Form **990**

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

Inspection

Department of the Treasury Internal Revenue Service

A	For t	he 201	2 calendar year, or tax year beg	inning 07/01, 2012	?, and endi	ng			6/30 , 20 13
_			C Name of organization				D Employer id	lenti	fication number
8	Check if	applicable:	METROPOLITAN MUSEUM (OF ART			13-162	408	36
	Add chai	ress	Doing Business As						
-	_	ne change	Number and street (or P.O. box if mail i	s not delivered to street address)	Room/suite		E Telephone n	umb	er
-		alreturn	1000 FIFTH AVENUE				(212) 87	9-	5500
-	-1	minated	City, town or post office, state, and ZIP of	code	L		<u> </u>		
-	Ame	nded	NEW YORK, NY 10028-01	198		I	G Gross receip	ts \$	1,395,762,348.
-	retu App	lication	F Name and address of principal officer:				H(a) Is this a gro		
L	pen	ding	1000 FIFTH AVENUE NEW				affiliates? H(b) Are all affilia	atac ir	
	Toyo	xempt sta			or 52	7			ist. (see instructions)
<u>-</u>			atus: X 501(c)(3) 501(c) (WWW.METMUSEUM.ORG) (insert no.) 4947(a)(1)	01 1 1 32		H(c) Group exem		
J				0					e of legal domicile: NY
90000000	MANAGEMENT .		zation: X Corporation Trust	Association Other	L Year o	i jormali	ion: 1070 M	Stat	B Of legal doffficile. 191
Lic			nmary						
	1		describe the organization's mission						
æ				LITAN MUSEUM OF ART IS				<u></u>	
ä				ATE APPRECIATION FOR AN		CE KI	OMTEDGE _		
ern				DULE O FOR MORE INFORMA					
& Governance	2			discontinued its operations or dispose				1	۱
∞	3	Numb	er of voting members of the governing	g body (Part VI, line 1a)				3	43.
es	4	Numbe	er of independent voting members of	the governing body (Part VI, line 1b) .				4	41.
Activities	5	Total r	number of individuals employed in cal	lendar year 2012 (Part V, line 2a)				5	2,406.
Act	6	Total r	umber of volunteers (estimate if neces	ssary)				6	1,376.
	7a	Total u	nrelated business revenue from Part \	VIII, column (C), line 12				7a	3,996,392.
	b	Net un	related business taxable income from	Form 990-T, line 34			<u> </u>	7b	(
							Prior Year		Current Year
a	8	Contril	outions and grants (Part VIII, line 1h)			1	93,652,34	12.	310,234,475.
aure	9	Progra	m service revenue (Part VIII, line 2g)				19,484,86	0.	18,292,718.
Revenue	10	Investr	nent income (Part VIII, column (A), lin	es 3, 4, and 7d)		1	37,816,26	6.	235,477,085.
LE.	11			, 6d, 8c, 9c, 10c, and 11e)			67,744,19	7.	67,560,857.
	12	Total r	evenue - add lines 8 through 11 (mus	t equal Part VIII, column (A), line 12).		4	18,697,66	5.	631,565,135.
	13	Grants	and similar amounts paid (Part IX, col	lumn (A), lines 1-3)			1,813,69	0.	1,700,343.
	14			umn (A), line 4)				0	C
ø	15			efits (Part IX, column (A), lines 5-10)		1	78,131,09	7.	192,660,165.
Expenses	16a	Profes	sional fundraising fees (Part IX, column	n (A), line 11e)			332,95	5.	342,350.
ę.				D), line 25) > 10,409,775					
ш	17			la-11d, 11f-24e)		2	05,947,17	4.	267,874,060.
	18			Part IX, column (A), line 25)		3	86,224,91	6.	462,576,918.
	19			m line 12			32,472,74	9.	168,988,217.
o s						Beginn	ing of Current Y	ear	End of Year
t Assets or nd Balances	20	Total a	ssets (Part X, line 16)			3,20	02,789,46	5.	3,471,893,746.
Ass	21	Total li	abilities (Part X. line 26)			4	89,754,95	3.	468,444,983.
Fet	22	Net ass	sets or fund balances. Subtract line 21	from line 20		2,7	13,034,51	2.	3,003,448,763.
			nature Block						
Unc	er per	nalties of	perjury, I declare that I have examined th	is return, including accompanying schedul	les and statem	ients, an	d to the best of	my	knowledge and belief, it is
true	, corre	ct, and c	omplete. Declaration of preparer (other than	n officer) is based on all information of whic	n preparer na	s any kno	owieage.		
Sig		S	ignature of officer				Date		
ler	e	.							
		T	ype or print name and title						
		Print/T	ype preparer's name	Preparer's signature	Date		Check	if I	PTIN
aid		TRAV	IS PATTON				self-employe	d	P00369623
	Only	Firm's	name > PRICEWATERHOUSEC	OOPERS LLP			Firm's EIN 🕨 🛭	13-	4008324
e	Only	Firm's a	ddress > 1301 K. STREET NW, SUITE	800W WASHINGTON, DC 20005-3333			Phone no. 2	202	-414-1000
Лау	the IF		uss this return with the preparer show						, X Yes No
	2220	avark D	aduction Act Notice can the congret	a instructions					Form 990 (2012)

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For	rm 990 (2012)	Page 2
9	art III Statement of Program Service Accomplishments	777
	Check if Schedule O contains a response to any question in this Part III	X
1	Briefly describe the organization's mission: ATTACHMENT 1	
	ATTACHEDIT	
2		X No
	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program	
3	services?	X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measu expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported.	ured by others
4a	a (Code:) (Expenses \$ _{103,196,801} . including grants of \$) (Revenue \$ _{5,419,917})	
	ACQUISITIONS OF ART - SEE SCHEDULE O FOR MORE INFORMATION	
4b	o (Code:) (Expenses \$	
	CURATORIAL DEPARTMENTS, INCLUDING OPERATION OF THE CLOISTERS,	
	CONSERVATION, CATALOGUING AND SCHOLARLY PUBLICATIONS (INCLUDES FELLOWSHIP AWARDS AND TRAVEL STIPENDS IN THE AMOUNT OF \$1,700,343)	
	- SEE SCHEDULE O FOR MORE INFORMATION	
	SEE SCHEDOLE O FOR HORE INFORMATION	
4c	(Code:) (Expenses \$67,016,517. including grants of \$) (Revenue \$)	
	GUARDIANSHIP AND MAINTENANCE OF THE MUSEUM AND ITS ART COLLECTION - SEE SCHEDULE O FOR MORE INFORMATION	
	- SEE SCHEDULE O FOR MORE INFORMATION	

A ~1	Other program services (Describe in Schedule O.) ATTACHMENT 2	
40		
4e	(Expenses \$ 116,803,013. Including grants of \$)(Revenue \$ 40,696,470.) Total program service expenses ▶ 404,227,888.	

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	Checklist of Required Schedules		Т.,	Τ
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		X	
_	complete Schedule A		X	-
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		A	ļ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
,	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	` <u> </u>	 	1-11
4		4	X	
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II	` 	1	
3	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors		 	
Ū	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
·	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		Ì	
	complete Schedule D, Part VI	11a	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	X	
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	ļ	X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			.,
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445		Х
40	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"	12a	Х	
L	complete Schedule D, Parts XI and XII	120		
a	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	1		Х
	Did the organization maintain an office, employees, or agents outside of the United States?			Х
	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	i		
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Χ
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	1		
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III			Х
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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Par	t IV Checklist of Required Schedules (continued)		.	
			Yes	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		X
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	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
20	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24.0	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
24 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			1
		24a	Х	
	through 24d and complete Schedule K. If "No," go to line 25	24b		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		3.7	
	to defease any tax-exempt bonds?	24c	X	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			į
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			ĺ
	If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			ĺ
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		Х
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			ĺ
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
D	·	28b		X
	Schedule L, Part IV	200		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		Х
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	^	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		77	
	conservation contributions? If "Yes," complete Schedule M	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			1
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			ı
	or IV, and Part V, line 1	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Χ
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
30	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Χ
27	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		Х
	Part VI	37		*7
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	20	. l	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

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Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V	• • •	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 788		163	140
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
	reportable gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 2,406			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			}
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	_		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			v
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6b		
7	gifts were not tax deductible?	0.0		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
ч	and services provided to the payor?	7a	Х	2002/05/05/00
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
_	required to file Form 8282?	7c		Χ
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Χ
g	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			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a			
	Gross income from members or shareholders			
b	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		NESCHERICH
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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Par	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 in Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	3		
	If there are material differences in voting rights among members of the governing body, or if the governing	1		
	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 1b 4	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct		+	+
3		i		X
4	supervision of officers, directors, or trustees, or key employees to a management company or other person?		 	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		 	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6	 	X
6	Did the organization have members or stockholders?	0	+	121
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	-		X
	one or more members of the governing body?	7a	 	1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			.,
_	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:		1	
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sect	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	T	T
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			Ì
	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	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	the state of the s	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	X	
, ,	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	135		10.000
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			l
iva	with a taxable entity during the year?	16a	9,000,000,000	Х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	IVA		
b	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?	466		(2005)
Sect	ion C. Disclosure	16b		
17	List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 3			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5	U1(c)(3)s or	ıiy)
	available for public inspection. Indicate how you made these available. Check all that apply. X Own website			
	tamend to the second of the se			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict or	inter	est p	olicy,
	and financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	e		
JSA	organization: ► CONTROLLER'S OFFICE 1000 FIFTH AVENUE NEW YORK, NY 10028-0198 (212)879-5500		000	(0015:
		r-orm	ッツリ /	(2012)

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Part VII	Compensation	of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and	_
	Independent C	ont	ractors									

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 related	organization compensate	d any current offic	er, director, or trus	stee.
		(C)			
(A)	(B)	Position	(D)	(E)	(F)
Name and Title	A	(do not check more than one	Danamakta	Damantable	F attacases

(A) Name and Title	(B) Average hours per week (list any	box, office	unle	Pos heck ss pe	erson	e than o	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) CANDACE K. BEINECKE	2.00									
ELECTIVE TRUSTEE	l	Х						lo	0	0
(2) LEON D. BLACK	1.00				<u> </u>					
ELECTIVE TRUSTEE	T	Х						0	0	0
(3) DANIEL BRODSKY	5.00									
ELECTIVE TRUSTEE & CHAIRMAN		Х		Х				0	0	0
(4) RUSSELL L. CARSON	2.00									
ELECTIVE TRUSTEE		Χ	~~~					0	0	0
(5) WELLINGTON Z. CHEN	1.00									
ELECTIVE TRUSTEE		Χ						0	0	0
(6) RICHARD L. CHILTON, JR.	2.00									
ELECTIVE TRUSTEE		Х						0	0	0
(7) PAULA CUSSI	1.00									
ELECTIVE TRUSTEE	1 00	Χ						0	0	0
(8) MARK FISCH	1.00			.]						^
ELECTIVE TRUSTEE	1 00	X						U	0	0
(9) MARINA KELLEN FRENCH ELECTIVE TRUSTEE FROM 11/2012	1.00	3.7								0
(10) JEFFREY W. GREENBERG	2.00	X						Ų	0	U
ELECTIVE TRUSTEE	2.00	Х						^	0	0
(11) CONRAD K. HARPER	1.00	Δ.							0	U
ELECTIVE TRUSTEE		Х						0	o	0
(12) J. TOMILSON HILL	1.00						_	<u> </u>		
ELECTIVE TRUSTEE		Х				İ		ol	ol	0
(13) BONNIE B. HIMMELMAN	1.00				$\neg \neg$			<u> </u>		
ELECTIVE TRUSTEE		X						ol	ol	0
(14) PHILIP H. ISLES	1.00									
ELECTIVE TRUSTEE		Х						0	o	0

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) Name and title Estimated Position Reportable Reportable Average hours per (do not check more than one compensation compensation from amount of box, unless person is both an week (list any other from related officer and a director/trustee) compensation hours for the organizations Officer Highest related Individual Institutional trustee Key employee from the organization (W-2/1099-MISC) organization organizations (W-2/1099-MISC) below dotted and related compensated organizations line) 15) HAMILTON E. JAMES 2.00 ELECTIVE TRUSTEE Χ Ω 0 DENIS P. KELLEHER 1.00 ELECTIVE TRUSTEE Х 0 DAVID H. KOCH 1.00 ELECTIVE TRUSTEE Χ 0 JOYCE FRANK MENSCHEL 1.00 ELECTIVE TRUSTEE Χ 0 1.00 BIJAN MOSSAVAR-RAHMANI ELECTIVE TRUSTEE Χ 0 1.00 JEFFREY M. PEEK ELECTIVE TRUSTEE 0 Χ 0 CYNTHIA HAZEN POLSKY 2.00 ELECTIVE TRUSTEE ANNETTE DE LA RENTA 2.00 ELECTIVE TRUSTEE & VICE CHAIR X 0 FRANK E. RICHARDSON 2.00 ELECTIVE TRUSTEE & VICE CHAIR Χ Χ 0 PAUL RUDDOCK 1.00 ELECTIVE TRUSTEE Χ 0 WILLIAM C. RUDIN 1.00 ELECTIVE TRUSTEE 0 0 0 9,460,571. 1,500,592. 9,460,571. 1,500,592. Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization > 175 Yes No 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated 3 Χ 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 4 Х 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 5 Χ Section B. Independent Contractors 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 (A) (C) Description of services Name and business address Compensation ATTACHMENT 4 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 70

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METROPOLITAN MUSEUM OF ART

Part VII Section A. Officers, Directors, Tr	ustees. Ke	ev En	olan	ove	es.	and l	Hia	hest Compensat	ted Employe	es (c	Page ontinued)
(A) Name and title	(B) Average hours per week (list any	(do box,	not cl unles	Pos heck ss pe	c) ition more	e than o is both tor/trust	one an tee)	(D) Reportable compensation from the	(E) Reportable compensation related organization	e from	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-M	1	from the organization and related organizations
26) BONNIE J. SACERDOTE ELECTIVE TRUSTEE	2.00	X								0	
27) ALEJANDRO SANTO DOMINGO ELECTIVE TRUSTEE	2.00	Х						C		0	<u> </u>
28) ANDREW M. SAUL ELECTIVE TRUSTEE	1.00	Х								0	
29) JAMES E. SHIPP ELECTIVE TRUSTEE	2.00	Х						0		0	
30) ANDREW SOLOMON ELECTIVE TRUSTEE FROM 11/2012	1.00	Х						0		0	
31) OSCAR L. TANG ELECTIVE TRUSTEE	2.00	Х						0		0	
32) ANN G. TENENBAUM ELECTIVE TRUSTEE	1.00	Х						0	***************************************	0	
3) LULU C. WANG ELECTIVE TRUSTEE	2.00	Х						0		0	
34) SHELBY WHITE ELECTIVE TRUSTEE	2.00	Х						0		0	
35) BARRIE A. WIGMORE ELECTIVE TRUSTEE	1.00	Х						0		0	
36) ANNA WINTOUR ELECTIVE TRUSTEE	1.00	Х						0		0	
c Total from continuation sheets to Part VII, Sod Total (add lines 1b and 1c)	imited to th		isted				re	ceived more than	\$100,000 of		
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu	er, directo	r, or	tru	stee	e, k	ey e	mp	loyee, or highest	compensate	d	Yes No
4 For any individual listed on line 1a, is the sorganization and related organizations graindividual	sum of rep eater than	ortabi \$15	le c	omp 00?	en: If	sation <i>"Yes,</i>	an " c	nd other compens	ation from th	e h	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Yes	accrue con es," complete	npens e <i>Sch</i>	atio edul	on fr le J	om for	any such p	unr o <i>ers</i>	elated organization	on or individua	al 	5 X
Complete this table for your five highest components from the organization. Report compensation from the organization.	pensated in ompensatio	depe on for	ndei the	nt c	ont end	ractor ar yea	s th	nat received more nding with or with	than \$100,00 in the organiz	00 of ation	s tax
(A) Name and business add	ress							(B) Description of ser	vices	Со	(C) mpensation
2 Total number of independent contractors (in more than \$100,000 in compensation from the				ited	to	those	e lis	sted above) who	received		

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Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	nplo	oye	es,	and	Hig	hest Compensat	ed Emplo	oyees (continued)
(A) Name and title	(B) Average hours per week (list any hours for	box,	unles er and	Po: heck ss po d a o	erson direct	e than is both tor/trus	an tee)	(D) Reportable compensation from the	(E Repor compensa relat organiz	table tion from ed	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/109		from the organization and related organizations
37) MICHAEL R. BLOOMBERG EX-OFFICIO TRUSTEE	1.00	X						0			
38) ADRIAN BENEPE EX-OFFICIO TRUSTEE TIL 9/2012	1.00	X						0		0	
39) KATE D. LEVIN EX-OFFICIO TRUSTEE	1.00	Х						0		0	
40) JOHN LIU EX-OFFICIO TRUSTEE	1.00	Х						0		0	
41) CHRISTINE QUINN EX-OFFICIO TRUSTEE	1.00	Х						0			
42) VERONICA M. WHITE EX-OFFICIO TRUSTEE FROM 9/2012	1.00	Х						0		0	
43) GAYLE PERKINS ATKINS ELECTIVE TRUSTEE-UNTIL 12/2012	1.00	X						0			
44) SUSANA TORRUELLA LEVAL ELECTIVE TRUSTEE UNTIL 9/2012	1.00	Х						0		0	
45) JAMES J. ROSS ELECTIVE TRUSTEE UNTIL 9/2012	1.00	X						0	V		
46) THOMAS P. CAMPBELL DIR & CEO, EX-OFFICIO TRUSTEE	35.00			Х				886,382.		0	337,118
47) EMILY K. RAFFERTY PRESIDENT, EX-OFFICIO TRUSTEE	35.00			X				830,327.		0	54,452.
Sub-total C Total from continuation sheets to Part VII, So d Total (add lines 1b and 1c) Total number of individuals (including but not I reportable compensation from the organization	ection A	· · · ·	stec				red	ceived more than \$	\$100,000	of	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedu	er, director	r, or h indi	trus	stee	e, k	ey e	mpl	oyee, or highest	compens	ated	Yes No
4 For any individual listed on line 1a, is the sorganization and related organizations greindividual	um of rep	ortabl \$150	e co 0,00	omp 00?	oens	atior "Yes	an " c	d other compens	ation from	the	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye Section B. Independent Contractors	accrue con s," complete	npens e <i>Sche</i>	atio e <i>dul</i> e	n fi e J	rom for s	any such j	unro pers	elated organizatio on	n or indivi	idual • • •	5 X
Complete this table for your five highest compensation from the organization. Report coyear.	pensated in ompensatio	depei n for	nder the	nt c	ontr enda	actor	s th	nat received more anding with or within	than \$100 in the orga	0,000 of anization	s tax
(A) Name and business addr	ess							(B) Description of ser	vices	Co	(C) ompensation
2 Total number of independent contractors (in more than \$100,000 in compensation from the	cluding but organizatio	not on ▶	limi	ted	to	those	e lis	ted above) who i	received		

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Form 990 (2012) Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (A) (B) Reportable Name and title Position Estimated Reportable Average (do not check more than one compensation hours per compensation from amount of box, unless person is both an week (list any from other related hours for officer and a director/trustee) compensation the organizations Individual t or director Officer from the related Highest nstitutional trustee organization (W-2/1099-MISC) organizations organization (W-2/1099-MISC) employee below dotted and related compensated organizations line) 48) CARRIE R. BARRATT 35.00 ASSOC DIR COLLECTIONS/ADMIN. X 294,662. 53,936. JENNIFER RUSSELL 35.00 ASSOC DIRECTOR OF EXHIBITIONS Χ 319,742. 37,052. SHARON H. COTT 35.00 SR VP, SEC & GEN COUNSEL Χ 0 410,483 54,170. HAROLD L. HOLZER 35.00 SR VP, FOR EXTERNAL AFFAIRS Χ 421,797. C 54,539. OLENA M. PASLAWSKY 35.00 SR VP, CFO & TREASURER Χ 438,471. 43,998. NINA MCN. DIEFENBACH 35.00 VP DEVELOPMENT & MEMBERSHIP Χ 364,916 0 54,235. TOM JAVITS 35.00 VP CONSTRUCTION & FACILITIES X 313,635 0 54,185. BRADLEY L. KAUFFMAN 35.00 VP & GEN MGR MERCH & RETAIL Χ 510,711. 38,156. DEBRA A. MCDOWELL 35.00 VP FOR HUMAN RESOURCES Χ 287,997. 43,205. ELYSE TOPALIAN 35.00 VP FOR COMMUNICATIONS Х 261,674. 50,113. SUZANNE E. BRENNER 58) 35.00 CHIEF INVESTMENT OFFICER 970,395. 233,868. Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization > 175 Yes No 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated Х 3 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 Χ 4 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 Χ Section B. Independent Contractors 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

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Sub-total Chief Technology Officer 35.00 Ch	Part VII Section A. Officers, Directors, 7	Γrustees, Κα	y En	ploy	ees,	and	Hig	hest Compensat	ted Emplo	oyees (c	Page continued)
9. TEFFREY BILTE ASSISTANT SECRETARY - LEGAL 35.00 X 194,540. 0 35,12 0 BARBARA DUCHERTY MANAGING CITIEF MEMBER OFFICER 1 LAUREN A. MSERVE BEPOTY CHIEF INVESTMY OFFICER 2 SERIN COBURN CHIEF OFFICER OF DIGITAL MEDIA 3 5,00 X 772,922. 0 189,99 3 5,00 CHIEF OFFICER OF DIGITAL MEDIA 3 5,00 X 363,325. 0 30,89 CHIEF OFFICER OF DIGITAL MEDIA 3 5,00 X 363,325. 0 30,89 CHIEF TECHNOLOGY OFFICER 3 5,00 X 363,325. 0 54,00 X 363,325. 0 54,00 X 363,325. 0 54,00 X 313,951. 0 54,00 X 313,951. 0 53,00 X 313,951. 0 54,00 X 313,951. 0 53,00 X 313,951. 0 54,00 X 313,951. 0 54,		Average hours per week (list any hours for related organizations	box,	not che unless rand a	ositior ck mo persor direc	e than on is both tor/trus	an tee)	Reportable compensation from the organization	Repor compensa relat organiz	table tion from ted ations	Estimated amount of other compensation from the organization
ASSISTANT SECRETARY - LEGAL 35.00 X 194,540. C 35,31 OI BARBARA DOUGHERTY 35.00 X 1,183,990. O 28,44 ILAUREN A. MESERVE 35.00 X 772,922. O 189,991 DEPUTY CHIEF INVESTMY OFFICER X 35.00 X 363,325. O 30,81 DEPUTY CHIEF TOUR MEDIA X 363,325. O 30,81 DEPUTY SPAR X 35.00 X 320,651. O 54,01 DEPUTY SPAR X 35.00 X 320,651. O 54,01 DEPUTY SPAR X 35.00 X 313,951. C 53,01 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of repotrable compensation from the organization P 175 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1at/ If Yes," complete Schedule J for such individual is any former officer, director, or trustee, key employee, or highest compensated employee on line 1at/ If Yes," complete Schedule J for such individual is any former officer, director, or trustee, key employee, or highest compensated employee on line 1at/ If Yes," complete Schedule J for such individual is any former officer, director, or trustee, key employee, or highest compensated employee on line 1at/ If Yes," complete Schedule J for such individual is any former officer, director, or trustee, key employee, or highest compensated employee on line 1at/ If Yes," complete Schedule J for such individual is any former officer, director, or trustee, key employee, or highest compensated employee on line 1at/ If Yes," complete Schedule J for such individual is any former officer, director, or trustee, key employee, or highest compensated employee on line 1at/ If Yes," complete Schedule J for such individual is any former officer, director, or trustee, key employee, or highest compensated employee on line 1at/ If Yes, complete Schedule J for such individual is		1	ual trustee ctor	ional trustee	ployee	t compensated ee	omide of the second second			7.00	organizations
10 PARRARA DOUGHERTY 35.00		35.00		X				194,540.		0	35,19
DEPUTY CHIEF INVSIMT OFFICER 2) ERIN COBURN CHEF OFFICER OF DIGITAL MEDIA 35.00 X 363,325. 0 30,81 3 CEGRGE GOLDNER CHARRMAN DRAWINGS AND PRINTS X 320,691. 0 54,01 4) JEFFREY SPAR CHIEF TECHNOLOGY OFFICER X 313,951. 0 53,00 The complete Schedule of the compensation of the calendar year ending with or within the organization's tax year. (A) Name and business address Complete Schedule J for such compensation of the calendar year ending with or within the organization's tax year. (A) Name and business address Description of services Compensation Complete Schedule J for such person Compensation from the organization's tax year. (B) Description of services Compensation Compensation of independent contractors that received more than \$100,000 of compensation from the organization's tax year. (C) Compensation of services Compensation of services Compensation of services	60) BARBARA DOUGHERTY MANAGING CHIEF MEMBSH. OFFICE.					Х				0	28,468
2) ERIN COBURN 35.00 X 363,325. 0 30,81 3) GEORGE GOLDNER 35.00 X 320,651. 0 54,01 JEFFREY SPAR 35.00 X 313,951. 0 53,01 CRISET TECHNOLOGY OFFICER X 313,951. 0 53,01 Total from continuation sheets to Part VII, Section A	61) LAUREN A. MESERVE DEPUTY CHIEF INVSTMT OFFICER	35.00				Х				0	189,99
33. GEORGE GOLDRER CHAIRMAN DRAWINGS AND FRINTS CRIEF TECHNOLOGY OFFICER 35.00 CRIEF TECHNOLOGY OFFICER 35.00 CRIEF TECHNOLOGY OFFICER 35.00 Total from continuation sheets to Part VII, Section A Total flad lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 175 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. 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. 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. Compensation from the organization. Report compensation from any unrelated organization or individual for services rendered to the organization. Report compensation from the calendar year ending with or within the organization's tax year. (A) Name and business address Total number of independent contractors (including but not limited to those listed above) who received	62) ERIN COBURN CHIEF OFFICER OF DIGITAL MEDIA					Х				0	
A) JEFFREY SPAR CHIEF TECHNOLOGY OFFICER Sub-total C Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ist any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 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 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization. Report compensation from the organization from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address Total number of independent contractors (including but not limited to those listed above) who received		35.00				Х				0	
1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 16 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 175 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 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) Name and business address (B) Description of services Compensation Compensation Total number of independent contractors (including but not limited to those listed above) who received	64) JEFFREY SPAR	35.00								0	53,008
d Total (add lines 1b and 1c).									1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
d Total (add lines 1b and 1c).											
d Total (add lines 1b and 1c).											
d Total (add lines 1b and 1c).											
d Total (add lines 1b and 1c).											4. 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
Total number of independent contractors (including but not limited to those listed above) who received Yes Yes Yes Yes Yes Yes Yes Y	c Total from continuation sheets to Part VII,	Section 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	2 Total number of individuals (including but no	t limited to th	nose li				re	ceived more than	\$100,000	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 off employee on line 1a? If "Yes," complete Sche-	icer, directo	r, or h indi	truste	e, ∶	key e	mpl	loyee, or highest	compens	sated	Yes N
for services rendered to the organization? If "Yes," complete Schedule J for such person	4 For any individual listed on line 1a, is the organization and related organizations g	sum of rep reater than	ortabl \$150	e con	npen ? <i>If</i>	satior <i>"Yes</i> ,	an "" c	nd other compens	ation from	the such	4 X
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address (B) Description of services Compensation Total number of independent contractors (including but not limited to those listed above) who received	for services rendered to the organization? If "	r accrue cor Yes," complet	npens e <i>Sch</i> e	ation edule	from <i>J for</i>	any such j	unr o <i>ers</i>	elated organizatio	n or indiv	idual •••	5 X
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	Complete this table for your five highest cor										
Name and business address Description of services Compensation Total number of independent contractors (including but not limited to those listed above) who received	year.					u. y.c.	UI		m are orga	2.112atiO11	
		ddress							vices	Co	
				limite	d to	those	l e lis	sted above) who	received		

Part VIII Statement of Revenue

30000000		Check if Schedule O co	ontains a respo	onse to any que	stion in this Part VI			Х
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tar under sections 512, 513, or 514
nts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b	29,430,108.	_			
fts,	С	Fundraising events	, 1c	17,467,284.				
nig.	d	Related organizations	1d					
Sir	е	Government grants (contribut	ions) 1e	17,775,318.	the state of the s			
buti	f	All other contributions, gifts, grant	. 1 1					
o tri		and similar amounts not included		245,561,765.				
a ငိ	g h							
e		Total. Add intes (a-1)		Business Code	The second secon			
ven	2a	EDUCATION PROGRAMS, CONCER	RTS & LECTURES	532000	18,206,738.	18,065,450.	141,288.	
P. Pe	b		4 1101011110	532000	85,980.		85,980.	
, vice	c						00,000.	
Ser	d							
am	е	-			:			
Program Service Revenue	f	All other program service reve						
<u>a</u>	g	Total. Add lines 2a-2f	<u> </u>	<u> ></u>	18,292,718.			
OTTO-LINE	3	Investment income (including other similar amounts)		▶			397,765.	47,110,505
	4	Income from investment of ta						
ĺ	5	Royalties	(i) Real	(ii) Personal	133,042.			133,042
		Cross route	()	(1)				
İ	6a b	Gross rents						
	C	Rental income or (loss)			400			
	d	Net rental income or (loss)			0		***************************************	
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
	r a	assets other than inventory	918,569,824.					
	b	Less: cost or other basis						
		and sales expenses	730,601,009.					
	c d	Gain or (loss)			187,968,815.			187,968,815.
enne	8a	Gross income from fundrais	•					
		events (not including \$17,4						
è		of contributions reported on lin	, , , , , , , , , , , , , , , , , , ,					
-		See Part IV, line 18	1	563,375.				
Other Rev	b c	Less: direct expenses Net income or (loss) from fund		5,144,953.	4 501 570			4 504 500
0		Gross income from gaming act See Part IV, line 19	ivities.		-4,581,578.			-4,581,578.
	b c	Less: direct expenses Net income or (loss) from gam	ь		0	TE FIELD		
1	0a		y, less	69,337,316.	U			
	b	Less: cost of goods sold		28,451,251.				
	С	Net income or (loss) from sales	of inventory	<u> </u>	40,886,065.	38,449,629.	2,436,436.	
L		Miscellaneous Revenue		Business Code				
1	1 a	RESTAURANT		812930	21,347,228.			21,347,228.
	b	PARKING GARAGE		812930	2,671,380.			2,671,380.
	С	CORPORATE EVENTS		561499	1,684,803.	749,880.	934,923.	· · · · · · · · · · · · · · · · · · ·
	d	All other revenue	-	900099	5,419,917.	5,419,917.		
	e	Total. Add lines 11a-11d		r	31,123,328.			
	2	Total revenue. See instructions			631,565,135.	62,684,876.	3,996,392.	254,649,392.

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13-1624086

METROPOLITAN MUSEUM OF ART

Part IX Statement of Functional Expenses

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

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

***************************************	Check if Schedule O contains a response to any question in this Part IX								
	onot include amounts reported on lines 6b, 7b, , 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	()						
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	1,628,177.	1,628,177.						
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	72,166.	72,166.						
4	Benefits paid to or for members	()						
5	Compensation of current officers, directors, trustees, and key employees	6,977,775.	5,186,197.	1,427,389.	364,189.				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	C							
7	Other salaries and wages	125,494,834.	110,934,900.	9,352,944.	5,206,990.				
8	Pension plan accruals and contributions (include section								
•	401(k) and 403(b) employer contributions)	19,854,499.	17,683,984.	1,647,576.	522,939.				
9	Other employee benefits	30,206,538.	24,692,893.	4,692,147.	821,498.				
10	Payroll taxes	10,126,519.	8,504,172.	1,265,265.	357,082.				
11	Fees for services (non-employees):	0							
	Management	2,733,395.	39,168.	2,694,227.					
	Legal	569,180.	39,108.	569,180.	WW.				
	Accounting	268,238.	268,238.	309,100.					
	Lobbying	342,350.	200,230.		342,350.				
	Professional fundraising services. See Part IV, line 17	13,939,862.		13,939,862.	342,330.				
	Investment management fees	13,939,002.		13, 939, 862.					
g	Other. (If line 11g amount exceeds 10% of line 25, column	11,893,354.	7,008,456.	4,577,780.	307,118.				
12	(A) amount, list line 11g expenses on Schedule O.)	2,882,288.	2,466,105.	197,257.	218,926.				
13	Advertising and promotion	31,765,459.	28,033,984.	2,914,619.	816,856.				
14	Office expenses	1,689,003.	737,511.	853,144.	98,348.				
15	Royalties	263,614.	263,614.	033/111.	70,010.				
16	Occupancy	5,751,075.	5,727,273.	23,239.	563.				
17	Travel	2,974,383.	2,735,311.	180,695.	58,377.				
18	Payments of travel or entertainment expenses	0	, 100,011	230,030	33,311.				
40	for any federal, state, or local public officials	282,991.	142 600	122 201	7 020				
	Conferences, conventions, and meetings	4,494,614.	142,680. 4,402,401.	133,291. 92,213.	7,020.				
	Interest	4,494,014.	4,402,401.	92,213.					
21 22	Payments to affiliates	47,120,892.	44,764,125.	2,178,973.	177,794.				
23		2,501,563.	1,842,368.	659,094.	177,794.				
24	Insurance	2,301,303.	1,042,500.	039,094.	101.				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If								
	line 24e amount exceeds 10% of line 25, column								
	(A) amount, list line 24e expenses on Schedule O.)								
و	PURCHASES OF ART	103,196,801.	103,196,801.						
	RESTAURANT SERVICES & SUPPLI	17,285,495.	17,285,495.						
	REPAIRS & MAINTENANCE	9,163,742.	8,952,644.	169,334.	41,764.				
	CATERING SERVICES	2,997,425.	1,752,196.	264,195.	981,034.				
	All other expenses	6,100,686.	5,907,029.	106,831.	86,826.				
25	Total functional expenses. Add lines 1 through 24e	462,576,918.	404,227,888.	47,939,255.	10,409,775.				
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)		, ,	,					
JSA		9			Form 990 (2012)				

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Form 990 (2012)

METROPOLITAN MUSEUM OF ART Page **11**

\mathbf{R}	art X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Pa	ırt X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	2,307,053.	1	1,993,623.
	2	Savings and temporary cash investments	C	2	(
	3	Pledges and grants receivable, net	93,674,261.	3	110,921,949.
	4	Accounts receivable, net		4	26,901,586.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	C	5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
ts		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	14 000 700	7	14 761 010
Ä		Inventories for sale or use	14,888,799.	8	14,761,212.
	9	Prepaid expenses and deferred charges	8,170,632.	9	8,073,645.
	10 a	Land, buildings, and equipment: cost or			
	١.	other basis. Complete Part VI of Schedule D 10a 995, 341, 490.			446 051 421
		Less: accumulated depreciation	·		
	11	Investments - publicly traded securities			1,909,809,900.
	12	Investments - other securities. See Part IV, line 11			880,724,145.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	CE C17 400	14	21 756 055
	15	Other assets. See Part IV, line 11		15	71,756,255.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16	3,471,893,746.
	17	Accounts payable and accrued expenses		17	227,806,738.
	18	Grants payable	7 550 400	18	E 000 010
	19	Deferred revenue		19	5,820,212.
	20	Tax-exempt bond liabilities	194,080,665.	20	174,310,404.
Liabilities	21	Escrow or custodial account liability. Complete Part IV of Schedule D	U	21	L L
Ħ	22	Loans and other payables to current and former officers, directors,			
į.		trustees, key employees, highest compensated employees, and		43000	,
_		disqualified persons. Complete Part II of Schedule L		22	40 030 000
	23	Secured mortgages and notes payable to unrelated third parties		23	40,030,000.
	24	Unsecured notes and loans payable to unrelated third parties	<u> </u>	24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
		· · · · · · · · · · · · · · · · · · ·	20,848,519.	25	20,477,629.
	26	of Schedule D	489,754,953.	26	
s	20	Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.	403/734/333.	20	100/444/303.
Fund Balances	27	Unrestricted net assets	699,987,338.	27	823,134,402.
3al	28	Temporarily restricted net assets	1,181,481,693.	28	1,324,437,745.
þ	29	Permanently restricted net assets	831,565,481.	29	855,876,616.
or Fur		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
sse	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	2,713,034,512.	33	3,003,448,763.
	34	Total liabilities and net assets/fund balances		34	3,471,893,746.

Form **990** (2012)

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METROPOLITAN MUSEUM OF ART

13-1624086

Form 9	90 (2012)				Р	age 12
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI				X	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		631,5	65,	135.
2	Total expenses (must equal Part IX, column (A), line 25)	2		462,5	576,	918.
3	Revenue less expenses. Subtract line 2 from line 1	3		168,9	988,	217.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,	713,0	34,	512.
5	Net unrealized gains (losses) on investments	5		80,6	513,	335.
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain in Schedule O)	9		40,8	312,	699.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	3,0	003,4	48,	763.
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII				_	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	L				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," ex	xplair	n in			
	Schedule O.					No.
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed o	n a			
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs	ight				
	of the audit, review, or compilation of its financial statements and selection of an independent accour	tant?	•	2c	Х	A100 (1000)
	If the organization changed either its oversight process or selection process during the tax year, ex	xplair	n in			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	in in			
	the Single Audit Act and OMB Circular A-133?			3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?		the			ĺ
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	lits		3b	X	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

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 4 hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 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). Χ 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). 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. Type II c Type III-Functionally integrated d Type III-Non-functionally integrated 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 organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the q (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes 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 (v) Did you notify (vi) Is the (vii) Amount of monetary (described on lines 1-9 organization organization in organization in the organization support col. (i) listed 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 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) 2012

Schedule A (Form 990 or 990-EZ) 2012

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Part Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Calendar year (or fiscal year beginning in) Gifts. grants, contributions. and membership fees received. (Do not include any "unusual grants.") 159,035,838 153,972,180 192,790,476. 193,652,342 310,234,475. 1,009,685,311. Tax revenues levied for organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the 15,823,383 13,738,289 organization without charge 15,369,185 16 151 301 77,107,909. Total. Add lines 1 through 3..... 174,859,221 167,710,469 209,803,643 1,086,793,220. The portion of total contributions by each person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)..... 49,082,918. Public support. Subtract line 5 from line 4. 037,710,302. Section B. Total Support (a) 2008 (b) 2009 Calendar year (or fiscal year beginning in) (c) 2010 (d) 2011 (e) 2012 (f) Total 174,859,221. Amounts from line 4 167,710,469. 209,803,643 208,159,661 326,260,226. 1,086,793,220. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 29,463,640. 29,308,975 38,736,504 29,759,757 47,256,240. 174,525,116. Net income from unrelated business activities, whether or not the business is regularly carried on 3,983,699 3,983,699. 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 . . 265,302,035. 12 418,527,237. First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 82.01% 84.44% 15 16a 331/3 % support test - 2012. If the organization did not check the box on line 13, and line 14 is 331/3 % or more, check this box and **stop here**. The organization qualifies as a publicly supported organization $\dots \dots \dots \dots \dots \blacktriangleright igsqcup X$ b 331/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶ | 17a 10%-facts-and-circumstances test - 2012. 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 b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

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Schedule A (Form 990 or 990-EZ) 2012

METROPOLITAN MUSEUM OF ART

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

Sec	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
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	l					
	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	L					
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	ļ					
	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						
	received from other than disqualified persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for						
	organization, check this box and stop here.						▶
	tion C. Computation of Public Sup			(8)	T		
15	Public support percentage for 2012 (line 8,					15	<u>%</u>
16	Public support percentage from 2011 Sche				· · · · · · · · · · · · · · · · · · ·	16	<u>%</u>
	tion D. Computation of Investmen						
17	Investment income percentage for 2012 (lin					17	<u>%</u>
18	Investment income percentage from 2011 S					18	<u>%</u>
19 a	331/3% support tests - 2012. If the org						_ []
	17 is not more than 331/3%, check this		_	•	•	-	
b	33 1/3 % support tests - 2011. If the organ						
	line 18 is not more than 331/3%, check		•	•		•	
20	Private foundation. If the organization of	id not check a	box on line 1	14, 19a, or 19b,	check this box	and see instru	ictions >

Schedule A (Form 990 or 990-EZ) 2012

METROPOLITAN MUSEUM OF ART

13-1624086

Schedule A (Form 990 or 990-EZ) 2012

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Part IV 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

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ 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.

▶ Complete if the organization is described below.

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

, .	s that have filed Form 5768 (election un s that have NOT filed Form 5768 (elect		·	•
· · · · · · · ·	" to Form 990, Part IV, line 5 (Proxy T	·		•
 Section 501(c)(4), (5), or (6) or 	ganizations: Complete Part III.			
Name of organization			Employer ident	fication number
METROPOLITAN MUSEUM OF				24086
Part I-A Complete if the o	organization is exempt under	section 501(c) or i	s a section 527 orgar	nization.
1 Provide a description of the	e organization's direct and indirect p	political campaign a	ctivities in Part IV.	
2 Political expenditures			▶ \$	
3 Volunteer hours				
Part I-B Complete if the o	organization is exempt under s	ection 501(c)(3).		
1 Enter the amount of any ex	cise tax incurred by the organization	n under section 495	5 ▶ \$	
2 Enter the amount of any ex	cise tax incurred by organization m	anagers under secti	on 4955 🕨 \$	
3 If the organization incurred	a section 4955 tax, did it file Form	4720 for this year?		Yes No
				Yes No
b If "Yes," describe in Part IV.		<u> </u>		
	organization is exempt under).
•	expended by the filing organization			
activities			▶ \$	
	ng organization's funds contributed	_		
	es			
	enditures. Add lines 1 and 2. En			
	e Form 1120-POL for this year?			
	and employer identification numb			
	ts. For each organization listed, en tributions received that were prom			
	nd or a political action committee			
	Ţ	Ì	<u> </u>	I
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
			funds. If none, enter -0	promptly and directly
			·	delivered to a separate political organization. If
				none, enter -0
(1)				
(0)				
(2)				
(3)				
(3)				
(4)				
17)				
(5)				
• •)	1	1

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

Schedule C (Form 990 or 990-EZ) 2012

JSA 2E1264 1.000

(6)

Sch	nedule C (Form 990 or 990-EZ) 2012 METRO	OLITAN MUSEUM OF ART	13-16	24086 Page 2
P	art II-A Complete if the organizati section 501(h)).	on is exempt under section 501(c)(3) and	l filed Form 5768 (elec	tion under
Α	Check ▶ if the filing organization	belongs to an affiliated group (and list in Pa	art IV each affiliated gro	oup member's
В		enses, and share of excess lobbying expend checked box A and "limited control" provisi		
		oying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 :	a Total lobbying expenditures to influence	e public opinion (grass roots lobbying)	17,001.	
ı	b Total lobbying expenditures to influence	e a legislative body (direct lobbying)	251,237.	
(Total lobbying expenditures (add lines	268,238.		
(495,904,884.	
(dd lines 1c and 1d) [496,173,122.	
1		the amount from the following table in both	1,000,000.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
Ç	Grassroots nontaxable amount (enter	25% of line 1f)	250,000.	
ł	Subtract line 1g from line 1a. If zero or		0	0
i	Subtract line 1f from line 1c. If zero or		0	0
i	If there is an amount other than zer	o on either line 1h or line 1i, did the organiz	ation file Form 4720	

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(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.			
С	Total lobbying expenditures	249,958.	248,736.	254,258.	268,238.	1,021,190.			
d	Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.			
е	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.			
f	Grassroots lobbying expenditures	15,676.	15,615.	16,358.	17,001.	64,650.			

Schedule C (Form 990 or 990-EZ) 2012

Yes

Page 3

METROPOLITAN MUSEUM OF ART

For each "Vee" reasons		Noo! recogning to lines to the order of below and the law of the lines	(a)		(b)			
		Yes," response to lines 1a through 1i below, provide in Part IV a detailed of the lobbying activity.	Yes	No		Amo	ount	
1	legislat referen	the year, did the filing organization attempt to influence foreign, national, state or local ion, including any attempt to influence public opinion on a legislative matter or dum, through the use of:						
a b	Volunte Paid sta	ers? aff or management (include compensation in expenses reported on lines 1c through 1i)?						
C	Media a	advertisements?						
d e	Publica	s to members, legislators, or the public? tions, or published or broadcast statements?						
f	Grants	tions, or published or broadcast statements? to other organizations for lobbying purposes?						
g	Direct of	contact with legislators, their staffs, government officials, or a legislative body?						
h	Rallies,	demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i		ctivities?						
j	Total. A	dd lines 1c through 1i						
2a b	If "Yes "	activities in line 1 cause the organization to be not described in section 501(c)(3)? 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		ing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Par		Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	ectio	n		
		501(c)(6).					·	· · · · · ·
1	Moro o	thetentially all (00% or mare) dues received nanded withle by manufactor					Yes	No
2		ubstantially all (90% or more) dues received nondeductible by members? organization make only in-house lobbying expenditures of \$2,000 or less?				1	 	-
3	Did the	organization agree to carry over lobbying and political expenditures from the prior year?		• • •		3	 	
Par		Complete if the organization is exempt under section 501(c)(4), section 501						<u> </u>
		501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"					3, is	i
		answered "Yes."						
		sessments and similar amounts from members			1			
		162(e) nondeductible lobbying and political expenditures (do not include amou expenses for which the section 527(f) tax was paid).	nts c	of				
					2a			
b	Carryove	yearer from last year		• •	2b			***************************************
C	Total	• • • • • • • • • • • • • • • • • • • •		• •	2c			
3	 Aggrega	ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	s		3	***************************************		
		s were sent and the amount on line 2c exceeds the amount on line 3, what portion						
		does the organization agree to carryover to the reasonable estimate of nondeductible lo	bbyin	g				
		tical expenditure next year?			4			
o Pan		amount of lobbying and political expenditures (see instructions)		• • •	5			
Comp	olete this	s part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line s, line 2; and Part II-B, line 1. Also, complete this part for any additional information.	5; Par	t II-A	(affiliate	=d gro	up	
	· · · · · · · · · · · · · · · · · · ·					·		

JSA 2E1266 1.000

Schedule C (Form 990 or 990-EZ) 2012

METROPOLITAN MUSEUM OF ART

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Schedule C (Form 990 or 990-EZ) 2012

Page 4

Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► 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

Name of the organization

METROPOLITAN MUSEUM OF ART

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the

Pa	Organizations Maintaining Donor Advi organization answered "Yes" to Form 9	sed Funds or Other Similar 90, Part IV, line 6.	Funds or Accounts. Complete if the
*****		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor a	advisors in writing that the asse	ts held in donor advised
	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, an	-	
	only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?		· · · · · · · · · · · · · · · · · · ·
Pa	rt II Conservation Easements. Complete if	the organization answered "\	es" to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the	organization (check all that apply).
	Preservation of land for public use (e.g., recre	eation or education) Pres	ervation of an historically important land area
	Protection of natural habitat	Pres	ervation of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization he	ld a qualified conservation cont	ribution in the form of a conservation
	easement on the last day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified h	nistoric structure included in (a).	<u>2c</u>
d	Number of conservation easements included in (c)	•	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, trans	ferred, released, extinguished,	or terminated by the organization during the
	tax year ▶		
4	Number of states where property subject to conser	vation easement is located 🕨	
5	Does the organization have a written policy regarding		
	violations, and enforcement of the conservation eas		
6	Staff and volunteer hours devoted to monitoring, ins	specting, and enforcing conserv	ation easements during the year
7	Amount of expenses incurred in monitoring, inspect	ing, and enforcing conservation	easements during the year
	> \$		
8	Does each conservation easement reported on line	• •	
	(i) and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports of		
	balance sheet, and include, if applicable, the text of		i's financial statements that describes the
	organization's accounting for conservation easemen		
lite	Organizations Maintaining Collections Complete if the organization answered '	of Art, Historical Treasures,	or Other Similar Assets.
1a	If the organization elected, as permitted under SFA	AS 116 (ASC 958), not to repo	ort in its revenue statement and balance sheet
	If the organization elected, as permitted under SFA works of art, historical treasures, or other similar public service, provide, in Part XIII, the text of the foo	otnote to its financial statements	that describes these items.
b	If the organization elected, as permitted under S		
	works of art, historical treasures, or other similar	assets held for public exhibit	
	public service, provide the following amounts relating		
	(i) Revenues included in Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art		•
	following amounts required to be reported under SF		
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
<u>b</u>	Assets included in Form 990, Part X		· · · · · · · · · · · · > \$

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

METROPOLITAN MUSEUM OF ART

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Pa	dule D (Form 990) 2012								Page 2
	rt III Organizations Maintair	ning Collections of	of Art, Historical	Treasure	s, or O	ther Simi	lar Ass	ets (cont	
3	Using the organization's acquisiti collection items (check all that app	on, accession, and oly):	other records, che	ck any of t	he follow	wing that a	ıre a sig	nificant us	e of its
а	X Public exhibition		d X Loar	or exchan	ge progra	ıms			
b	X Scholarly research			r					
С	X Preservation for future gene	erations	lancoured						
4	Provide a description of the orga	nization's collection	s and explain how	they further	er the or	ganization'	s exemp	t purpose	in Part
	XIII.		,	•			•		
5	During the year, did the organizati	on solicit or receive	donations of art, his	storical trea	sures, or	other simil	ar		
	assets to be sold to raise funds rat							Yes	X No
Par	t IV Escrow and Custodial line 9, or reported an an	Arrangements. C	omplete if the o					n 990, P	art IV,
1a	Is the organization an agent, truste	ee, custodian or othe	r intermediary for o	ontribution:	s or othe	r assets no	t		
	included on Form 990, Part X?						[Yes	No
b	If "Yes," explain the arrangement is	n Part XIII and comp	ete the following to	ıble:					
						A	mount		
C	Beginning balance			10	5				
d	Additions during the year		. <i></i>	10	t				
е	Distributions during the year				•				
f	Ending balance			11	:				
	Did the organization include an an							Yes	No
b	If "Yes," explain the arrangement in								
Par	tV Endowment Funds. Cor	nplete if the orgar	ization answered	"Yes" to F	orm 99	0, Part IV,	line 10.		
		(a) Current year	(b) Prior year	(c) Two ye	ears back	(d) Three ye	ears back	(e) Four ye	ars back
	Beginning of year balance	2181790580.	2313067614.		56158.	186430			18961
	Contributions	28,031,302.	24,912,568.	14,82	1,823.	4,741	,195.	18 , 57	2 , 729
С	Net investment earnings, gains,								
	and losses	301,511,700.	-2,340,878.					man to an incidence of the second	73909
	Grants or scholarships	2,502,016.	2,675,861.	2,31	3 , 828.	2,292	2,900.	2,17	7,291
е	Other expenditures for facilities								
	and programs	137,340,325.	151,171,863.	130,840	0,197.	138,526	,156.	122,53	7,960
	Administrative expenses								
	End of year balance	2371491241.	2181791580.			199425	6158.	18643	02530
	Provide the estimated percentage	•		, column (a)) held as	.			
			_%						
	Permanent endowment ►66.0								
С	Temporarily restricted endowment								
•	The percentages in lines 2a, 2b, ar								
	Are there endowment funds not in	the possession of the	ie organization that	are held a	nd admir	istered for t	the	<u></u>	
	organization by:							Ye	
	(i) unrelated organizations							3a(i)	X
	(ii) related organizations							3a(ii)	X
	If "Yes" to 3a(ii), are the related org					• • • • • •		3b	
		ses of the organizati							
4	Describe in Part XIII the intended u		000 0 11/11	111					
4	Land, Buildings, and Equ	iipment. See Forn		; 10.	1				
4 Par	Land, Buildings, and Equ Description of property	ipment. See Forn (a) Cost or (invest	other basis ment) (b) Cost	or other basis other)		umulated eciation	(d) Book value	-
4 Pari 1a	Land, Buildings, and Equ Description of property Land	ipment. See Forn (a) Cost or (invest	other basis ment) (b) Cost	or other basis			(d) Book value	,000.
Par 1a b	Land, Buildings, and Equation Description of property Land	(a) Cost or (invest	other basis (b) Cost (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	or other basis other)	depre		(d		
Par 1a b	Description of property Land	(a) Cost or (invest	other basis (b) Cost (c) (b) Cost (d) (d) (d) (d) (d) (d) (d) (d) (d) (d)	or other basis other)	22,18	36,197.		1,015	,153.
Pari 1a b c d	Land, Buildings, and Equation of property Land	ipment. See Forn (a) Cost or (invest	other basis (b) Cost (c) (b) Cost (d) (d) (d) (d) (d) (d) (d) (d) (d) (d)	or other basis other) 015,000.	22,18	B6,197.		1,015 14,037	,153.
4 Pari 1a b c d e	Description of property Land	ipment. See Forn (a) Cost or (invest	other basis (b) Cost (c) (b) Cost (d) (d) (d) (d) (d) (d) (d) (d) (d) (d)	or other basis other) 015,000. 223,350. 173,987. 929,153.	22,18 479,29 46,91	36,197. 90,779.		1,015 14,037 415,883	,153.

Schedule D (Form 990) 2012

JSA 2E1269 1.000

METROPOLITAN MUSEUM OF ART Schedule D (Form 990) 2012

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Part VII	Investments - Other Securities. See F	orm 990, Part X, lin	e 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financi	al derivatives		
(2) Closely	-held equity interests		
(3) Other_	VATE EQUITY		
(A) PRI	VATE EQUITY	517,201,879.	FMV
	L ASSETS	363,522,266.	FMV
<u>(C)</u>			
(D)			
(E)			
(F) (G)			
(H)			
(1)		was well and the second of the	
	n (b) must equal Form 990, Part X, col. (B) line 12.)	880,724,145.	
Part VIII	Investments - Program Related. See F		e 13.
	(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)		***************************************	
(5)		-	
(6)			
(7)			
(8)			
(9) (10)			
	n (b) must equal Form 990, Part X, col. (B) line 13.)	<u></u>	
Part IX	Other Assets. See Form 990, Part X, lin	ne 15	
BANJARIAN		Description	(b) Book value
(1)	11.11.11.11.11.11.11.11.11.11.11.11.11.		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)	***************************************		
(8)			
(9)			
(10)	war (b) must a wal Farm 000 Bart V and (B) ii	4F\	
Part X	mn (b) must equal Form 990, Part X, col. (B) li		
1.	Other Liabilities. See Form 990, Part X (a) Description of liability	(b) Book value	
	al income taxes	(b) Book value	
	TY & SPLIT-INT OBLIGS.	20,477,6	529.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 25.)	▶ 20,477,6	29.
2 FIN 48 (A	SC 740) Footnote In Part XIII, provide the text of	f the faatnate to the or	ganization's financial statements that reports the organization's

liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. JSA 2E1270 1.000 06571Q 2536 2/14/2014 11:01:21 AM V 12-7.12

METROPOLITAN MUSEUM OF ART

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Schedule D (Form 990) 2012		Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu	rn	
1 Total revenue, gains, and other support per audited financial statements	1	549,162,948.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments		
b Donated services and use of facilities 2b	1	
c Recoveries of prior year grants 2c	7	
d Other (Describe in Part XIII.)	1	
e Add lines 2a through 2d	2e	-49,080,818.
3 Subtract line 2e from line 1		598,243,766.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3	330/213/700.
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b 33,321,369	-	
		22 221 260
c Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	4c	33,321,369.
		631,565,135.
	1	242 065 105
1 Total expenses and losses per audited financial statements	1	343,867,125.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	4	
b Prior year adjustments 2b	1	
c Other losses 2c	_	
d Other (Describe in Part XIII.) e Add lines 2a through 2d d 49,978,512.		
o raa moo za mough za	2e	49,978,512.
3 Subtract line 2e from line 1	3	293,888,613.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b 168,688,305.		
c Add lines 4a and 4b	4c	168,688,305.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	5	462,576,918.
Part XIII Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to proinformation. SEE PAGE 5	V, line ovide a	s 1b and 2b; any additional

Part XIII Supplemental Information (continued)

SCHEDULE D, PART III, LINE 1A

SFAS 116 FOOTNOTE

Schedule D (Form 990) 2012

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

Page 5

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

SCHEDULE D, PART XI, LINE 1

SUPPORT FOR MUSEUM EXPENSES.

AUDITED FINANCIAL STATEMENTS INCLUDE \$326,851,603 FROM OPERATING

ACTIVITIES AND \$222,311,345 FROM NON-OPERATING ACTIVITIES FOR REVENUE,

GAINS AND OTHER SUPPORT. TOTAL PART XII, LINE 1 \$549,162,948

SCHEDULE D, PART XI, 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 \$28,451,251; INVESTMENT RETURN IN EXCESS OF CURRENT SUPPORT FOR OPERATING AND NON-OPERATING \$(179,672,665); UTILITIES PROVIDED BY THE CITY OF NEW YORK \$14,980,005; FUNDRAISING SPECIAL EVENTS \$5,144,953, ADVERTISING GIFT-IN-KIND \$356,557; FEDERAL INDEMNIFICATION AWARD \$1,045,746; TOTAL PART XII, LINE 2D \$(129,694,153).

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Page 5

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

CORPORATE EVENTS EXPENSE \$552,821; INVESTMENT MANAGEMENT FEES \$13,939,862; TRANSFER OF UNDESIGNATED NON-OPERATING FUNDS \$13,023,697; PROCEEDS FROM SALE OF ART \$5,419,917; PARTNERSHIP UBI \$385,072; TOTAL PART XII, LINE 4B \$33,321,369.

SCHEDULE D, PART XII, 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 \$28,451,251; SPECIAL EVENTS DIRECT EXPENSES OTHER THAN FUNDRAISING \$5,144,953; UTILITIES PROVIDED BY THE CITY OF NEW YORK \$14,980,005; ADVERTISING GIFT-IN-KIND \$356,557; FEDERAL INDEMNIFICATION AWARD \$1,045,746; TOTAL PART VIII, LINE 2D \$49,978,512.

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

NON-OPERATING DEPRECIATION AND MISCELLANEOUS NON-CAPITALIZED EXPENDITURES \$46,892,363; PURCHASES OF ART \$103,196,801; INVESTMENT MANAGEMENT FEES \$13,939,862; CORPORATE EVENTS EXPENSE \$552,821; EFFECT OF INTEREST RATE SWAP \$4,106,459; TOTAL PART XIII, LINE 4B \$168,688,305.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

▶ Attach to Form 990. ▶ See separate instructions.

Employer identification number

\$1000 to 1000	ROPOLITAN MUSEUM OF AR				13-162408	
Par	General Information of Form 990, Part IV, line 1		Outside the	United States. Complete	e if the organization answ	vered "Yes" to
1	For grantmakers. Does the organssistance, the grantees' eligibil grants or assistance?	ity for the gran	ts or assistand	e, and the selection criter	ria used to award the	X Yes No
2	For grantmakers. Describe in assistance outside the United St	ates.			•	and other
3	Activities per Region. (The follow (a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	e duplicated if additional s (d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	EUROPE			GRANTMAKING	T. ROUSSEAU FELLOWSHIP	72,166.
(2)	CENTRAL AMERICA/CARIBBEAN			INVESTMENTS		518,642,465.
_(3)	EUROPE			INVESTMENTS		74,537,042.
(4)	EUROPE			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	1,314,000.
_(5)	EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	516,000.
(6)	RUSSIA/INDEPENDENT STATES			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	38,000.
(7)	SOUTH AMERICA			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	13,000.
(8)	NORTH AMERICA			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	18,000.
(9)	MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	376,000.
(10)	SUB-SAHARAN AFRICA			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	12,000.
(11)	CENTRAL AMERICA/CARIBBEAN			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	1,000.
(12)	SOUTH ASIA			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	139,000.
(13)						
(14)						
(15)	Unit 1 (1.1. 1.1. 1.1. 1.1. 1.1. 1.1. 1.1.					
(16)						
(17)						
3a b	Sub-total					595,678,673.

c Totals (add lines 3a and 3b) For Paperwork Reduction Act Notice, see the Instructions for Form 990.

595,678,673. Schedule F (Form 990) 2012

METROPOLITAN MUSEUM OF ART

Part

13-1624086

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. Part II can be duplicated if additional space is needed. Schedule F (Form 990) 2012

(i) Method of valuation (book, FMV, appraisal, other) (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 (b) IRS code section and EIN (if applicable) (a) Name of organization (10) Ξ (12) (13) (14) (15) (16) $\overline{\mathbf{c}}$ ල 3 9 9 E 8 6

³ Enter total number of other organizations or entities.........

13-1624086

METROPOLITAN MUSEUM OF ART

Schedule F (Form 990) 2012
Part III Grants ar

Page 3 Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

EUROPE / DEPARTMENT OF A MONTH OF GENERAL ASSISTANCES	(a) Tune of graph or accidance	At Docion	7	4 16 2	(e) Manner of	(f) Amount of	(g) Description	(h) Method of
THEOREGIAND/GRISHILAND 6,	The original crassistance	uoibay (a)	(c) Number of recipients	(d) Amount of cash grant	cash disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
	OUSSEAU FELLOWSHIP	EUROPE/ICELAND/GREENLAND	.9	72,166.	CHECK		N/A	A/N
Schedick of (Form \$60) 901							THE PROPERTY OF THE PROPERTY O	The state of the s
Schedid F (From 1990) 2012						- Control of the Cont		
Selective F (Form 869) 2012				TO THE THE THE THE THE THE THE THE THE THE				
Schedule F (Form 989) 2012								William and the state of the st
Schedule F (Form 980) 2012				The state of the s				
Schedule F (Form 990) 2012					To the state of th	The second secon		
Schedule F (Form 989) 2012						The contract of the contract o		
Schedule F (Form 990) 2012						A DESCRIPTION OF THE PROPERTY		
Schedule F (Form 990) 2012					- The state of the	The second secon		
						TO THE POPULATION OF THE POPUL		
Schedule F (Form 980) 2012						· ·		
Schedule F (Form 990) 2012					A THE STATE OF THE	The second secon		
Schedule F (Form 990) 2012						The second secon		
Schedule F (Form 990) 2012						The state of the s		
Schedule F (Form 990) 2012						The second secon		
Schedule F (Form 990) 2012						The state of the s		Annahir Annahi
Schedule F (Form 990) 2012								
							Sch	edule F (Form 990) 2012

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PAGE 38

METROPOLITAN MUSEUM OF ART

13-1624086

Schedule F (Form 990) 2012 Page 4 Part IV Foreign Forms 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 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) X No Yes 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) No 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) No 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 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 Yes

Schedule F (Form 990) 2012

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METROPOLITAN MUSEUM OF ART

13-1624086

Schedule F (Form 990) 2012

Page 5

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.

OMB No. 1545-0047 Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number METROPOLITAN MUSEUM OF ART 13-1624086 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. e X Solicitation of non-government grants а Mail solicitations Χ X h Internet and email solicitations Solicitation of government grants Χ g X Special fundraising events c Phone solicitations X In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? X Yes b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) custody or control of (ii) Activity (or retained by) or entity (fundraiser) from activity fundraiser listed in contributions? organization col. (i) Yes No 1 TELE-DONOR SERVICES GROUP MARKETING Χ 661,429 342,350 319,079. 2 3 5 6 8 9 10 661,429. Total 342,350 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. 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,

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

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METROPOLITAN MUSEUM OF ART

Schedule G (Form 990 or 990-EZ) 2012

Page 2

Pa	art	Fundraising Events. Complete than \$15,000 of fundraising ever gross receipts greater than \$5,0	nt contributions and gro			
			(a) Event #1 COSTUME INST (event type)	(b) Event #2 ACQ FND DINNER (event type)	(c) Other events 5.	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts	11,899,591.		4,145,833.	18,030,659
Re		Less: Contributions			3,817,448.	
	3	Gross income (line 1 minus line 2)			328,385.	
	4	Cash prizes				
	5	Noncash prizes				
nses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages			· · · · · · · · · · · · · · · · · · ·	
Direc	8	Entertainment	4			
	9	Other direct expenses	3,974,171.	227,631.	943,151.	5,144,953.
	10 11	Direct expense summary. Add lines 4 Net income summary. Combine line 3 Gaming. Complete if the orga than \$15,000 on Form 990-E	3, column (d), and line 10 anization answered "Y) <i>.</i>	<u> </u>	-4,581,578.
Revenue		alan \$10,000 cm omi coo L	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
8	1	Gross revenue	······································			
ses	2	Cash prizes				
Expen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes%	Yes%No	
	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 a b	ls		aming activities in each o	of these states?		Yes No
		ere any of the organization's gaming li	censes revoked, susper	nded or terminated during	g the tax year?	

METROPOLITAN MUSEUM OF ART

13-1624086

Sched	ule G (Form 990 or 990-EZ) 2012
11 12	Does the organization operate gaming activities with nonmembers? Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	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
h	revenue?
D	amount of gaming revenue received by the organization \$\infty\$ and the amount of gaming revenue retained by the third party \$\infty\$
С	If "Yes," enter name and address of the third party:
	Nama N
	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
	retain the state gaming license? Yes No
b	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 > \$
	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
121111	TID OF FONDIATORIO AGREEMENT
DONO	R SERVICES GROUP CONDUCTS TELEMARKETING CAMPAIGNS TO CURRENT AND
LAPS	ED MEMBERS OF THE METROPOLITAN MUSEUM OF ART THROUGHOUT THE YEAR. THE
TELE	MARKETING STAFF REFERS TO A SCRIPT, WHICH IS APPROVED BY THE
MEMB	ERSHIP DEPARTMENT, WHEN SPEAKING WITH MEMBERS. DURING FISCAL YEAR
2013	, 35,145 CURRENT MEMBERS WERE CONTACTED BY DONOR SERVICES GROUP

METROPOLITAN MUSEUM OF ART

13-1624086

Sched	dule G (Form 990 or 990-EZ) 2012			Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other enti	ty		
	formed to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity operated in:			
а	The organization's facility	13a		%
b	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events book	s and		
	records:			
	Name ►			
	Address ►			
15 2	Does the organization have a contract with a third party from whom the organization receives	namina		
154	revenue?		Vac	No
h	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$	and the	163 [NO
	amount of gaming revenue retained by the third party ▶ \$	and the		
С	If "Yes," enter name and address of the third party:			
	Name ▶			
	Address ▶			
16	Gaming manager information:			
	Name &			
	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 pro			 1
	retain the state gaming license?		Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organization and exempt activities during the tox years.	nizations	3	
Dar	or spent in the organization's own exempt activities during the tax year ▶ \$ Supplemental Information. Complete this part to provide the explanation required by P	ort I lin		
LIKELL	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable.	Also co	3 ZD, omplete th	ie
	part to provide any additional information (see instructions).	A130 CC	mpiete un	13
REQU	UESTING A CONTRIBUTION TO THE MEMBERSHIP ANNUAL APPEAL; 11,591 CURRENT			
MEME	BERS WERE CONTACTED PRIOR TO EXPIRATION WITH A REQUEST FOR THEM TO			
RENE	EW THEIR MEMBERSHIP; AND 12,713 LAPSED MEMBERS WERE CONTACTED WITH A			
REQU	JEST FOR THEM TO REJOIN THE MUSEUM.			
	had 2	ule G /Eor	m 990 or 990-l	F7\ 2012
	Scheu	~.~ • ii • ii		,,

JSA

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ► Attach to Form 990. METROPOLITAN MUSEUM OF ART Department of the Treasury nternal Revenue Service Name of the organization SCHEDULEI (Form 990)

OMB No. 1545-0047

Open to Public

Employer identification number

Š (h) Purpose of grant or assistance Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. X Yes 13-1624086 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 the selection criteria used to award the grants or assistance? (c) IRC section if applicable Part General Information on Grants and Assistance (b) EIN (a) Name and address of organization or government Part II

4

9

(6)

6

(10)

(11)

8

(7)

3

(2)

E

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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

(12)

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) (2012)

Page 2

METROPOLITAN MUSEUM OF ART Schedule I (Form 990) (2012)

Part III Grants and Other As

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.

(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
THE BOTHWER FELLOWGHIP	ę-				
T.T.T.O.L.O.T.T.T.T.T.T.T.T.T.T.T.T.T.T.	-	27,300.			
2 SYLVAN C. AND PAMELA COLEMAN FELLOWSHIP	12.	187,833.			
3 CHESTER DALE FELLOWSHIP	4	60,000.			
4 ANNETTE DE LA RENTA FELLOWSHIP		23.000	- Available		
5 THE DOUGLASS FOUNDATION FELLOWSHIP IN AMERICAN ART	2.	49,666	To the service of the		
6 SHERMAN FAIRCHILD FOUNDATION FELLOWSHIP	~	34.666	established a second of the se		
7 ANDREW W. MELLON ART HISTORY FELLOWSHIP	r.	293 832	Target and the second		
Part IV Supplemental Information. Complete this information.	is part to pro	vide the informat	ion required in	Part I, line 2, Part III, o	part to provide the information required in Part I, line 2, Part III, column (b), and any other additional

Schedule I (Form 990) (2012)

PAGE 46

Page 2

METROPOLITAN MUSEUM OF ART

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. Schedule I (Form 990) (2012)
Part III Grants and

י מיי ווי סמויסיים משלווסמים ווי מממונסו מיי יים יים יים יים יים יים יים יים יים	יכב ופיבמכת.				
(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 ANDREW W. MELLON CONSERVATION FELLOWSHIP	14.	235,166.			
2 ANDREW W MELLON POSTDOCTORAL CURATORIAL FELLOWSHIP	'n	96,097.			
3 J. CLAMSON MILLS FELLOWSHIP	,	49,666.			
4 HEGOP KEVORKIAN FELLOWSHIP	2.	53,334.		in section .	
5 HANNS AND BRIGITTE HORNEY SWARZENSKI FELLOWSHIP		25,000.		Total Control	
6 JANE AND MORGAN WHITNEY FELLOWSHIP	14.	267,667.			
7 SLIFKA FOUNDATION FELLOWSHIP		34.666	T TRAINE LA	111111111111111111111111111111111111111	
Part IV Supplemental Information. Complete this information.	is part to pro	vide the informat	tion required in	Part I, line 2, Part III,	part to provide the information required in Part I, line 2, Part III, column (b), and any other additional

Schedule I (Form 990) (2012)

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Page 2

METROPOLITAN MUSEUM OF ART thedule I (Form 990) (2012)

Part III

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.

(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 SAMUEL H. KRESS FDN. INTERPRETIVE FELLOWSHIP	2.	25,000.	and Quick and American and Amer		
2 ANNETTE KADE FELLOWSHIP	, my	25,500.			
3 RESEARCH SCHOLARSHIP IN PHOTOGRAPH CONSERVATION		6,666.			
4 ANDREW W. MELLON SUPPORTED STIPEND INCREASES	64.	123,918.	- Tree and the control of the contro		
5 SAMUEL H. KRESS FDN. CONSERVATION FELLOWSHIP	1.	9,000.			
9			FREEDOM, TO THE PROPERTY OF TH		
7			- Advisor de la companya de la compa		
Part IV Supplemental Information. Complete this information.		vide the informat	ion required in	Part I, line 2, Part III, o	part to provide the information required in Part I, line 2, Part III, column (b), and any other additional

SCHEDULE I, PART I, LINE

THE MUSEUM AWARDS VARIOUS GRANTS, EDUCATIONAL TRAVEL STIPENDS AND

A GRANTS FELLOWSHIPS ON AN OBJECTIVE AND NONDISCRIMINATORY BASIS. COMMITTEE, COMPRISED OF MUSEUM CURATORS, CONSERVATORS, EDUCATORS,

SCIENTISTS AND LIBRARIANS, MAKES SELECTIONS BASED UPON COMPETITIVE

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

OPPORTUNITY FOR THE GRANTEES TO CONDUCT RESEARCH, EXTEND THEIR

PROFESSIONAL KNOWLEDGE AND CONTRIBUTE TO THEIR RESPECTIVE FIELDS AT

RECIPIENTS OF THE EDUCATIONAL TRAVEL STIPENDS ARE EMPLOYEES OF LARGE.

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

Schedule I (Form 990) (2012)

METROPOLITAN MUSEUM OF ART

Schedule I (Form 990) (2012)

Part III

Page 2

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.

(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
			Toronto and the state of the st	THE PARTY OF THE P	
	The second secon				
		The state of the s	- Livering and the state of the		
Part IV Supplemental Information. Complete this		vide the informat	ion required in	Part I, line 2, Part III,	part to provide the information required in Part I, line 2, Part III, column (b), and any other additional

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

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

IS ASSIGNED A SPECIFIC SUPERVISOR AT THE START OF THEIR FELLOWSHIP

THE SUPERVISOR IS EITHER A CURATOR, CONSERVATOR, SCIENTIST OR PERIOD.

EDUCATOR FROM THE DEPARTMENT HOSTING THE INDIVIDUAL SCHOLAR. THE SCHOLAR

AND SUPERVISOR ARE IN CONTACT THROUGHOUT THE YEAR AND DISCUSS ALL OF THE

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

PROGRAMS OFFICE WHICH IS RESPONSIBLE FOR ALL OF THE FELLOWS REQUIRES

PERIODIC UPDATES ON THE INDIVIDUALS' RESEARCH.

Schedule I (Form 990) (2012)

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

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

Inspection Employer identification number

	ROPOLITAN MUSEUM OF ART 13-162408	6		
Par	t I Questions Regarding Compensation			
			Yes	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 X 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	1b	X	
2	explain		1	
-	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	X	4049494
	directors, indices, and the opening the blocker, regarding the items checked in the rate			
3	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, but explain in Part III. X			
4 a	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?	4a	X	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Х	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Χ
	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.			
5	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:			
а	The organization?	5a		X
b	Any related organization?	5b		Χ
	If "Yes" to line 5a or 5b, describe in Part III.			
6	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:			
а	The organization?	6a		Χ
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	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	
8	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			
	in Part III	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

13-1624086

Page 2

Schedule J (Form 990) 2012

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

For each individual whose compensation must be reported 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				The same of the sa
(A) Name and Title	0	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	(U) Nontaxable benefits	(E) lotal of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
THOMAS P. CAMPBELL (i)		771,022.		115,360.	35,474.	301,644.	1,223,500.	0
O, EX	(i	0	0	 		0	 	0
EMILY K. RAFFERTY	(E)	. 699, 597.		130,730.	35,474.	18,978.	884,779.	0
EX-	i.	0	0		0	0		0
CARRIE R. BARRATT (1)		271,710.	0	22,952.	35,474.	18,462.	348,598.	0
3 ASSOC DIR COLLECTIONS/ADMIN. (II)	<u>(i</u>	0	0			0	 - - -	0
JENNIFER RUSSELL		314,978.		4,764.	35,474.	1,578.	356,794.	0
4 ASSOC DIRECTOR OF EXHIBITIONS (II)	ı)	0	0			0	 	0
SHARON H. COTT		374,030.	0	36,453.	35,474.	18,696.	464,653.	0
5 SR VP, SEC & GEN COUNSEL (II)	(i	0	O			0	1 1 1	0
HAROLD L. HOLZER (1)		374,737.	0	47,060.	35,474.	19,065.	476,336.	0
	(i	0	D			0	1	0
	(434,277.	0	4,194.	35,474.	8,524.	482,469.	0
7 SR VP, CFO & TREASURER (II)	(i	0	0	0		0	 	0
NINA MCN. DIEFENBACH (1)		317,284.		47,632.	35,474.	18,761.	419,151.	0
8 VP DEVELOPMENT & MEMBERSHIP (II)	_	0	0			0		0
TOM JAVITS (1)		309,113.		4,522.	35,474.	18,711.	367,820.	0
9 VP CONSTRUCTION & FACILITIES (II)	((0	0	l	0	0		
BRADLEY L. KAUFFMAN (1)		425,298.	82,086.	3,327.	35,474.	2,682.	548,867.	O TOTAL DESCRIPTION OF THE PROPERTY OF THE PRO
10 VP & GEN MGR MERCH & RETAIL (II)	(1	0	1	1	0	0		0
DEBRA A. MCDOWELL		267,065.		20,932.	35,474.	7,731.	331,202.	0
	<u>.</u>	0	0			0	1	0
		224,454.	0	37,220.	32, 191.	17,922.	311,787.	0
ONTCA	10	0	0	0	0	0	0	0
SUZANNE E. BRENNER		548,067.	401,306.	21,022.	214,224.	19,644.	1,204,263.	205,859.
-	1	0	0		0	0		1
JEFFREY BLAIR		194,155.		385.	27,682.	7,516.	229,738.	0
124		0	0	0	0	0	1 1 1 1 1 1 1 1	0
X.		20,681.	0	1,163,309.	17,652.	10,816.	1,212,458.	0
12TH	i.	0	0	0	0	0		0
		454,574.	317,808.	540.	181,487.	8,505.	962,914.	159,297.
16 DEPUTY CHIEF INVSTMT OFFICER (II)		Q	D	O	0	0		0

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Page 2

Schedule J (Form 990) 2012

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

For each individual whose compensation must be reported 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.

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		(a) Dieakuowii oi	of VV-2 and/of 1089-MISC compensation	c compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
ERIN COBURN	ε	166,074.	0	197,251.	24,134.	6,765.	394,224.	O
1 CHIEF OFFICER OF DIGITAL MEDIA	(II)					0		
GEORGE GOLDNER	ε	268,981.	0	51,670.	35,474.	18,526.	374,651.	
2 CHAIRMAN DRAWINGS AND PRINTS	(II)	ی				i		
JEFFREY SPAR	(1)	313,141.	0	810	35.237.	17.771	0 7 0	
3 CHIEF TECHNOLOGY OFFICER	€	į į	0					
	ε							
4	(ii)							
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6	(E)	-						
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12	(E)							
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16	€							
						4		

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METROPOLITAN MUSEUM OF ART

dule 1 (Form 990) 2012

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

- FOR CALENDAR YEAR 2012, THE MUSEUM PROVIDED A HOUSING PERSONAL HOUSING

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

AS TAXABLE COMPENSATION. FOR CALENDAR YEAR 2012, THE MUSEUM PROVIDED THE

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

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

SCHEDULE J, PART I, LINE 4A

THE FOLLOWING PERSONS RECEIVED SEPARATION PAY IN CALENDAR YEAR 2012:

BARBARA DOUGHERTY - \$1,047,572;

ERIN COBURN - \$183,040.

SCHEDULE J, PART 1, 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

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13-1624086

Schedule J (Form 990) 2012 Part III 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.

SHARON H. COTT - \$34,500

HAROLD HOLZER - \$41,400

NINA MCN DIEFENBACH - \$46,000

DEBRA A. MCDOWELL - \$18,400

ELYSE TOPALIAN - \$35,100

SUZANNE BRENNER - \$18,400

GEORGE GOLDNER - \$46,000

SCHEDULE J, PART 1, LINE

PURSUANT TO THE MUSEUM'S INCENTIVE COMPENSATION PLAN FOR INVESTMENT

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

m. PAYMENT OF \$401,306 WHICH IS INCLUDED IN SCHEDULE J, PART 11, COLUMN

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

WHICH IS INCLUDED IN SCHEDULE J, PART 11, BONUS PAYMENT OF \$317,808

VICE PRESIDENT AND GENERAL MANAGER OF MERCHANDISE AND RETAIL, COLUMN B.

BRADLEY L. KAUFFMAN RECEIVED A DISCRETIONARY BONUS PAYMENT OF \$82,086

WHICH IS INCLUDED IN SCHEDULE J, PART 11, COLUMN B

13-1624086

Schedule J (Form 990) 2012

Part III 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.

FORM 990, PART VII

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

Schedule J (Form 990) 2012

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PARTIAL FUNDING OF CAPITAL PROJECTS

Supplemental Information on Tax-Exempt Bonds

SCHEDULE K (Form 990)

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

Open to Public

OMB No. 1545-0047

▶ See separate instructions. ► Attach to Form 990.

METROPOLITAN MUSEUM OF ART

Name of the organization Department of the Treasury

Employer identification number

(i) Pooled financing Yes No ŝ ŝ ۵ Yes No ۵ (h) On behalf of × 13-1624086 Yes Yes (g) Defeased ŝ × Yes ° ŝ 65,000,000. PARTIAL FUNDING OF CAPITAL PROJECT 65,000,000. PARTIAL FUNDING OF CAPITAL PROJECT ပ O Yes Yes (f) Description of purpose 65,000,000. 64,204,310. 795,690. ŝ ŝ \bowtie \bowtie \bowtie Ω m 2008 Yes Yes × × 65,000,000. 795,690. 64,204,310. å ŝ × \times (e) Issue price × 2008 ⋖ Yes Yes \bowtie × 12/01/2006 12/01/2006 (d) Date issued Other spent proceeds Were the bonds issued as part of an advance refunding issue?............. Total proceeds of issue...... Capitalized interest from proceeds........... 13 Year of substantial completion............ Does the organization maintain adequate books and records to support the final allocation of proceeds? (c) CUSIP# 649717NP6 649717NQ4 1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? (b) Issuer EIN 911882413 911882413 A TRUST FOR CULTURAL RESOURCES OF THE CITY OF NY TRUST FOR CULTURAL RESOURCES OF THE CITY OF NY Part III Private Business Use (a) Issuer name 1 Amount of bonds retired Bond Issues Proceeds Part Part II 4 S 15 œ 10 12 -4 17 Ω Ç

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.

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Schedule K (Form 990) 2012

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13-1624086

METROPOLITAN MUSEUM OF ART

Schedule K (Form 990) 2012

Page 2 % % % Schedule K (Form 990) 2012 ŝ ŝ ۵ Yes Yes % 8 % % ŝ ŝ ပ Yes Yes CAPITAL PROJECTS % % 30 % ŝ ŝ × \bowtie \bowtie \bowtie × Yes Yes × × × × × OF. 8 % % % FUNDING ŝ ŝ × × \bowtie \bowtie \bowtie PARTIAL Yes Yes \times \times × × × Has there been a sale or disposition of any of the bond-financed property to a nongovern-If "Yes" to line 3c, does the organization routinely engage bond counsel or other other than a section 501(c)(3) organization or a state or local government ▶ Are there any management or service contracts that may result in private business Enter the percentage of financed property used in a private business use by entities Are there any research agreements that may result in private business use of bond-Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel outside counsel to review any research agreements relating to the financed property? b Exception to rebate? d Was the hedge superintegrated?...... to review any management or service contracts relating to the financed property? 4a Has the organization or the governmental issuer entered into a qualified hedge with If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed Has the organization established written procedures to ensure that all nonqualified If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections mental person other than a 501(c)(3) organization since the bonds were issued?. If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate bonds of the issue are remediated in accordance with the requirements under another section 501(c)(3) organization, or a state or local government . . Rebate not due yet?..... Does the bond issue meet the private security or payment test? Is the bond issue a variable rate issue?...... Private Business Use (Continued) Has the issuer filed Form 8038-T? use of bond-financed property? e Was the hedge terminated?... .141-12 and 1.145-2?... computation was performed respect to the bond issue? Total of lines 4 and 5 financed property? Arbitrage No rebate due? Part III 3a Ω σ v ~ က 6 2 9

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METROPOLITAN MUSEUM OF ART

13-1624086

Page 3

ŝ ŝ ۵ ۵ Yes Yes Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions) ŝ ŝ Yes Yes ŝ ŝ × × æ Yes Yes × ŝ ŝ × × ⋖ ⋖ Yes Yes \bowtie d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? 5a Were gross proceeds invested in a guaranteed investment contract (GIC)? Has the organization established written procedures to ensure that violations of federal agreement program if self-remediation is not available under applicable regulations? 6 Were any gross proceeds invested beyond an available temporary period? tax requirements are timely identified and corrected through the voluntary closing monitor **Q** Has the organization established written procedures Procedures To Undertake Corrective Action JSA 2E13281.000 06571Q 2536 2/14/2014 Schedule K (Form 990) 2012

Part IV Arbitrage (Continued) requirements of section 148? c Term of GIC..... Part V Part VI

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METROPOLITAN MUSEUM OF ART

13-1624086

Schedule K (Form 990) 2012

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

SCHEDULE K, PART 111, LINES 4-6

PRIVATE BUSINESS AND UNRELATED USE

THE MUSEUM PERFORMS A DETAILED PRIVATE BUSINESS AND UNRELATED USE

CALCULATION. THE MUSEUM CALCULATED ITS PRIVATE BUSINESS AND UNRELATED USE

FOR THE FISCAL YEAR ENDED JUNE 30,2013 TO BE NEARLY 0% IN TAX EXEMPT BOND

FINANCED SPACE. THIS ANALYSIS EXCLUDES COST OF ISSUANCE.

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
2012
Open To Public

Department of the Treasury Internal Revenue Service

Name of the organization
METROPOLITAN MUSEUM OF ART

Employer identification number

13-1624086

Pa	rt I Types of Property				
	Types of Froperty	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art	X	167.	0	
2	Art - Historical treasures				
3	Art - Fractional interests	X	6.	0	
4	Books and publications				
5	Clothing and household				
	goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	155.	37,157,038.	MKT VALUE- GIFT DATE
10	Securities - Closely held stock				
11	Securities - Partnership, LLC,				
	or trust interests		manufacture and the second second second second second second second second second second second second second		
12	Securities - Miscellaneous		THE PROPERTY OF THE PARTY OF TH		
13	Qualified conservation				
	contribution - Historic				
	structures				
14	Qualified conservation				
	contribution - Other				
15	Real estate - Residential	X	1.	3,534,759.	MKT VALUE- GIFT DATE
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			WTT	
25	Other ►()			+	
26	Other ►()			****	
27 28	Other ►()				
29	Other ►()	tha area	ni-otion during the tour	f f	
29	Number of Forms 8283 received to which the organization completed F				29 63.
	which the organization completed F	UIIII 0203, F	Part IV, Donee Acknowledge	ement (Yes No
30 a	During the year, did the organizati	on receive	by contribution any proper	rty reported in Part I line	
	it must hold for at least three years				I 2002 to the 2011 1200 000 to 0.01 12 to 0.00 to 0.00 1
	used for exempt purposes for the en				
b	If "Yes," describe the arrangement in	Part II.			
31	Does the organization have a g		ance policy that requires	the review of any n	on-standard
	contributions?			,	# 0.000.00 to 10.00 # 0.00 # 0.00 # 0.00 # 0.00 # 0.00 # 0.00 # 0.00 # 0.00 # 0.00 # 0.00 # 0.00 # 0.00 # 0.00
32 a	Does the organization hire or use	third partie	es or related organizations	to solicit, process, or se	ell noncash
	contributions?				
b	If "Yes," describe in Part II.				
33	If the organization did not report an	amount in c	column (c) for a type of prop	perty for which column (a)	is checked.
	describe in Part II.		()	,	

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

Schedule M (Form 990) (2012)

METROPOLITAN MUSEUM OF ART

13-1624086

Schedule M (Form 990) (2012)

Part II

Page 2

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

PART I, 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 M (Form 990) (2012)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047
2012
Open to Public

Department of the Treasury Internal Revenue Service 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.

Inspection
Employer identification number

13-1624086

Name of the organization

METROPOLITAN MUSEUM OF ART

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-EIGHT PERCENT OF ITS 6.2 MILLION ANNUAL VISITORS (INCLUDING THE CLOISTERS MUSEUM AND GARDENS) FROM OUTSIDE THE TRI-STATE AREA. FISCAL 2013 WAS A PIVOTAL YEAR FOR THE METROPOLITAN MUSEUM OF ART. ATTENDANCE IN FISCAL YEAR 2013 MAINTAINED THE RECORD HIGHS REACHED IN THE PREVIOUS YEAR, DRIVEN BY FOUR EXHIBITIONS

Schedule O (Form 990 or 990-EZ) 2012

Name of the organization
METROPOLITAN MUSEUM OF ART

Employer identification number

Page 2

13-1624086

THAT HAD OVER 440,000 VISITORS: IMPRESSIONISM, FASHION, AND MODERNITY;

MATISSE: IN SEARCH OF TRUE PAINTING; REGARDING WARHOL: SIXTY ARTISTS,

FIFTY YEARS; AND PUNK: CHAOS TO COUTURE. STARTING JULY 1, 2013, THE

MUSEUM'S NEW SEVEN DAY SCHEDULE EXTENDED PUBLIC ACCESS THROUGHOUT THE

WEEK. ANOTHER ATTENDANCE HIGH POINT OCCURRED ON JANUARY 18, 2013 WHEN THE

NEW GALLERIES FOR THE ART OF THE ARAB LANDS, TURKEY, IRAN, CENTRAL ASIA,

AND LATER SOUTH ASIA, WHICH OPENED IN NOVEMBER 2011, REACHED THE

MILESTONE OF 1 MILLION VISITORS.

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, DRAWINGS AND

PRINTS, PHOTOGRAPHS, 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.

IN FISCAL YEAR 2013, THE MUSEUM RECEIVED ONE OF THE GREATEST GIFTS IN THE INSTITUTION'S 143-YEAR EVOLUTION - A PROMISED GIFT OF LEONARD A. LAUDER'S GROUP OF CUBIST PAINTINGS, AN UNRIVALED COLLECTION OF SEVENTY-EIGHT WORKS BY PICASSO, BRAQUE, GRIS AND LEGER. CONCURRENT WITH THE PROMISED GIFT -

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WITH THE SUPPORT OF MUSEUM TRUSTEES AND OTHERS, INCLUDING MR. LAUDER, THE METROPOLITAN MUSEUM IS ESTABLISHING THE LEONARD A. LAUDER RESEARCH CENTER FOR MODERN ART, ALLOWING THE MUSEUM TO PURSUE BROAD-REACHING SCHOLARSHIP. IT WILL BE THE FIRST SUCH CENTER DEDICATED EXCLUSIVELY TO MODERN ART WITHIN AN ENCYCOPEDIC INSTITUTION.

THE MUSEUM CONTINUES TO ENHANCE THE COLLECTIONS THROUGH KEY ACQUISITIONS INCLUDING IN FISCAL 2013 A MARBLE FIGURE OF THE SLEEPING ADONIS BY THE BAROQUE VIRTUOSO ANTONIO CORRADINI (1688-1752); A SEVENTEENTH-CENTURY IVORY CARVING, SAINT SEBASTIAN, BY THE AUSTRIAN ARTIST KNOWN AS MASTER OF THE FURIES (AUSTRIAN, SALZBURG); THIRTEEN SEMINAL WORKS OF TIBETAN AND NEPALESE ART DATING FROM THE ELEVENTH TO THE SEVENTEENTH CENTURY; EARLY WORK BY THE DEFINING EUROPEAN PAINTER JUSEPE DE RIBERA (CALLED LO SPAGNOLETTO, SPANISH, 1591-1652); A MAJOR CANVAS, VIRGIL'S TOMB BY MOONLIGHT FROM 1779; A MAGNIFICENT PORTRAIT OF ONE OF THE GREATEST POLITICAL FIGURES OF MODERN TIMES, CHARLES MAURICE DE TALLEYRAND; AND A LATE TWENTIETH-CENTURY WORK OF ART BY BARBARA KRUGER (BORN 1945).

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 AND MAKES IT AVAILABLE FOR CURATORIAL, EDUCATION, AND PUBLICATION PROJECTS. IN FISCAL YEAR 2013, 8,919 VISITS WERE MADE BY

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OUTSIDE RESEARCHERS (A 28% INCREASE FROM FY12). WATSON LIBRARY REGISTERED 2,404 NEW OUTSIDE RESEARCHERS. THE MUSEUM LIBRARIES CIRCULATED 70,111 ITEMS TO READERS. NINE WEEKLY SESSIONS OF STORY TIME IN NOLEN LIBRARY REACHED OVER 12,200 CHILDREN AND THEIR CAREGIVERS. THE LIBRARY CONTINUED TO DIGITIZE RARE COLLECTION MATERIALS, BOTH PRINTED AND MANUSCRIPT, AND TO MAKE THEM AVAILABLE ONLINE.

THE MUSEUM CONTINUES TO BE A LEADING MUSEUM PUBLISHER IN THE WORLD AND AGAIN PRODUCED AN IMPRESSIVE NUMBER OF PUBLICATIONS, MANY TITLES RECEIVING EXCELLENT REVIEWS OR WINNING PRESTIGIOUS AWARDS. IN FISCAL YEAR 2013, THE EDITORIAL DEPARTMENT PUBLISHED TWENTY THREE PUBLICATIONS, INCLUDING TEN EXHIBITION CATALOGUES, NINE COLLECTION AND OTHER SCHOLARLY CATALOGUES, AND FOUR BULLETINS. 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 IS NOW AVAILABLE IN SIX TRANSLATED LANGUAGES.

PART III (CONTINUED)

THE MUSEUM'S EXHIBITION PROGRAM IS EXCEPTIONALLY DIVERSE, PRESENTING

ABOUT 35 TEMPORARY EXHIBITIONS, PERMANENT COLLECTION ROTATIONS, AND

OUTGOING LOAN SHOWS PER YEAR FOCUSING ON A WIDE RANGE OF THEMES, PERIODS,

CULTURES, AND INDIVIDUAL ARTISTS. THE FOLLOWING EXHIBITIONS WERE AMONG

THE HIGHLIGHTS THIS YEAR: "REGARDING WARHOL: SIXTY ARTISTS, FIFTY YEARS";

"BERNINI: SCULPTING IN CLAY"; "FAKING IT: MANIPULATED PHOTOGRAPHY BEFORE

PHOTOSHOP"; "EXTRAVAGANT INVENTIONS: THE PRINCELY FURNITURE OF THE

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ROENTGENS"; "GEORGE BELLOWS"; "MATISSE: IN SEARCH OF TRUE PAINTING"; "IMPRESSIONISM, FASHION, AND MODERNITY"; "PHOTOGRAPHY AND THE AMERICAN CIVIL WAR"; "PUNK: CHAOS TO COUTURE"; "THE ROOF GARDEN COMMISSION: IMRAN QURESHI"; "SEARCH FOR THE UNICORN: AN EXHIBITION IN HONOR OF THE CLOISTERS' 75TH ANNIVERSARY"; "THE BOXER: AN ANCIENT MASTERPIECE"; "THE CYRUS CYLINDER AND ANCIENT PERSIA: CHARTING A NEW EMPIRE"; "EARTH, SEA, AND SKY: NATURE IN WESTERN ART - MASTERPIECES FROM THE METROPOLITAN MUSEUM OF ART" (PRESENTED AT THE NATIONAL MUSEUM OF CHINA, BEIJING AND THE TOKYO METROPOLITAN MUSEUM, TOKYO); "VELÁZQUEZ'S PORTRAIT OF DUKE FRANCESCO I D'ESTE: A MASTERPIECE FROM THE GALLERIA ESTENSE, MODENA"; "AFRICAN ART, NEW YORK, AND THE AVANT-GARDE"; "BASHFORD DEAN AND THE CREATION OF THE ARMS AND ARMOR DEPARTMENT"; "CAMBODIAN RATTAN: THE SCULPTURES OF SOPHEAP PICH"; "STREET", A NEW VIDEO BY JAMES NARES. THE PERMANENT COLLECTION AND SPECIAL EXHIBITIONS CONTINUE TO BE ENHANCED BY A VARIETY OF EDUCATIONAL AND CONCERTS & LECTURES PROGRAMS. THE MUSEUM SERVES ALL AGE GROUPS, FROM PRE-SCHOOL CHILDREN TO SENIOR CITIZENS, AND MAINTAINS A BROAD RANGE OF EDUCATIONAL AND OUTREACH PROGRAMS. BUILDING ON THE PRIOR YEAR, THE MUSEUM CREATED NEW EVENTS IN WHICH LIVING ARTISTS ACTIVELY PARTICIPATED, OFFERING UNIQUE PERSPECTIVES. NOTABLY WAS THE FIRST-EVER PERFORMING-ARTIST RESIDENCY, WITH PAUL D. MILLER, AKA DJ SPOOKY, WHO COLLABORATED ON NUMEROUS PROJECTS WITH CURATORS, EDUCATORS, AND STAFF THROUGHOUT THE MUSEUM. LAST YEAR THE MUSEUM ORGANIZED SOME 25,815 EDUCATIONAL EVENTS REACHING 652,898 PEOPLE REPRESENTING AN INCREASINGLY NEW AND DIVERSE AUDIENCE. OF THE APPROXIMATELY 38,000 WHO ATTENDED A MET MUSEUM PRESENTS TICKETED PROGRAM, 60 PERCENT HAD NEVER

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BEFORE ATTENDED A CONCERT OR LECTURE AT THE MUSEUM.

AT THE MAIN BUILDING AND THE CLOISTERS, THE MUSEUM WELCOMED 5,900 SCHOOL CLASSES, REPRESENTING 208,838 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 40,995 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: 1,587 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, 105,645 PEOPLE PARTICIPATED IN GALLERY TALKS AND GUIDED TOURS, AND 22,548 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. THIS INCLUDES THE MULTICULTURAL AUDIENCE DEVELOPMENT INITIATIVE (MADI) TO INCREASE AWARENESS OF THE MUSEUM'S PROGRAMS AND COLLECTIONS, TO CREATE ONGOING RELATIONSHIPS WITH THE MANY DIVERSE COMMUNITIES THAT MAKE UP NEW YORK, TO DIVERSIFY MUSEUM VISITORSHIP AND MEMBERSHIP, AND TO INCREASE PARTICIPATION IN MUSEUM

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ACTIVITIES. THE MULTICULTURAL ADVISORY COMMITTEE IS COMPOSED OF NEW YORK'S AFRICAN-AMERICAN, SOUTH ASIAN, ASIAN-AMERICAN, HISPANIC/LATINO, AMERICAN INDIAN, LGBT, AMERICAN MUSLIM, AND INTERFAITH CULTURAL LEADERS AND ORGANIZATIONS, WHO MEET ON A REGULAR BASIS WITH MUSEUM STAFF TO PURSUE THESE ONGOING GOALS. 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 2013, 7,035 SUCH VISITORS PARTICIPATED IN 368 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 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 2013 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 REACH BEYOND ITS
WALLS THROUGH THE USE OF DIGITAL MEDIA, LEADING THE CREATION, PRODUCTION,
PRESENTATION, AND DISSEMINATION OF MULTIMEDIA CONTENT BOTH WITHIN THE

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GALLERIES AND ONLINE.

THE MUSEUM'S WEBSITE, METMUSEUM.ORG, RECEIVED MORE THAN 40 MILLION VISITS, WITH A TOTAL OF MORE THAN 138 MILLION PAGEVIEWS, IN FISCAL YEAR 2013. OUR SOCIAL MEDIA CHANNELS--MOST NOTABLY FACEBOOK AND PINTEREST--CONTRIBUTED SIGNIFICANTLY TO SITE TRAFFIC AND OVERALL AWARENESS OF THE MUSEUM'S EXHIBITIONS AND PROGRAMS. THE MET'S FACEBOOK FOLLOWING INCREASED TO NEARLY ONE MILLION PEOPLE BY THE END OF THE FISCAL YEAR. IN JANUARY 2012 OUR SOCIAL MEDIA TEAM LAUNCHED AN INSTAGRAM ACCOUNT, WHICH QUICKLY BECAME ANOTHER EFFECTIVE WAY FOR THE MUSEUM TO ENGAGE WITH THE PUBLIC, BOTH LOCALLY AND GLOBALLY.

THE WEBSITE ALSO MADE AVAILABLE THE WIDE RANGE OF PUBLIC PROGRAMS OFFERED IN THE MUSEUM. DOZENS OF LECTURES, PANELS, AND OTHER EDUCATIONAL PROGRAMS WERE VIDEOTAPED AND PRESENTED IN THE MET MEDIA SECTION OF THE MUSEUM'S WEBSITE. OVER THE COURSE OF THE YEAR, METMUSEUM.ORG ALSO LIVE STREAMED ELEVEN PROGRAMS MOUNTED BY MET MUSEUM PRESENTS, INCLUDING CONCERTS BY ARTIST-IN-RESIDENCE D.J. SPOOKY AND A PERFORMANCE OF THE CHINESE OPERA, THE PEONY PAVILION, IN THE ASTOR GARDEN COURT.

FINDING NEW WAYS TO ENGAGE WITH OUR AUDIENCE IS AN ONGOING COMMITMENT,

AND THIS YEAR WE AGAIN BUILT ON A SERIES OF AWARD-WINNING METROPOLITAN

MUSEUM ONLINE INITIATIVES INSPIRED BY OUR VAST COLLECTION. THE MET AROUND

THE WORLD (NEW EDITION LAUNCHED JULY 2012) ENRICHED THE PREVIOUSLY

INTERNATIONALLY FOCUSED INSTITUTIONAL ACTIVITIES IN THE AREAS OF

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EXHIBITIONS, LOANS, CONSERVATION, EXCAVATIONS, FELLOWSHIPS, EXCHANGES, AND OTHER COLLABORATIONS TO INCLUDE DOMESTIC ACTIVITIES. LAUNCHED IN JANUARY 2013, 82ND & FIFTH WAS A YEARLONG INTERACTIVE WEB SERIES IN WHICH CURATORS FROM ACROSS THE MUSEUM INVITED VISITORS TO ENGAGE WITH THE INDIVIDUAL WORKS. LIKE 2011'S CONNECTIONS, ANOTHER GROUNDBREAKING WEB SERIES, 82ND & FIFTH SPEAKS DIRECTLY TO THE MUSEUM'S INTEREST IN LINKING HISTORICAL ART AND CULTURE TO A BROADER AUDIENCE.

THE MUSEUM'S ONLINE PUBLISHING PROGRAM ALSO ADVANCED THIS YEAR WITH THE LAUNCH IN OCTOBER 2012 OF METPUBLICATIONS. AN ACHIEVEMENT THAT REAFFIRMS OUR COMMITMENT TO BOTH SCHOLARSHIP AND GLOBAL ACCESSIBILITY, IT IS A PORTAL TO THE INSTITUTION'S RENOWNED COMPREHENSIVE PUBLISHING PROGRAM, PROVIDING ACCESS TO NEARLY 900 BOOKS, MANY OF THEM OUT OF PRINT, AS WELL AS FIFTY YEARS OF BULLETINS AND JOURNALS.

JULY 2013 SAW THE COMPLETION OF THE TMS CONSOLIDATION PROJECT. TMS (THE MUSEUM SYSTEM) IS THE DATABASE PROGRAM USED TO CATALOGUE AND TRACK ALL OBJECTS IN THE COLLECTION. THE MUSEUM'S TWENTY-THREE TMS DATABASES WERE CONSOLIDATED INTO A SINGLE SYSTEM. THIS WAS THE CULMINATION OF FOUR YEARS OF WORK AND MARKS THE FIRST TIME THE MUSEUM HAS HAD A SINGLE CENTRALIZED COLLECTION DATABASE.

THE MUSEUM ALSO MADE STRIDES IN ITS MOBILE EFFORTS, PRODUCING A NUMBER OF FREELY DOWNLOADABLE APPLICATIONS AND ONLINE INTERACTIVES SUCH AS FAKING IT, BEYOND BATTLE, AND PLAIN OR FANCY. THE MUSEUM ALSO RELAUNCHED THE

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AUDIO GUIDE AVAILABLE TO ONSITE VISITORS. THE GUIDE IS AN ESSENTIAL PART
OF THE VISITOR EXPERIENCE, AS IT PROVIDES INTERPRETIVE MEDIA ON THOUSANDS
OF WORKS OF ART AND SPECIAL EXHIBITIONS, PROVIDING CONNECTIONS BETWEEN
LEARNING ABOUT THE MUSEUM AND ITS COLLECTIONS AND ENCOUNTERING
FACE-TO-FACE THE MAGNIFICENT WORKS AND PROGRAMS IN OUR GALLERIES.

PART III (CONTINUED)

THE MUSEUM AND ITS PERMANENT COLLECTIONS ARE CONTINUOUSLY ENHANCED
THROUGH NEW INSTALLATIONS AND CAPITAL PROJECTS. THE MUSEUM CELEBRATED
THE REOPENING IN MAY OF THE MUSEUM'S GALLERIES DEVOTED TO ITS
WORLD-RENOWNED COLLECTION OF OLD MASTER PAINTINGS FROM THE THIRTEENTH
THROUGH THE NINETEENTH CENTURY. THIS NEW SPACE IS A THIRD LARGER THAN
ITS PREVIOUS INCARNATION AND ACCOMODATES THE DISPLAY OF MORE THAN 700
PAINTINGS IN FORTY-FIVE REDESIGNED GALLERIES. 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 CONTINUES AND IS EXPECTED
TO OPEN TO THE PUBLIC NEXT FALL.

A BRAND-NEW MEMBERS LOUNGE ON THE SECOND FLOOR OF THE GREAT HALL BALCONY WAS COMPLETED IN THE FALL OF 2012. RENOVATION OF THE GALLERIES, LIBRARY, CONSERVATION SPACE, AND ADMINISTRATIVE OFFICES OF THE COSTUME INSTITUTE CONTINUES WITH EXPECTED COMPLETION IN SPRING 2014. WITH A GENEROUS ALLOCATION OF \$6 MILLION FROM THE CITY OF NEW YORK, THE MUSEUM CONTINUED WORK ON ITS MULTIYEAR PLAN TO UPGRADE AND REPLACE COMPONENTS OF ITS INFASTRUCTURE. THE PROCESS OF THINKING ABOUT THE FULL SCOPE OF THE

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FACILITIES AND HOW BEST TO ALLOCATE PHYSICAL RESOURCES IN THE COMING DECADES CONTINUED TO BE A PRIORITY THIS YEAR. UNDER THE DIRECTION OF BEYER BENDER BELLE, THE MUSEUM IS ON TRACK TO COMPLETE ITS FEASIBILITY STUDY THIS FALL.

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

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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

STATEMENTS ARE COMPLETED AND RETURNED TO THE GENERAL COUNSEL'S OFFICE.

WHEN POTENTIAL CONFLICTS ARISE, THEY ARE INITIALLY EVALUATED BY THE

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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 TRANSACTION.

PART VI, LINES 15A AND 15B

COMPENSATION REVIEW

THE COMPENSATION COMMITTEE ("THE COMMITTEE") OF THE BOARD OF TRUSTEES IS RESPONSIBLE FOR OVERSIGHT OF COMPENSATION AND BENEFITS PROGRAMS FOR THE MUSEUM'S OFFICERS, AND FOR ENSURING THAT THE COMPENSATION POLICIES OF THE MUSEUM ARE CONSISTENT WITH AND IN SUPPORT OF THE MUSEUM'S MISSION, VALUES AND LONG-TERM GOALS. THE INTENT OF THE COMMITTEE IS TO PROVIDE A TOTAL COMPENSATION PROGRAM FOR THE OFFICERS THAT PROMOTES THE MUSEUM'S LONG-TERM OBJECTIVES, AND IS REASONABLE, APPROPRIATE AND FAIR.

ANNUALLY, AN INDEPENDENT COMPENSATION CONSULTANT AND THE COMMITTEE

REVIEWS THE TOTAL COMPENSATION OF EACH OFFICER OF THE MUSEUM. THE

INDEPENDENT COMPENSATION CONSULTANT MAKES RECOMMENDATIONS WITH RESPECT TO

THE TOTAL COMPENSATION OF EACH OFFICER, AND THE COMMITTEE APPROVES THE

COMPENSATION. COMPENSATION DECISIONS ARE MADE WITH REFERENCE TO

COMPARABILITY DATA FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY

COMPARABLE ROLES AT SIMILARLY SITUATED ORGANIZATIONS PRESENTED BY THE

INDEPENDENT COMPENSATION CONSULTANT. THE INDEPENDENT COMPENSATION

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CONSULTANT AND THE COMMITTEE ALSO CONSIDER OTHER RELEVANT FACTORS IN DETERMINING COMPENSATION, INCLUDING THE MUSEUM'S MISSION AND GOALS, THE PERFORMANCE OF EACH OFFICER, AND THE MARKET FOR EXECUTIVE TALENT. THE COMMITTEE COMPLIES WITH THE "REBUTTABLE PRESUMPTION" PROCEDURES FOR DETERMINING THAT COMPENSATION IS REASONABLE UNDER INTERNAL REVENUE CODE SECTION 4958. DELIBERATIONS AND DECISIONS REGARDING COMPENSATION ARRANGEMENTS ARE CONTEMPORANEOUSLY DOCUMENTED IN THE MEETING MINUTES.

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.

PART VIII, LINE 8

FUNDRAISING EVENTS

NOTE THAT THE \$4,581,578 LOSS ON LINE 8(C) DOES NOT INCLUDE THE \$17,467,284 OF CONTRIBUTIONS WHICH RESULTED IN A NET GAIN FROM THESE EVENTS OF APPROXIMATELY \$12.9 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.

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PART XI, LINE 9

OTHER CHANGES IN NET ASSETS OR FUND BALANCES

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

INTEREST RATE SWAPS \$16,940,261; RECLASSIFICATIONS, FEES AND OTHER

\$(11,817,618); CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENT \$2,045,431;

PENSION RELATED CHANGES OTHER THAN NPPC \$37,957,118; ADDITIONAL

RETIREMENT CONTRIBUTION \$(3,927,421); PARTNERSHIP UBI \$(385,072) TOTAL

PART XI, LINE 5 \$40,812,699.

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

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.

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICE	S	ATTACHMENT	2
DESCRIPTION	GRANTS	EXPENSES	REVENUE
MERCHANDISING OPERATIONS		37,910,789.	38,449,629.
OPERATION OF RESTAURANTS		20,437,556.	
SPECIAL EXHIBITIONS		14,000,394.	
DEPRECIATION		8,201,964.	
COMMUNITY PROGRAMS AND LIBRARIES		11,398,191.	
RENOVATION OF GALLERIES		4,106,463.	

Schedule O (Form 990 or 990-EZ) 2012				Page 2
Name of the organization			Employer identifica	tion number
METROPOLITAN MUSEUM OF ART			13-16240	86
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES	S.		ATTACHMENT	2 (CONT'D)
DESCRIPTION	GRANTS	EXP	ENSES	REVENUE
COMMUNICATIONS		5,	687,284.	85,980.
MEMBERSHIP SERVICES INC BULLETIN		4,	227,334.	
OPERATION OF AUDITORIUM		2,	893,033.	1,410,981.
OPERATION OF PARKING GARAGE		1,	566,463.	
CORPORATE EVENTS & FUNDRAISING			552,821.	749,880.
OPERATING SERVICES		5,	820,721.	
TOTALS		116,	803,013.	40,696,470.

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	4
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ATTACHMENT 3

990, PART VII- COMPENSATION OF THE FIVE HIC	GHEST PAID IND. CONTRACTORS	
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
RC DOLNER, LLC 2 PENN PLAZA EAST, 11TH FLOOR NEWARK, NJ 07105	CONSTRUCTION MANAGER	7,365,351.
MASTERPIECE INTERNATIONAL 39 BROADWAY NEW YORK, NY 10006	CUSTOMHOUSE BROKERS	3,137,635.
BEYER BLINDER BELLE ARCHITECTS 2025 BRUNSWICK AVENUE, SUITE 204 LINDEN, NJ 07036	ARCHITECTS	2,204,006.

 Schedule O (Form 990 or 990-EZ) 2012
 Page 2

 Name of the organization
 Employer identification number

 METROPOLITAN MUSEUM OF ART
 13-1624086

 ATTACHMENT 4 (CONT'D)

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

DESCRIPTION OF SERVICES COMPENSATION

TUTTLE
295 MADISON AVNEUE
NEW YORK, NY 10017

RAUL AVILA INC.
20 WEST 22ND STREET

DESCRIPTION OF SERVICES COMPENSATION

COMPENSATION

DESIGN SERVICES
1,582,025.

NEW YORK, NY 10010

METROPOLITAN MUSEUM OF ART

.3-1624086

Related Organizations and Unrelated Partnerships

2012 Open to Public

OMB No. 1545-0047

► 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.

Department of the Treasury

SCHEDULE R (Form 990)

Inspection

(g) Section 512(b)(13) controlled entity? (f) Direct controlling entity Schedule R (Form 990) 2012 Employer identification number ŝ Yes 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.) 13-1624086 (f) Direct controlling (e) End-of-year assets (e) Public charity status (if section 501(c)(3)) (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) (d) Exempt Code section Legal domicile (state or foreign country) (b) Primary activity Ω (b) Primary activity (a) Name, address, and EIN (if applicable) of disregarded entity For Paperwork Reduction Act Notice, see the Instructions for Form 990. (a)Name, address, and EIN of related organization METROPOLITAN MUSEUM OF ART Name of the organization Partl Part Ξ (2) 3 (5) 9 4 (1) 2 (3) (4) (5) 9 5

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Schedule R (Form 990) 2012

Page 2 (k)
Percentage
ownership (j) General or managing ŝ 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.) partner? Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 Yes Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) (h) Disproportionate alboations? Yes No (g) Share of end-of-year assets (f) Share of total income because it had one or more related organizations treated as a partnership during the tax year.) (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) (d)
Direct controlling
entity (c) Legal domicile (state or foreign country) (b) Primary activity (a)
Name, address, and EIN of related organization Part III Part IV Ξ 2 3 4 3 9

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(c) (d) (e) Legal domicile Direct controlling Type of entity (state or foreign entity (C corp., S corp, or country)	(f) Share of total income	(g) Share of end-of-year assets	(h) (i) Section 14ge 512(b)(13) controlled countrolled	(i) Section 512(b)(13) controlled
				The state of the s				Yes No
(1) 13 CHARITABLE TRUSTS								
(0)	TRUST		N/A	TRUST				
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<u>(4)</u>	A CALL TO THE CALL TH							
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(9)					TOTAL TOTAL	The state of the s		
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METROPOLITAN MUSEUM OF ART

Schedule R (Form 990) 2012

PartV

Schedule R (Form 990) 2012 Method of determining Yes 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. 79 13 7 9 10 19 -# Loans or loan guarantees to or for related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Other transfer of cash or property to related organization(s) Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.) (c) Amount involved 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? Lease of facilities, equipment, or other assets from related organization(s) (b) Transaction type (a-s) Performance of services or membership or fundraising solicitations for related organization(s) Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Other transfer of cash or property from related organization(s) Reimbursement paid by related organization(s) for expenses Gift, grant, or capital contribution to related organization(s) Name of other organization ъ Ø E = 0 Ω ပ g T م م (9) Ξ (2) 3 4 9 7

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METROPOLITAN MUSEUM OF ART

Schedule R (Form 990) 2012

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.) Part VI

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 or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	<u> </u>	3								
	Primary activity	Legal domicile (state or foreign country)	-	Are all partners section 501(c)(3) organizations?	S Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	(I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	or Percentage ownership
(1)		THE STATE OF THE S	section 512-514)	Yes			Yes No	_	Yes	No
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Schedule R (Form 990) 2012

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Part VII Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule R (see