			Under section 501(c),	527, or 4947(a)(1) of the li	nternal Reven	ue Code (except	private foun	dations)	
_				er social security numbers			-	· · · · · ,	Open to Public
		the Treasury ue Service		ww.irs.gov/Form990 for in		-			Inspection
			lar year, or tax year begir	-		, 2023, and ei			, 20
_				iends of the Natio	onal Ambo		laing	D. Employ	· ·
		applicable:		Tends of the Natio	onal Arbo				er identification number
5	ddress o	-	Doing business as			1_			52-1257712
5	lame ch	-		ox if mail is not delivered to street ad	ldress)	Room	/suite	E Telepho	
- ''	nitial retu	irn	3501 New York						(202)544-8733
╡「	inal retu	rn/terminated	City or town, state or province	, country, and ZIP or foreign postal of	code			G Gross r	eceipts
_ ^	mended	l return	Washington, DC	20002				\$	2,896,337
A	pplicatio	on pending	F Name and address of principa	al officer: Michael Ste	evens		H(a) Is this a	group return for	subordinates? Yes X No
			Same as C abov	7e			H(b) Are all	subordinates	included? Yes No
Ta	ax-exem	npt status: X	501(c)(3) 501(c) () (insert no.) 4947(a	a)(1) or 5	27	lf "No,"	attach a list.	See instructions
N L	Vebsite:	www	.fona.org				H(c) Group	exemption nu	Imber
K F	orm of c	organization: X	Corporation Trust Ass	ociation Other	L	Year of formation: 1	982 м :	State of legal	domicile: DC
Par	rt I	Summar	y					Ť	
		Briefly descr	ibe the organization's miss	ion or most significant activ	ities: See	Schedule 0.			
	-	2	ise the engline and englished	ion of moot olgrinoalit aout	<u></u>	benedure o.			
S									
าลท									
err									
Activities & Governance	2	Check this b	ox 📋 if the organization o	discontinued its operations of	or disposed of	more than 25% of	its net assets		
<u>ل</u> م	3	Number of v	oting members of the gove	erning body (Part VI, line 1a))			3	26
ŝ	4	Number of ir	ndependent voting member	rs of the governing body (Pa	art VI, line 1b)			4	26
itie	5	Total numbe	r of individuals employed in	n calendar year 2023 (Part)	V, line 2a)			5	21
Ę	6			necessary)				6	141
¥	7a		,	Part VIII, column (C), line 1				7a	
									0
	a	Net unrelate	d business taxable income	from Form 990-T, Part I, lin		<u></u> .		7b	0
							Prior Year		Current Year
	8	Contributions and grants (Part VIII, line 1h) 1,898							2,261,976
nue	9	Program service revenue (Part VIII, line 2g)							201,425
Revenue	10	Investment i	ncome (Part VIII, column (/	A), lines 3, 4, and 7d) ••			69	,198	92,279
Re	11	Other revenue	ue (Part VIII, column (A), lii	nes 5, 6d, 8c, 9c, 10c, and <i>^</i>	11e)	[140	,183	249,455
	12	Total revenu	e - add lines 8 through 11 ((must equal Part VIII, colum	in (A), line 12)		2,177		2,805,135
	13	Grants and s	similar amounts paid (Part	IX, column (A), lines 1-3)			•		103,610
	14			X, column (A), line 4)					0
	15			e benefits (Part IX, column			1,344	740	1 221 140
es				1,740	1,321,140				
esue	· .		sional fundraising fees (Part IX, column (A), line 11e)						0
Expe	b		•			339,267			
ш	17	•	ses (Part IX, column (A), li	. ,			777	,922	1,028,442
	18			equal Part IX, column (A),	,		2,122	2,670	2,453,192
	19	Revenue les	s expenses. Subtract line	18 from line 12			54	,913	351,943
Net Assets or Fund Balances						В	eginning of Curr	ent Year	End of Year
lan	20	Total assets	(Part X, line 16)				3,631	,875	4,333,419
Ass Ba	21	Total liabilitie	es (Part X, line 26)			🗖		5,173	363,311
Net	22		()	ine 21 from line 20		⊢	3,375		3,970,108
Par			ire Block				57575	///02	575707100
		0		urn, including accompanying schedu	iles and statement	and to the best of my	knowledge and h	elief it is	
				fficer) is based on all information of v			into mougo una p		
0:	-		ael Stevens						
Sig	n	Signature of office	cer					Date	
Here	е	Mich	ael Stevens, Boar	d Chair					
		Type or print nar							
		Print/Type pre	eparer's name	Preparer's signature		Date	Check	∏ if P	TIN
Paic	ł								
	parei	John Mu		John Mullins		11-14-2024		ployed	P01429307
	Only		Mullins,				Firm's EIN		
use		Firm's addres	s 7625 Wig	consin Avenue			Phone no.		

Return of Organization Exempt From Income Tax

May the IRS discuss this return with the preparer shown above? See instructions		
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Bethesda MD 20814

Form **990**

No

X Yes

202-770-6371

OMB No. 1545-0047

2023

Form	n 990 (2023) Friends of the National Arboretum	52-1257712	Page 2
Pa	Int III Statement of Program Service Accomplishments		_
	Check if Schedule O contains a response or note to any line in this Part III		📋
1	Briefly describe the organization's mission:		
	See Schedule O.		
2	Did the organization undertake any significant program services during the year which were not listed on the	_	_
	prior Form 990 or 990-EZ?	· · 🏼 Yes	<u>x</u> No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	· · 🏼 Yes	<u>x</u> No
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure	d by	
-	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot	-	
	the total expenses, and revenue, if any, for each program service reported.	,	
4a	(Code:) (Expenses \$697,464 including grants of \$5,038) (Revenue	\$)
	See SERVICES page for a description of this program service.		
4b	(Code:) (Expenses \$ 506,533 including grants of \$ 39,005) (Revenue	\$)
	See SERVICES page for a description of this program service.	•	/
4c	(Code:) (Expenses \$188,629 including grants of \$) (Revenue	\$)
	Annual Garden Fair and Plant Sale Event: The Garden Fair is held in early spr	ing and typ	ically
	attracts 10,000 people to the grounds of the Arboretum. Traditionally, the Na		
	curators serve as plant experts providing advice for novice as well as experi	enced garde	ners.
4d)	
4e	(Expenses \$ 112,882 including grants of \$ 59,567 (Revenue \$ Total program service expenses 1,505,508)	
EEA		Forn	n 990 (2023)

	1 990 (2023) Friends of the National Arboretum 52	-12577	12	P	age 3
Par	rt IV Checklist of Required Schedules				
				Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"				
	complete Schedule A	·	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	·	2	x	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to				
	candidates for public office? If "Yes," complete Schedule C, Part I	· • • •	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)				
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	·	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,				
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	· • • •	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors				
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If				
	"Yes," complete Schedule D, Part I		6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ī			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	ſ			
	complete Schedule D, Part III		8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	Ī			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or				
	debt negotiation services? If "Yes," complete Schedule D, Part IV		9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	Ī			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V		10	x	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	Ī			
	VII, VIII, IX, or X, as applicable.				
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"				
	complete Schedule D, Part VI		11a	x	
b		Ī			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		11b		x
с		Ī			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		11c		x
d		Ī			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Г	11e	х	
		Ī	-		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.		11f	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	ľ			
	Schedule D, Parts XI and XII		12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	ľ			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	H	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?		14a		x
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	ľ			
	fundraising, business, investment, and program service activities outside the United States, or aggregate				
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	ľ			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.		15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	ľ			
-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	ŀ			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions		17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	-			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.		18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			-	
	If "Yes," complete Schedule G, Part III		19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		20a		x
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		20b		<u>_A</u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	-			
					i i

	-	
domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х
Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		

Form **990** (2023)

Form 990 (2	2023)
Part IV	0

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	х	
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			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III.	27		x
28	Was the organization a party to a business transaction with one of the following parties (See the Schedule			
_	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	00-		
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28a 28b		X
b		200		x
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		v
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	200		x x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	25		
	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N. Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	-		
	or IV, and Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O	38	х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a ⊾	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	4-		
	reportable gaming (gambling) winnings to prize winners?	1c	Х	

Form	990 (2023) Friends of the National Arboretum 52-1257	712	F	Page 5
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 21			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Yes," enter the name of the foreign country			
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (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 transaction?	5b		x
c	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 the			
va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Ju		
b	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	00		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	7a	v	
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b	X	
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	0	x	
С	required to file Form 8282?	7c		v
d	If "Yes," indicate the number of Forms 8282 filed during the year	10		x
d	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		v
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	-		x
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? • • • • • • • • • • •	7g 7h		
h 8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	- 11		
0	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a h	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
ь 10	Section 501(c)(7) organizations. Enter:	30		
	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·			
a h	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
ь 11		-		
	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a			
a h	Gross income from other sources. (Do not net amounts due or paid to other sources	-		
b				
12a	against amounts due or received from them.)	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
ь 13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.	134		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
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 on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.			-
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

_	n 990 (2023) Friends of the National Arboretum 52-1257			age 6
Pa	rt VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below,			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O			ctions.
_	Check if Schedule O contains a response or note to any line in this Part VI			х
Sec	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 26	-		
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 26	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	•		
•	any other officer, director, trustee, or key employee?	2		<u>x</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	2		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3		<u>x</u>
4 5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		x 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			
74	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,			<u></u>
-	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 year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		х
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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	10-		
40	describe on Schedule O how this was done Did the organization have a written whistleblower policy?	12c	X	
13 14	Did the organization have a written document retention and destruction policy?	13 14	X	
15	Did the process for determining compensation of the following persons include a review and approval by	14	x	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
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 on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
_	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Statement #17			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule 0)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	The Organization (202)544-8733, 3501 New York Avenue NE, Washington, DC 20002			

Form 990 (202	3) Friends of the National Arboretum	52-1257712	Page 7				
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highe	est Compensated Employee	es, and				
	Independent Contractors						
	Check if Schedule O contains a response or note to any line in this Part VII						
Section A.	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees						
1a Complete th	nis table for all persons required to be listed. Report compensation for the calendar year ending v	vith or within the					
organization's t	ax year.						

· List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

			mpe	1134		any cu	non		1 1100000.	
				((C)					
(A)	(B)	Position (do not check more than one				(D)	(E)	(F)		
Name and title	Average					han one s both a		Reportable	Reportable	Estimated amount
	hours			•		/trustee		compensation	compensation	of other
	per week							from the organization (W-2/	from related organizations (W-2/	compensation from the
	(list any hours for	or d	Ins	Office	Ke	em Hig	For	1099-MISC/	1099-MISC/	organization and
	related	Individual trustee or director	nstitutional trustee	icer	Key employee	ploy	Former	1099-NEC)	1099-NEC)	related organizations
	organizations	for tr	onal		ploy	t con				
	below	uste	trus		ee	nper				
	dotted line)	CD CD	ee			Highest compensated employee				
						đ				
(1)Craven Rand	40.00									
Executive Director				x				157,500	0	17,809
(2)Catherine_Kerkam	40.00									
Dir. Philanthropy/Communication						х		106,994	0	19,280
(3)Lucy S. Rhame	1.00									
Director		x						0	0	0
(4)Catherine_Robbins	1.00									
Director		х						0	0	0
(5)Keith_Sellars	1.00									
Director		х						0	0	0
(6)Eric_Michael	1.00									
Director		x						0	0	0
(7)Vaughn Perry	1.00									
Director		x						0	0	0
(8)Melissa Pflieger	1.00									
Director		x						0	0	0
(9) Amy A. Titus	1.00									
Director		х						0	0	0
(10)Nzinga Tull	<u>1.00</u>									
Director		x						0	0	0
(11)Tuckie Westfall	1.00									
Director		x						0	0	0
(12)Barbara Shea	1.00									
Director		x						0	0	0
(13)Louis_Slade	1.00									
Director		x						0	0	0
(14)Peggy_Strand	1.00									
Director		x						0	0	0
EEA										Form 990 (2023)

Form 990 (202	3) Friends of the National Arboretum	52-1257712 Pa	age 7				
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Hig		Highest Compensated Employees, a	and				
	Independent Contractors						
	Check if Schedule O contains a response or note to any line in this Part VII						
Section A.	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees						
1a Complete t	his table for all persons required to be listed. Report compensation for the calendar year ϵ	ending with or within the					
organization's	ax year.						

· List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

	aleu organiza		inhe	iisai	ieu a	any cu	nen	t officer, difector, o	liusiee.	
				((C)					
(A)	(B)		Position		(D)	(E)	(F)			
Name and title	Average	``				han one s both a		Reportable	Reportable	Estimated amount
	hours			•		/trustee		compensation	compensation	of other
	per week				from the organization (W-2/	from related	compensation			
	(list any	or	Ins	q	Ke	Hi	Fo	1099-MISC/	organizations (W-2/ 1099-MISC/	from the organization and
	hours for related	direc	stitut	Officer	iy en	ghes	Former	1099-NEC)	1099-NEC)	related organizations
	organizations	Individual trustee or director	Institutional trustee		Key employee	ree /				
	below	uste	trus		/ee	nper				
	dotted line)	o o	tee			Highest compensated employee				
						ğ				
(1)John F. Cooney	1.00									
Director		x						0	0	0
(2)Elizabeth M. Dugan	1.00									
Director		х						0	0	0
(3)Zandra Chestnut	1.00									
Director		х						0	0	0
(4)Robert Bartlett	1.00									
Director		х						0	0	0
(5)Mark_Buscaino	1.00									
Director		х						0	0	0
(6)Bill Matuszeski	1.00									
Director		х						0	0	0
(7)Paul Meyer	1.00									
Director		х						0	0	0
(8)Anne MacMillan	1.00									
Director		х						0	0	0
(9)Chandler_Goule	1.00									
Director		х						0	0	0
(10)Jennifer Hatcher	1.00									
Director		х						0	0	0
(11)Martha Van Dale	4.00									
Vice Chair		x		x				0	0	0
(12)Michael Stevens	4.00]							
Board Chair		x		х				0	0	0
(13)John Dillard	4.00									
Secretary		x		х				0	0	0
(14)Virginia_Kromm	4.00									
Treasurer		x		x				0	0	0
EEA										Form 990 (2023)

Form 9	990 (2023) Friends of the Na	tional A	rbor	etu	m			a d	Lighaat Camp		2-1257			Page 8
Part	VII Section A. Officers, Directors, T	rustees,	rey i	Em	-	-	es, ar	na	nignest Comp	ensated		loyees	i (cont	inued)
	(A) Name and title	(B) Average hours per week	box	, unles	Po: eck n ss pe	rson i	than one is both a r/trustee	in	(D) Reportable compensation from the organization (W-2/	(E) Reportable compensation from related organizations (W-2/		CO	(F) nated am of other mpensat from the	r tion
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		1099-MI 1099-NE	sc/	orga	nization d organiz	and
<u>(15)</u>														
(16)														
<u>(17)</u>														
<u>(18)</u>														
<u>(19)</u>														
<u>(20)</u>														
<u>(21)</u>														
<u>(22)</u>														
<u>(23)</u>														
<u>(24)</u>														
<u>(25)</u>														
1b c	Subtotal		 			 	· · · · · ·	:						
d	Total (add lines 1b and 1c)								264,494		0		37,0	089
2	Total number of individuals (including but n reportable compensation from the organization		o thos	ens	stea	abo	ove) v	vno	received more t	nan \$100	,000 01			2
2	Did the exercise list and former officer direct	an tructoo k					when the		nonacted				Yes	No
3	Did the organization list any former officer, direct employee on line 1a? <i>If "Yes," complete Schedule</i>			-		-						3		x
4	For any individual listed on line 1a, is the sum of r													
	organization and related organizations greater that			es," c	comp	olete	Sche	dule	J for such					
5	individual			•• man	· ·	••• nrela	ted or	••• dani	ization or individual			4	X	
	for services rendered to the organization? If "Yes,	•			•			-				5		x
Sect	on B. Independent Contractors													
1	Complete this table for your five highest co compensation from the organization. Repo												s tax	year.
	(A)								(B)			(C)		
Tree	Name and business addres -Mendous (TMAA LLC), 12913 RT 22		JY 12	2029	9			Arc	Description of servio	es		Compens	sation 141,3	381
								Ē				-	/、	
								-						
								-						
2	Total number of independent contractors (in received more than \$100,000 of compensations)	-					nose l	iste	ed above) who	1				

	00(2023) Friends of the Nation	al Arboretu	m		52-12577	' 12 Pag
Part \	VIII Statement of Revenue Check if Schedule O contains a response	or note to any l	ine in this Part \	/		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–51
	1a Federated campaigns 1a					
ه ۵	b Membership dues	68,167				
unts	c Fundraising events 1c	198,180				
Ū Ū	d Related organizations					
Contributions, Gifts, Grants and Other Similar Amounts	e Government grants (contributions) 1e	444,483				
a, n nii n	f All other contributions, gifts, grants,	-				
tion sr Si	and similar amounts not included above 1f	1,551,146				
n the	g Noncash contributions included in					
nd o	lines 1a-1f	\$ 22,445				
a c	h Total. Add lines 1a-1f		2,261,976			
		Business Code				
2	2a <u>Program Services</u> 6	11710	30,073	30,073		
Program Service Revenue	b <u>Fairs & Festivals</u> 9	00099	130,657	130,657		
nu	C Other Event Income 9	00099	40,695	40,695		
eve	d					
. œ	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		201,425			
	3 Investment income (including dividends, interest, and					
	other similar amounts)	ł	91,383			91,3
	4 Income from investment of tax-exempt bond procee	1				
	5 Royalties					
	(i) Real	(ii) Personal				
	6a Gross rents 6a 239,525					
	b Less: rental expenses 6b					
	c Rental income or (loss) 6c 239,525					
	d Net rental income or (loss)		239,525			239,5
	7a Gross amount from (i) Securities	(ii) Other				
	sales of assets other than inventory 7a 6,070					
	b Less: cost or other basis					
e	and sales expenses 7b 5,174					
	c Gain or (loss) 7c 896					
Sev	d Net gain or (loss)		896			8
Other Reven	8a Gross income from fundraising					Ŭ Ŭ
oth	events (not including \$ 198,180					
-	of contributions reported on line					
	1c). See Part IV, line 18 8a	94,440				
	b Less: direct expenses	86,028				
	c Net income or (loss) from fundraising events		8,412			8,4
	9a Gross income from gaming					
	activities. See Part IV, line 19 • • • • • • 9a					
	b Less: direct expenses					
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less	Τ				
	returns and allowances					
	b Less: cost of goods sold 10b					
	c Net income or (loss) from sales of inventory					
		Business Code				
Θ		00099	1,518	1,518		
nue	b					
Revenue	c					ļ
R	d All other revenue					
	e Total. Add lines 11a-11d		1,518			
	12 Total revenue. See instructions		2,805,135	202,943	0	340,2

Friends of the National Arboretum

52-1257712

Page 9

Form 990 (2023)

Part IX

Do not include amounts rep	ported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9b, and 10b of Part VIII.			expenses	general expenses	expenses
	tance to domestic organizations				
-	ents. See Part IV, line 21 • • •	103,610	103,610		
2 Grants and other assis					
	(, line 22				
3 Grants and other assis	°				
organizations, foreign g					
	Part IV, lines 15 and 16				
5 Compensation of curre					
		157,500	87,167	33,983	36,35
•	ided above to disqualified				
	der section $4958(f)(1)$) and				
•	ection 4958(c)(3)(B) • • • • • •				
		917,799	507,947	198,031	211,821
	and contributions (include				
	(b) employer contributions) • •	35,059	17,978	7,497	9,58
	ts · · · · · · · · · · · · · · · · ·	125,168	71,472	31,070	22,62
		85,614	47,570	18,007	20,03
11 Fees for services (none					
-					
U U		4,907	4,907		
0		107,916		107,916	
, ,					
	g services. See Part IV, line 17 • •				
	nt fees	8,429		8,429	
	int exceeds 10% of line 25, column				
	g expenses on Schedule O.)	553,553	407,988	129,904	15,663
	tion	3,785	3,217	568	
•		111,476	56,203	44,701	10,572
•••					
•					
		24,850	21,399	2,537	914
	ntertainment expenses				
for any federal, state, o	· · ·				
,	ons, and meetings • • • • • •	15,633	3,389	3,934	8,310
,	and amortization	10 (85			
	, and amortization • • • • • • •	10,677	7,296	3,381	
	ze expenses not covered	22,746	8,060	14,686	
•	· ·				
,	bus expenses on line 24e. If ds 10% of line 25, column				
	,				
	e expenses on Schedule O.)	150 100	150.000	100	
a <u>Garden & Progra</u>		150,192	150,022	170	
b <u>Bank & Merchant</u>	rees	14,278	7,283	3,603	3,393
c					
d All other expenses					
e All other expenses			1		
 Total functional expension Joint costs. Complete 	nses. Add lines 1 through 24e • • •	2,453,192	1,505,508	608,417	339,26
organization reported in					
from a combined educa	ational campaign and				
fundraising solicitation.					
tollowing SOP 98-2 (AS	SC 958-720)				

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

Form 990	(2023)	Friends	of	the	National	Arboretum
Part X	Balance S	Sheet				

EEA

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Par	t 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
	1	Cash - non-interest-bearing	1,208,211	1	1,355,568
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	42,908	3	275,074
	4	Accounts receivable, net	34,501	4	27,137
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ŝ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
¥8	9	Prepaid expenses and deferred charges	10,246	9	14,861
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 133,872			
	b	Less: accumulated depreciation	26,993	10c	19,063
	11	Investments - publicly traded securities	2,309,016	11	2,635,274
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14			14	
	15	Other assets. See Part IV, line 11		15	6,442
	16	Total assets. Add lines 1 through 15 (must equal line 33)	3,631,875	16	4,333,419
	17	Accounts payable and accrued expenses	121,406	17	205,177
	18 19	Grants payable	100.050	18	140.100
	20	Tax-exempt bond liabilities	122,250	19 20	140,108
	20	Escrow or custodial account liability. Complete Part IV of Schedule D		20	
ú	21	Loans and other payables to any current or former officer, director,		21	
Liabilities	~~~	trustee, key employee, creator or founder, substantial contributor, or 35%			
lide		controlled entity or family member of any of these persons		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties	12,517	23	11,527
	24	Unsecured notes and loans payable to unrelated third parties	12,317	24	11,527
	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		25	6,499
	26	Total liabilities. Add lines 17 through 25	256,173	26	363,311
		Organizations that follow FASB ASC 958, check here		-	,
es		and complete lines 27, 28, 32, and 33.			
anc	27	Net assets without donor restrictions	318,177	27	295,524
3alá	28	Net assets with donor restrictions	3,057,525	28	3,674,584
I pr		Organizations that do not follow FASB ASC 958, check here			
Fur		and complete lines 29 through 33.			
or	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	3,375,702	32	3,970,108
z	33	Total liabilities and net assets/fund balances	3,631,875	33	4,333,419
			· · · · · ·		Form 000 (2022)

Form **990** (2023)

Form	990 (2023) Friends of the National Arboretum	52-12577	L2	Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,	805,	135
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,	453,	192
3	Revenue less expenses. Subtract line 2 from line 1	3		351,	943
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	З,	375,	702
5	Net unrealized gains (losses) on investments	5		242,	463
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	З,	970,	108
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
	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	х	
	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	х	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>	3b		
			-		(0000)

Form 990 (2023)

SCHE	DU	LE	A
(Form	990)	

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.

OMB No. 1545-0047
2023
2023

	ment of the Treasury	Attac	ch to Form 990 or Form	990-EZ.			Open to Public		
Interna	I Revenue Service Ge	o to www.irs.gov/For	m990 for instructions a	nd the late	est inform	ation.	Inspection		
Name	of the organization	-				Employer identificatio	n number		
Frie	nds of the National Ark	oretum				52-125771	.2		
Par			II organizations mus	st comple	ete this p				
The or	rganization is not a private foundation	n because it is: (For li	nes 1 through 12, check	only one b	ox.)				
1	A church, convention of church	es, or association of ch	nurches described in sec	tion 170(b)(1)(A)(i).				
2	A school described in section 1	70(b)(1)(A)(ii). (Attach	n Schedule E (Form 990)	.)					
3	A hospital or a cooperative hos		, ,	,	A)(iii).				
4	A medical research organization	-				(1)(A)(iii). Enter the			
	hospital's name, city, and state:	, ,			(-)				
5	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). (Com	Ũ	, ,	,	5				
6	A federal, state, or local govern	,	unit described in section	170(b)(1)	(A)(v).				
7	An organization that normally re	-				from the general public	C		
	described in section 170(b)(1)(,		5 1			
8	A community trust described in		,						
9	An agricultural research organiz		, , ,	erated in co	onjunction	with a land-grant colle	qe		
	or university or a non-land-gran				•	-	•		
	university:	0 0	· · · ·			0			
10	An organization that normally re receipts from activities related t support from gross investment acquired by the organization aft	o its exempt functions, ncome and unrelated	subject to certain excep business taxable income	tions; and (less sect	(2) no mor ion 511 tax	e than 33 1/3% of its	ISS		
11	An organization organized and	, ,	, ,						
12									
	one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check								
	the box on lines 12a through 12				•	•			
а	Type I. A supporting organi		•		-	.,	ng		
	the supported organization	, , , ,		ority of the	directors of	or trustees of the			
	supporting organization. Yo	-							
b	Type II. A supporting organ				-	.,			
	control or management of t			persons th	at control o	or manage the suppor	ted		
	organization(s). You must	•							
С	Type III functionally integ						ith,		
_	its supported organization(s	, , ,	-						
d	Type III non-functionally i	• • • •	•••				. ,		
	that is not functionally integ	•	• • •		•	nent and an attentiven	ess		
	requirement (see instruction	, -							
е	Check this box if the organi					і, туре ії, туре ії			
	functionally integrated, or T		integrated supporting or	ganization	•				
f	Enter the number of supported or	5	••••••••••••••••••••••••••••••••••••••				••••		
g	Provide the following information						1		
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the o listed in you docum	ir governing	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
				Yes	No				
(A)									
(B)									
(C)									
(D)									
(E)									

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

Schedu	e A (Form 990) 2023 Friends of	the Nation	al Arboret	um		52-1257712	
Part	II Support Schedule for Organiz	ations Desc	ribed in Sec	tions 170(b)	(1)(A)(iv) and	d 170(b)(1)(A))(vi)
	(Complete only if you checked t	he box on lin	e 5, 7, or 8 of	Part I or if th	e organizatio	on failed to qua	alify under
	Part III. If the organization fails t	o qualify und	er the tests li	sted below, p	lease comple	ete Part III.)	
Secti	on A. Public Support					· · · ·	
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
		1,382,983	1,395,688	2,310,837	1,898,227	2,261,976	9,249,711
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	1 - 382 - 983	1,395,688	2,310,837	1 .898 .227	2,261,976	9,249,711
5	The portion of total contributions by	1,302,503	1,333,000	273107037	1,050,227	272017570	572157711
	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)						1,132,379
6	Public support. Subtract line 5 from line 4						8,117,332
	on B. Total Support						0/11//002
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	1,382,983	1,395,688	2,310,837	1,898,227	2,261,976	9,249,711
8	Gross income from interest, dividends,	1/002/000		275207037		272027570	<u> </u>
-	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources	126,517	98,377	294,686	285,225	91,383	896,188
9	Net income from unrelated business	1207517	507577	2317000	2037223	517505	0,0,100
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)				45,003	1,518	46,521
11	Total support. Add lines 7 through 10				15,005		10,192,420
12	Gross receipts from related activities, etc	. (see instructi	ons)			12	
13	First 5 years. If the Form 990 is for the c	•	,				c)(3)
	organization, check this box and stop he	•			•	•	,,,,
Secti	on C. Computation of Public Suppo						
14	Public support percentage for 2023 (line	6, column (f), o	divided by line	11, column (f))		14	79.64 %
15	Public support percentage from 2022 Scl					15	81.35 %
16a	33 1/3% support test - 2023. If the organ	nization did no	t check the box	k on line 13, ar	id line 14 is 33	1/3% or more,	check this
	box and stop here. The organization qua	alifies as a pub	licly supported	organization.			🗴
b	33 1/3% support test - 2022. If the organ	nization did no	t check a box o	on line 13 or 16	Sa, and line 15	is 33 1/3% or n	nore, check
	this box and stop here. The organization	qualifies as a	publicly suppo	rted organizati	on		🛛
17a	10%-facts-and-circumstances test - 20	23. If the orga	nization did no	t check a box o	on line 13, 16a	, or 16b, and lir	ne 14 is
	10% or more, and if the organization mee	ets the facts-ar	nd-circumstanc	es test, check	this box and s	top here. Expla	ain in
	Part VI how the organization meets the fa	acts-and-circur	nstances test.	The organizati	on qualifies as	a publicly supp	orted
	organization						🛛
b	10%-facts-and-circumstances test - 20	22. If the orga	nization did no	t check a box o	on line 13, 16a	, 16b, or 17a, a	nd line
	15 is 10% or more, and if the organizatio	-					
	in Part VI how the organization meets the					•	-
	organization			-	•	• •	
18	Private foundation. If the organization d	id not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and s	see
	instructions	<u></u>					🔲

	(Complete only if you checked the	ne box on
	If the organization fails to qualify	under the
Sect	ion A. Public Support	
Caler	ndar year (or fiscal year beginning in)	(a) 2019
1	Gifts, grants, contributions, and membership fees	
	received. (Do not include any "unusual grants.")	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	
3	Gross receipts from activities that are not an	
	unrelated trade or business under section 513	
4	Tax revenues levied for the	

Part III

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
- **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
 c Add lines 7a and 7b
- 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Caler	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the or	rganization's fi	irst, second, th	ird, fourth, or f	ifth tax year as	a section 50)1(c)(3)
	organization, check this box and stop her	е					[
Sect	on C. Computation of Public Suppo	rt Percentaç	ge				
15	Public support percentage for 2023 (line 8	3, column (f), c	divided by line	13, column (f))		15	%
16	Public support percentage from 2022 Sch	edule A, Part	III, line 15 .			16	%
Sect	on D. Computation of Investment In	come Perce	entage				
17	Investment income percentage for 2023 (line 10c, colur	nn (f), divided	by line 13, colu	ımn (f))	17	%
18	Investment income percentage from 2022	Schedule A,	Part III, line 17	·		18	%
19a	33 1/3% support tests - 2023. If the orga	nization did n	ot check the bo	ox on line 14, a	nd line 15 is m	ore than 33	1/3%, and line
	17 is not more than 33 1/3%, check this b	ox and stop h	nere. The organ	nization qualifi	es as a publicly	supported	organization
b	33 1/3% support tests - 2022. If the organization	n did not check	a box on line 14	or line 19a, and l	ine 16 is more tha	an 33 1/3%, a	nd
	line 18 is not more than 33 1/3%, check this box	and stop here.	The organization	n qualifies as a p	ublicly supported	organization	
20	Private foundation. If the organization di	d not check a	box on line 14	. 19a. or 19b. (check this box a	and see inst	ructions

(f) Total

(e) 2023

m 990) 2023 Friends of the National Arboretum 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.)

(c) 2021

(d) 2022

(b) 2020

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

No

Yes

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

	Les the exercise tends with a contribution from one of the following persons?		163	
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 on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? 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 officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	-		
2				
	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,			
0	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations		V.	N
			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		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI			
	how the organization maintained a close and continuous working relationship with the supported organization(s)	. 2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (se	e inst	tructi	ons).
а	The organization satisfied the Activities Test. Complete line 2 below.	-		/
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction	ns)		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		100	
u	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	0-		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
2	Falent of Supported Organizations. Answer miles sa and so below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a		3a		
b	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? <i>If "Yes" or "No," provide details in Part VI.</i>	3a		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	3a 3b		

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Page 5

Yes No

-	(Form 990) 2023	Friends	of	the	National	Arboretum
Part IV	Supporting (Organizatio	ons	(con	tinued)	

EEA

1	Check here if the organization satisfied the Integral Part Test as a qualifying	ı trust	on Nov 20 1970 (ex	plain in Part VI) See
•	instructions. All other Type III non-functionally integrated supporting organ			
				(B) Current Yea
sect	ion A - Adjusted Net Income		(A) Prior Year	(optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (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):			
а	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
•	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
ect	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
-	emergency temporary reduction (see instructions).	6		

-	e A (Form 990) 2023 Friends of the National A	rboretum	52-1	2577	712 Page 7
Part	V Type III Non-Functionally Integrated 509(a)(Supporting Organ	izations (continue	ed)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish e			1	
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppor	ted		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orgar	izations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required)	- provide details in Par	: VI)	5	
6	Other distributions (describe in Part VI). See instructions.			6	
	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	(!!!)
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	IS	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023				
	(reasonable cause required - <i>explain in Part VI</i>). See				
	instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
C	From 2020				
d	From 2021				
e	From 2022				
f	Total of lines 3a through 3e				
<u>g</u>	Applied to underdistributions of prior years			_	
<u>h</u>	Applied to 2023 distributable amount				
<u>i</u>	Carryover from 2018 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2023 from				
4	Section D, line 7: \$				
	Applied to underdistributions of prior years				
<u>a</u> b	Applied to underdistributions of phot years			_	
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
Ŭ	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
•	and 4b from line 1. For result greater than zero, <i>explain in</i>				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2019				
b	Excess from 2020				
С	Excess from 2021				
d	Excess from 2022				
е	Excess from 2023				
EEA				s	chedule A (Form 990) 2023

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

SCHEDULE D		Supplementa	OMB No. 1545-0047		
(Forn	n 990)		inization answered "Yes" on Form 990,		2023
			0, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b		
	nent of the Treasury		Attach to Form 990.	11an	Open to Public Inspection
	Revenue Service f the organization	Go to www.irs.gov/Formas	90 for instructions and the latest informa		dentification number
	-	ational Arboratum			
Pa		ational Arboretum	Funds or Other Similar Funds or Ac		1257712
		te if the organization answered "Yes" of		Joounto	
	•••••		(a) Donor advised funds		(b) Funds and other accounts
1	Total number at	end of year		· · · · · ·	
2		of contributions to (during year) • • • •			
3		of grants from (during year)			
4		at end of year			
5		-	writing that the assets held in donor advise	d	
	funds are the org	ganization's property, subject to the organiza	ation's exclusive legal control?		Yes 🗌 No
6	Did the organiza	tion inform all grantees, donors, and donor	advisors in writing that grant funds can be u	sed	
	-	-	nor or donor advisor, or for any other purpo		
	conferring imper	missible private benefit? • • • • • • • • •			Yes 🗌 No
Par	t II Conse	rvation Easements			
	Complet	te if the organization answered "Yes" o	on Form 990, Part IV, line 7.		
1	Purpose(s) of co	nservation easements held by the organiza	tion (check all that apply).		
	Preservation	of land for public use (for example, recreation	on or education)	historically i	important land area
	Protection of	natural habitat	Preservation of a	certified his	toric structure
	Preservation	of open space			
2	Complete lines 2	a through 2d if the organization held a qual	ified conservation contribution in the form of	fa con <u>serva</u>	ition
	easement on the	last day of the tax year.			Held at the End of the Tax Year
а	Total number of	conservation easements • • • • • • • •		2a	
b	Total acreage rea	stricted by conservation easements		2b	
С	Number of conse	ervation easements on a certified historic st	ructure included on line 2a	2c	
d		ervation easements included on line 2c, acq	-		
	on a historic stru	cture listed in the National Register • • •		2d	
3	Number of conse	ervation easements modified, transferred, re	eleased, extinguished, or terminated by the	organization	n during the
	tax year				
4	Number of states	s where property subject to conservation ea	sement is located		
5	Does the organiz	zation have a written policy regarding the pe	eriodic monitoring, inspection, handling of		
	-		it holds?		
6	Staff and volunte	er hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	rvation ease	ements during the year
7	Amount of exper	 nses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	on easemen	ts during the year
8	Does each cons	 ervation easement reported on line 2d abov	re satisfy the requirements of section 170(h)	(4)(B)(i)	

8	Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?	🗌 No
9	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 FASB ASC 958, not to report in its revenue statement and balance sheet works

1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works
	of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,
	provide the following amounts relating to these items:
	(i) Revenue included on Form 990, Part VIII, line 1 • • • • • • • • • • • • • • • • • •
	(ii) Assets included in Form 990, Part X · · · · · · · · · · · · · · · · · ·
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under FASB ASC 958 relating to these items:

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Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) o Using the organization accussion, and after records, check any of the following that make significant use of its collecton terms (check all that apply): a Public exhibition d Lans or exchange program b Strokally research d Loan or exchange program c Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XII. c During the year, did the organization and explain how they further the organization's exempt purpose in Part XII. c Beach or the foring particle that the trans the maintained as part of the organization's collection's . Yes Ne Part IV Complete if the organization any entry for contributions or other assets not included on form 900, Part X, line 21. Is the organization any agent, trustee, custodain or other intermediary for contributions or other assets not included on form 900, Part X, line 21. Is the organization include an amount on Form 900, Part X, line 21. Is the organization include an amount on Form 900, Part X, line 21. a Additions during the year time organization answered "Yes" on Form 990, Part IV, line 10. Is Is a Beginning of year balance to organization answered "Yes" on Form 990, Part IV, line 10. Is Is a Beginning of year ba		eD(Form 990) 2023 Friends of the			_		52-125		Page 2
collection terms (check all that apply): d d Las or exchange program b Provide a collection terms (check all that apply): d d collection b Provide a collection terms (check all that apply): d d collection c Provide a collection for future generations e collection c During the year, did the organization solicit or raceive donations of art, historical treasures, or other similar assets to be solt orise funds rather than to be maintained as part of the organization's collection? vss No Part MI Escreme and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, flustee, custodian or other intermediary for contributions or other assets not include on form 990, Part X, line 21. Is the organization include an amount on Form 990, Part X, line 21. Is the organization include an amount on Form 990, Part X, line 21. c Beginning balance 10 11 Is Is Amount c Beginning balance 12 14 Is Is </th <th>Par</th> <th>t III Organizations Maintaining</th> <th>Collections of</th> <th>Art, Historical 1</th> <th>Freasures,</th> <th>or Ot</th> <th>her Similar <i>I</i></th> <th>Assets (a</th> <th>continued)</th>	Par	t III Organizations Maintaining	Collections of	Art, Historical 1	Freasures,	or Ot	her Similar <i>I</i>	Assets (a	continued)
a b b c c b c c c c c c c c c c c c c	3	Using the organization's acquisition, access	sion, and other record	ls, check any of the f	ollowing that n	nake si	gnificant use of it	S	
b Sholatiy research 0 Other c Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XII. During the year. did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintaned as part of the organization's collection? Yes No Part NI Excrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on form 900, Part X, line 21. Is is the organization funds an agent trustee, custodian or other intermediary for contributions or other assets not included on form 900, Part X, line 21. Is is the organization include an amount on Form 900, Part X, line 21. for escrow or custodial account intellity? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Image: Part V intellity? Yes No b Is information of the current year on borm 990, Part IV, line 10. Image: Part V intellity intellity? Yes No complete if the organization answered "Yes" on Form 990, Part IV, line 10. Image: Part V intellity? Yes No for drop stratimes anings, gains, and losses 301,888		collection items (check all that apply):							
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Forvise a description of the organization's collections and explain how they further the organization's exempt purpose in Part XII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintalened as part of the organization's collection?	b	Scholarly research		e 🗌 Other					
XIII Source from the year, did the organization solicit or receive donalons of art, historical treasures, or other similar assets to be solid to raise finds rather than to be maintained as part of the organization's collection?	с	Preservation for future generations							
Souring the year, dif the organization solicit or receive domains of art, historical treasures, or other similar assets to be sold to rather than to be maintained as part of the organization's collection? Yes	4	Provide a description of the organization's of	collections and explain	n how they further th	e organization	's exen	npt purpose in Pa	art	
assets to be sold to raise funds raher than to be maintained as part of the organization?		XIII.							
Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X 27. Ves No b If "Yes," explain the arrangement in Part XII and complete the following table.	5	During the year, did the organization solicit	or receive donations	of art, historical treas	sures, or other	similar			
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990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 90, Part X? Image: Control of Form 90, Part X? 0 Beginning balance Image: Control of Form 90, Part X? Image: Control of Form 90, Part X? 1d Image: Control of Form 90, Part X? Image: Control of Form 90, Part X Image: Control of Form 90, Part X 2 Did the organization include an amount on Form 900, Part X, line 21, for escrow or custodial account liability? Image: Control of Form 900, Part X. Image: Control of Form 90, Part X. Part V Endowment Funds Image: Control of Form 90, Part X. Image: Control of Form 90, Part X. Image: Control of Form 90, Part X. 1a Beginning of year balance Image: Control of Form 90, Part IV. 1a Beginning of year balance Image: Control of Form 90, Part IV. 1a Beginning of year balance Image: Control of Form 90, Part IV. I	Par	t IV Escrow and Custodial Arra	angements						
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included on Form 990, Part X?		990, Part X, line 21.							
b If "Yes," explain the arrangement in Part XIII and complete the following table.	1a	Is the organization an agent, trustee, custo	dian or other intermed	diary for contributions	s or other asse	ts not			
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(i) Unrelated organizations? 3a(i) x (ii) Related organizations? 3a(ii) x b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b 3b 3b Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 25,524 25,524 4 4 d Equipment 108,348 89,285 19,063	3a	Are there endowment funds not in the poss	ession of the organization	ation that are held ar	nd administere	d for th	e		
(ii) Related organizations? 3a(ii) x b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation b Buildings c Leasehold improvements c Leasehold improvements d Equipment c Cother d Equipment		organization by:	-						Yes No
(ii) Related organizations? 3a(ii) x 3a(ii) x b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 3b 3b 3b 3b 3b 3c 3b 3c 3b 3b </th <td></td> <td>(i) Unrelated organizations?</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td> 3a(i)</td> <td>x</td>		(i) Unrelated organizations?						3a(i)	x
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?		.,							1 1
4 Describe in Part XII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (c) Accumulated depreciation (d) Book value 1a Land (d) Book value (d) Book value (d) Book value b Buildings 25,524 25,524 c Leasehold improvements 108,348 89,285 19,063 e Other Under Under Under Under	b								
Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land	4								1 1
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land Land </th <td>Par</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Par								
Image: Non-Structure Image: No	-			on Form 990, P	art IV, line	11a. S	See Form 990), Part X,	line 10.
1a Land b Buildings c Leasehold improvements 25,524 d Equipment 108,348 89,285 19,063 e Other		Description of property	(a) Cost or othe	er basis (b) Cost o	r other basis	(c) /	Accumulated	(d) Boo	k value
b Buildings c Leasehold improvements 25,524 25,524 d Equipment 108,348 89,285 19,063 e Other						• •			
c Leasehold improvements 25,524 25,524 d Equipment 108,348 89,285 19,063 e Other	1a	Land							
c Leasehold improvements 25,524 25,524 d Equipment 108,348 89,285 19,063 e Other	b	Buildings							
d Equipment 108,348 89,285 19,063 e Other 108,348 89,285 19,063 19,063	с	Leasehold improvements			25,524		25,524		
e Other	d	•		1					19,063
Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. line 10c. column (B)	е	Other							
	Total.			X, line 10c, column (E	3)				19,063

Schedule D (Form 990) 2023 Friends of the National Arbo	pretum	52-1257712 Page 3
Part VII Investments - Other Securities		
Complete if the organization answered "Yes" on For	rm 990, Part IV, lin	e 11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, line 12, col.(B))		
Part VIII Investments - Program Related	•	
Complete if the organization answered "Yes" on For	rm 990, Part IV, lin	e 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

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

(a) Description	(b) Book value
(1Right of Use Asset	6,442
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15 col. (B))	6,442

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2]Lease Liability	6,499
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25 col. (B))	6,499

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

-		52-1257712	Page 4
Part		r Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	3,125,197
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	328,491
3	Subtract line 2e from line 1	3	2,796,706
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 8,429		
b	Other (Describe in Part XIII.) ••••••••••••••••••••••••••••••••••		
С	Add lines 4a and 4b	4c	8,429
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	2,805,135
Part		per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	2,530,791
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.) 2d 86,028		
е	Add lines 2a through 2d	2e	86,028
3	Subtract line 2e from line 1	3	2,444,763
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 8,429		
b	Other (Describe in Part XIII.) ••••••••••••••••••••••••••••••••••		
С	Add lines 4a and 4b	4c	8,429
5	Total expenses. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line 18.</i>)	5	2,453,192
Part	XIII Supplemental Information		

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

01. Endowment funds intended uses (Part V, line 4)

The Heritage Collections Fund supports the Azalea, Boxwood and other heritage collections at the US

National Arboretum; the second endowment, The Meyer Kidder Horticultural Fund, supports a

horticulture student, recent graduate or visiting scientist with a special interest in taxonomy.

02. Other revenues not included on Form 990 (Part XI, line 2d)

Direct event revenue: \$86,028

03. Other expenses not included on Form 990 (Part XII, line 2d)

Direct event expenses: \$86,028

04. Footnote for uncertain tax position under FIN 48 (Part X)

Management has evaluated FONA's tax positions and concluded that there are no significant uncertain

tax positions that qualify for either recognition or disclosure in the financial statements.

SCHEDULE G Supplemental Information Regarding Fundraising or Gaming Activities								OMB No. 1545-0047			
(Form 990) Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.								or if the	2023		
	ment of the Treasury			tach to Form 9					Open to Public		
	al Revenue Service	(30 to www.irs.gov/	Form990 for in	structions an	d the latest informati	on.	Employer identifie	Inspection		
	•										
	ands of the National States	ational Arbor sing Activities.	<u>Complete if t</u>	ho organiz	ation and	warad "Vaa" an	Forn	52-125	57712 / line 17		
Par		0-EZ filers are r	•	-		weled les on	FUII	11990, Fait IV	, iii e 17.		
1	Indicate whether	the organization rais	sed funds through	any of the fo	llowing activi	ities. Check all that a	apply.				
а	Mail solicitatio	ns		е [Solicitation	of non-government	grant	s			
b	Internet and e	mail solicitations		f	Solicitation	of government gra	nts				
с	Phone solicita	tions		g [Special fur	ndraising events					
d	In-person soli	citations			_	-					
2a	Did the organizat	ion have a written o	r oral agreement \	with any indivi	idual (includi	ng officers, directors	s, trus	tees,			
	or key employees	s listed in Form 990,	Part VII) or entity	in connectior	n with profes	sional fundraising se	ervice	s?	🗌 Yes 🗌 No		
b	If "Yes," list the 1	0 highest paid indivi	duals or entities (f	[;] undraisers) p	oursuant to a	greements under wh	nich th	e fundraiser is to	be		
	compensated at l	east \$5,000 by the	organization.								
				(iii) Did fun	draiser have			Amount paid to	(vi) Amount paid to		
	(i) Name and addres or entity (fund		(ii) Activity		r control of	(iv) Gross receipts from activity	•	or retained by) ndraiser listed in	(or retained by)		
	or onling (runs			contrib	outions?	nonn doarney	iui	col. (i)	organization		
				Yes	No						
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
Total											
3	List all states in w	hich the organizatio	on is registered or	licensed to se	olicit contribu	itions or has been n	otified	it is exempt fron	n		
	registration or lice	ensing.									

Schedule G (Form 990) 20

	dule G	(Form 990) 2023 Fri Fundraising Events. Com	ends of the Natio	nal Arboretum answered "Yes" on Fo	-52 990, Part IV, line 18,	-1257712 Page 2 , or reported more
		than \$15,000 of fundraising gross receipts greater than		d gross income on For	m 990-EZ, lines 1 and 6l	b. List events with
			(a) Event #1 Dinner (event type)	(b) Event #2 (event type)	(c) Other events <u>None</u> (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts • • • • • • • • •	292,620			292,620
μ.	2 3	Less: Contributions Gross income (line 1	198,180			198,180
		minus line 2) • • • • • • • • • • •	94,440			94,440
	4	Cash prizes				
	5	Noncash prizes				
nses	6	Rent/facility costs • • • • • •	27,505			27,505
Expe	7	Food and beverages • • • • •	53,523			53,523
Direct Expenses	8	Entertainment	5,000			5,000
	9	Other direct expenses				
	10	Direct expense summary. Add line	•	,		86,028
Pa	11 rt III	Net income summary. Subtract lin Gaming. Complete if the or				8,412 more than
		\$15,000 on Form 990-EZ, I	ine 6a.		1	1
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re	1	Gross revenue				
ses	2	Cash prizes				
Expens	3	Noncash prizes				
Direct Expe	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	☐ Yes % ☐ No	└ Yes% │	│	
	7	Direct expense summary. Add line	es 2 through 5 in column (d	I)		
	8	Net gaming income summary. Su	btract line 7 from line 1, col	lumn (d) • • • • • • • •		
9 a k	l Ist	nter the state(s) in which the organiz the organization licensed to conduc	zation conducts gaming act	ivities: of these states? ••••		🗌 Yes 🗌 No
10a k		ere any of the organization's gamin 'Yes," explain:	g licenses revoked, susper	nded, or terminated during	the tax year?	🗌 Yes 🗌 No
EEA						Schedule G (Form 990) 2023

SCHEDULE I (Form 990)	orm 990) Governments, and Individuals in the United States							
Department of the Treasury		Complete	-	Attach to Form 990.	rm 990, Part IV, line 21	or 22.	C	Open to Public
Internal Revenue Service Name of the organization			Go to www.irs.go	ov/Form990 for the la	test information.		Employer identificat	Inspection
0								
Friends of the N Part I Genera	Information on	Grants and Assis	tance				52-1257712	
1 Does the organiza	tion maintain records to	o substantiate the amou	nt of the grants or assi			assistance, and		· XYes No
		cedures for monitoring t						
		ce to Domestic Org				organization answered is needed.	l "Yes" on Form 99	90,
1 (a) Name and addre or gover	•	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) US National A	rboretum							
3501 New York Av	-							Program
Washington DC 20	002			98,096				Support
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
2 Enter total number	of section 501(c)(3) a	nd government organiza	tions listed in the line f	table			<u> </u> ····· _	

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

1

Schedule I (Form 990) 2023 Friends of the National Arboretum 52-1257712 Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

	Part III can be duplicated if additional space is needed.										
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance					
1											
2											
3											
4											
5											
6											
7											
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.										

Page **2**

SCHEDULE J	
(Form 990)	

Compensation Information

OMB No. 1545-0047 2023

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

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number 52-1257712

Frie	nds of the National Arboretum 52-1257712			
Part				
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use Travel for companience Dowmante for business use of personal residence			
	□ Travel for companions □ Payments for business use of personal residence			
	Tax indemnification and gross-up payments			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
~	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization: Receive a severance payment or change-of-control payment?	40		
a h	Receive a severance payment or change-of-control payment?	4a 4b		X
b C	Participate in or receive payment from an equity-based compensation arrangement?	40 40		x x
C	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
-	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
5	compensation contingent on the revenues of:			
2		5a		
a b	Any related organization?	5a 5b		X
D	If "Yes" on line 5a or 5b, describe in Part III.	50		х
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		х
b	Any related organization?	6b		х
	If "Yes" on line 6a or 6b, describe in Part III.			
-	For a second lists of an Example 000, Dart VIII, October A, Vian Az, skiddler annanization manual second second			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed	-		
0	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract evention described in Regulations section 52 4058 4(a)/2)2 If "Yes " described			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
	III I alt III	0		x
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
-	Regulations section 53.4958-6(c)?	9		

Schedule J (Form 990) 2023 Friends of the National Arboretum

52-1257712 Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II

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

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

		(B)Breakdown of W-2 ar	nd/or 1099-MISC and/or	1099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
Craven Rand	(i)	157,500	0	0	4,361	13,448	175,309	0
1 Executive Director	(ii)	0	0	0	0	0	0	c
	(i)							
2	(ii)							
	(i)							
3	(ii)							
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2023

Page 2

EEA

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

> Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number 52-1257712

Friends of the National Arboretum

01. Form 990 governing body review (Part VI, line 11)

The Form 990 is completed by the outside accountants with the involvement of the Executive

Director and the accountant. After the draft is reviewed by the Executive Director and

accountant, it is presented to and reviewed

by the Finance Committee of the Board, which can approve the Form on behalf of the Board,

or require further adjustments to the Form before formally accepting the Form for

submission to the IRS. Before filing, a copy of the 990 is reviewed by the entire Board of

Directors.

02. Conflict of interest policy compliance (Part VI, line 12c)

All Board members and key employees are asked to review and sign a copy of FONA's conflict

of interest policy annually.

If a potential or actual conflict of interest arises, any conflicted individual is

provided an opportunity to disclose all material facts to the Executive Committee or

governance body assigned with investigating the conflict. The individual does not

participate in the resulting decision-making deliberations.

After receiving information about an actual or potential conflict of interest, the

Executive Committee or other assigned governance body has their responsibility to exercise

due diligence to determine whether FONA can obtain, with reasonable efforts, a more

advantageous transaction or arrangement from a person or entity that would not give rise

to a conflict of interest. If not, the Executive Committee or governance body determines

by a majority vote whether any related transaction or arrangement is in FONA's best

interest, for its own benefit, and whether it is fair and reasonable.

Schedule O (Form 990) 2023	Page 2
Name of the organization	Employer identification number
Friends of the National Arboretum	52-1257712

A written record of the proceedings that identifies the person(s) with the potential or actual conflict of interest, the nature of the conflict itself, the names of the members of the committee present for deliberations, and the date(s) and nature of the discussion and resolution(s) are kept. This record is included in the minutes of the next meeting of the Executive Committee or Board of Directors.

03. CEO, executive director, top management comp (Part VI, line 15a)

The Executive Director is subject to an annual review by the Board Chair on behalf of the

Board. The Board Chair presents the performance review to the full Board in executive

session, and incorporates any comments from the board in the final review. Any adjustments

in compensation are presented and established in the executive session. The Board Chair

reviews performance with the Executive Director orally and in writing.

04. Governing documents, etc, available to public (Part VI, line 19)

FONA's governing documents and conflict of interest policy are provided by the Executive

Director upon request. FONA's audited financial statements, tax return and related

documents are posted on its website, www.fona.org, as well as made available on request.

05. Not undergone required audits or steps for audit (part XII, line 3b)

FONA's Finance Committee is responsible for oversight of the audit, including selection of

the independent accountant. This process has not changed from previous years.

06. List of other fees for services expenses (Part IX, line 11g)

Financial Services: \$13,780

Photography: \$3,144

Grant Writer: \$11,564

Schedule O (Form 990) 2023	Page 2
Name of the organization Friends of the National Arboretum	Employer identification number 52–1257712
Graphics Design: \$7,930	
IT Consultant: \$55,200	
<u>Security:</u> \$29,516	
Professional Fees: \$430,139	
Other: \$2,280	
07. General explanation attachment	
Mission Statement:	
The Friends of the National Arboretum (FONA) is an independent, non-p	
established to enhance, through public and private sector resources,	support for the U.S.
National Arboretum. FONA provides valuable financial and volunteer su	pport, especially for
Arboretum internship programs, maintenance of the gardens and	
collections, youth educational programs, and many other projects.	

Statement of Program Service Accomplishments

Name(s) as shown on return

2023 PG01 Your Social Security Number

52-1257712

Statement #4

Friends of the National Arboretum

Form 990-Part III(a) Statement of Service Accomplishment

Program Service Code	
Program Service Expenses	\$697464
Grants and allocations included in above expense	\$5038
Program Services Revenue	\$0

Explanation

Washington Youth Garden: The Washington Youth Garden serves as the hub for FONA's youth and school outreach programs, targeting Title 1 schools in Wards 5, 7, and 8 of Washington, DC. The mission of our youth programs is to nurture curious minds and healthy bodies by connecting youth to food, the land, and each other. The WYG uniquely combines efficient food production, produce distribution, a welcoming visitor experience focused on children, youth education programs, teacher professional development, and support for school gardens at Title 1 schools. We intentionally orient our education programs and produce distribution to Black, low-income children and youth because of the documented disparities in access to and consumption of fruits and vegetables in the DC region, the location of the garden, and the historic purpose for the space. Over 156 different crops are grown at the WYG. In 2023, we grew and distributed over 8,000 pounds of produce to school families and hunger relief organizations. Name(s) as shown on return

Friends of the National Arboretum

2023 PG01 Your Social Security Number

52-1257712

Statement #4

Form 990-Part III(b) Statement of Service Accomplishment

Program Service Code	
Program Service Expenses	\$506533
Grants and allocations included in above expense	\$39005
Program Services Revenue	\$0

Explanation

Projects and activities: FONA holds numerous temporary and permanently restricted funds given for various purposes to benefit the U.S. National Arboretum. Every year, in consultation with the Arboretum leadership and staff, FONA releases funds from these restricted assets or general operating funds to the Arboretum to achieve a designated purpose. FONA then works with the Arboretum staff, often over a multi-year period, to ensure that the donor's objective for each project or activity is fulfilled in a timely and cost-effective manner. For example, in recent years, FONA has collaborated with the Arboretum on the following projects and activities: -Updating the Arboretum's Master Plan and identifying follow-on campaigns and related activities. -Cleanup and restoration as well as ongoing monitoring of Springhouse Run along with monitoring of Hickey Run, two crucial watercourses that traverse the Arboretum, emptying into the Anacostia River and ultimately into the Chesapeake Bay. -Completion of the Flowering Tree Walk, a universal access walkway providing magnificent views of the Arboretum's great meadow and Capitol Columns. - Preservation and maintenance of the Arboretum's heritage collections, which include the azalea, boxwood, and associated collections; and for general support of all the Arboretum gardens and collections, including funding for interpretive signage. -Funding support for many internships, including: those working in the azalea, boxwood, Asia valley, introduction garden, and other heritage collections and on research. -Luncheon and plant sales as well as promotional support for the annual Lahr Native Plant Symposium. -Curator's wish list, to raise funds and procure plant material specifically selected by the curators of the Arboretum's collections. Evaluating opportunities to support repair of the Capitol Columns and fund their care in perpetuity.

Statement of Program Service Accomplishments

Name(s) as shown on return

Friends of the National Arboretum

2023 PG01 Your Social Security Number

52-1257712

Statement #4

Form 990-Part III(c) Statement of Service Accomplishment

Program Service Code	
Program Service Expenses	\$112882
Grants and allocations included in above expense	\$59567
Program Services Revenue	\$0

Explanation

Membership and outreach: FONA runs an active outreach program designed to broaden and expand the visibility of, and to provide public support for, the Arboretum locally, nationally, and internationally, as well as to increase the Arboretum's visitor base. For example, FONA hosts numerous public programs such as forest bathing, yoga classes, family programs, and community events. FONA also partners with other Arboretum stakeholders, interest groups, and community organizations for the betterment of the Arboretum. FONA staff and board members continually reach out to the media, government officials, community leaders, and industry associations, and maintain ongoing relationships with these and other key decision-makers and influential organizations and citizens. FONA also maintains an active public presence via its website and through social media such as Facebook and Instagram. In addition, FONA runs a membership program to recruit and serve 1,000+ members and supporters each year with member events and activities, volunteer opportunities, a quarterly printed newsletter and weekly enewsletter with updates on Arboretum News, and other member benefits.

ame(s) as shown on return	Federal Supporting Statements	2023 PG01
	the National Arboretum	52-1257712
	Form 990, Part VI, Section C, line 17	Statement #017
tates when	e a copy of this Form 990	
s required	l to be filed:	
District	of Columbia	
Maryland		
Virginia		