are in the care of **THE ORGANIZATION****5235 OAK STREET - KANSAS CITY, MO 64112**Telephone No. **816-235-8000**

Fax No.

• If the organization does not have an office or place of business in the United States, check this box
 • If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15**, 20 **24**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

calendar year 20 **23** or
 tax year beginning , 20 , and ending , 20

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$ 0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$ 0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ 0.

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

Form **8868** (Rev. 1-2024)

FORM 990-T		PRE-2018 NET OPERATING LOSS DEDUCTION		STATEMENT 20
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/12	33,056.	10,981.	22,075.	22,075.
12/31/13	4,325.	0.	4,325.	4,325.
12/31/14	23,382.	0.	23,382.	23,382.
12/31/15	6,329.	0.	6,329.	6,329.
12/31/16	464.	0.	464.	464.
NOL CARRYOVER AVAILABLE THIS YEAR			56,575.	56,575.

SCHEDULE A
(Form 990-T)

Department of the Treasury
Internal Revenue Service

**Unrelated Business Taxable Income
From an Unrelated Trade or Business**

OMB No. 1545-0047

2023

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

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

A Name of the organization NATIONAL MUSEUM OF TOYS AND MINIATURES	B Employer identification number 43-1187852
C Unrelated business activity code (see instructions) 455000	D Sequence: 1 of 1

E Describe the unrelated trade or business **RETAIL SALES IN MUSEUM GIFT SHOP**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales				
b Less returns and allowances	c Balance			
2 Cost of goods sold (Part III, line 8)				
3 Gross profit. Subtract line 2 from line 1c				
4a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions				
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions				
c Capital loss deduction for trusts				
5 Income (loss) from a partnership or an S corporation (attach statement)				
6 Rent income (Part IV)				
7 Unrelated debt-financed income (Part V)				
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)				
9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)				
10 Exploited exempt activity income (Part VIII)				
11 Advertising income (Part IX)				
12 Other income (see instructions; attach statement)				
13 Total. Combine lines 3 through 12		0.		

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

1 Compensation of officers, directors, and trustees (Part X)	1
2 Salaries and wages	2
3 Repairs and maintenance	3
4 Bad debts	4
5 Interest (attach statement). See instructions	5
6 Taxes and licenses	6
7 Depreciation (attach Form 4562). See instructions	7
8 Less depreciation claimed in Part III and elsewhere on return	8a
9 Depletion	9
10 Contributions to deferred compensation plans	10
11 Employee benefit programs	11
12 Excess exempt expenses (Part VIII)	12
13 Excess readership costs (Part IX)	13
14 Other deductions (attach statement)	14
15 Total deductions. Add lines 1 through 14	15
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16
17 Deduction for net operating loss. See instructions	17
18 Unrelated business taxable income. Subtract line 17 from line 16	18

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2023

Part III Cost of Goods Sold

Enter method of inventory valuation

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

Part IV Rent Income (From Real Property and Personal Property Leased With Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.

A _____
 B _____
 C _____
 D _____

	A	B	C	D
2 Rent received or accrued				
a From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3 Total rents received or accrued. Add line 2c, columns A through D. Enter here and on Part I, line 6, column (A)	0 .			
Deductions directly connected with the income				
4 in lines 2a and 2b (attach statement)				
5 Total deductions. Add line 4, columns A through D. Enter here and on Part I, line 6, column (B)	0 .			

Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.

A _____
 B _____
 C _____
 D _____

	A	B	C	D
2 Gross income from or allocable to debt-financed property				
3 Deductions directly connected with or allocable to debt-financed property				
a Straight line depreciation (attach statement)				
b Other deductions (attach statement)				
c Total deductions (add lines 3a and 3b, columns A through D)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5 Average adjusted basis of or allocable to debt-financed property (attach statement)				
6 Divide line 4 by line 5	%	%	%	%
7 Gross income reportable. Multiply line 2 by line 6				
8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)	0 .			
9 Allocable deductions. Multiply line 3c by line 6				
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)	0 .			
11 Total dividends-received deductions included in line 10	0 .			

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

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

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

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

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

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

990-T SCH A		POST-2017 NET OPERATING LOSS DEDUCTION		STATEMENT 21
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/19	28,964.	0.	28,964.	28,964.
12/31/20	47,642.	0.	47,642.	47,642.
12/31/21	41,008.	0.	41,008.	41,008.
12/31/22	28,769.	0.	28,769.	28,769.
NOL CARRYOVER AVAILABLE THIS YEAR			146,383.	146,383.