Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Department of the Treasury Internal Revenue Service

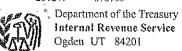
▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A F	or th	e 201	1 calendar year, or tax year beginning 07/01, 2011,	and endin	ıg	(06/30 , 20 12
_			C Name of organization		Ī	D Employer ident	ification number
Bo	heck if a	oplicable:	METROPOLITAN MUSEUM OF ART		1	13-16240	86
	Addre	ess	Doing Business As				
	7	change	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	· ·	E Telephone num	ber
\vdash	+	return	1000 FIFTH AVENUE		- 1	(212) 879-	- 5500
-	7	inated	City or town, state or country, and ZIP + 4	······································	 	(/	
-	Amer		NEW YORK, NY 10028-0198		- 1	G Gross receipts	\$ 1,015,528,923.
\vdash	returi Appli	n cation	F Name and address of principal officer: THOMAS CAMPBELL		TO DESCRIPTION OF THE PARTY OF	H(a) Is this a group r	
L	pend					affiliates?	100 21
			1000 FIFTH AVENUE NEW YORK, NY 10028-0198	1 1		H(b) Are all affiliates	
<u></u>		empt sta		r 527			list. (see instructions)
-			WWW.METMUSEUM.ORG			H(c) Group exemption	
-		of organ	ization: X Corporation Trust Association Other	L Year of	f formatio	on: 1870 M Sta	ate of legal domicile: NY
Pa	irt I	Sur	nmary				
	1		describe the organization's mission or most significant activities:				
ø		THE	MISSION OF THE METROPOLITAN MUSEUM OF ART IS	TO COLLE	ECT,	PRESERVE,	
auc		STUL	Y, EXHIBIT, AND STIMULATE APPRECIATION FOR AN	D ADVANO	CE KN	OWLEDGE	
ern		OF W	ORKS OF ART. SEE SCHEDULE O FOR MORE INFORMA	TION.			
Governance	2	Check	this box 🕨 🔲 if the organization discontinued its operations or disposed	d of more tha	an 25% c	of its net assets.	
≪ಶ	3	Numb	er of voting members of the governing body (Part VI, line 1a)			3	44.
	4		er of independent voting members of the governing body (Part VI, line 1b)				41.
V:E	5		number of individuals employed in calendar year 2011 (Part V, line 2a)				2,363.
Activities	6		number of volunteers (estimate if necessary)				1,259.
•	7a	Total u	unrelated business revenue from Part VIII, column (C), line 12			7:	a 2,188,371.
	1		related business taxable income from Form 990-T, line 34			1	
					<u> </u>	Prior Year	Current Year
	8	Contri	butions and grants (Part VIII, line 1h)		19	2,790,476	. 193,652,342.
Revenue	9		am service revenue (Part VIII, line 2g)			1,769,800	
, e	10	Invoct	ment income (Part VIII, column (A), lines 3, 4, and 7d)			8,721,775	
å						16,765,989	
	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			70,048,040	
	12		revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).		4/	1,459,262	
	13		s and similar amounts paid (Part IX, column (A), lines 1-3)		<u> </u>		1,813,690.
	14		its paid to or for members (Part IX, column (A), line 4)		1.		
es	15		es, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1/	73,305,508	
Expense	16a		sional fundraising fees (Part IX, column (A), line 11e)			344,497	. 332,955.
Εχρ	b		undraising expenses (Part IX, column (D), line 25) \longrightarrow 10,151,124				
_	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		<u></u>	70,247,672	
	18	Total e	expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		34	15,356,939	. 386,224,916.
	19	Reven	ue less expenses. Subtract line 18 from line 12		12	24,691,101	
Sor	20 21 22					ing of Current Yea	
set	20	Total a	assets (Part X, line 16)		3,32	24,866,332	. 3,202,789,465.
t As	21	Total I	iabilities (Part X, line 26)		41	8,074,857	. 489,754,953.
SE E	22	Net as	sets or fund balances. Subtract line 21 from line 20	<i></i> .	2,90	6,791,475.	. 2,713,034,512.
Pa	irt II	Sig	nature Block				
			perjury, I declare that I have examined this return, including accompanying schedules				wledge and belief, it is true,
COL	rect, ar	ia comp	lete. Declaration of preparer (other than officer) is based on all information of which pre	parer nas any	Knowled	ge.	
Sig			Signature of officer			Date	
He	re						
			Type or print name and title				
		Print/	Type preparer's name Preparer's signature	Date		Check if	PTIN
Paid	d	TRAT	/IS L. PATTON			self-employed	P00369623
	parer	Firm's					3-4008324
Use	Only	——	address ► 1301 K. STREET NW, SUITE 800W WASHINGTON, DC 20005-3333				2-414-1000
May	the l	RS disc	this action with the account above above (and instructions)				
ivia	, 1110 1	0131	and the retain that the property enemit above; (occurate actions)				, A les NO

ΤE

131624086



For assistance, call: 1-877-829-5500

Notice Number: CP211A Date: December 3, 2012

Taxpayer Identification Number:

13-1624086 Tax Form: 990

Tax Period: June 30, 2012

METROPOLITAN MUSEUM OF ART 1000 5TH AVE NEW YORK N 10028-0113

010108.132807.0038.001 1 AT 0.374 536

10108

APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED

We received and approved your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above. Your extended due date to file your return is February 15, 2013.

When it's time to file your Form 990, 990-EZ, 990-PF or 1120-POL, you should consider filing electronically. Electronic filing is the fastest, easiest and most accurate way to file your return. For more information, visit the Charities and Nonprofit web at www.irs.gov/eo. This site will provide information about:

- The type of returns that can be filed electronically,
- approved e-File providers, and
- if you are required to file electronically.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top of this letter.

PAGE 2

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Part IV **Checklist of Required Schedules** Yes Nο 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Х 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 X Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II................................ X Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Х 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Χ Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," Х Did the organization, directly or through a related organization, hold assets in temporarily restricted 10 endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 X If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI X b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more Х d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX" 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X X 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f X, 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if Х 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 14a Did the organization maintain an office, employees, or agents outside of the United States?....... b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any 15 organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 15 X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance X 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services 17 17 Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 X Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 Х Χ b if "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

, F,

Checklist of Required Schedules (continued) Part IV No 21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II............ 21 Χ 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Χ Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated 23 Х 24 a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25..... Х 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? X Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?..... X 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 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? Х Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II . 26 X. 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 Х Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV...... X A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Х c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Х 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Х 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 31 X Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 33 Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, 34 34 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Χ b 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 Х Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 Χ Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, 37 X Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 38

the same of	990 (2011)	Par	ge 5
¥8	Statements Regarding Other IRS Filings and Tax Compliance		
	Check if Schedule O contains a response to any question in this Part V	· · · · · · · <u>· · · · · · · · · · · · </u>	
4		AND DESCRIPTION OF THE PARTY OF	No
l d	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	- 1 1	
D C			
ť	Did the organization comply with backup withholding rules for reportable payments to vendors and		
22	reportable gaming (gambling) winnings to prize winners?	1c X	HALOSANI VICE
La	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		
h	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 2,363		
~	if at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b X	OLINE STATE
3 a	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).		
h	Did the organization have unrelated business gross income of \$1,000 or more during the year?		
4 a	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b X	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		
	account)?	1.	
b	account)? If "Yes," enter the name of the foreign country:	4a	X
	See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c	<u>~</u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30	
	organization solicit any contributions that were not tax deductible?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		
	gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		
	and services provided to the payor?	7a X	ANTORPES
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b X	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		
	required to file Form 8282?	7c	Х
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	1 1 1 1	X
Ť	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f :	X
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		
0	organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
10	Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	9b	et inspect
	Indiamatical field and the state of the stat		
h	Groce receipts included as Farm 600 Gardania and Control and Contr		
11	Section 501(c)(12) organizations. Enter:		
		15 1	
	Gross income from members or shareholders		
	agginet amounts due or received from the and	No. of the second	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	40-	
b	If "Yes" enter the amount of tay avament interest remitted as a second discount.	12a	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
а	Is the organization licensed to issue qualified health plans in more than one state?	120	
	Note. See the instructions for additional information the organization must report on Schedule O.	13a	1000
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		
C	Enter the amount of reserves on hand		
142	Did the organization receive any payments for indoor tanning services during the tay year?	14a >	X.
d	13 1997 Has it then a could follow the foot those namented if "No " provide an accusal of the could be a first	14b	
SA		· · · · · · · · · · · · · · · · · · ·	

Form 990 (2011) METROPOLITAN MUSEUM OF ART 13-1624086 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Χl Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... Did the organization become aware during the year of a significant diversion of the organization's assets?.... 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7 a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Χ 8a X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a 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 b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c X Did the organization have a written whistleblower policy?....... 13 Х 13 Did the organization have a written document retention and destruction policy?..... 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ ATTACHMENT 2 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection, indicate how you made these available. Check all that apply. Another's website X Upon request 19

Describe in 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.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► CONTROLLER'S OFFICE 1000 FIFTH AVENUE NEW YORK, NY 18028-0198 (212) 879-5500

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

Check if Schedule O contains a response to any question in this Part VII

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any relat	ed organization compensated any current officer, director, or trustee.
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(A) Name and Title	(B) Average hours per week (describe hours for	box,	unle	Pos heck ss pe	rson	e than o is both	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations in Schedule O)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(VV-27 1039-MISO)	organization and related organizations
(1) GAYLE PERKINS ATKINS										
ELECTIVE TRUSTEE	1.00	X			ļ			0	0	
(2) CANDACE K. BEINECKE										
ELECTIVE TRUSTEE	2.00	X			<u> </u>			0	0	C
(3) LEON D. BLACK	1									
ELECTIVE TRUSTEE	1.00	X						0	0	C
(4) DANIEL BRODSKY		.					•			
ELECTIVE TRUSTEE & CHAIRMAN	5.00	Х	_	Х				0	0	C
(5) RUSSELL L. CARSON ELECTIVE TRUSTEE										
(6) WELLINGTON Z. CHEN	2.00	X						<u> </u>	0	0
ELECTIVE TRUSTEE	1	1,2								
(7) RICHARD L. CHILTON, JR	1.00	X						0	0	0
ELECTIVE TRUSTEE	2.00	х						o	0	0
(8) PAULA CUSSI										
ELECTIVE TRUSTEE	1.00	Х						0	0	0
(9) MARK FISCH										
ELECTIVE TRUSTEE	1.00	Х						0.	0	0
_(10) JEFFREY W. GREENBERG ELECTIVE TRUSTEE	1.00	Х						0	0	0
(11) CONRAD K. HARPER										
ELECTIVE TRUSTEE	1.00	Х						٨	o	. 0
(12) J. TOMILSON HILL				\neg						
ELECTIVE TRUSTEE	1.00	Х		1	ŀ	ļ	ļ	0	ol	0
(13) BONNIE B. HIMMELMAN				\dashv			\neg			
ELECTIVE TRUSTEE	1.00	Х		l				0	0	0
(14) PHILIP H. ISLES				\neg						
ELECTIVE TRUSTEE	1.00	х			J		ļ	٨	0	0

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Part VII Section A. Officers, Directors, Tr (A)							9	1	1	737	
Name and title	(B)				C)			(D)	(E)		(F)
Wallie and tille	Average hours per	(do	not c		sition	e than c	ana	Reportable	Reportable		Estimated
	week					is both		compensation	compensation t	irom	amount of
	(describe					lor/trus		from the	related		other compensation
	hours for	or a	sul	Off	<u>\$</u>	em Tig	Fo	organization	organization (W-2/1099-Mi		from the
	related	d fe	ii.	Officer	eş .	hes	Former	(W-2/1099-MISC)	(77-271000-1911	30)	organization
	organizations	ctor	ion	Ì	[룡	989	"		1	Į	and related
	in Schedule O)	Indivídual trustee or director	at tr		Key employee	dig			}	}	organizations
·		tee	Institutional trustee		"	Highest compensated employee]			
TEN HUMATTOON D. TRANSCO	ļ				_	fed					
15) HAMILTON E. JAMES		ĺ				ĺ				ľ	
ELECTIVE TRUSTEE	1.00	X			<u> </u>		<u> </u>	0		이	(
16) DENIS P. KELLEHER	j	ļ]]					······································
ELECTIVE TRUSTEE	1.00	Х						0		ol	(
17) DAVID H. KOCH		<u> </u>			†			· ·		\dashv	
ELECTIVE TRUSTEE	1.00	x						_		اہ	,
18) SUSANA TORRUELLA LEVAL			 				-	V		_4	(
ELECTIVE TRUSTEE	1 , , , ,	1								-	
	2.00	X	\sqcup		<u> </u>	ļ	_	0		0	(
19) JOYCE FRANK MENSCHEL]						1				
ELECTIVE TRUSTEE	1.00	X						0		ol	(
20) BIJAN MOSSAVAR-RAHMANI	T									- 1	
ELECTIVE TRUSTEE	1.00	Х									
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d Total (add lines 1b and 1c)				•	• •	• • •				—⋠	1,599,694.
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Name and business add	ress							(B) Description of ser	vices	Сс	(C) empensation
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Name and title Authority	Part VII Section A. Officers, Directors, Ti	rustees, Ke	y En	ple	уе	es,	and	Hig	hest Compensat	ed Employees (continued)
Note that Note No	(A) Name and title	Average hours per week	box,	unle	Pos heck ss pe	sition mor erson	e than o is both tor/trus	an tee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
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27] ANNA KINTOUR SECTIVE TRUSTER 1.00 X	Form 990 (2011) Part VII Section A. Officers, Directors, True	ustees. Ke	ev En	ınlo	vee	s.a	nd l	-lin	hest Component	13-1624	Dea
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3) RENEE E. BEJERR ELECTIVE TRUSTEE TIL 09/12 1.00 X 0 0 0 SELE. TRUSTEE & CHAIR TIL 09/11 5.00 X X 0 0 0 BEUC C. RATNER ELECTIVE TRUSTEE & CHAIR TIL 09/11 5.00 X X 0 0 0 SELE. TRUSTEE & CHAIR TIL 09/11 2.00 X 0 0 0 SELE. TRUSTEE & CHAIR TIL 09/11 2.00 X 0 0 0 SELE. TRUSTEE & CHAIR TIL 09/11 2.00 X 0 0 0 0 SELE. TRUSTEE & CHAIR TIL 09/11 2.00 X 0 0 0 0 SELE. TRUSTEE & CHAIR TIL 09/11 2.00 X 0 0 0 0 0 SELE. TRUSTEE & CHAIR TIL 09/11 2.00 X 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		1.00	Х						0	o.	
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ELE. TRUSTEE & CHAIR TIL 09/11 5.00 X X 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ELECTIVE TRUSTEE TIL 09/11	1.00	х						۸		
\$5) BROCE C. RATMER ELECTIVE TRUSTEE TIL 09/11 2.00 X 0 0 0 50 THOMAS P. CAMPBELL DIR 4 CEO. EX-OFFICIO TRUSTEE 35.00 X 805,201. 0 308,38 71 EMILY K. RAFERRY PRESIDENT, EX-OFFICIO TRUSTEE 35.00 X 1,496,732. 0 54,48 1b Sub-total C Total from continuation sheets to Part VII, Section A 1	44) JAMES R. HOUGHTON				\dashv			_		<u> </u>	
ELECTIVE TRUSTEE TIL 09/11 2.00 X 0 0 0 6) THOMAS P. CAMPBELL DIR & CEO, EX-OFFICIO TRUSTEE 35.00 X 805,201. 0 308,38 7) EMILY K. RAFFERTY PRESIDENT, EX-OFFICIO TRUSTEE 35.00 X 1,496,732. 0 54,48 1 Sub-total c Total from continuation sheets to Part VII, Section A 1 1,496,732. 0 54,48 d Total (add lines 1b and 1c) 2.26 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual. 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such individual. Section B. Independent Contractors I Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address Description of services Compensation Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization because of the organization because		5.00	Х		x L				0		
DIR 4 CEO, EX-OFFICIO TRUSTEE 35.00 X 805,201. 0 308,38		2.00	,								
DIR & CEO, EX-OFFICIO TRUSTEE 35.00 X 805,201. 0 308,388 7) EMILY K. RAFFERTY PRESIDENT, EX-OFFICIO TRUSTEE 35.00 X 1,496,732. 0 54,488 1b Sub-total C Total from continuation sheets to Part VII, Section A 1		2.00	X	-		-			0	0	
Settion B. Independent Contractors Independent Contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. Settion B. Independent Contractors (including but not limited to those listed above) who received more than \$100,000 of the calendar year ending with or within the organization's tax year. 1, 496,732.	DIR & CEO, EX-OFFICIO TRUSTEE	35.00			x				805.201		300 30
1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c). 2 Total number of independent contractors (A) Name and business address (A) Name and business address (A) Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 22 (a) 1 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual. 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If Yes," complete Schedule J for such person. 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address (B) (C) Compensation Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶	47) EMILY K. RAFFERTY				<u> </u>			7			300,30
d Total (add lines 1b and 1c). 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 226 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual			!					_	1,496,732.	0	54,48
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 226 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	c Total from continuation sheets to Part VII Se	action A			• •						
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 226 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	d Total (add lines 1b and 1c)										
a Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual. 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual. 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (A) (B) (C) Compensation Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶	2 Total number of individuals (including but not I	îmited to tl	nose l	isted	abo	ove)	who	rec	ceived more than S	3100,000 of	
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedu	er, directo ele J for suc	r, or chindi	trus <i>vidus</i>	tee,	. ke	ey e	mpl	loyee, or highest	compensated	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	4 For any individual listed on line 1a, is the s organization and related organizations gre	um of rep ater than	ortabl	e co	mpi 02	ensa If	ation "Yes	an	d other compens	ation from the	
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Compensation Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization > A (B) (C) Compensation Form 990 (20	5 Did any person listed on line 1a receive or a for services rendered to the organization? If "Ye	acceue cor	nnenc	ation	a fra	nm .	anu	1 1 2 2 4	alatad annulusts		
(A) Name and business address (B) Description of services (C) Compensation Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization A 1085 2.000 065710 2536 1/8/2013 10:55553 7M W 13.564	Section B. independent Contractors										
Name and business address Description of services Compensation Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization And the services of the se	compensation nom the organization. Report co	pensated in ompensation	ndepe	nden the c	t co cale:	ntra nda:	actor r yea	s th rer	nat received more nding with or withi	than \$100,000 of n the organization	's tax
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1055 2.000 0 65710 2536 1/8/2013 10.555.52 7M V 13.6.4	2 Total number of independent contractors (independent contractors (independent than \$100,000 in compensation from the	cluding but	not	limit	ed	to t	hose	lis	ted above) who r	eceived	
065710 2536 1/8/2013 10.55.52 nm t/ 13 C /	SA	organizati	on ≱ ≻	····							146
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	Name and title	(B)				C)			(D)	(E		(F)
	Name and the	Average hours per	(do r	not cl		ition mor	e than	ากค	Reportable	Repor		Estimated
		week					is both		compensation from	compensa		amount of other
		(describe			dad		or/trus		the	relat organiz		compensation
		hours for	e e	suj	Off	6	en G	Fo	organization	(W-2/109		from the
		related	di Nd	2	Officer	<u>ē</u>	plo	Forme	(W-2/1099-MISC)	111 100	J-141100)	organization
		organizations	C S	ion	ľ	ğ	yee	٦	,			and related
		in Schedule O)	Individual trustee or director	al tr		Key employee	ğ				1	organizations
		,	tee	Institutional trustee		10	ens					
		<u> </u>		ě			Highest compensated employee					
(-	48) CARRIE R. BARRATT					-		ļ				
-	ASSOC DIR COLLECTIONS/ADMIN.	35.00						i	0.50 0.5		_	
ζ.	19) JENNIFER RUSSELL	33,00			Х	<u> </u>		<u> </u>	268,365.		0	53,626.
		25.50				Ì			***			
, .	ASSOC DIRECTOR OF EXHIBITIONS	35.00			Х			<u> </u>	309,852.		0	36,355.
ι.	50) SHARON H. COTT	ļ										
. :	SR VP, SEC & GEN COUNSEL	35.00			X	<u>L</u> .	[399,968.		0	53,471.
(51) HAROLD HOLZER											
	SR VP, FOR EXTERNAL AFFAIRS	35.00			Х	ĺ			410,226.		o	53,863.
({	52) OLENA M. PASLAWSKY											
	SR VP, CFO & TREASURER	35.00			Х				424,198.		٨	TOO CA
({	33) NINA MCN DIEFENBACH					-			124,130.			43,091.
•	VP DEVELOPMENT & MEMBERSHIP	35.00			Х				256 222			
1	54) TOM JAVITZ	33.00			Δ				356,239.		0	54,099.
` :	VP CONSTRUCTION	25 20									j	
, ;		35.00			Х				305,141.		0	53,745.
, ;	55) BRADLEY L. KAUFFMAN							Ì				
, :	VP & GEN MGR MERCH & RETAIL	35.00			Χ				602,312.		o	37,150.
(;	66) DEBRA A. MCDOWELL											
_	VP FOR HUMAN RESOURCES	35.00			Х				276,832.		o	42,826.
	7) ELYSE TOPALIAN									······································		
	VP OF COMMUNICATIONS	35.00			х				250,799.		٨	10 107
	8) SUZANNE E. BRENNER								200,755.			48,487.
_	CHIEF INVESTMENT OFFICER	35.00			Х				000 050		_	
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	1b Sub-total					* *		Þ				
	o force from continuation sheets to part vii, 50	ECTION A										
-	d Total (add lines 1b and 1c)	* * X * * *	K E Y .					•				
	2 Total number of individuals (including but not lead to reportable compensation from the organization	imited to the			d at	oove) who	o re	ceived more than t	\$100,000	of	
_	reportable compensation from the organization))	226						····			
												Yes No
	3 Did the organization list any former office	er, directo	r, or	tru	stee	e, i	cey e	mp	loyee, or highest	compens	sated	
	employee on line 1a? If "Yes," complete Schedu	ile J for suc	h indi	vidu	al,							3 X
	4 For any individual listed on line 1a, is the s	um of ren	ortabl	مما	റമ്പ	nan	ention		d other community			
	organization and related organizations gre	eater than	\$15	n ni	ህ።። ጎብን	⊪ Դ⇔ն	581101 ~^V~	າ ສະ " ,	id other compens	ation from	the	
	individual						169	, (ompiata Scriedul	e u for	sucn	4 17
	5 Did any person listed on line 1a receive or	accrise cor	nnane	· · ·	n f	***						4 X
	for services rendered to the organization? If "Ye	s " complet	a Sch	edir.	iii i Io I	for	any	บกก	elated organizatio	n or indiv	idual	Samuel Control
-	Section B. Independent Contractors	o, complet	0 0011	GGG	0 0	ini	Suon	06/3	sun ,	* * * * 1	• • •	5 X
	1 Complete this table for your five highest comp	annested in	done									
	compensation from the organization. Report of	omnanestic	idepe	nae tho	ni c	cont	racto	S	nat received more	than \$100	J,000 of	f
	year.	ompenaanc) I (O)	E116	udi	enu	at yea	ar e	liding with or with	in the orga	anization	i's tax
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	(A)								(B)			(C)
_	Name and business adde	ress							Description of ser	vices	Ç	ompensation
	and the same of th											
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-								<u> </u>				
-	2 Total number of independent contractors (in	cluding but	t not	lim	iten	fo	than	<u> </u>	tod about all			
	more than \$100,000 in compensation from the	organizati	ciiuit on 🌬	mtt!	ica	ιο	u(US6	≓ IIS	red above) who i	received		
J8	A 1055 2.000								······			
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(A) Name and title	ŧ	1					9	hest Compensat	on minimoyodo (continuea)
	(B) Average			(C Posi	•			(D) Reportable	(E)	(F)
	hours per	(do r				than c	ne	compensation	Reportable compensation from	Estimated amount of
	week					is both or/trust		from	related	other
	(describe hours for				~~~~	~~~		the	organizations	compensation from the
	related	divid	stitu	Officer	Key employee	ghe	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
	organizations in Schedule	Ct a	tiona		oldu	st co yee		,,		and related
	O)	Individual trustee or director	al to		yee	duc				organizations
		66	Institutional trustee			Highest compensated employee				
59) LAUREN A. MESERVE				-		۵.				
DEPUTY CHIEF INVSTMT OFFICER	35.00					Х		721,558.	(242,40
60) GEORGE GOLDNER	1									
DRUE HEINZ CHAIRMAN	35.00		Ш.			Χ		314,420.		53,68
61) GARY TINTEROW	_	l								
ENGLEHARD CHARIMAN	35.00					X		301,886.	(52,98
62) LAWRENCE BECKER										
SHERMAN FAIR.CURATOR-IN-CHARGE	35.00	ļ				Х		294,050.	(53,62
53) KEN M. WEINSTEIN	4			l]		
GEN MGR MERCH FIN, OPERS & SYS	35.00		_	_		Х		283,386.	(53,35
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1h Sub-total	.1	L								
1b Sub-total continuation sheets to Part VII, S	Rootion A		. ,							<u> </u>
d Total (add lines 1b and 1c)	Jection A ,			• •	* •	* *				
2 Total number of individuals (including but not	limited to the	hose i	isted	l ab	ove) who	re	ceived more than 9	100 000 of	
reportable compensation from the organization	n 🟲	226								
3 Did the organization list any former office	aar diraafa		****	_ +	. 1.					Yes N
employee on line 1a? If "Yes," complete Sched	iule J for suc	h ind	aru: Vidu	al.	ء, ہ ^م	ey e	mh	loyee, or nignest	compensated	3
4 For any individual listed on line 1a, is the										3 / /
organization and related organizations gr	eater than	\$15	0.00	00?	- If	"Yes.	" 0	complete Scheduli	a I for each	
Individual									* * * * * * *	4 X
5 Did any person listed on line 1a receive or	accrue cor	nnen	atio	n fr	nn	anv	Line	elated organizatio	a ar individual	
Fare and the annual control to the control of the c	'es " comolei	e Scn	edul	e J	for.	such _I	oers	son , , , , , , ,	* * * * * * * *	5 >
for services rendered to the organization? If "Y	co, compre									
for services rendered to the organization? If "Y Section B. Independent Contractors				- 4	1					
for services rendered to the organization? If "Y Section B. Independent Contractors Complete this table for your five highest con	pensated in	ndepe	nder	nt c	onti	ractor ar vea	s th	nat received more	than \$100,000 o	of n's tav
for services rendered to the organization? If "Y Section B. Independent Contractors	pensated in	ndepe	nder	nt c	onti	ractor ar yea	s th	nat received more nding with or withi	than \$100,000 on the organization	of n's tax
for services rendered to the organization? If "Y Section B. Independent Contractors 1 Complete this table for your five highest con compensation from the organization. Report of year. (A)	pensated in compensation	ndepe	nder	nt c	ont end	ractor ar yea	s th	nat received more nding with or withi (B)	than \$100,000 on the organization	of n's tax (C)
for services rendered to the organization? If "Y Section B. Independent Contractors 1 Complete this table for your five highest con compensation from the organization. Report of year.	pensated in compensation	ndepe	nder	nt c	ont end	ractor ar yea	s th	nding with or withi	n the organizatio	n's tax
for services rendered to the organization? If "Y Section B. Independent Contractors 1 Complete this table for your five highest con compensation from the organization. Report of year. (A)	pensated in compensation	ndepe	nder	nt c	ont	actor ar yea	s ti	nding with or withi	n the organizatio	n's tax (C)
for services rendered to the organization? If "Y Section B. Independent Contractors 1 Complete this table for your five highest con compensation from the organization. Report of year. (A)	pensated in compensation	ndepe	nder	nt c	onti	ractor ar yea	s th	nding with or withi	n the organizatio	n's tax (C)
for services rendered to the organization? If "Y Section B. Independent Contractors 1 Complete this table for your five highest con compensation from the organization. Report of year. (A)	pensated in compensation	ndepe	nder	nt c	onti end	ractor ar yea	s ti	nding with or withi	n the organizatio	n's tax (C)
for services rendered to the organization? If "Y Section B. Independent Contractors 1 Complete this table for your five highest con compensation from the organization. Report of year. (A) Name and business ad	npensated ir compensatio	ndepe on for	nder	cale	end	ar yea	rei	nding with or withi (B) Description of ser	n the organization	n's tax (C)
for services rendered to the organization? If "Y Section B. Independent Contractors 1 Complete this table for your five highest con compensation from the organization. Report of year. (A) Name and business ad 2 Total number of independent contractors (in more than \$100,000 in compensation from the	npensated in compensation dress	ndepe on for	nder the	cale	end	ar yea	rei	nding with or withi (B) Description of ser	n the organization	n's tax (C)
for services rendered to the organization? If "Y Section B. Independent Contractors 1 Complete this table for your five highest con compensation from the organization. Report of year. (A) Name and business ad 2 Total number of independent contractors (in	npensated in compensation dress	ndepe on for	nder the	cale	end	ar yea	rei	nding with or withi (B) Description of ser	n the organization	n's tax (C)

	Statement of Reve	nue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from under section 512, 513, or
1a b c d e f	Federated campaigns	<u>1a</u>					
b	Membership dues	1b	26,977,308.		\$4.000 a.c.		
c	V		16,525,916.				
d	Related organizations	1d		and the state of		Section 1	
e	Government grants (contribu	, , , , , , , ,	27,108,283.		10000000		
f	gitte, gitte,	1 1		10.000000000000000000000000000000000000			
) 	and similar amounts not include		123,040,835.	-			
g h	Noncash contributions included						
 	Total. Add lines 1a-1f	* * * * * * * * *	Business Code	193,652,342.		8 4 4 5 6 6 6 6 6	
1	CENTERAL PROPERTY COMPA						
2a b			532000	19,462,890.	19,297,593.	165,297.	
6			532000	21,970,	470.	21,500.	
d							
, a	····						
f	All other program service rev	Venue					
g	Total. Add lines 2a-2f			19,484,860.			
3	Investment income (includin			19,484,860.			
	other similar amounts)			28,489,752.			
4	Income from investment of					-1,059,866.	29,549,
5	Royalties	, ,					
	,	(i) Real	(ii) Personal				210,
6a	Gross rents						
b	Less: rental expenses	1			0.0000000000000000000000000000000000000		
c	Rental income or (loss)		***************************************				
d	Net rental income or (loss) -			0			
7 a		(i) Securities	(ii) Other				
'-	assets other than inventory	681,374,285.					
b	Less: cost or other basis						
	and sales expenses	572,047,771.					100
С	Gain or (loss)	109,326,514.					
d	Net gain or (loss)		<u></u>	109,326,514.		***************************************	109,326,
8a	Gross income from fundra	aísing					100,020,
	events (not including \$16	,525,916.					
	of contributions reported on	line 1c).					
	See Part IV, line 18	a	574,890.				
b	Less: direct expenses	b	3,650,800.				
c	Net income or (loss) from fur			-3,075,910.			-3,075,
9 a	Gross income from gaming a	activities.					
	See Part IV, line 19						
b	Less: direct expenses						
С	Net income or (loss) from ga		· · · · · . >	0			
10a		ory, less					
	returns and allowances		72,094,810.		40.00	200	
b	Less: cost of goods sold	b		The second			
<u> </u>	Net income or (loss) from sal Miscellaneous Reven	es of inventory		43,660,523.	42,028,791.	1,631,732.	
		ue	Business Code		100		
11a	RESTAURANT		812930	21,403,280.			21,403,2
	PARKING GARAGE		812930	2,800,917.			2,800,9
b			res too	2 262 420	027 76		
С	CORPORATE EVENTS		561499	2,367,429.	937,721.	1,429,708.	
	All other revenue	'	900099	377,819.	377,819.	1,429,708.	

JSA 1E1051 1.000

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do	Check if Schedule O contains a respond include amounts reported on lines 6b,	(A)	(B)	(C)	
7b	, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States. See Part IV, line 22,	1,658,248.	1,658,248.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	155,442.	155,442.		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	6,723,530.	5,057,814.	1,325,501.	340,21
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	119,025,200.	105,041,548.	9,157,105.	4,826,54
8	Pension plan accruals and contributions (include section				***************************************
	401(k) and 403(b) employer contributions)	15,132,912.	12,910,931.	1,746,279.	475,70
9	Other employee benefits	27,439,769.	24,002,192.	2,687,342.	750,23
0	Payroll taxes	9,809,686.	8,254,589.	1,224,940.	330,15
1	Fees for services (non-employees):				
	Management , , , , , , , , , , , , , , , , , , ,	0			
	Legal	1,812,327.	115,387.	1,696,940.	
	Accounting	544,500.		544,500.	
	Lobbying	254,258.	254,258.		
	Professional fundraising services. See Part IV, line 17	332,955.			332,95
	Investment management fees	12,357,936.		12,357,936.	
	Other	10,089,344.	6,451,031.	3,490,489.	147,82
2 3	Advertising and promotion	3,281,818.	2,869,040.	34,719.	378,05
	Office expenses	37,144,264.	34,178,453.	1,740,210.	1,225,60
‡ =	Information technology	1,158,041.	590,892.	556,045.	11,10
5 5	Royalties	0 E E C 2 3 3 C			···
	Occupancy ,	5,563,736.	5,534,446.	28,689.	60
	Travel	2,785,237.	2,587,409.	133,212.	64,61
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials Conferences, conventions, and meetings	231,987.	204 50-		
	Interest	4,566,880.	104,781.	121,380.	5,82
	Payments to affiliates	4,360,000.	4,302,921.	63,959.	
	Depreciation, depletion, and amortization	46,820,086.	45,200,282.	3 475 730	
	Insurance	1,825,125.	1,210,121.	1,475,718.	144,08
	Other expenses itemize expenses not covered	2,020,120.	1,210,121.	614,916.	8
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				and state of the same
	(A) amount, list line 24e expenses on Schedule ().				estados a estado
	PURCHASES OF ART	38,853,776.	38,853,776.		
	RESTAURANT SERVICES & SUPPLI	17,565,519.			
_	REPAIRS & MAINTENANCE	11,683,932.	17,565,519.	300 3 70	
	CATERING SERVICES	3,055,317.	11,382,273.	129,152.	172,50
	All other expenses	6,353,091.	1,921,328.	319,580.	814,409
- i	Total functional expenses. Add lines 1 through 24e	386,224,916.	6,096,307.	126,192.	130,592
3 .	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	500,223,910.	336,498,988.	39,574,804.	10,151,124
- f	fundraising solicitation. Check here ☐ If following SOP 98-2 (ASC 958-720)	0			

P	rt X	Balance Sheet			Page 11
	т .		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	2,031,723.	1	2,307,053.
	2	Savings and temporary cash investments	0	2	(
	3	Pledges and grants receivable, net	107,833,829.	3	93,674,261.
	4	Accounts receivable, net	17,720,247.	4	16,577,514.
	5	employees, and highest compensated employees. Complete Part II of			
vs	6	Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions)	0	5	
ssets	7	Notes and loans receivable, net	0		
Ąŝ	8	Inventories for sale or use	14,475,878.		14,888,799.
-	9	Prepaid expenses and deferred charges	7,408,866.		8,170,632.
	10a	Land, buildings, and equipment: cost or		25,000	0,2.0,03.
		other basis. Complete Part VI of Schedule D 10a 971,514,660.			
	b	Less: accumulated depreciation	427,038,517.	100	422,646,649.
	11	Investments - publicly traded securities	1,804,332,914.		1,683,249,711.
	12	Investments - other securities. See Part IV, line 11	892,416,903.		895,657,354.
	13	Investments - program-related. See Part IV, line 11	0	13	050,001,554,
	14	Intangible assets		14	<u> </u>
	15	Other assets. See Part IV, line 11	51,607,455.		65,617,492.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,324,866,332.	16	3,202,789,465.
	17	Accounts payable and accrued expenses	177,409,200.	17	231,381,271.
	18	Grants payable		18	231,301,2/1.
	19	Deferred revenue	5,616,656.		7,558,498.
	20	Tax-exempt bond liabilities	173,485,962.	20	
(f)	21	Escrow or custodial account liability. Complete Part IV of Schedule D	110,400,302.	21	194,080,665.
itie	22	Payables to current and former officers, directors, trustees, key		41	U PROGRESSION PROG
Liabi	21 22	employees, highest compensated employees, and disqualified persons.			
	23	Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties		22	- 0
,	24	Unsecured notes and loans payable to unrelated third parties	45,330,000.	23	35,886,000.
	25	Other liabilities (including federal income tax, payables to related third	U	24	0
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	16,233,039.	25	20,848,519.
	26	Total liabilities. Add lines 17 through 25.	418,074,857.	26	489,754,953.
Fund Balances		Organizations that follow SFAS 117, check here X and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	836,313,194.	27	699,987,338.
Ba	28	remporarily restricted fiet assets	1,249,610,968.	28	1,181,481,693.
pu	29	Permanently restricted net assets	820,867,313.	29	831,565,481.
or Fu		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
\$	30	Capital stock or trust principal, or current funds		30	
Assets or	31	raid-iii di capital surplus, or land, building, or equipment fund		31	
¥	32	Retained earnings, endowment, accumulated income, or other funds		31	·
Net	33		2,906,791,475.		2 712 024 510
- 1		Total liabilisian and not produce and but		33	2,713,034,512.
			3,324,866,332.	34	3,202,789,465.

-	m 990 (2011)				Pa	ge 12
P	Art XI Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI	• •				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4	118,6	97,	665.
2	Total expenses (must equal Part IX, column (A), line 25)	2	- 5	86,2	24,	916.
3	Revenue less expenses. Subtract line 2 from line 1 ,	3	******	32,4	72,	749.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,9	06,7	91,	175.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-2	26,2	29,	712.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,					
	column (B))	6	2 2	13,0		- 1 0
	Check if Schedule O contains a response to any question in this Part XII			• • • •	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					Malach
	If the organization changed its method of accounting from a prior year or checked "Other," ex	olain	i (n			
	Schedule O,				943419160 1111	
2a	The state of a state of the sta			2a		Х
b	Were the organization's financial statements audited by an independent accountant?		• • •	2b	Х	
C	If Yes to line 2a or 2b, does the organization have a committee that assumes responsibility for o	vers	ìght			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant	t?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plair	ı in			
٦						
u	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the ye issued on a separate basis, consolidated basis, or both:	ar w	ere			
	X Separate basis Consolidated basis Both consolidated and separate basis					
3a						rii ii
	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	torti	ı in			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under		 	3 a	X	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	rgo	me	3 b	٧,	İ
*****	7 Taxabas a site account any steps taken to undergo such addits			J DU	Х	I

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

OMB No. 1545-0047

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions,

Open to Public Inspection

Name of the organization Employer identification number METROPOLITAN MUSEUM OF ART 13-1624086 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi), (Complete Part II.) 9 An organization that normally receives: (1) more than 331/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 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 that describes the type of supporting organization and complete lines 11e through 11h. a Type I Type II c Type III - Functionally integrated d Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting f organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the a following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) No and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (III) Type of organization (IV) is the ganization in (v) Did you notify (vi) is the (viii) Amount of organization (described on lines 1-9 organization in col. (i) listed in the organization organization in above or IRC section in col. (i) of col. (i) organized your governing (see instructions)) your support? in the U.S.? document? Yes Yes No Yes No (A) (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2011

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	202,625,071.	159,035,838.	153,972,180.	192,790,476.	193,652,342.	902,075,907.	
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	14,583,235.	15,823,383.	13,738,289.	15,369,185.	16,151,301.	75,665,393.	
4	Total. Add lines 1 through 3	217,208,306.	174,859,221.	167,710,469.	208,159,661.	209,803,643.	977,741,300.	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
Sec	Public support. Subtract line 5 from line 4. tion B. Total Support						977,741,300.	
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(a) 2000	(8.0040			
7	Amounts from line 4			(c) 2009	(d) 2010	(e) 2011	(f) Total	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	237,208,306. 45,044,372.	174,859,221. 29,463,640.	167,710,469. 29,308,975.	208,159,661. 38,736,504.	29,759,757.	977,741,300. 172,313,248.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on	7,847,634.					7,847,634.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
11	Total support. Add lines 7 through 10			100			1,157,902,182.	
12	Gross receipts from related activities, etc. (s	see instructions) .				12	418,206,459.	
13	First five years. If the Form 990 is f organization, check this box and stop here	or the organizat	ion's first, secon	d third fourth	or fifth tax yes	ar as a section	E04(a)(3)	
Sec	tion C. Computation of Public Sup	port Percenta	ge					
14	Public support percentage for 2011 (li	ne 6, column (f)	divided by line	11, column (f))		14	84.44%	
15	Public support percentage from 2010	Schedule A, Pa	rt II, line 14		* * * * * * * *	15	78.61%	
16a	331/3% support test - 2011. If the o	rganization did	not check the	box on line 13,	and line 14 is	331/3 % or mor	e, check	
b	331/3% support test - 2010. If the o	rganization did	not check a be	ox on line 13 o	r 16a, and line	15 is 331/3%	or more.	
	check this box and stop here. The orga	anization qualifie	es as a publicly :	supported organ	nization .		.	
	check this box and stop here. The organization qualifies as a publicly supported organization. 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. b 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line							
18	Explain in Part IV how the organization supported organization Private foundation. If the organization	nization meets on meets the "f	the "facts-and acts-and-circum 	l-circumstances" stances" test. 1 	test, check the creation the organization or 17b, check	is box and sto qualifies as a	pp here. publicly	
········	instructions . , ,		* * * * * * * * * *		* * * * * * * * * *		> 🔲	

Schedule A (Form 990 or 990-EZ) 2011

Page 3

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

(Complete only if you checked the box on line 9 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.)

	endar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Tota
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities				 		
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3		 	<u> </u>		ļ	
	received from other than disqualified				·		
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
8 8	Add lines 7a and 7b	Shiften Shire and also a state.	vi 171. Sisso sistema e a distrib				·
	Public support (Subtract line 7c from						
202	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(e) 2007	T #\ 2000	1 (1000	T		
9		(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Tota
	Amounts from line 6						·
	payments received on securities loans,		ļ			1	
	rents, royalties and income from similar		**************************************	-		******	
	sources						
Þ	Unrelated business taxable income (less						
	section 511 taxes) from businesses					ĺ	
	acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b.		***************************************				
	Whather or not the hydrones is well-the					,	
	whether or not the business is regularly carried on		1				
12	carried on			<u> </u>			
12	Carried on						
	Carried on						
	Carried on						
	carried on						
13	carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.)	the organization	n's first second	shind fourth			
13	Carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for	the organizatio	n's first, second,	third, fourth, or	fifth tax year as	a section 501(c	e)(3)
13	carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here.			third, fourth, or	fifth tax year as	a section 501(c	s)(3)
13 14 Sect	carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here.	oort Percent	age	* * * * * * * * *	* * * 4 5 * * * * *		e)(3) ▶
13 14 Sect	carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here. tion C. Computation of Public Suppublic support percentage for 2011 (line 8,	oort Percent	age ed by line 13, colu	mn (f))		15	©)(3) ▶
13 14 Sect 5	Carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here.tion C. Computation of Public Suppersubic support percentage for 2011 (line 8, Public support percentage from 2010 Sched	port Percent column (f) divíd lule A, Part III, lii	age ed by line 13, colume 15	mn (f))			s)(3) .
id Sect	carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here.tion C. Computation of Public Suppublic support percentage for 2011 (line 8, Public support percentage from 2010 Schection D. Computation of Investment	port Percent column (f) divid dule A, Part III, lii t Income Per	age ed by line 13, colume 15	mn (f))		15	s)(3) .
13 6ect 6 6ect	Carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here.tion C. Computation of Public Suppublic support percentage for 2011 (line 8, Public support percentage from 2010 Scheetion D. Computation of Investment Investment income percentage for 2011 (line)	port Percent column (f) divid dule A, Part III, fin t Income Per e 10c, column (age ed by line 13, colume 15 centage (f) divided by line	mn (f))		15	s)(3) .
13 6ect 6 6ect 7	Carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here. Ition C. Computation of Public Superpublic support percentage for 2011 (line 8, Public support percentage from 2010 Scheet ion D. Computation of Investment Investment income percentage from 2011 (line Investment income percentage from 2010 Scheet Investment income percentage from 2010 Scheet Investment income percentage from 2010 Scheet Investment income percentage from 2010 Scheet Investment income percentage from 2010 Scheet Investment income percentage from 2010 Scheet Investment income percentage from 2010 Scheet Investment income percentage from 2010 Scheet Investment income percentage from 2010 Scheet Investment Income percentage from 2010 Scheet Investment Income percentage from 2010 Scheet Investment Income percentage from 2010 Scheet Investment Income percentage from 2010 Scheet Investment Income percentage from 2010 Scheet Investment Income percentage from 2010 Scheet Investment Income Investment Investment Income Investment Investment Investment Income Investment I	column (f) divid dule A, Part III, fin t Income Per e 10c, column (chedule A, Part	age ed by line 13, colume 15	mn (f))		15 16 17 18	
13 14 5 6 6 iect 7 8	Carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for organization, check this box and stop here. Ition C. Computation of Public Supple Public support percentage for 2011 (line 8, Public support percentage from 2010 Scheetion D. Computation of Investment Investment income percentage from 2010 S 331/3% support tests - 2011. If the org	court Percent column (f) divid dule A, Part III, lil t Income Per e 10c, column (chedule A, Part anization did n	age ed by line 13, colume 15	mn (f))	l line 15 is more	15 16 17 18 than 331/3% a	ad line
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Schedule A (Form 990 or 990-EZ) 2011

Page 4

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ➤ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶ See separate instructions. If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) or	ganizations: Complete Part III.						
Nam	e of organization			Employer ident	ification number			
MET	ROPOLITAN MUSEUM OF	ART		13-16	24086			
Pa	it I-A Complete if the c	organization is exempt under	section 501(c) or	is a section 527 organ	nization			
1	Provide a description of the	organization's direct and indirect	political campaign a	ctivities in Part IV				
2	Political expenditures	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		▶ \$				
3	Volunteer hours	9 ₁ * * * # * * * * * * * * * * * * * * *	* * * * * * * * * * * * * *					
	t I-B Complete if the c	organization is exempt under s	section 501(c)(3).					
1	Enter the amount of any ex	cise tax incurred by the organization	on under section 495	i5 ▶ \$				
2	Enter the amount of any ex	cise tax incurred by organization m	nanagers under sect	ion 4955 🕨 \$				
3	If the organization incurred	a section 4955 tax, did it file Form	4720 for this year?	* * * * * * * * * * * * * * * *	Yes No			
4a h	Was a correction made? . If "Yes," describe in Part IV.				Yes No			
1		organization is exempt under	section 501(c), ex	cept section 501(c)(3).			
4.	activities	expended by the filing organization	n for section 527 e	xempt function				
2	Enter the amount of the fili		* * * * * * * * * * * * * * * * * * *	• \$				
	527 exempt function activiti	ies	u to other organizat	ions for section				
3	527 exempt function activities							
	line 17b							
4	Did the filing organization file Form 1120-POL for this year?							
5	Enter the names, addresses	and employer identification numb	per (EIN) of all section	nn 527 nolitical organiz	ations to which the filling			
	organization made payment	is. Hor each organization listed, er	iter the amount nai	d from the filing organi-	zation's funds. Also anto-			
	me amount or hourical cou.	tributions received that were pron	nptly and directly de	livered to a senarate no	alitical organization nuch			
	as a separate segregated fu	nd or a political action committee	(PAC). If additional	space is needed, provide	information in Part IV.			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political			
				filing organization's	contributions received and			
				funds. If none, enter -0	promptly and directly delivered to a separate			
		71			political organization, If			
4.					none, enter -0			
1)			_					
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2)			-					
3)								
•,		<u></u>	-					
4)								
,			1					
5)								
			1					
6)								
					•			
or Pa	sperwork Reduction Act Notice and	the instructions for Form 808 as 000 E7						

Schedule C (Form 990 or 990-EZ) 2011

JSA 1E1264 1.000

Scf	o sedule C (Form 990 or 990-EZ) 2011	METROPOLITAN I	MUSEUM OF ART		13-	1624086 Page
P	art II-A Complete if the c section 501(h)).	organization is exer	npt under section	n 501(c)(3) and f		
Α	Check ▶ if the filing org	ganization belongs t	o an affiliated grou	p (and list in Part	IV each affiliated o	Troup memberie
	name, address	s, EIN, expenses, and	share of excess I	obbying expendit	urae)	group member s
В	Check ▶ if the filing org	ganization checked	box A and "limited	control" provision	ns apply	
	Lim	its on Lobbying Exper	nditures			4 > 4 > 4 > 4 > 4 > 4 > 4 > 4 > 4 > 4 >
	(The term "expen	ditures" means amou	ints paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a	Total lobbying expenditures t	o influence public opin	ion (grass roots lob)	ovina)	16,358.	3
b		o influence a legislativ	e body (direct lobby	ina)	237,900.	
C		add lines 1a and 1b)			254,258.	
d	Other exempt purpose expen	nditures			375,819,534.	
е	Total exempt purpose expend	ditures (add lines 1c ar	nd 1d)	• • • • • • • •	376,073,792.	
f	Lobbying nontaxable amount	. Enter the amount fro	m the following table	in hoth	0,0,0,0,0,0	
	columns.		The following table	,	1,000,000.	
	If the amount on line 1e, column	(a) or (b) is: The lobbying	ng nontaxable amount	is:		
	Not over \$500,000		amount on line 1e.	<u></u>		
	Over \$500,000 but not over \$1,0		lus 15% of the excess	nver \$500 000		
	Over \$1,000,000 but not over \$1		lus 10% of the excess			
	Over \$1,500,000 but not over \$1	······································	lus 5% of the excess of			
	Over \$17,000,000	\$1,000,000		7-67 \$1,000,000.		
g	Grassroots nontaxable amou				250,000.	
h	Subtract line 1g from line 1a.	If zero or less, enter -0		· · · · · · · · · · · · · · · · · · ·	200,000:	
i	Subtract line 1f from line 1c.	If zero or less, enter -0-	· • • • • • • • • • • • • • • • • • • •		0	
j	If there is an amount other th	an zero on either line	1h or line 1i, did the	organization file F		
	reporting section 4911 tax for	this year?			31111 41 <u>20</u>	Yes No
					* * * * * * * * * * * * *	I les No
	(\$ama augusti	4-Year Aver	aging Period Under	Section 501(h)		
	(Some organiz	ations that made a se	ection 501(h) election	on do not have to	complete all of the fi	ve ·
		lumns below. See the	instructions for iin	es 2a through 2f o	on page 4.)	
		Lobbying Expe	nditures During 4-Y	ear Averaging Perio	od	
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total

	Lobbying Expen	ditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2 a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
c Total lobbying expenditures	288,833.	249,958.	248,736.	254,258	1,041,785.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	15,129.	15,676.	15,615.	16,358.	62,778.

Schedule C (Form 990 or 990-EZ) 2011

b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or se 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or se 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Carryover from last year	
1 During the year, did the filling organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: 1 Volunteers? 2 Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 3 Mailings to members, legislators, or the public? 4 Publications, or published or broadcast statements? 5 Grants to other organizations for lobbying purposes? 9 Direct contact with legislators, their staffs, government officials, or a legislative body? 1 Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? 1 Other activities? 1 Total. Add lines 1c through 1i 2 Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? 3 b If "Yes," enter the amount of any tax incurred under section 4912 4 If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? 2 Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or se 501(c)(6). 3 Were substantially all (90% or more) dues received nondeductible by members? 5 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 5 Did the organization agree to carry over lobbying and political expenditures from the prior year? 4 Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or se 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	section
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Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total. Add lines to through 1i a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or se 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or se 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. b Carryover from last year	
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 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year 	rt III-A, line 3, is
political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year	1
a Current year	
Surjoid non astyda	2a
c Total	2b
***************************************	2c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	2.053.00 2.053.00
excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying	
5 Tayable amount of to bhying and notifical arranditures (as the first arrange)	4
Part IV Supplemental Information	5
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; a 1. Also, complete this part for any additional information.	; and Part II-B, line

Page 4

Schedule C (Form 990 or 990-EZ) 2011

Part IV Supplemental Information (continued)

JSA

SCHEDULE D (Form 990)

Supplemental Financial Statements

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection Employer identification number

OMB No. 1545-0047

METROPOLITAN MUSEUM OF ART 13-1624086 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year)..... 3 Aggregate value at end of year....... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Number of conservation easements on a certified historic structure included in (a) C Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ _____ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? in Part XIV, 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" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: For Paperwork Reduction Act Notice, see the Instructions for Form 990.

1E1268 1,000

Schedule D (Form 990) 2011

Pε	rt III — Organizations Maintain	ing Collections of	Art, Historic	al Treasure	s, or	Other	Similar Ass	ets (contir	nued)
3							· · · · · · · · · · · · · · · · · · ·		···
3	Using the organization's acquisition collection items (check all that app	on, accession, and	other records,	check any	of the	follow	ing that are	a significar	it use of its
a	<u> </u>		, []		,				
b			d X	Loan or ex	kchan	ge prog	rams		
c		enerations	e	Other					
4	Provide a description of the orga		e and evoluin	have thou for	rábaa	+tn =	monto alla orti		
	XIV.		a and explain	now mey ru	HE	me org	anizations e	xempt purt	ose in Part
5	During the year, did the organization	on solicit or receive	donations of a	t historical t	roncu	ron or o	tha was in site o		
	assets to be sold to raise funds rat	her than to be maint	ained as part o	f the organiz	ation'	ica, ur u	tion?		
Pa	rt IV Escrow and Custodial A	rrangements. Co.	mplete if the	organization	3 200	Mered	"Voo" to Eo	Y	es X No
	line 9, or reported an ar	mount on Form 99	0, Part X, line	21.		7170100	103 (010)	111 000, Fe	iitiv,
1 a	is the organization an agent, truste	e, custodian or othe	r intermediary	for contribut	ions c	or other	assets not		
	included on Form 990, Part X?							TY	es No
b	If "Yes," explain the arrangement in	n Part XIV and comp	lete the follow	ing table:					
_	Deminute a tratage						Amo	unt	
c d	3			* * * * * * *	1 c				
e	Additions during the year			* * * * * * *	1d				
f	Distributions during the year Ending balance		• • • • • • • •		1 e				· · · · · · · · · · · · · · · · · · ·
	Did the organization include an am	count on Form DDC	Dart V Bas 040	* * * * * * * * * * * * * * * * * * *	1f				
b	If "Yes," explain the arrangement in	n Part XIV	ratta, ine 21		• • •		• • • • • • •	Ye	s ∐ No
	Endowment Funds. Con		nization anew	orod "Voo"	o Fo	rm 000	Donat R.J. Co.	- 40	······
		(a) Current year	(b) Prior year	er (c) Tw	o year:		(d) Three years		our years back
1a	Beginning of year balance	2313067614.	1994256			530.	25095189		our years back
b	Contributions	24,912,568.	14,821,8			195.	18,572,7	NUMBER 4445-15	
c	Net investment earnings, gains,		· · · · · · · · · · · · · · · · · · ·				10,0,2,,		
	and losses	-2,340,878.	437,143,6	58. 266,	031,	489.	-5390739	09.	
	The second of th	2,675,861.	2,313,8			900.	2,177,2	10 (may 4.5 4.5 4.5 4.5 4.5 4.5 4.5 4.5 4.5 4.5	
e	Other expenditures for facilities							######################################	
	and programs	151,171,863.	130,840,1	.97. 138,	526,	156.	122,537,9	60.	
	Administrative expenses							978908	
9	End of year balance		23130676		4256	158.	18643025	30.	
2	Provide the estimated percentage	of the current year e	nd balance (lir	ie 1g, column	(a)) l	held as:			
b	a Board designated or quasi-endowment > 36.0000 %								
	Permanent endowment > 63.0 Temporarily restricted endowment								
	The percentages in lines 2a, 2b, ar	1.0000 %	0.007						
3a	Are there endowment funds not in	the nossession of the	uu 78. Na oraanizatior	that are bal					
	organization by:	p 0 0 0 0 0 0 ; 0; 1 0; 1;	ic organization	i iliat ale liei	u anu	aumms	stered for the		No. 1 No.
	(i) unrelated organizations							3a(i	Yes No
	(ii) related organizations							. 3a(ii	
b	If "Yes" to 3a(ii), are the related org	anizations listed as	required on Sci	nedule R?.				3b	
4	Describe in Part XIV the intended u	ses of the organizat	ion's endowme	int funds.					<u> </u>
Par	t VI Land, Buildings, and Equ	<mark>iipment.</mark> See Forr	n 990, Part X	, line 10.					
	Description of property	(a) Cost or (invest		Cost or other ba (other)	sis	(c) Accur deprec		(d) Book	value
1 a	Land			1,015,00	0.			1.1	015,000.
	Buildings			36,454,93		20,74	7,312.		707,622.
	Leasehold improvements			73,061,90				***************************************	774,209.
	Equipment			60,982,82		46,833			49,818.
e Tota	Other								
iota	l. Add lines 1a through 1e. (Column	(d) must equal Form	990, Part X, c	olumn (B), line	9 10(c	沙)	🕨	422,6	46,649.
							S		orm 990) 2011

- Ar	

Part VII Investments - Other Securities. See	Earm 000 D-4 V **	Pa
(a) Description of security or category	(b) Book value	
(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) PRIVATE EQUITY	554,960,187.	FMV
(B) REAL ASSETS	340,697,167.	
(C)		ENIV
(D)	- 	
(E)	-	
(F)		
(G)		
(H)		
(l)	-	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	▶ 895,657,354.	
Part VIII Investments - Program Related. See	Form 990 Part Y lin	n 12
(a) Description of investment type	(b) Book value	
(a) a destribution in additional type	(b) book value	(c) Method of valuation: Cost or end-of-year market value
(1)		Total of year market value
(2)		
(3)		
(4)		
(5)	·	
(6)		
(7)		
(8)		
(9)		
(10)	· 	
**		
Part IX Other Assets. See Form 990, Part X,	▶	
		· · · · · · · · · · · · · · · · · · ·
(1)	a) Description	(b) Book value
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)		
Part X Other Liabilities. See Form 990, Part		
(a) Description of liability	 	
(1) Federal income taxes	(b) Book value	
(2) ANNUITY & SPLIT-INT OBLIGS.		
	20,848,5	<u> </u>
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
otal. (Column (b) must equal Form 990, Part X, col. (B) line 25	.) ▶ 20,848,5	19.
FIN 48 (ARC 740) Footents to Det VIII		

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XIV Supplemental Information (continued)

SCHEDULE D, PART III, LINE 1A

SFAS 116 FOOTNOTE

IN CONFORMITY WITH ACCOUNTING POLICIES GENERALLY FOLLOWED BY ART MUSEUMS,
THE VALUE OF THE MUSEUM'S COLLECTIONS HAS BEEN EXCLUDED FROM THE BALANCE
SHEET, AND GIFTS OF ART OBJECTS ARE EXCLUDED FROM REVENUE IN THE
STATEMENT OF ACTIVITIES. PURCHASES OF ART OBJECTS BY THE MUSEUM ARE
RECORDED AS DECREASES IN NET ASSETS IN THE STATEMENT OF ACTIVITIES.
PURSUANT TO STATE LAW AND MUSEUM POLICY, PROCEEDS FROM THE SALE OF ART
AND RELATED INSURANCE SETTLEMENTS ARE RECORDED AS TEMPORARILY RESTRICTED
NET ASSETS FOR THE ACQUISITION OF ART.

SCHEDULE D, PART III, LINE 4

DESCRIPTION OF ORGANIZATION'S COLLECTIONS & FURTHERANCE OF EXEMPT PURPOSE
THE MUSEUM'S COLLECTIONS COMPRISE NEARLY TWO MILLION WORKS OF ART FROM
ANCIENT, MEDIEVAL, AND MODERN TIMES AND FROM ALL AREAS OF THE WORLD. THEY
OFFER A SURVEY OF CONSIDERABLE BREADTH OF ART FROM THE ANCIENT
CIVILIZATIONS OF ASIA, AFRICA, SOUTH AMERICA, THE PACIFIC ISLANDS, EGYPT,
THE NEAR EAST, AND GREECE AND ROME TO THE PRESENT TIME. THE MUSEUM'S
COLLECTIONS INCLUDE EUROPEAN PAINTINGS, MEDIEVAL ART AND ARCHITECTURE,
ARMS AND ARMOR, PRINTS, PHOTOGRAPHS, DRAWINGS, COSTUMES, MUSICAL
INSTRUMENTS, SCULPTURE, TEXTILES, AND DECORATIVE ARTS FROM THE
RENAISSANCE TO THE PRESENT TIME, AS WELL AS ONE OF THE FOREMOST
COLLECTIONS OF AMERICAN ART IN THE WORLD. THE MUSEUM ALSO MAINTAINS SOME
OF THE MOST COMPREHENSIVE ART AND ARCHITECTURE LIBRARIES IN THE UNITED
STATES. THE COLLECTIONS ARE MAINTAINED FOR PUBLIC EXHIBITION, EDUCATION,
AND RESEARCH IN FURTHERANCE OF PUBLIC SERVICE, RATHER THAN FOR FINANCIAL

Schedule D (Form 990) 2011

GAIN.

SCHEDULE D, PART V, LINE 4

INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUNDS

THE MUSEUM'S ENDOWMENT FUNDS ARE INTENDED TO SUPPORT EDUCATIONAL

PROGRAMS, SCHOLARLY RESEARCH AND PUBLICATIONS, ACQUISITIONS OF WORKS OF

ART, CONSERVATION OF WORKS OF ART, SPECIAL EXHIBITIONS OF INTEREST TO THE

PUBLIC, MAINTENANCE AND EXPANSION OF GALLERIES, AND GENERAL OPERATING

SUPPORT FOR MUSEUM EXPENSES.

SCHEDULE D, PART XI, LINE 8

OTHER RECONCILING ITEMS

CHANGE IN THE FAIR VALUE OF INTEREST RATE AGREEMENTS AND EFFECT OF

INTEREST RATE SWAPS \$(23,289,703); RECLASSIFICATIONS, FEES AND OTHER

\$(15,903,061); CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENT \$(7,459,630);

PENSION RELATED CHANGES OTHER THAN NPPC \$(47,587,557); ADDITIONAL

RETIREMENT CONTRIBUTION \$(4,273,368); PARTNERSHIP UBI \$1,059,866; TOTAL

PART XI, LINE 8 \$(97,453,453).

SCHEDULE D, PART XII, LINE 1

AUDITED FINANCIAL STATEMENTS INCLUDE \$314,164,425 FROM OPERATING
ACTIVITIES AND \$120,694,724 FROM NON-OPERATING ACTIVITIES FOR REVENUE,
GAINS AND OTHER SUPPORT. TOTAL PART XII, LINE 1 \$434,859,149

SCHEDULE D, PART XII, LINE 2D AND 4B

RECONCILING ITEMS FOR REVENUE

AMOUNTS INCLUDED ON LINE 1 BUT NOT ON FORM 990, PART VIII, LINE 12: LINE 2D, OTHER.

COST OF SALES \$28,434,287; INVESTMENT RETURN LESS THAN CURRENT SUPPORT FOR OPERATING AND NON-OPERATING \$123,080,296; UTILITIES PROVIDED BY THE CITY OF NEW YORK \$15,115,706; FUNDRAISING SPECIAL EVENTS \$3,650,800, ADVERTISING GIFT-IN-KIND \$761,381; FEDERAL INDEMNIFICATION AWARD \$1,035,595; TOTAL PART XII, LINE 2D \$172,078,065.

AMOUNTS INCLUDED ON FORM 990, PART VIII, LINE 12, BUT NOT LINE 1: LINE 4B, OTHER.

CORPORATE EVENTS EXPENSE \$769,684; INVESTMENT MANAGEMENT FEES \$12,357,937; TRANSFER OF UNDESIGNATED NON-OPERATING FUNDS \$14,694,759; PROCEEDS FROM SALE OF ART \$377,819; PARTNERSHIP UBI \$(1,059,866); TOTAL PART XII, LINE 4B \$27,140,333.

SCHEDULE D, PART XIII, LINE 2D AND 4B RECONCILING ITEMS FOR EXPENSES AMOUNTS INCLUDED ON LINE 1 BUT NOT ON FORM 990, PART IX, LINE 25: LINE 2D, OTHER.

COST OF SALES \$28,434,287; SPECIAL EVENTS DIRECT EXPENSES OTHER THAN FUNDRAISING \$3,650,800; UTILITIES PROVIDED BY THE CITY OF NEW YORK

Schedule D (Form 990) 2011

Part XIV Supplemental Information (continued)

\$15,115,706; ADVERTISING GIFT-IN-KIND \$761,381; FEDERAL INDEMNIFICATION AWARD \$1,035,595; TOTAL PART VIII, LINE 2D \$48,997,769.

AMOUNTS INCLUDED ON FORM 990, PART IX, LINE 25, BUT NOT LINE 1: LINE 4B, OTHER.

NON-OPERATING DEPRECIATION AND MISCELLANEOUS NON-CAPITALIZED EXPENDITURES \$47,107,313; PURCHASES OF ART \$38,853,776; INVESTMENT MANAGEMENT FEES \$12,357,937; CORPORATE EVENTS EXPENSE \$769,684; EFFECT OF INTEREST RATE SWAP \$4,238,057; TOTAL PART XIII, LINE 4B \$103,326,767.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

OMB No. 1545-0047

Interr	rtment of the Treasury nal Revenue Service	➤ Attach	to Form 990.	➤ See separate instructions	•	Open to Public Inspection
	•					ntification number
Pa	ROPOLITAN MUSEUM				13-1624	086
	Form 990, Part	mation on Activities IV, line 14b,	Outside the	United States. Complet	e if the organization ar	nswered "Yes" to
1			ain records to	substantiate the amount o	of its growth and attack	
	assistance, the grantees	s' eligibility for the gran	its or assistance	e, and the selection crite	ria used to award the	
	grants or assistance?	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * *	na useu to awatu the	X Yes No
_						
2	For grantmakers. Des assistance outside the U	cribe in Part V the or Inited States.	rganization's p	rocedures for monitorin	g the use of its grar	its and other
3	Activities per Region. (7	The following Part I line	3 tahla can h	e duplicated if additional s		•
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in	(e) If activity listed in (d)	÷- 1
		offices in the region	employees, agents, and	region (by type) (e.g.,	a program service,	expenditures for
		109.0	independent	fundraising, program services, investments,	describe specific type of service(s) in region	of and investments in region
			contractors in region	grants to recipients located in the region)		
		NONE	NONE			
(1)	EUROPE			GRANIMAKING	T. ROUSSEAU FELLOWS	HIP 155,442.
(0)		NONE	NONE	-		
(2)	CENTRAL AMERICA/CARIBBE			INVESTMENTS		534,909,638.
(3)	EUROPE	NOME	NONE ,			
	EOROPE	NONE	NONE	INVESTMENTS	·	76,445,001.
(4)	EUROPE		24042			
		NONE	NONE	PROGRAM SERVICES	RESEARCH & EXHIBITION	DNS 1,419,000.
(5)	EAST ASIA AND THE PACIF	ric		PROGRAM SERVICES	DESCRIPCIO A DURATERIA	
		NONE	NONE	CAMONESS OBEVIORS	RESEARCH & EXHIBITION	ONS 248,000.
(6)	RUSSIA/INDEPENDENT STAT	ES		PROGRAM SERVICES	RESEARCH & EXHIBITION	DNS 16,000.
/ *** >		NONE	NONE			10,005.
(7)	SOUTH AMERICA	20017		PROGRAM SERVICES	RESEARCH & EXHIBITIO	ONS 16,000.
(8)	NORTH AMERICA	NONE	NONE			
. (0)	NORTH AMERICA	NONE	NONE	PROGRAM SERVICES	RESEARCH & EXHIBITIO	NS 48,000.
(9)	MIDDLE EAST AND NORTH A		19001			
		NONE	NONE	PROGRAM SERVICES	RESEARCH & EXHIBITIO	NS 133,000.
(10)	SUB-SAHARAN AFRICA			PROGRAM SERVICES	DECEMBER : EVERETARE	
		NONE	NONE	5517 5517	RESEARCH & EXHIBITIO	NS 39,000.
(11)	CENTRAL AMERICA/CARIBBE	AN		PROGRAM SERVICES	RESEARCH & EXHIBITIO	NS 1,000.
		ЭИОИ	NONE			1,000.
(12)	SOUTH ASIA			PROGRAM SERVICES	RESEARCH & EXHIBITIO	NS 15,000.
(13)						
(10)						
(14)						
·		· · · · · · · · · · · · · · · · · · ·				
(15)						
			· · · · · · · · · · · · · · · · · · ·			
16)						
مضوي						
17)						
3a ⊾	Sub-total		NONE			613,445,081.
b	Total from conting		NONE			
c	sheets to Part I Totals (add lines 3a ar	nd 3h) NONE	NONE			×22
-	The second of th	14 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	**************************************		See Anna Anna Anna Anna Anna Anna Anna An	J00000

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

JSA 1E1274 1.000

Schedule F (Form 990) 2011

613,445,081.

13-1624086

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(i) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 (h) Description of non-cash assistance (g) Amount of non-cash assistance (f) Manner of cash disbursement (e) Amount of cash grant (d) Purpose of grant (c) Region Part II can be duplicated if additional space is needed. (b) IRS code section and EIN (if applicable) (a) Name of organization Part

ter total furinger of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt
IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entities က

1E1275 1.000

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Schedule F (Form 990) 2011

METROPOLITAN MUSEUM OF ART

Schedule F (Form 890) 2011

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV.

Page 3

13-1624086

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, the contract of
(1) THEODORE ROUSSEAU FELLOWERIP	EUROPE/ICELAND/GREENSAND	7.	155,442.	жодно		A/N	N/A
(2)	7110111477						
(3)	***************************************						
(4)	The control of the co				Pulsa and the state of the stat	***************************************	Widelist with the community of the commu
(5)		7.170.770.00					(4)
(9)	-		100 to 100 to 100 to 100 to 100 to 100 to 100 to 100 to 100 to 100 to 100 to 100 to 100 to 100 to 100 to 100 to	Andrew Community of the	And the state of t		
(2)					and the state of t		
(8)				With the same of t	1970 - A. A. A. A. A. A. A. A. A. A. A. A. A.		And the second s
(6)					· · · · · · · · · · · · · · · · · · ·		- interest and the second district and the second dist
(10)					The same of the sa		And the second s
(11)					artenia — applit — crev — — (Aleksia - Green — Aleksia)		,
(12)							
(13)				A/Arrana a militara	100000000000000000000000000000000000000		
(14)							- Andrews
(15)							
(16)							
(17)				r i mikitana	, 1986), and the state of the s		White the same of
(18)					this is a second of the second		
N.S.						Sche	Schedule F (Form 990) 2011

1E1276 1,000

065710 2536 1/8/2013

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Par	IV Foreign Forms			rage 1
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X	Yes	□ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520. Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	X	Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	X	Yes	□ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	X	Yes	□ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)		Yes	X No

Part V Supplemental Information

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

SCHEDULE F, PART I, LINE 2

THE MUSEUM AWARDS VARIOUS GRANTS, EDUCATIONAL TRAVEL STIPENDS AND FELLOWSHIPS ON AN OBJECTIVE AND NONDISCRIMINATORY BASIS. A GRANTS COMMITTEE, COMPRISED OF MUSEUM CURATORS, CONSERVATORS, EDUCATORS, SCIENTISTS AND LIBRARIANS, MAKES SELECTIONS BASED UPON COMPETITIVE WRITTEN APPLICATIONS. THE PURPOSE OF THE GRANTS IS TO PROVIDE AN OPPORTUNITY FOR THE GRANTEES TO CONDUCT RESEARCH, EXTEND THEIR PROFESSIONAL KNOWLEDGE AND CONTRIBUTE TO THEIR RESPECTIVE FIELDS AT LARGE. TO THE BEST OF THE MUSEUM'S KNOWLEDGE, NONE OF THE RECIPIENTS OF THE GRANTS OR FELLOWSHIPS ARE RELATED TO ANY PERSON SUCH AS A TRUSTEE, AN OFFICER, OR A KEY EMPLOYEE OF THE MUSEUM.

EVERY GRANTEE IS ASSIGNED A SPECIFIC SUPERVISOR AT THE START OF THEIR

FELLOWSHIP PERIOD. THE SUPERVISOR IS EITHER A CURATOR, CONSERVATOR,

SCIENTIST OR EDUCATOR FROM THE DEPARTMENT HOSTING THE INDIVIDUAL SCHOLAR.

THE SCHOLAR AND SUPERVISOR ARE IN CONTACT THROUGHOUT THE YEAR AND

DISCUSS ALL OF THE DETAILS OF THE GRANTEE'S RESEARCH WORK. IN ADDITION,

THE ACADEMIC PROGRAMS OFFICE WHICH IS RESPONSIBLE FOR ALL OF THE FELLOWS

REQUIRES PERIODIC UPDATES ON THE INDIVIDUALS' RESEARCH.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

METROPOLITAN MUSEUM OF ART					13-162408	si ilaniber
Part I Fundraising Activities. C	omplete if the orga	anization a	nswered	"Yes" to Form 9	90. Part IV line	17
Form 990-EZ filers are n	lot required to com	plete this	part.			17.
1 Indicate whether the organization	raised funds through	h any of the	following	activities. Check	all that apply	
a 🔼 Mail solicitations		e X Soli	citation of i	non-government g	rants	
b X Internet and email solicitation	is f			government grant		
c X Phone solicitations	•			ising events		
d X In-person solicitations						
2a Did the organization have a writte	n or oral agreement	with any in-	dividual (in	cluding officers, d	irectors, trustees	
or key employees listed in Form 9	90, Part VII) or entit	ty in connec	tion with p	rofessional fundra	ising services?	X Yes No
b if "Yes," list the ten highest paid i compensated at least \$5,000 by ti	naviadais or eminie: he organization	s (fundraise	rs) pursua	int to agreements	under which the	fundraiser is to be
(i) Name and address of individual	(II) A melicular	(iii) Did fur	draiser have	(iv) Gross receipts	(v) Amount paid to (or retained by)	(vi) Amount paid to
or entity (fundraiser)	(ii) Activity		or control of buttons?	from activity	fundraiser listed in	(or retained by)
		Yes	No		col. (i)	organization
1	TELE-					
DONOR SERVICES GROUP	MARKETING		Х	553,782.	332,955.	220,827.
2						
3						
•				- "		
4						
5		-				
6						
				ļ		
7						
8						
9						
10						
				<u> </u>		
Total				553,782.	332,955.	220 007
3 List all states in which the organizer	zation is registered	or licensed	to solicit	contributions or t	as been notified	220,827.
- grantant of hoomonig,					iau book kotilica	it is exempt nom
AL, AK, AZ, AR, CA, CO, CT, FL, GA, H	II,IL,					
KS, KY, LA, ME, MD, MA, MI, MN, MS, M DK, OR, PA, RI, SC, TN, UT, VA, WA, W	O, NH, NJ, NM, NY,	,NC,ND,O	Н,			
OK, OR, PA, RI, SC, TN, UT, VA, WA, W	V,WI,					
	~~			· 		
	- —					
					· · · · · · · · · · · · · · · · · · ·	
				~ 	. — — — — — — — — — — — — — — — — — — —	

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

Schedule G (Form 990 or 990-EZ) 2011

Part II	Fundaciales Figure 6
	Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more
	than \$15,000 of fundaming event contributions and
	than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with
	gross receipts greater than \$5,000.

		gross receipts greater than \$5,0	T	4.5	I	
			(a) Event #1 COSTUME INST	(b) Event #2 ACQ FND DINNER	(c) Other Events	(d) Total events
			(event type)	(event type)	(fotal number)	(add col. (a) through col. (c))
nue					(1000)	<u> </u>
Revenue	1	Gross receipts	11,707,577.	1,513,835.	3,879,394.	17,100,806
œ	2	Less: Charitable	13 555 555			
	3	contributions	11,555,077.	1,450,475.	3,520,364.	16,525,916
	Ĭ	line 2)	152,500.	63,360.	350 030	
				03,300.	359,030.	574,890
	4	Cash prizes				
		Noncash prizes				
Direct Expenses		Rent/facility costs				A STATE OF THE STA
ben						
ij	7	Food and beverages				
lrec.	8	Entortainment				
Ω	0	Entertainment				
	9	Other direct expenses	2,455,607.	218,284.	976,909.	7 (50 000
						3,650,800
	10	Direct expense summary. Add lines 4	through 9 in column (d)			(3,650,800.)
		Net alcome summary. Combine the	3, column (a), and line 1(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-3 075 910
ŀa	rt li	Gaming. Complete if the orgathan \$15,000 on Form 990-E	anization answered "Y	es" to Form 990, Par	t IV, line 19, or repo	rted more
		than \$15,000 on Form 990-E	Z, line ba.			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total garning (add col. (a) through col. (c))
ek ek				-		oon (a) timoagit con (c))
u.	1	Gross revenue				
		0-16-1				
sec	2	Cash prizes				
Direct Expenses	3	Noncash prizes	4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			
irect	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes%	%	
	_		140	No	No	
ļ	7	Direct expense summary. Add lines 2	through 5 in column (d)			(\
	8	Net gaming income summary. Combi	ne line 1, column d, and	line 7		
9		ter the state(s) in which the organizati				
	ls i	the organization licensed to operate g	on operates gaming acti	vities:		····
b	lf "	No," explain:	anning activities in each t	n these states?		Yes No
				~ ~ 		
					······································	
l0a	We	ere any of the organization's gaming li	censes revoked, susper	ided or terminated during	g the tax year?	Yes No
b	# "					

Schedule G (Form 990 or 990-EZ) 2011

	dule G (Form 990 or 990-EZ) 2011
11	Does the organization operate gaming activities with nonmembers?
12	is the dispersion a gramor, beneficiary or trustee of a trust of a member of a partnership or other entity
	formed to administer charitable gaming?
13	indicate the percentage of gaming activity operated in:
a	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and
	records:
	Name ▶
	Address ▶
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	ii Tes, enter the amount of gaming revenue received by the organization 🐎 🕏
	amount of gaining revenue retained by the third party 🕨 \$
C	If "Yes," enter name and address of the third party:
	Name >
	Address ►
16	Gaming manager information:
	Name ►
	Gaming manager compensation ▶ \$
	Description of services provided >
	Director/officer Employee Independent contractor
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
b	retain the state gaming license? Yes No Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year > \$
Part	Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).
SCHE	DULE G, PART I, LINE 2B
DETA	ILS OF FUNDRAISING AGREEMENT
DONC	R SERVICES GROUP CONDUCTS TELEMARKETING CAMPAIGNS TO CURRENT AND
LAPS	ED MEMBERS OF THE METROPOLITAN MUSEUM OF ART THROUGHOUT THE YEAR.
THE	TELEMARKETING STAFF REFERS TO A SCRIPT, WHICH IS APPROVED BY THE
MEMB	ERSHIP DEPARTMENT, WHEN SPEAKING WITH MEMBERS.
	Catadala Office and The Control of t

	dule G (Form 990 or 990-EZ) 2011 Page 3
11	Does the organization operate gaming activities with nonmembers?
12	or organization a grantor, beneficiary or trustee of a trust of a member of a partnership or other entity
4.5	formed to administer charitable gaming?
13 a	Indicate the percentage of gaming activity operated in:
a b	The organization's facility
14	An outside facility
	records:
	Name ►
	Address >
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
ь	If it is, enter the amount of gaming revenue received by the organization 🛌 s
	amount of gaming revenue retained by the third party - \$
C	If "Yes," enter name and address of the third party:
	Name >
	Address ►
16	Gaming manager information:
	Name
	Gaming manager compensation ▶ \$
	Description of services provided
	Director/officer Employee Independent contractor
17	Mandatory distributions:
' a	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
S2000000	or spent in the organization's own exempt activities during the tax year > \$
Part	Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).
DURI	NG FISCAL YEAR 2012; 35,136 CURRENT MEMBERS WERE CONTACTED BY DONOR
	VICES GROUP REQUESTING A CONTRIBUTION TO THE MEMBERSHIP ANNUAL APPEAL;
10,7	16 CURRENT MEMBERS WERE CONTACTED PRIOR TO EXPIRATION WITH A REQUEST
FOR	THEM TO RENEW THEIR MEMBERSHIP; AND 10,102 LAPSED MEMBERS WERE
CONT	ACTED WITH A REQUEST FOR THEM TO REJOIN THE MUSEUM.

Schedule G (Form 990 or 990-EZ) 2011

SCHEDULE (Form 990) Department of the Treasury Name of the organization Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No. 1545-0047

Inspection Open to Pub

> Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

Employer identification number 13-1624086

METROPOLITAN MUSEUM OF ART

2 (h) Purpose of grant or assistance to Form 990, Part IV, line 21, for any reciplent that received more than \$5,000. Check this box if no one reciplent received more than \$5,000. × Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant grant the selection criteria used to award the grants or assistance? Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) RC section if applicable Part II can be duplicated if additional space is needed Enter total number of other organizations listed in the line 1 table Part I General Information on Grants and Assistance (b) EIN (a) Name and address of organization or government Part II g 2 3 **₹** 3 (9) 8 (8) 6) 9 (12)

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

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METROPOLITAN MUSEUM OF ART

Schedule I (Form 990) (2011)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

13-1624086 Page 2

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(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 THE BOTHMER FELLOWSHIP	1.	2, 600.	Parameter and transfer and tran	This desires were an annual access to the state of the st	
2 SYLVAN C. AND PAMELA COLEMAN FELLOWSHIP	,	216,667.			
3 CHESTER DALE FELLOWSHIP	· •	94,167.			PPANTAGE AND AND AND AND AND AND AND AND AND AND
4 ANNETTE DE LA RENTA FELLOMSHIP	H	45.000		- Control of the Cont	
5 THE DOUGLASS FOUNDATION FELLOWSHIP IN AMERICAN ART	7	0000	***************************************		
6 SHERMAN FAIRCHILD FOUNDATION FELLOWSHIP	, (em.)	35,000,			Optimization of Address and Ad
7 ANDREW W. MELLOW ART HISTORY FELLOWSHIP	: 27	276,508,		The state of the s	The state of the s
Partiv Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	is part to prov	vide the informat	ion required in	Part I, line 2, and any	other additional information.

METROPOLITAN MUSEUM OF ART

Schedule I (Form 990) (2011)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

8

13-1624086

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of nor-cash assistance	(e) Method of valuation (book, FMV, appreisal, other)	(f) Description of non-cash assistance
ANDREW W. MELLON CONSERVATION FELLOWSHIP	1-14 1-14 1-14	229,958.		44444444	
2 ANDREM M MELLON POSTDOCTORAL CTRATORIAL PELLOWSHIP	m3	137,057.			The state of the s
3 J. CLAMSON MILLS FELLOWSHIP	7	71,667.		The state of the s	Walking and the control of the contr
4 HEGOP KEYORKIAN FELLOWSHIP		25.000		The state of the s	
5 HANNS AND BRIGITTE HORNEY SWARZENSKI PELLOWSHIP		90000		- Control Commission - Market Control	Approximate the second
6 JANE AND MORCAN WHITNEY FELLOWSHIP		247,333.			
7 SLIFKA FOUNDATION PELLOWSHIP	7.7	25,000.	7.		A CONTRACTOR OF THE PROPERTY O
Part IV Supplemental Information. Complete this part to provide the information required in Part I line 2 and any other additional information	is part to prov	vide the informat	ion required in	Part Lline 2 and any	other additional information

schedule I (Form 990) (2011)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
			7 5557 755 mp. 2.4.4. mm.		
SAMUEL H. KRESS FDN. INTERPRETIVE FELLOWSHIP	2.	27,083.			
2 ANNETTE KADE PELLOWSHIP	2,	18,833.			
3 RESEARCH SCHOLARSHIP IN PHOTOGRAPH CONSERVATION	1.	40,000.		***************************************	A CONTROL OF THE PROPERTY OF T
4 POLAIRE WEISSMAN	- pai	5,000.			
5 ANDREW W. MELLON SUPPORTED STIPEND INCREASES	- 77	99,916,	***************************************	Active Ac	
6 SAMUEL H. RRESS FDN, CONSERVATION FELLOWSHIP	, ,	20,250.		And the state of t	
2					Addition and the state of the s
Maria Supplemental Information Complete this					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE ;

THE MUSEUM AWARDS VARIOUS GRANTS, EDUCATIONAL TRAVEL STIPENDS AND

FELLOWSHIPS ON AN OBJECTIVE AND NONDISCRIMINATORY BASIS. A GRANTS

COMMITTEE, COMPRISED OF MUSEUM CURATORS, CONSERVATORS, EDUCATORS,

SCIENTISTS AND LIBRARIANS, MAKES SELECTIONS BASED UPON COMPETITIVE

WRITTEN APPLICATIONS. THE PURPOSE OF THE GRANTS IS TO PROVIDE AN

OPPORTUNITY FOR THE GRANTEES TO CONDUCT RESEARCH, EXTEND THEIR

PROFESSIONAL KNOWLEDGE AND CONTRIBUTE TO THEIR RESPECTIVE FIELDS AT

LARGE. RECIPIENTS OF THE EDUCATIONAL TRAVEL STIPENDS ARE EMPLOYEES OF

THE MUSEUM. TO THE BEST OF THE MUSEUM'S KNOWLEDGE, NONE OF THE OTHER

Schedule I (Form 990) (2011)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. Part III

	Transfer of the state of the st	والمعاددة والمحاددة				
	(a) Type of grant or essistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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9						1600 Market and the second sec
2			***************************************			
Part IV	Part IV Supplemental Information. Complete this	s part to prov	ide the informat	ion required in	Part I, line 2, and any	part to provide the information required in Part I, line 2, and any other additional information.

RECIPIENTS OF THE GRANTS OR FELLOWSHIPS ARE RELATED TO ANY PERSON SUCH AS

A TRUSTEE, AN OFFICER, OR A KEY EMPLOYEE OF THE MUSEUM.

SCIENTIST OR EDUCATOR FROM THE DEPARTMENT HOSTING THE INDIVIDUAL SCHOLAR. THE ACADEMIC PROGRAMS OFFICE WHICH IS RESPONSIBLE FOR ALL OF THE FELLOWS IN ADDITION, EVERY GRANTEE IS ASSIGNED A SPECIFIC SUPERVISOR AT THE START OF THEIR THE SUPERVISOR IS EITHER A CURATOR, CONSERVATOR, THE SCHOLAR AND SUPERVISOR ARE IN CONTACT THROUGHOUT THE YEAR AND DISCUSS ALL OF THE DETAILS OF THE GRANTEE'S RESEARCH WORK. FELLOWSHIP PERIOD.

Schedule I (Form 990) (2011)

13-1624086

	Į	duals in the Un	nited States, Co	mplete if the o	rganization answered	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
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		All value				
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				Additional and the state of the		The second secon
Part IV	Supplemental Information. Complete this		vide the informa	fion required in	Part Line 2 and any	part to provide the information required in Part I line 2 and any other additional information

REQUIRES PERIODIC UPDATES ON THE INDIVIDUALS' RESEARCH.

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

Attach to Form 990. See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

METROPOLITAN MUSEUM OF ART

Employer identification number 13-1624086

Part Questions Regarding Compensation No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in 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 companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., 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 X 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? X Indicate which, if any, of the following the filing 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. Explain in Part III. Compensation committee Written employment contract Х Independent compensation consultant Х Compensation survey or study Х Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in 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? X 4a b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4 c Х 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) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? 5a Х X If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? 6a X b Any related organization? 6b X If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Х Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe Х if "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

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

Schedule J (Form 990) 2011

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

For each individual whose compensation must be reported in 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 are not 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.

Total Control of the	(B) Breakdown	n of W-2 and/or 1099-MISC compensation	compensation	(C) Betirement and	(N) Nicotalia	7 - 7 - 1 - 1 - 1	
(A) Name	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable	other deferred	benefits	(E) (Octal Of Columns (B)(I)-(D)	reported as deferred in prior Form 990
The state of the s			compensation				
	(I) 698,789	0	106,412.	34,564.	273,820.	1,113,585.	0
1 THOMAS P. CAMPBELL	(ii)	d d	 	0	1		
	(n) 655, 932.		840,800.	34,827.	19,656.	1,551,215.	0
2 EMILY K. RAFFERTY		0	! !				0
	(1) 245,929		22,436.	34,827.	18,799.	321,991.	0
3 CARRIE R. BARRATT	(ii)	0		i	Ì	. 1	0
	(n) 305,088.		4,764.	34,827.	1,528.	346,207.	0
4 JENNIFER RUSSELL	(ii)	0				 	0
	364,007.		35,961.	34,827.	18,644.	453,439.	0
5 SHARON H. COTT	(11)		i		ļ	1	0
	364,617.		45,609.	34,827.	19,036.	464,089.	0
6 HAROLD HOLZER	1	0	† 		1		0
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7 OLENA M. PASLAWSKY	(ii)			0	i i	-	
	308,839.		47,400.	34,827.	19,272.	410,338.	0
8 NINA MCN DIEFENBACH	(ii)	0	ŀ	0	Ì		0
	301,282.	D	3,859.	34,827.	18,918.	358,886.	0
9 TOM JAVITZ	(ii)	0	0	! !	0		
	399,598.	200,000.	2,714.	34,827.	2,323.	639,462.	
10 BRADLEY L. KAUFFMAN	0		1		i		0
	(1) 256,045.		20,787.	34,827.	7,999.	319,658.	0
11 DEBRA A. MCDOWELL	(ii)	D	0	O	0	[]	0
12 ELYSE TOPALIAN	(n)213,717.		37,082.	30,250,	18,237.	299,286.	0
	(n) 516,424.	383,562,	20.067	284.827	10 200	201	132 663
13 SUZANNE E. BRENNER		i			5	00112711	
	(1) 423,073.	297,945.	540.	234,564.	7,845.	963,967,	97.945.
14 LAUREN A. MESERVE (II)			0		ĺ		
	0 261,347.		53,073.	34,827.	18,856.	368,103.	0
15 GEORGE GOLDNER (ii)		0	0	0	O		0
(B)	242,341.	0	59,545.	34,827.	18,156.	354,869.	0
(I)			0	C		d	0
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Schedule J (Form 990) 2011

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

For each individual whose compensation must be reported in 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 are not 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	of W-2 and/or 1099-MISC compensation	compensation	(C) Retirement and	(D) Montavabla	(B) Total of minds	
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred	benefits	(B)(I)-(D)	(r) Compensation reported as deferred in prior Form 990
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	E	242,857.	40,000.	529.	34,564.	18,792.	336,742.	- American
2 KEN M. WEINSTEIN	(1)	d	D				0	0
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Page 3

Parrell Supplemental Information

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

SCHEDULE J, PART I, LINE 1A

PERSONAL HOUSING - FOR CALENDAR YEAR 2011, THE MUSEUM PROVIDED A HOUSING

ALLOWANCE TO THE PRESIDENT, EMILY K. RAFFERTY. THIS ALLOWANCE WAS TREATED

AS TAXABLE COMPENSATION. FOR CALENDAR YEAR 2011, THE MUSEUM PROVIDED THE

DIRECTOR, THOMAS P. CAMPBELL, WITH A RESIDENCE THAT HE WAS REQUIRED TO

LIVE IN AS A CONDITION OF EMPLOYMENT FOR THE CONVENIENCE OF THE MUSEUM.

SCHEDULE J, PART I, LINE 4B

THE FOLLOWING PERSONS PARTICIPATED IN OR RECEIVED PAYMENTS FROM A

SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLAN;

THOMAS P. CAMPBELL - \$11,200

CARRIE R. BARRATT - \$21,210

SHARON H. COTT - \$34,500

HAROLD HOLZER - \$41,400

GARY TINTEROW - \$45,000

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Parisili Supplemental Information

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

NINA MCN DIEFENBACH - \$46,000

DEBRA A. MCDOWELL - \$18,400

ELYSE TOPALIAN - \$35,100

SUZANNE BRENNER - \$18,400

GEORGE GOLDNER - \$46,000

LAWRENCE BECKER - \$46,000

THE FOLLOWING PERSONS VESTED AND RECEIVED PAYMENT FROM A NON-QUALIFIED

RETIREMENT PLAN:

RAFFERTY - \$714,214 EMILY K.

SCHEDULE J, PART 1, LINE

PURSUANT TO THE MUSEUM'S INCENTIVE COMPENSATION PLAN FOR INVESTMENT

BRENNER RECEIVED A BONUS STAFF, THE CHIEF INVESTMENT OFFICER, SUZANNE E.

PAYMENT OF \$383,562 WHICH IS INCLUDED IN SCHEDULE J, PART 11, COLUMN B.

LAUREN M. MESERVE, ALSO RECEIVED A THE DEPUTY CHIEF INVESTMENT OFFICER,

WHICH IS INCLUDED IN SCHEDULE J, PART 11 BONUS PAYMENT OF \$297,945

COLUMN B.

edufe J (Form 990) 2011

Page 3

Partill Supplemental Information

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

VICE PRESIDENT AND GENERAL MANAGER OF MERCHANDISE AND RETAIL, BRADLEY L.

KAUFFMAN, AND GENERAL MANAGER OF MERCHANDISING FINANCE, OPERATIONS AND

SYSTEMS, KEN M. WEINSTEIN, RECEIVED DISCRETIONARY BONUS PAYMENTS OF

\$200,000 AND \$ 40,000 RESPECTIVELY, WHICH ARE INCLUDED IN SCHEDULE J,

PART 11, COLUMN B.

FORM 990, PART VII

THOMAS P. CAMPBELL AND EMILY K. RAFFERTY ARE EX-OFFICIO TRUSIEES.

PARTIAL FUNDING OF CAPITAL PRO

SCHEDULE K (Form 990)

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990.

Name of the organization Department of the Treasury

Open to Public

See separate instructions.

OMB No. 1545-0047

Employer identification number

(i) Pooled financing Yes No Š ŝ ŝ (h) On behalf of 13-1624086 Yes Yes Yes (g) Defeased ş Yes ° ŝ O ¢ PARTIAL FUNDING OF CAPITAL PRO Yes Yes (f) Description of purpose PARTIAL FUNDING OF CAPITAL 65,000,000 795,690 64,204,310. ů. ŝ × \bowtie × × œ 2008 m Yes Yes × 65,000,000. 64,204,310. 65,000,000. 795,690 65,000,000. Ŷ (e) issue price ŝ × × × ⋖ 2008 ⋖ Yes Yes × × 12/01/2006 (d) Date issued 12/01/2006 2 Are there any lease arrangements that may result in private business use of bond-financed property? For Paperwork Reduction Act Notice, see the instructions for Form 990. Total proceeds of issue........ 9 Working capital expenditures from proceeds Other spent proceeds 15 Were the bonds issued as part of an advance refunding issue?.......... 1 Was the organization a partner in a partnership, or a member of an LLC, which owned 6 Proceeds in refunding escrows......... Does the organization maintain adequate books and records to support the final effocation of proceeds? • • • (c) CUSIP# 649717NP6 649717NQ4 2 Amount of bonds legally defeased....... (b) Issuer EIN 911882413 911882413 16 Has the final allocation of proceeds been made? A TRUST FOR CULTURAL RESOURCES OF THE CITY OF NY B TRUST FOR CULTURAL RESOURCES OF THE CITY OF NY 5 Capitalized interest from proceeds.... property financed by tax-exempt bonds? METROPOLITAN MUSEUM OF ART Private Business Use (a) Issuer name Amount of bonds retired Bond Issues Par II Proceeds Part III PartI 5 10 ~ ပ

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PAGE 58

Schedule K (Form 990) 2011

Private Business Use (Continued)	1							Page
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		A		8		U	Q	•
3a Are there any management or service contracts that may result in private business	Yes	No	Yes	No.	Yes	N _o	Yes	N _o
use of bond-financed property?	×		×					
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X		×			_		
c Are there any research agreements that may result in private business use of bond-								
- 1		×		×				
d if "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government . ▶		% 00'0		0.00 %		%		%
e of financed property used in trade or business activity carr (3) organization, or a state or local	***************************************	0.00 %	- water	% 00 0		70	***************************************	76
6 Total of lines 4 and 5		0.00 %		00.00		%		8 8
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	×		×					
PartIIV Arbitrage								
POPURATION AND ADMINISTRATION ADMINISTRATION ADMINISTRATION AND ADMINISTRATION AND ADMINI	A			83	O		a	
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penatty in Lieu of	Yes	No	Yes	oN	Yes	No	Yes	ON
Arbit		×		×				
2 Is the bond issue a variable rate issue?	×		×					
3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		>		>				- Marine in the second
b Name of provider				<				
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?						-		
		×		×				
c Term of GIC					***************************************			
Mos the regulation and headers for the first t					-			
		×		×				
b Did the bond issue qualify for an exception to rebate?	×		×					

Procedures To Undertake Corrective Action

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

SCHEDULE K, PART 111, LINES 4-6

PRIVATE BUSINESS AND UNRELATED USE

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Schedule K (Form 990) 2011

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	1	- 1	- 1	1				
	*	Ą		В		ပ	Ω	_
3a Are there any management or service contracts that may result in private business use of bond-financed property?	Yes	No	Yes	No	Yes	No	Yes	No
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?			THE PERSON OF TH					
c Are there any research agreements that may result in private business use of bond-financed property?								
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		%		%		%		%
Enter the percentage of financed property used in result of unrelated trade or business activity carr another section 501(c)(3) organization, or a state or local		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
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Part IV Arbitrage								
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1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	ьеу	No	Yes	No	Yes	No	Yes	No
2 Is the bond issue a variable rate issue?								
3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?								
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								***************************************
4a Were gross proceeds invested in a guaranteed investment contract (GIC)?								AAAA
)								
ᆔ								
6 Did the bond issue qualify for an exception to rebate?								

Procedures To Undertake Corrective Action Part V

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations

Paravi Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

THE MUSEUM PERFORMS A DETAILED PRIVATE BUSINESS AND UNRELATED USE

CALCULATION. THE MUSEUM CALCULATED ITS PRIVATE BUSINESS AND UNRELATED USE 1284 1,000

Schedule K (Form 990) 2011

Part Private Business Use (Confined)	DADMIAT TATUM	1	1					rage v
		FUNDING OF	CAFITAL	AL PRO				
	4			В		၁	٥	
3a Are there any management or service contracts that may result in private business use of bond-financed property?	Yes	o _N	Yes	No	Yes	No	Yes	N _o
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
 Are there any research agreements that may result in private business use of bond- financed property? 								
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?	The state of the s			***************************************				
4 Enter the percentage of financed property used in a private business use by entitles other than a section 501(c)(3) organization or a state or local government.		8		%		, %		76
Enter the percentage of financed property used in result of unrelated trade or business activity carrianother section 501(c)(3) organization, or a state or loca	A the state of the	%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
d p								
Part IV Arbitrage								
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1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	Yes	S O	Yes	No	Yes	°	Yes	o Z
2 Is the bond issue a variable rate issue?								
3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?								
b Name of provider								
c Term of hedge ,		-						
d Was the hedge superintegrated?								-
48 Were gross proceeds invested in a guaranteed investment contract (GIC)?								
1								
d Was the requiatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Did the hand issue anality for an evention to make the hand issue anality for an evention to make the								
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Procedures To Undertake Corrective Action Pant V

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions). FOR THE FISCAL YEAR ENDED JUNE 30, 2012 TO BE NEARLY 0% IN TAX EXEMPT BOND

FINANCED SPACE. THIS ANALYSIS EXCLUDES COST OF ISSUANCE.
181296 1.000 10:55:53 A 065710 2536 1/8/2013

V 11-6.4

Schedule K (Form 990) 2011 PAGE 61

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Inspection

Name of the organization Employer identification number METROPOLITAN MUSEUM OF ART 13-1624086 Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Part Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. 1 (a) Name of disqualified person (c) Corrected? (b) Description of transaction Yes No (1) (2)(3)(4)(5) (6) Enter the amount of tax imposed on the organization managers or disqualified persons during the year 2 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a. (a) Name of interested person and purpose (e) in default? (f) Approved (c) Original (d) Balance due (g) Written the organization? principal amount by board or agreement? committee? Τo From Yes No Yes Νo Yes No (1) (2) (3)(4)(5)(6)(7)(8) (9) (10)Total Grants or Assistance Benefiting Interested Persons. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the (c) Amount and type of assistance organization (1)(2)(3) (4)(5)(6)

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

Schedule L (Form 990 or 990-EZ) 2011

(7)(8)(9)(10)

Page 2

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (a) Name of interested person (b) Relationship between interested person and the organization (c) Amount of (d) Description of transaction (e) Sharing of transaction organization's revenues? Yes No (1) CHILTON INVESTMENT COMPANY, INC. SEE PART V. 1,061,864. MANAGEMENT FEES Х (2) (3) (4)(5) (6) (7)(8) (9)

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE L, PART IV

(10)

BUSINESS TRANSACTIONS INVOLVING INTERESTED PARTIES

TRUSTEE RICHARD L. CHILTON, JR. IS CHAIRMAN, CEO AND CHIEF INVESTMENT

OFFICER OF CHILTON INVESTMENT COMPANY, INC.

SCHEDULE M (Form 990)

Noncash Contributions

 Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
 ►Attach to Form 990. OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

METROPOLITAN MUSEUM OF ART

Employer identification number

13-1624086

(a) Check if applicable Vertical property (b) Number of contributions or items contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contribution amounts reported on prom 990, Part VIII, line 19 noncash contri
2 Art - Historical treasures X 11. 0 3 Art - Fractional interests X 11. 0 4 Books and publications X 0 5 Clothing and household goods 0 0 6 Cars and other vehicles 0 0 7 Boats and planes 0 0 8 Intellectual property 0 0 9 Securities - Publicly traded X 131. 5,371,088. MKT VALUE- GIFT DATI 10 Securities - Putnership, LLC, or trust interests 0 0 0 0 0 11 Securities - Partnership, LLC, or trust interests 0 <
3 Art - Fractional interests X 11 0 4 Books and publications X 0 0 5 Clothing and household goods 0 0 0 6 Cars and other vehicles 9 0 0 0 7 Boats and planes 10 </th
Books and publications X 0 Clothing and household goods. Cars and other vehicles Boats and planes Intellectual property Securities - Publicly traded Securities - Publicly traded Securities - Publicly traded Securities - Partnership, LLC, or trust interests Securities - Miscellaneous Securities - Miscellaneous Qualified conservation contribution - Historic structures Qualified conservation contribution - Other Real estate - Residential Real estate - Commercial Collectibles Food inventory Drugs and medical supplies Taxidermy Historical artifacts Historical artifacts Signific specimens Archeological artifacts
5 Clothing and household goods. 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded 10 Securities - Closely held stock 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures 14 Qualified conservation contribution - Other 15 Real estate - Residential 16 Real estate - Commercial 17 Real estate - Other 18 Collectibles 19 Food inventory 19 Food inventory 20 Drugs and medical supplies 21 Historical artifacts 22 Scientific specimens 23 Scientific specimens 24 Archeological artifacts
goods. 6 Cars and other vehicles. 7 Boats and planes. 8 Intellectual property. 9 Securities - Publicity traded. X 131. 5,371,088. MKT VALUE - GIFT DATI 10 Securities - Closely held stock. 11 Securities - Partnership, LLC, or trust interests. 12 Securities - Miscellaneous. 13 Qualified conservation contribution - Historic structures. 14 Qualified conservation contribution - Other 15 Real estate - Residential. 16 Real estate - Commercial 17 Real estate - Other. 18 Collectibles. 19 Food inventory. 20 Drugs and medical supplies. 21 Taxidermy 22 Historical artifacts. 23 Scientific specimens. 24 Archeological artifacts.
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7 Boats and planes. 8 Intellectual property. 9 Securities - Publicly traded
8 Intellectual property 9 Securities - Publicity traded X 131. 5,371,088. MKT VALUE- GIFT DATI 10 Securities - Closely heid stock 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures 14 Qualified conservation contribution - Other 15 Real estate - Residential 16 Real estate - Commercial 17 Real estate - Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts
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10 Securities - Closely held stock. 11 Securities - Partnership, LLC, or trust interests
or trust interests
12 Securities - Miscellaneous
13 Qualified conservation contribution - Historic structures
contribution - Historic structures 14 Qualified conservation contribution - Other 15 Real estate - Residential 16 Real estate - Commercial 17 Real estate - Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts
structures
14 Qualified conservation contribution - Other
contribution - Other
15 Real estate - Residential
16 Real estate - Commercial
17 Real estate - Other
18 Collectibles
19 Food inventory
20 Drugs and medical supplies
20 Drugs and medical supplies
22 Historical artifacts
22 Historical artifacts
23 Scientific specimens
24 Archeological artifacts
25 Other ►(
26 Other ▶()
27 Other ▶()
28 Other ▶()
29 Number of Forms 8283 received by the organization during the tax year for contributions for
which the organization completed Form 8283, Part IV, Donee Acknowledgement
Yes No.
30 a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that
it must hold for at least three years from the date of the initial contribution, and which is not required to be
used for exempt purposes for the entire holding period?
bilities, describe the arrangement in Part II.
31 Does the organization have a gift acceptance policy that requires the review of any non-standard
contributions?
The organization time of use time parties of related organizations to solicit, process, or self-noncash in the organization of
contributions?
b If "Yes," describe in Part II.
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,
describe in Part II.

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

PART I, COLUMN (B)

THE AMOUNTS SHOWN IN PART I, COLUMN (B) FOR "NUMBER OF CONTRIBUTIONS"

REPRESENTS THE TOTAL NUMBER OF CONTRIBUTORS AND NOT NECESSARILY THE TOTAL

NUMBER OF ITEMS CONTRIBUTED.

PART I, LINE 32B

THE MUSEUM MAY, FROM TIME TO TIME, SELL ART WORKS ACQUIRED AS NON-CASH CONTRIBUTIONS THROUGH THIRD PARTIES SUCH AS PUBLIC AUCTION HOUSES, PRIVATE DEALERS, OR INDIVIDUALS. IN EACH CASE, THE MUSEUM ENTERS INTO A CONTRACT OR AGREEMENT WITH THE THIRD PARTY CONDUCTING OR PARTICIPATING IN THE SALE AND ADHERES TO ITS OWN PUBLISHED POLICY REGARDING SUCH SALES AS WELL AS APPLICABLE IRS LAWS AND STANDARDS OF ACCOUNTING.

PART I, LINE 33

IN ACCORDANCE WITH FASB'S SFAS 116, THE MUSEUM DOES NOT TREAT DONATIONS
OF PROPERTY OF THE TYPES DESCRIBED IN PART I OF SCHEDULE M AS REVENUE OR
CAPITALIZE ITS COLLECTIONS BECAUSE THEY ARE USED TO SUPPORT ITS
NON-PROFIT EDUCATIONAL MISSION, AND, SHOULD THE PROPERTY BE SOLD,
PROCEEDS FROM SUCH SALE WOULD BE USED SOLELY TO ACQUIRE OTHER ITEMS FOR
THE COLLECTION. THESE ACCOUNTING STANDARDS ARE ALSO ENDORSED BY THE
AMERICAN ALLIANCE OF MUSEUMS AND THE ASSOCIATION OF ART MUSEUM DIRECTORS,
OF WHICH ORGANIZATIONS THE MUSEUM IS A MEMBER.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2011

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

METROPOLITAN MUSEUM OF ART

Employer identification number 13-1624086

PART III

MISSION AND PROGRAM SERVICE ACCOMPLISHMENTS

THE MISSION OF THE METROPOLITAN MUSEUM OF ART IS TO COLLECT, PRESERVE, STUDY, EXHIBIT, AND STIMULATE APPRECIATION FOR AND ADVANCE KNOWLEDGE OF WORKS OF ART THAT COLLECTIVELY REPRESENT THE BROADEST SPECTRUM OF HUMAN ACHIEVEMENT AT THE HIGHEST LEVEL OF QUALITY, ALL IN THE SERVICE OF THE PUBLIC AND IN ACCORDANCE WITH THE HIGHEST PROFESSIONAL STANDARDS.

THE METROPOLITAN MUSEUM OF ART WAS FOUNDED ON APRIL 13, 1870 BY A GROUP OF CIVIC LEADERS, ART COLLECTORS, AND PHILANTHROPISTS. THE PREMISE ON WHICH THE MUSEUM WAS FOUNDED IS "FOR THE PURPOSE OF ESTABLISHING AND MAINTAINING IN NEW YORK CITY A MUSEUM AND LIBRARY OF ART, OF ENCOURAGING AND DEVELOPING THE STUDY OF THE FINE ARTS, AND THE APPLICATION OF ARTS TO MANUFACTURE AND PRACTICAL LIFE, OF ADVANCING THE GENERAL KNOWLEDGE OF KINDRED SUBJECTS, AND, TO THAT END, OF FURNISHING POPULAR INSTRUCTION."

THE MUSEUM HAS SINCE BECOME THE PREEMINENT CULTURAL INSTITUTION IN THE WESTERN HEMISPHERE, SERVING A PUBLIC THAT EXTENDS FAR BEYOND NEW YORK CITY TO ALL THE UNITED STATES AND, INDEED, THE WORLD. IT RANKS AS NEW YORK'S PREMIER TOURIST ATTRACTION, WITH FIFTY-NINE PERCENT OF ITS NEARLY 6.28 MILLION ANNUAL VISITORS (INCLUDING THE CLOISTERS MUSEUM AND GARDENS) FROM OUTSIDE THE TRI-STATE AREA. FISCAL 2012 WAS A PIVOTAL YEAR FOR THE METROPOLITAN MUSEUM OF ART. ATTENDANCE IN FISCAL YEAR 2012 WAS THE HIGHEST RECORDED IN OVER FORTY YEARS DRIVEN BY THE FINAL WEEKS OF THE

"ALEXANDER MCQUEEN: SAVAGE BEAUTY" EXHIBITION ALONG WITH THE LANDMARK
OPENING OF NEW GALLERIES FOR THE DEPARTMENTS OF ISLAMIC AND AMERICAN ART,
AND MANY OTHER EXHIBITIONS AND PROGRAMS. THE MUSEUM SERVES ALL AGE
GROUPS, FROM PRE-SCHOOL CHILDREN TO SENIOR CITIZENS, AND MAINTAINS A
BROAD RANGE OF EDUCATIONAL AND OUTREACH PROGRAMS.

PART III (CONTINUED)

THE MUSEUM'S COLLECTIONS COMPRISE WORKS OF ART FROM ANCIENT, MEDIEVAL,

AND MODERN TIMES AND FROM ALL AREAS OF THE WORLD. THEY OFFER A SURVEY OF

ART FROM ANCIENT CIVILIZATIONS OF ASIA, AFRICA, SOUTH AMERICA, THE

PACIFIC ISLANDS, EGYPT, THE NEAR EAST, AND GREECE AND ROME, TO THE

PRESENT TIME. THE MUSEUM ALSO POSSESSES COLLECTIONS OF EUROPEAN

PAINTINGS, MEDIEVAL ART AND ARCHITECTURE, ARMS AND ARMOR, PRINTS,

PHOTOGRAPHS, DRAWINGS, COSTUMES, MUSICAL INSTRUMENTS, ISLAMIC ART,

EUROPEAN SCULPTURE AND DECORATIVE ARTS, AND AMERICAN ART. THE MUSEUM

MAINTAINS ONE OF THE MOST COMPREHENSIVE ART AND ARCHITECTURE LIBRARIES IN

THE UNITED STATES. THE COLLECTIONS ARE MAINTAINED FOR PUBLIC EXHIBITION,

EDUCATION, AND RESEARCH.

THE MUSEUM CONTINUES TO ENHANCE THE COLLECTIONS THROUGH KEY ACQUISITIONS IN A NUMBER OF AREAS. IN FISCAL YEAR 2012, THE MUSEUM ACQUIRED MANY OBJECTS OF DISTINCTION, INCLUDING A MARBLE HEAD OF ZEUS AMMON, CA A.D. 120-60; AN EXQUISITE BRONZE FIGURE BY THE RENAISSANCE ARTIST KNOWN AS ANTICO ENTITLED SPINARIO (BOY PULLING A THORN FROM HIS FOOT); AN EXCEEDINGLY RARE AND MONUMENTAL DOUBLE-SIDED PANEL BY THE GERMAN RENAISSANCE ARTIST HANS SCHÄUFELEIN THE ELDER, ONE OF ALBRECHT DÜRER'S

MOST GIFTED PUPILS; AN ALBUM OF LANDSCAPE PAINTINGS BY

SEVENTEENTH-CENTURY ARTIST ZHENG MIN ENTITLED EIGHT VIEWS OF MOUNT HUANG;

A MAJOR PAINTING BY LOUIS-LÉOPOLD BOILLY OF THE PUBLIC VIEWING DAVID'S

"CORONATION" AT THE LOUVRE (1830); 9 PORTRAIT DRAWINGS BY THE GREAT

19-CENTURY FRENCH DRAUGHTSMAN JEAN-AUGUSTE-DOMINIQUE INGRES; AND 36 COLOR

PHOTOGRAPHS BY THE AMERICAN PHOTOGRAPHER WILLIAM EGGLESTON.

PART III (CONTINUED)

THE CURATORIAL PROGRAMS ARE SUPPORTED BY NUMEROUS SERVICES AND RESOURCES.

THE DEPARTMENTS OF PAINTINGS, PAPER, OBJECTS AND TEXTILE CONSERVATION

PREPARE AND REVIEW EVERY ARTWORK SELECTED FOR A NEW INSTALLATION, SPECIAL

EXHIBITION OR LOAN. THIS CONSERVATION EFFORT RANKS WITH THE BEST OF THE

WORLD'S MAJOR MUSEUMS. THE THOMAS J. WATSON LIBRARY HOUSES VALUABLE

RESEARCH MATERIAL AVAILABLE FOR CURATORIAL, EDUCATION, AND PUBLICATION

PROJECTS. IN FISCAL YEAR 2012, OVER 7,400 VISITS WERE MADE BY OUTSIDE

RESEARCHERS (3,000 MORE THAN IN FY 2011) AND OVER 34,000 ITEMS WERE

CIRCULATED TO READERS. NOLEN LIBRARY'S STORYTIME PROGRAM REACHED 5,250

CHILDREN AND HAS BEEN EXPANDED TO 8 TIMES A WEEK. THE LIBRARY ALSO MAKES

RARE MATERIALS AVAILABLE ONLINE, INCLUDING ALL MUSEUM PUBLICATIONS FROM

THE FOUNDING TO 1923.

THE MUSEUM CONTINUES TO BE A LEADING MUSEUM PUBLISHER IN THE WORLD AND AGAIN PRODUCED AN IMPRESSIVE NUMBER OF PUBLICATIONS, WITH MOST TITLES SELLING EITHER AT OR ABOVE PROJECTION, AND MANY TITLES RECEIVING EXCELLENT REVIEWS OR WINNING PRESTIGIOUS AWARDS. IN FISCAL YEAR 2012, THE EDITORIAL DEPARTMENT PUBLISHED TWENTY FIVE PUBLICATIONS, INCLUDING

13-1624086

TWELVE EXHIBITION CATALOGUES, SEVEN COLLECTION AND OTHER SCHOLARLY
CATALOGUES, TWO GUIDEBOOKS, AND FOUR BULLETINS. IN FISCAL 2012 MET
PUBLICATION SALES CONTINUED TO BE BOLSTERED BY A RECORD NUMBER OF COPIES
SOLD OF ALEXANDER MCQUEEN: SAVAGE BEAUTY (CLOSE TO 211,000 COPIES SOLD
BETWEEN MAY 2011 AND THE END OF FISCAL 2012). A COMPLETELY RECONCEIVED
AND REWRITTEN METROPOLITAN MUSEUM OF ART GUIDE WAS PUBLISHED IN 2012, THE
FIRST NEW EDITION IN ALMOST THREE DECADES. WITH NEARLY 600 MASTERPIECES,
IT REPRESENTS THE FULL SCOPE OF THE MUSEUM'S ENCYCLOPEDIC COLLECTION AND
BY JANUARY 2013 WILL BE AVAILABLE IN SIX LANGUAGES.

PART III (CONTINUED)

THE MUSEUM'S SPECIAL EXHIBITIONS PROGRAM IS EXCEPTIONALLY DIVERSE,

PRESENTING ABOUT 35 EXHIBITION AND COLLECTION ROTATIONS PER YEAR FOCUSING

ON A WIDE RANGE OF THEMES, PERIODS, AND INDIVIDUAL ARTISTS. THE

FOLLOWING EXHIBITIONS WERE AMONG THE HIGHLIGHTS THIS YEAR: "INFINITE

JEST: CARICATURE AND SATIRE FROM LEONARDO TO LEVINE"; "HEROIC AFRICANS:

LEGENDARY LEADERS, ICONIC SCULPTURES"; "'WONDER OF THE AGE': MASTER

PAINTERS OF INDIA, 1100-1900"; "STIEGLITZ AND HIS ARTISTS: MATISSE TO

O'KEEFFE"; "THE GAME OF KINGS: MEDIEVAL IVORY CHESSMEN FROM THE ISLE OF

LEWIS" (THE CLOISTERS); "STORYTELLING IN JAPANESE ART"; "THE COE

COLLECTION OF AMERICAN INDIAN ART"; "DUNCAN PHYFE: MASTER CABINETMAKER

IN NEW YORK"; "THE RENAISSANCE PORTRAIT FROM DONATELLO TO BELLINI";

"CHINESE ART IN AN AGE OF REVOLUTION: FU BAOSHI (1904-1965)"; "SPIES IN

THE HOUSE OF ART: PHOTOGRAPHY, FILM, AND VIDEO"; "REMBRANDT AND DEGAS:

PORTRAIT OF THE ARTIST AS A YOUNG MAN"; "THE STEINS COLLECT: MATISSE,

PICASSO, AND THE PARISIAN AVANT-GARDE"; "BYZANTIUM AND ISLAM: AGE OF

TRANSITION"; "NAKED BEFORE THE CAMERA"; "DÜRER AND BEYOND: CENTRAL EUROPEAN DRAWINGS IN THE METROPOLITAN MUSEUM OF ART, 1400-1700"; "THE DAWN OF EGYPTIAN ART"; "THE PRINTED IMAGE IN CHINA, 8TH-21ST CENTURY"; "SCHIAPARELLI AND PRADA: IMPOSSIBLE CONVERSATIONS"; "TOMÁS SARACENO ON THE ROOF: CLOUD CITY"; "DESIGNING NATURE: THE RINPA AESTHETIC IN JAPANESE ART"; AND "ELLSWORTH KELLY PLANT DRAWINGS".

THE PERMANENT COLLECTION AND SPECIAL EXHIBITIONS CONTINUE TO BE ENHANCED BY A VARIETY OF EDUCATIONAL PROGRAMS. LAST YEAR THE MUSEUM ORGANIZED SOME 25,283 EDUCATIONAL EVENTS REACHING 693,116 PEOPLE. AT THE MAIN BUILDING AND THE CLOISTERS, THE MUSEUM WELCOMED 6,021 SCHOOL CLASSES, REPRESENTING 217,850 STUDENTS. TEACHER TRAINING, THROUGH ONSITE AND ONLINE WORKSHOPS, AS WELL AS PRINTED AND WEB-BASED TEACHER RESOURCES, WHICH ARE FREE UPON REQUEST FOR ALL NYC PUBLIC SCHOOLS AND AVAILABLE IN PDF FORM FOR SCHOOLS WORLDWIDE, ENABLE K-12 EDUCATORS TO MORE FULLY UTILIZE THE MUSEUM'S COLLECTIONS IN THEIR CURRICULA.

PART III (CONTINUED)

DURING THE YEAR 46,083 INDIVIDUALS PARTICIPATED IN FAMILY PROGRAMMING AND MANY MORE WERE ABLE TO ENRICH THEIR VISITS THROUGH PRINTED FAMILY GUIDES. FAMILIES WITH CHILDREN MAY ALSO DOWNLOAD AND PRINT THESE GUIDES AT HOME IN PREPARATION FOR THEIR MET VISIT. THE MUSEUM OFFERS SPECIALLY DESIGNED PROGRAMS FOR A DEDICATED TEEN AUDIENCE: 2,080 VISITORS (AGED 11 THROUGH 18) TOOK PART IN THESE PROGRAMS. FOR GENERAL VISITORS, THE MUSEUM OFFERS A COMPREHENSIVE SERIES OF LECTURES, GALLERY TALKS, AND GUIDED TOURS IN NUMEROUS LANGUAGES THROUGHOUT THE DAY, MOST OF WHICH ARE FREE WITH MUSEUM

ADMISSION. LAST YEAR, 110,326 PEOPLE PARTICIPATED IN GALLERY TALKS AND GUIDED TOURS, AND 37,984 ATTENDED LECTURES. THE MUSEUM IS COMMITTED TO REACHING OUT TO POPULATIONS THROUGHOUT THE NEW YORK CITY COMMUNITY WHO MAY NOT BE FAMILIAR WITH THE MUSEUM. THE MUSEUM ALSO OFFERS A FULL RANGE OF PROGRAMS FOR VISITORS WITH VISION, HEARING, LEARNING, AND MOBILITY IMPAIRMENTS, AS WELL AS FOR THOSE WITH DEMENTIA AND THEIR CAREGIVERS. IN FISCAL 2012, 6,392 SUCH VISITORS PARTICIPATED IN 367 PROGRAMS.

DESPITE THE EVER-INCREASING CHALLENGE TO MEET OPERATING NEEDS, THE MUSEUM IS COMMITTED TO FINDING WAYS TO BE MORE RESPONSIVE TO THE INTERESTS OF ITS AUDIENCE. IN ORDER TO SERVE OUR MANY AUDIENCES MORE EFFECTIVELY, THE MUSEUM CONDUCTS QUARTERLY SURVEYS OF VISITORS, POLLING INDIVIDUALS AS THEY ENTER THE BUILDING TO DETERMINE GEOGRAPHIC ORIGIN, AGE, LEVEL OF EDUCATION, ETHNICITY, INCOME AND PROFESSION. NUMEROUS OTHER SURVEYS AND STUDIES EVALUATE SPECIFIC PROGRAMS. IN THE LAST FISCAL YEAR, APPROXIMATELY 36% OF VISITORS TO THE MUSEUM WERE FROM OTHER COUNTRIES. THUS, AS THE NUMBER OF NON-ENGLISH SPEAKING VISITORS INCREASES, PROVIDING SERVICES TO MEET THEIR NEEDS BECOMES EVER MORE IMPORTANT. THE MUSEUM OFFERS A FOREIGN VISITORS INFORMATION DESK; A MUSEUM MAP AND INFORMATION BROCHURE IN ELEVEN LANGUAGES; AND MULTI-LINGUAL WALKING TOURS, GALLERY TALKS, AND VISITOR INFORMATION ON THE MUSEUM'S WEBSITE.

PART III (CONTINUED)

FISCAL YEAR 2012 SAW THE METROPOLITAN MUSEUM OF ART'S DIGITAL MEDIA DEPARTMENT AT THE FOREFRONT OF SEVERAL OF THE MUSEUM'S DEFINING ACHIEVEMENTS AND INITIATIVES. FORMED IN FY 2011, THE DEPARTMENT IS

CHARGED TO BOLSTER THE MUSEUM'S EFFORTS TO EXPAND ITS AUDIENCES THROUGH
THE USE OF DIGITAL MEDIA, LEADING THE CREATION, PRODUCTION, PRESENTATION
AND DISSEMINATION OF MULTI-MEDIA CONTENT BOTH WITHIN THE GALLERIES AND
ONLINE.

IN JANUARY 2011, THE MUSEUM COMPLETED THE ONLINE PUBLICATION OF ALL
CATALOGUED WORKS. THE DATABASE WAS A KEY COMPONENT IN THE LAUNCH OF THE
MUSEUM'S EXPANDED AND REDESIGNED WEBSITE IN SEPTEMBER 2011. WITH COMPLETE
LISTINGS OF THE MUSEUM'S CATALOGUED COLLECTIONS, AN INTERACTIVE MAP OF
THE BUILDINGS, AND AN ARRAY OF EASILY ACCESSIBLE RESOURCES, THE NEW
WEBSITE IS AN ESSENTIAL PART OF THE VISITOR EXPERIENCE. IT PROVIDES A
SEAMLESS CONNECTION BETWEEN LEARNING ABOUT THE MUSEUM AND ITS COLLECTIONS
ONLINE AND ENCOUNTERING FACE-TO-FACE THE MAGNIFICENT WORKS AND PROGRAMS
IN OUR GALLERIES. IN FY 2012, THE MUSEUM COMPLETED ITS TWO-YEAR EFFORT TO
REBUILD AND RELAUNCH THE WEBSITE. USING A NEW TRACKING TOOL, THE MUSEUM
DETERMINED THAT VISITS TO THE SITE EQUALED APPROXIMATELY 46 MILLION IN FY
2012, WHICH REPRESENTS A 27% INCREASE COMPARED TO COMPARABLE VISITS IN FY

AS PART OF THE NEW WEBSITE, THE CONSTANTLY EVOLVING HEILBURUNN TIMELINE OF ART HISTORY BECAME MORE FULLY INTEGRATED INTO THE SITE. LAUNCHED IN 2000, THE TIMELINE REMAINS A FAVORITE ONLINE FEATURE AMONG SCHOLARS AND THE GENERAL PUBLIC ALIKE, WITH 1.5 MILLION VISITS PER MONTH. THE TIMELINE CONTINUES TO EXPAND IN SCOPE AND DEPTH, REFLECTING THE MOST UP-TO-DATE SCHOLARSHIP AND EXPLORING THE HISTORY OF ART AROUND THE WORLD THROUGH THE

Employer identification number 13-1624086

MUSEUM'S COLLECTIONS.

PART III (CONTINUED)

CONNECTIONS, ANOTHER WEB FEATURE THAT RECEIVED ENTHUSIASTIC RESPONSE CAME
TO A CLOSE THIS YEAR AFTER ONE HUNDRED EPISODES. BY EXPLORING THE
COLLECTIONS THROUGH THEMES THAT WERE PERSONAL TO MET STAFF, CONNECTIONS
TAUGHT OUR AUDIENCE TO LOOK AT WORKS OF ART WITH FRESH EYES.

NOVEMBER 2011 SAW THE LAUNCH OF THE MET AROUND THE WORLD, A NEW WEBSITE FEATURE THAT OUTLINES THE MUSEUM'S GLOBAL ACTIVITY IN THE AREAS OF EXHIBITIONS, LOANS, CONSERVATION, EXCAVATIONS, FELLOWSHIPS, AND OTHER COLLABORATIONS. THE NEW SECTION CONSOLIDATES ALL OF THESE ACTIVITIES AND ALLOWS VISITORS TO SEARCH THEM BY LOCATION OR CATEGORY.

AS PART OF A BROADER EFFORT TO SUPPORT ITS COMMITMENT TO ADD ONLINE VISITORS AND BUILD AND ENCOURAGE ITS RELATIONSHIP WITH THEM, THE MUSEUM ALSO OPERATES EMAIL-MARKETING AND SOCIAL-MEDIA PROGRAMS THAT PROVIDE CONTENT AND INTERACTIVE EXPERIENCES. THE EMAIL MARKETING PROGRAM, WHICH INCLUDES BOTH ENGAGEMENT AND FUNDRAISING MESSAGES, REACHED 600,000 ONLINE SUBSCRIBERS AND MEMBERS IN FISCAL YEAR 2012. COLLECTIVELY THE MUSEUM REACHED MORE THAN 1.2 MILLION INDIVIDUALS THROUGH OUR E-MARKETING AND SOCIAL MEDIA EFFORTS, WHICH INCLUDES FACEBOOK, TWITTER, FLICKR, ARTBABBLE, AND YOUTUBE.

THE MUSEUM ALSO MADE STRIDES IN ITS DIGITAL PUBLISHING EFFORTS, PRODUCING A NUMBER OF APPLICATIONS FOR MOBILE DEVICES AS WELL AS BLOGS AND OTHER

ONLINE PUBLICATIONS AND RESOURCES. A NEW DIRECTOR'S TOUR AUDIO GUIDE, THE FIRST SINCE 1999, WAS ALSO RELEASED. IT OFFERS-IN EIGHT LANGUAGES-A BROAD OVERVIEW OF THE MET AS WELL AS COMMENTARY ON SELECTED WORKS OF ART AND STORIES FROM THE HISTORY OF THE MUSEUM. THIS INTERPRETIVE TOOL SITS ALONGSIDE A WIDE RANGE OF EDUCATIONAL PROGRAMS DESIGNED TO ENGAGE VISITORS WITH WORKS OF ART IN NEW AND INNOVATIVE WAYS.

PART III (CONTINUED)

THE MUSEUM AND ITS PERMANENT COLLECTIONS ARE CONTINUOUSLY ENHANCED
THROUGH NEW INSTALLATIONS AND CAPITAL PROJECTS. THE OPENING IN NOVEMBER
2011 OF THE NEW GALLERIES FOR THE ART OF THE ARAB LANDS, TURKEY, IRAN,
CENTRAL ASIA, AND LATER SOUTH ASIA WAS HISTORIC FOR THE MUSEUM, TRACING
THE FULL COURSE OF ISLAMIC CIVILIZATION OVER A SPAN OF FOURTEEN
CENTURIES. THE RENOVATION OF THESE FIFTEEN GALLERIES INCLUDED THE
CONSERVATION AND REINSTALLATION OF THE DAMASCAS ROOM AND THE SPANISH
CEILING, AS WELL AS INSTALLATION OF THE STONE FLOOR. THE JANUARY OPENING
OF THE NEW AMERICAN WING GALLERIES FOR PAINTINGS, SCULPTURE, AND
DECORATIVE ARTS CONCLUDED A TEN-YEAR PROJECT TO RENOVATE THE ENTIRE
AMERICAN WING. THE NEW INSTALLATION PROVIDES VISITORS WITH AN UNRIVALED
HISTORY OF AMERICAN ART FROM THE EIGHTEENTH THROUGH THE EARLY TWENTIETH
CENTURY IN TWENTY-SIX RENOVATED AND ENLARGED GALLERIES ON THE WING'S
SECOND FLOOR.

IN ADDITION, CONSTRUCTION BEGAN IN JANUARY 2012 ON A BRAND-NEW MEMBERS
LOUNGE ON THE SECOND FLOOR OF THE GREAT HALL BALCONY AND WAS COMPLETED IN
THE FALL OF 2012. A PROJECT TO RENOVATE AND INSTALL THE MUSEUM'S

13-1624086

WORLD-RENOWNED EUROPEAN PAINTINGS GALLERIES COMMENCED AND THE GALLERIES

ARE EXPECTED TO REOPEN IN SPRING 2013. RENOVATION OF THE GALLERIES,

LIBRARY, CONSERVATION SPACE, AND ADMINISTRATIVE OFFICES OF THE COSTUME

INSTITUTE BEGAN LAST FALL AND IS EXPECTED TO BE COMPLETED IN SPRING 2014.

CONSTRUCTION ON A COMPREHENSIVE REDESIGN OF THE METROPOLITAN'S

FOUR-BLOCK-LONG PLAZA- INCLUDING THE CREATION OF NEW FOUNTAINS AS WELL AS

SEASONAL LANDSCAPING, IMPROVED ACCESS TO THE MUSEUM, AND NEW LIGHTING
BEGAN IN FALL 2012 AND WILL TAKE APPROXIMATELY TWENTY-THREE MONTHS TO

COMPLETE.

PART VI, LINE 1A

GOVERNING BODY DELEGATED AUTHORITY

IN ACCORDANCE WITH THE MUSEUM'S BY-LAWS, THE EXECUTIVE COMMITTEE HAS THE RIGHT TO EXERCISE ALL THE POWERS OF THE BOARD OF TRUSTEES DURING

INTERVALS BETWEEN MEETINGS OF THE BOARD OF TRUSTEES OTHER THAN THE POWERS

TO (1) PURCHASE, SELL, MORTGAGE OR LEASE REAL PROPERTY ON BEHALF OF THE MUSEUM; (B) FILL VACANCIES IN THE BOARD OF TRUSTEES OR IN ANY COMMITTEE;

(C) AMEND OR REPEAL THE BY-LAWS OR ADOPT NEW BY-LAWS; AND (D) AMEND OR REPEAL ANY RESOLUTION OF THE BOARD OF TRUSTEES WHICH BY ITS TERMS SHALL NOT BE SO AMENDABLE OR REPEALABLE.

PART VI, LINE 6

GOVERNING BODY AND MANAGEMENT

THE MUSEUM DOES NOT HAVE "MEMBERS" AS SUCH TERM IS DEFINED IN THE INSTRUCTIONS TO FORM 990. HOWEVER, THE MUSEUM USES THE TERM "MEMBERS" IN CONNECTION WITH DUES, FEES, GOODS, BENEFITS, PRIVILEGES AND SERVICES

AS ESTABLISHED BY THE MUSEUM FROM TIME TO TIME.

PART VI, LINE 11B

PROCESS THE ORGANIZATION USES TO REVIEW THE FORM 990

THE MUSEUM'S FORM 990, INCLUDING REQUIRED SCHEDULES AND SUPPORTING

DOCUMENTATION, IS INITIALLY COMPILED BY THE MUSEUM'S CONTROLLER'S OFFICE

PRIMARILY RELYING ON THE MUSEUM'S GENERAL LEDGER, AUDITED FINANCIAL

STATEMENTS AND OTHER FINANCIAL SYSTEMS. THE MUSEUM'S CONTROLLER, CHIEF

FINANCIAL OFFICER, GENERAL COUNSEL, AND EXTERNAL TAX ADVISORS PARTICIPATE

IN A SERIES OF DETAILED REVIEWS OF THE FORM 990. THE FORM 990 IS ALSO

REVIEWED BY THE MUSEUM'S SENIOR MANAGEMENT, INCLUDING THE MUSEUM'S

DIRECTOR AND PRESIDENT, THE AUDIT COMMITTEE OF THE MUSEUM'S BOARD OF

TRUSTEES, AND EXTERNAL LEGAL COUNSEL. A COMPLETE COPY IS PROVIDED TO

EACH MEMBER OF THE BOARD OF TRUSTEES PRIOR TO FILING THE RETURN. THE

MUSEUM'S EXTERNAL TAX ADVISORS FILE THE FORM 990 ELECTRONICALLY WITH THE

INTERNAL REVENUE SERVICE.

PART VI, LINE 12C

CONFLICT OF INTEREST POLICY

ON AN ANNUAL BASIS, THE MUSEUM SEEKS TO ENSURE COMPLIANCE WITH ITS

CONFLICT OF INTEREST POLICY BY SENDING RELEVANT WRITTEN POLICIES TO

SENIOR STAFF, TRUSTEES AND ADVISORY MEMBERS OF COMMITTEES OF THE BOARD OF

TRUSTEES. EACH POLICY IS SENT WITH A STATEMENT, WHICH MUST BE COMPLETED,

SIGNED AND RETURNED TO THE MUSEUM'S SENIOR VICE PRESIDENT, SECRETARY AND

GENERAL COUNSEL. THE STATEMENT REQUIRES EACH INDIVIDUAL TO CONFIRM THAT

HE OR SHE HAS (I) RECEIVED A COPY OF THE POLICY, (II) READ AND UNDERSTOOD

THE POLICY AND (III) AGREES TO COMPLY WITH THE POLICY. THE INDIVIDUAL IS ALSO ASKED TO DISCLOSE ANY SITUATION OR AREAS OF POTENTIAL CONFLICTS OF INTEREST THAT HE OR SHE OR A MEMBER OF HIS OR HER FAMILY MAY HAVE. THE GENERAL COUNSEL'S OFFICE ENSURES ALL STATEMENTS ARE COMPLETED AND RETURNED. WHEN POTENTIAL CONFLICTS ARISE, THEY ARE INITIALLY EVALUATED BY THE GENERAL COUNSEL WITH THE ASSISTANCE OF OUTSIDE LEGAL COUNSEL IF NECESSARY. CONFLICTS ARE RESOLVED IN CONSULTATION WITH THE MUSEUM'S DIRECTOR AND PRESIDENT (FOR STAFF) AND THE CHAIRMAN OF THE BOARD OF TRUSTEES AND THE LEGAL COMMITTEE OF THE MUSEUM'S BOARD (FOR TRUSTEES, INCLUDING THE DIRECTOR AND THE PRESIDENT). IF A CONFLICT OF INTEREST IS DETERMINED TO EXIST, THE INDIVIDUAL IS PROHIBITED FROM PARTICIPATING IN THE BOARD'S DELIBERATIONS AND DECISIONS REGARDING THE TRANSACTIONS.

PART VI, LINES 15A AND 15B

COMPENSATION REVIEW

ANNUALLY, THE MUSEUM OBTAINS A REVIEW AND APPROVAL BY AN INDEPENDENT COMPENSATION CONSULTANT AND THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES FOR THE TOTAL REMUNERATION OF ALL THE MUSEUM'S OFFICERS.

PART VI, LINE 19

PUBLIC AVAILABILITY OF OTHER DOCUMENTS

THE MUSEUM'S AUDITED FINANCIAL STATEMENTS ARE INCLUDED IN THE MUSEUM'S ANNUAL REPORT, WHICH IS MADE AVAILABLE TO THE PUBLIC ON THE MUSEUM'S WEBSITE. THE MUSEUM MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC UPON REQUEST.

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Name of the organization
METROPOLITAN MUSEUM OF ART

Employer identification number 13-1624086

PART VIII, LINE 8

FUNDRAISING EVENTS

NOTE THAT THE \$3,075,910 LOSS ON LINE 8(C) DOES NOT INCLUDE THE \$16,525,916 OF CONTRIBUTIONS WHICH RESULTED IN A NET GAIN FROM THESE EVENTS OF APPROXIMATELY \$13.5 MILLION.

PART VIII, LINE 10

GROSS SALES LESS RETURNS AND ALLOWANCES

NOTE THAT THE GROSS PROFIT REPORTED ON LINE 10(C) DOES NOT INCLUDE

EXPENSES REPORTED ON PART IX, LINE 25.

PART XI, LINE 5

OTHER CHANGES IN NET ASSETS OR FUND BALANCES

UNREALIZED GAINS ON INVESTMENTS \$(128,776,248); CHANGE IN THE FAIR VALUE

OF INTEREST RATE AGREEMENTS AND EFFECT OF INTEREST RATE SWAPS

\$(23,289,703); RECLASSIFICATIONS, FEES AND OTHER \$(15,903,061); CHANGE IN

VALUE OF SPLIT-INTEREST AGREEMENT \$(7,459,630); PENSION RELATED CHANGES

OTHER THAN NPPC \$(47,587,557); ADDITIONAL RETIREMENT CONTRIBUTION

\$(4,273,368); PARTNERSHIP UBI \$1,059,866; ROUNDING \$(11) TOTAL PART XI,

LINE 5 \$(226,229,712).

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES		ATTACHMENT	1
DESCRIPTION	GRANTS	EXPENSES	REVENUE
MERCHANDISING OPERATIONS		40,217,462.	42,028,791.
OPERATION OF RESTAURANTS		20,079,602.	
SPECIAL EXHIBITIONS		12,879,944.	•

Name of the organization			Page 2
		Employer identifica	ition number
METROPOLITAN MUSEUM OF ART		13-16240	186
ECOM OOO DARW THE		ATTACHMENT	' 1 (CONT'D)
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES	<u> </u>		
DESCRIPTION	CONTINUE		
The state of the s	GRANTS	EXPENSES	REVENUE
DEPRECIATION		13,352,042.	
		, ,	
COMMUNITY PROGRAMS AND LIBRARIES		11,603,387.	
RENOVATION OF GALLERIES			
or or ordinative		9,217,500.	
COMMUNICATIONS		5,767,484.	21,970.
		,,	22,010.
MEMBERSHIP SERVICES INC BULLETIN		4,279,338.	
OPERATION OF AUDITORIUM			
TO THE TOTAL OF THE PROPERTY O		2,779,412.	1,839,978.
OPERATION OF PARKING GARAGE		1,553,797.	
		2,000,70,2	
CORPORATE EVENTS & FUNDRAISING		769,684.	937,721.
			·
TOTALS		122,499,652.	44,828,460.

ATTACHMENT 2

FORM 990, PART VI, LINE 17 - STATES

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

FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI,

MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,

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

ATTACHMENT 3

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

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
RC DOLNER, LLC 2 PENN PLAZA EAST, 11TH FLOOR NEWARK, NJ 07105	CONSTRUCTION MANAGER	4,263,818.
KEVIN ROCHE JOHN DINKELOO AND ASSOCIATES 20 DAVIS STREET, P.O. BOX 6127 HAMDEN, CT 06517	ARCHITECTS	2,202,656.

Name of the organization
METROPOLITAN MUSEUM OF ART

Employer identification number 13-1624086

ATTACHMENT 3 (CONT'D)

11,545,739.

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

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
GIF SERVICES 2525 BRUNSWICK AVENUE, SUITE 204 LINDEN, NJ 07036	BROKERAGE/SHIPPING	1,895,738.
TUTTLE 295 MADISON AVNEUE NEW YORK, NY 10017	EMPLOYMENT AGENCY	1,704,248.
MASTERPIECE INTERNATIONAL 39 BROADWAY NEW YORK, NY 10006	CUSTOMHOUSE BROKERS	1,479,279.

TOTAL COMPENSATION

--3

SCHEDULE R (Form 990)

METROPOLITAN MUSEUM OF ART

Name of the organization Department of the Treasury

Infernal Revenue Service

Related Organizations and Unrelated Partnerships

: (3)	
200 F	

OMB No. 1545-0047

Employer identification number 13-1624086

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. See separate instructions. Attach to Form 990.

(f) Direct controlling entity (e) End-of-year assets (d) Total income Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (c)
Legal domicile (state
or foreign country) (b) Primary activity (a) Name, address, and EIN of disregarded entity Partl (1) ন্ত 4 (2) (3)

(g) Section 512(b)(13) controlled Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (f)
Direct controlling (e)
Public charity status
(if section 501(c)(3)) (c) (d)
Legal domicile (state Exempt Code section Primary activity (a)
Name, address, and EIN of related organization Part

9

	:	or foreign country)	(if section 501(c)(3))	entity	contro	controlled entity?
THE PARTY OF THE P				L	Yes	No
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(2)	The special sections					
(3)			WALL STATE OF THE			- Heaten
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For Paperwork Raduction Act Notice, see the instructions for Form 990.

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Schedule R (Form 990) 2011

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34	ed Organizations T	axable	as a Partnership	Complete if t	ne organization	answered "Ye	s" to Form	990, Part IV, li	ne 34	Tayle
	pecause it had one or more related organizations treated as a partnership during the tax year.	nore related organ	zations	treated as a par	tnership during t	he tax year.)					
	Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year oseurovenna assets	(h) Osspireprofemsea	(I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	(k) Percentage ownership
(1)	Martin Ministra						Annual Artistance and Annual A	Yes No		Yes No	
										**	
(2)											
(3)	on are any loss for				A STATE OF THE STA						
(4)					MANAGE TO THE TOTAL PROPERTY OF THE TOTAL PR						
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	30 min m or or or or or or or or or or or or or										Salation (Salation Salation Sa
Part IV	Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	d Organizations Ta	axable d organ	as a Corporation izations treated a	or Trust (Com	plete if the org or trust during	anization answethe tax year.)	ered "Yes" t	o Form 990, F	art IV,	
	(a) Name, address, and EIN of related organization	elated organization		(b) Primary activity	(c) Legal domicile (state or	(d) Direct controlling entity	(e) Type of entity (C corp., S corp.	(f) Share of total Income	(g) Share of end-of-year assets	of r assets	(h) Percentage ownership

or trust) TRUST TRUST (1) 13 CHARITABLE TRUSTS (4) (3) (2) (7) (5) 9

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Part V	Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)	o Form 990, Par	t IV, line 34, 35, 35a, or 3	36.)	
Note. Compi	Note. Complete line 1 if any entity is listed in Parts II III or IV of this schadula				- ⊩
1 During t	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	d organizations liste	ed in Parts II-IV?		ON Seat
	Receipt of (I) interest (II) annulties (III) royalties or (Iv) rent from a controlled entity,			<u>"</u>	
b Giff, gra	Gift, grant, or capital contribution to related organization(s)		* * * * * * * * * * * * * * * * * * *	1	
c Giff, gra	Gift, grant, or capital contribution from related organization(s)			<u>.</u>	
d Loans o	Loans or loan guarantees to or for related organization(s)			-	
e Loans o	Loans or loan guarantees by related organization(s)			2 4	_
	• • • • • • • • • • • • • • • • • • • •		* * * * * * * * * * * * * * * * * * *		
f Sale of ≀	Sale of assets to related organization(s)			+	
g Purchase	Purchase of assets from related organization(s)	· · · · · · · · · · · · · · · · · · ·			
h Exchang	Exchange of assets with related organization(s)			P. 4	-
i Lease of	Lease of facilities, equipment, or other assets to related organization(s)		* * * * * * * * * * * * * * * * * * * *	:	
			* * * * * * * * * * * * * * * * * * * *		
j Lease of	Lease of facilities, equipment, or other assets from related organization(s)			**	
k Performa	Performance of services or membership or fundraising solicitations for related organization(s)				
l Perform	Performance of services or membership or fundraising solicitations by related accordingly		* * * * * * * * * * * * * * * * * * *	:	-
m Sharing	Sharing of facilities action and mailing lists or other exects with related digalities (s).		* * * * * * * * * * * * * * * * * * *	= .	
	היינים ביינים br>סל הסול היינים ביינים			ا <u>ء</u> :	
	or hard employees with letated ofganization(s).	* * * * * * * * * * * * * * * * * * * *		- 1	
Combine Sunhing	Point him of the state of the s				
	Reimbursement bald by related organization(s) for expenses				
	sement hand by retated organization(s) for experises				
q Other tra				ţ	
r Other tra	Other transfer of cash or property from related organization(s),				
2 If the ans	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	e including covere	od refationshins and transactions	tion thresholds	-
	(a)	(4)		enoles en con	***************************************
	Name of other organization	Transaction	(c) Amount involved	(a) Method of determining	mining
***************************************		(t	All de la constant de	atticunt involved	Dev
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PartVI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets

(a) Name, address, and ElN of entity											
	(b) Primary activity	(c) Legal domicile	(d) Predominant	(e) Are all partners		(g) Share of	(h)	(g) (G) (A)	C.		(8)
		(state or foreign country)		section 501(c)(3)	total income	end-of-year assets	allocations?			managing partner?	Percentage ownership
				Yes No			Yes	No (Form 1065)		οÑ	
						***************************************				ļ	
(2)											
(3)	A A A A A A A A A A A A A A A A A A A	A Part of AAA A A A A A A A A A A A A A A A A	· · · · · · · · · · · · · · · · · · ·								
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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).