

Form 990
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2011

Open to Public Inspection

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

Part I Summary

- B Check if applicable
Address change
Name change
Initial return
Terminated
Amended return
Application pending

C Name of organization
THE MUSEUM OF FINE ARTS HOUSTON
Doing Business As
Number and street (or P O box if mail is not delivered to street address) Room/suite
PO BOX 6826
City or town, state or country, and ZIP + 4
HOUSTON, TX 772656826

D Employer identification number
74-1109655
E Telephone number
(713) 639-7300
G Gross receipts \$ 136,119,351

F Name and address of principal officer
GARY TINTEROW
PO BOX 6826
HOUSTON, TX 772656826

H(a) Is this a group return for affiliates?
H(b) Are all affiliates included?
H(c) Group exemption number

I Tax-exempt status
501(c)(3)
501(c) () (insert no)
4947(a)(1) or
527

J Website: WWW.MFAH.ORG

K Form of organization
Corporation
Trust
Association
Other
L Year of formation 1924
M State of legal domicile TX

Part I Summary

1 Briefly describe the organization's mission or most significant activities
THE MUSEUM OF FINE ARTS, HOUSTON (THE "MUSEUM") IS ORGANIZED AND IS TO BE OPERATED EXCLUSIVELY FOR CHARITABLE, SCIENTIFIC, LITERARY, AND EDUCATIONAL PURPOSES...
2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets
3 Number of voting members of the governing body (Part VI, line 1a) 79
4 Number of independent voting members of the governing body (Part VI, line 1b) 79
5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 829
6 Total number of volunteers (estimate if necessary) 1,026
7a Total unrelated business revenue from Part VIII, column (C), line 12 0
7b Net unrelated business taxable income from Form 990-T, line 34 -965,402

Table with 3 columns: Line number, Description, Prior Year, Current Year. Rows 8-19 covering Revenue and Expenses.

Table with 3 columns: Line number, Description, Beginning of Current Year, End of Year. Rows 20-22 covering Net Assets or Fund Balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on information furnished by filer.

Sign Here
Signature of officer: GARY TINTEROW DIRECTOR

Paid Preparer's Use Only
Preparer's signature: BROOKE KITCHEN
Date:
Firm's name (or yours if self-employed), address, and ZIP + 4: DELOITTE TAX LLP, 1111 BAGBY STREET SUITE 4500, HOUSTON, TX 770024196

May the IRS discuss this return with the preparer shown above? (see instructions)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission
 THE MUSEUM OF FINE ARTS, HOUSTON (THE "MUSEUM") IS ORGANIZED AND IS TO BE OPERATED EXCLUSIVELY FOR CHARITABLE, SCIENTIFIC, LITERARY, AND EDUCATIONAL PURPOSES, INCLUDING THE OPERATION AND MAINTENANCE OF ONE OR MORE MUSEUM FACILITIES AND, IN CONNECTION THEREWITH, THE OPERATION AND MAINTENANCE OF AN ARTS SCHOOL AND THE CONDUCT OF SUCH OTHER CHARITABLE, SCIENTIFIC, LITERARY, AND EDUCATIONAL ACTIVITIES AS ARE CUSTOMARILY CARRIED ON BY A MUSEUM AND WHICH ARE APPROVED BY THE BOARD OF TRUSTEES

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
 If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
 If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 9,299,460 including grants of \$) (Revenue \$ 1,593,969)
 EDUCATION & PUBLIC PROGRAMS

4b (Code) (Expenses \$ 53,698,024 including grants of \$ 131,727) (Revenue \$ 752,066)
 ACCESSIONS, CURATORIAL & EXHIBIT EXPENSES

4c (Code) (Expenses \$ 3,646,567 including grants of \$) (Revenue \$ 1,765,121)
 GLASSELL SCHOOL OF ART

(Code) (Expenses \$ 1,727,838 including grants of \$) (Revenue \$ 2,749,251)
 MEMBERSHIP ACTIVITIES

(Code) (Expenses \$ including grants of \$) (Revenue \$)
 FORM 990, PART III, LINE 4 - DESCRIPTION OF PROGRAM SERVICES ESTABLISHED IN 1900 AS A MODEST EDUCATION INITIATIVE TO BRING ART TO HOUSTON PUBLIC SCHOOLS, THE MUSEUM OF FINE ARTS, HOUSTON (MFAH) REMAINS STEADFAST IN ITS MISSION TO SERVE AS A PLACE FOR ALL PEOPLE THROUGH EXCELLENCE IN THE COLLECTION, EXHIBITION, PRESERVATION, CONSERVATION, AND INTERPRETATION OF ART TO THAT END, MFAH PUBLIC PROGRAMMING ACTIVELY SEEKS TO CONNECT THE INSTITUTION WITH THE COMMUNITY THROUGH EXHIBITIONS AND ACTIVITIES HELD ACROSS HOUSTON EACH YEAR, OVER TWO MILLION VISITORS ENGAGE WITH THE MUSEUM'S PERMANENT COLLECTION OF NEARLY 60,000 MASTERPIECES FROM AROUND THE WORLD, AND WITH THE ARTISTS AND OBJECTS FEATURED IN SPECIAL PRESENTATIONS AND PROGRAMS THE MFAH IS THE LARGEST CULTURAL INSTITUTION SOUTH OF CHICAGO, WEST OF WASHINGTON, D C , AND EAST OF LOS ANGELES, WITH A TOTAL OF 300,000 SQUARE FEET OF SPACE DEDICATED TO THE DISPLAY OF ART THE MAJORITY OF THE MUSEUM'S EXHIBITIONS AND ACTIVITIES TAKE PLACE ON ITS MAIN CAMPUS, WHICH COMPRISES THE CAROLINE WIESS LAW BUILDING, THE AUDREY JONES BECK BUILDING, THE GLASSELL SCHOOL OF ART, THE GLASSELL JUNIOR SCHOOL, AND THE LILLIE AND HUGH ROY CULLEN SCULPTURE GARDEN WITHIN THESE BUILDINGS, EXHIBITION GALLERIES AND AN EDUCATIONAL RESOURCE CENTER RESIDE ALONGSIDE THE OLDEST REPERTORY CINEMA IN HOUSTON AND ONE OF THE LARGEST ART LIBRARIES IN THE SOUTHWEST THE ROSINE BUILDING ENCOMPASSES THE MFAH ARCHIVES - ONE OF THE COUNTRY'S FIRST PUBLIC ART MUSEUM RECORDS REPOSITORIES - AND A STATE-OF-THE-ART CONSERVATION AND STORAGE FACILITY NEARBY ARE TWO REMARKABLE HOUSE MUSEUMS - BAYOU BEND, GIVEN TO THE MUSEUM BY TEXAS PHILANTHROPIST IMA HOGG, AND RIENZI, THE FORMER HOME OF ART PATRONS CARROLL AND HARRIS MASTERSON, III - PROVIDING EXQUISITE SETTINGS FOR VISITORS TO EXPERIENCE THE MUSEUM'S RENOWNED AMERICAN AND EUROPEAN DECORATIVE ARTS COLLECTIONS IN CONTEXT OVER THE YEARS, THE MFAH HAS BEEN PRIVILEGED TO ACQUIRE OUTSTANDING WORKS OF ART REPRESENTING A WIDE VARIETY OF GEOGRAPHIC REGIONS AND HISTORIC PERIODS PARTICULAR STRENGTHS LIE IN PRE-COLUMBIAN ART, RENAISSANCE AND BAROQUE PAINTING AND SCULPTURE, 19TH- AND 20TH-CENTURY ART, AFRICAN-AMERICAN ART, PHOTOGRAPHY, AND LATIN AMERICAN ART BAYOU BEND HOUSES ONE OF THE FINEST ASSEMBLAGES OF EARLY AMERICAN FURNITURE, SILVER, CERAMICS, AND PAINTINGS OUTSIDE OF NEW ENGLAND, AND RIENZI SHOWCASES ONE OF THE MOST IMPORTANT COLLECTIONS OF ENGLISH PORCELAIN OUTSIDE OF THE UNITED KINGDOM CHIEF AMONG THE MUSEUM'S CURRENT ACQUISITION, EXHIBITION, AND SHCOLARSHIP PRIORITIES ARE THE ARTS OF THE AMERICAS, THE ISLAMIC WORLD, AND ASIA IN 2001, THE MFAH ESTABLISHED THE INTERNATIONAL CENTER FOR THE ARTS OF THE AMERICAS, A RESEARCH INSTITUTION DESIGNED TO ADDRESS THE WIDESPREAD LAG IN SCHOLARSHIP AND COLLECTION OF LATIN AMERICAN AND LATINO ART THE MUSEUM HAS RECENTLY ESTABLISHED A NEW DEPARTMENT OF ISLAMIC ART, WHICH IS DEVOTED TO BUILDING A RENOWNED PERMANENT COLLECTION, ORGANIZING INNOVATIVE EXHIBITIONS OF ISLAMIC ART, AND HOSTING STIMULATING EDUCATIONAL AND INTERPRETIVE PROGRAMS AT THE SAME TIME, THE MUSEUM IS ALSO DEEPENING ITS COMMITMENT TO ASIAN ART, ACTIVELY SEEKING TO INCREASE ITS RELEVANT HOLDINGS AND PROMOTE CULTURAL UNDERSTANDING, BEGINNING WITH THE DECEMBER 2007 OPENING OF THE NEWLY RENOVATED ARTS OF KOREA GALLERY, FOLLOWED BY THE ESTABLISHMENT OF THE INDONESIAN GOLD GALLERY AND THE MAY 2009 OPENING OF THE NIDHIKA AND PERSHANT MEHTA ARTS OF INDIA GALLERY THIS WORK TO EXPLORE THE RICH TRADITIONS OF EACH COUNTRY BY JUXTAPOSING ANCIENT AND CONTEMPORARY WORKS CONTINUED WITH THE ESTABLISHMENT OF DEDICATED GALLERIES FOR THE ART OF CHINA AND JAPAN IN 2010 IN SEPTEMBER 2010, BAYOU BEND COLLECTION AND GARDENS, THE MFAH HOUSE MUSEUM FOR AMERICAN DECORATIVE ARTS, OPENED THE LORA JEAN KILROY VISITOR AND EDUCATION CENTER THE VISITOR CENTER FEATURES AN ORIENTATION GALLERY, A LIBRARY, A RETAIL SHOP, TWO MEETING ROOMS, PUBLIC TERRACES, AND AMPLE PARKING DESIGNED BY HOUSTON ARCHITECT LESLIE K ELKINS, THE BUILDING ACHIEVED A LEED SILVER CERTIFICATION FOR ITS ENVIRONMENTAL EFFICIENCIES IN FY 12, THE MUSEUM WELCOMED MORE THAN 250,000 VISITORS TO TUTANKHAMUN THE GOLDEN KING AND THE GREAT PHAROAH (OCTOBER 16 - APRIL 15), AND PRESENTED GIFTS OF THE SULTAN THE ART OF GIVING AT THE ISLAMIC COURTS (OCTOBER 23 - JANUARY 16) FROM NOVEMBER TO FEBRUARY, THE RENOWNED VAN OTTERLOO COLLECTION OF SEVENTEENTH-CENTURY DUTCH AND FLEMISH PAINTINGS WAS DISPLAYED, AND IN JANUARY, THE MUSEUM'S RESEARCH CENTER FOR LATIN AMERICA AND LATINO ART, THE INTERNATIONAL CENTER FOR THE ARTS OF THE AMERICAS, LAUNCHED AN UNPRECEDENTED DIGITAL ARCHIVE FEATURING THOUSANDS OF PRIMARY-SOURCE MATERIALS THAT HAVE ALREADY PROVED TO BE INVALUABLE TO STUDENTS, SCHOLARS, AND COLLECTORS IN ADDITION TO OFFERING ART EDUCATION, STUDIO INSTRUCTION, AND COMMUNITY OUTREACH, THE MFAH IS DEDICATED TO SUPPORTING RESEARCH AND CULTIVATING INNOVATION WITHIN THE ARTS AND RELATED DISCIPLINES TO THAT END, THE MFAH IS PARTNERING WITH RICE UNIVERSITY TO STRENGTHEN ART INSTRUCTION AT UNDERGRADUATE AND GRADUATE LEVELS AND TO PURSUE LEADING-EDGE SCIENTIFIC RESEARCH AIMED AT ADVANCING CURRENT TECHNIQUES FOR ART CONSERVATION WITH GENEROUS SUPPORT FROM THE ANDREW W MELLON FOUNDATION, THE MUSEUM HAS ESTABLISHED A RESEARCH SCIENCE PROGRAM DEDICATED TO THOROUGH SCIENTIFIC INVESTIGATION AND ANALYSIS OF WORKS OF ART IN A RELATED EFFORT, THE MUSEUM IS DEVELOPING AN ART CONSERVATION DATABASE (ACD), A WEB-BASED DATABASE THAT WILL PROVIDE A SYSTEM FOR EASILY ACCESSING CONSERVATION RECORDS, INFORMING ALL COLLECTION PROCEDURES AND POLICIES, AND SERVING AS A NATIONAL MODEL FOR CONSERVATION DATA MANAGEMENT AND COLLECTION CARE IN ACKNOWLEDGMENT OF THE ACD'S IMPACT ON THE FIELD, THE INSTITUTE FOR MUSEUM AND LIBRARY SERVICES HAS RECOGNIZED THE MUSEUM WITH A NATIONAL LEADERSHIP AWARD BY PROVIDING A BROAD RANGE OF EDUCATIONAL AND ARTISTIC ACTIVITIES, THE MUSEUM SEEKS TO CAPTURE THE VIBRANT PATCHWORK OF HOUSTON'S UNIQUE CULTURE AND TO RESPOND TO THE INTERESTS AND NEEDS OF A DIVERSE POPULATION THUS, THE VISION OF INCLUSION AND ACCESSIBILITY ON WHICH THE MFAH WAS FOUNDED ENDURES IN ITS INNOVATIVE PROGRAMS, WHICH ENGAGE THE ENTIRE COMMUNITY IN THE ARTS AND IN A CELEBRATION OF THE DIVERSE FORMS OF CREATIVITY THAT INTRIGUE, INSPIRE, AND EXCITE US ALL

4d Other program services (Describe in Schedule O)
 (Expenses \$ 1,727,838 including grants of \$) (Revenue \$ 2,749,251)

4e Total program service expenses \$ 68,371,889

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i> <input checked="" type="checkbox"/>	Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? <input checked="" type="checkbox"/>	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>		No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i>		No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i> <input checked="" type="checkbox"/>		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i> <input checked="" type="checkbox"/>		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i> <input checked="" type="checkbox"/>	Yes	
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i> <input checked="" type="checkbox"/>		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> <input checked="" type="checkbox"/>	Yes	
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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> <input checked="" type="checkbox"/>	Yes	
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? <i>If "Yes," complete Schedule D, Part VII.</i> <input checked="" type="checkbox"/>	Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i> <input checked="" type="checkbox"/>		No
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? <i>If "Yes," complete Schedule D, Part IX.</i> <input checked="" type="checkbox"/>		No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> <input checked="" type="checkbox"/>		No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i> <input checked="" type="checkbox"/>		No
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> <input checked="" type="checkbox"/>	Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i> <input checked="" type="checkbox"/>		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		No
14a Did the organization maintain an office, employees, or agents outside of the United States?	Yes	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Part I.</i> <input checked="" type="checkbox"/>	Yes	
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 U S? <i>If "Yes," complete Schedule F, Part II and IV.</i> <input checked="" type="checkbox"/>		No
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 U S? <i>If "Yes," complete Schedule F, Part III and IV.</i> <input checked="" type="checkbox"/>	Yes	
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? <i>If "Yes," complete Schedule G, Part I.</i> <input checked="" type="checkbox"/>	Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i> <input checked="" type="checkbox"/>	Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i> <input checked="" type="checkbox"/>		No
20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>		No
b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements.		
20b		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> <input checked="" type="checkbox"/>	21		No
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? <i>If "Yes," complete Schedule I, Parts I and III</i> <input checked="" type="checkbox"/>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> <input checked="" type="checkbox"/>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> <input checked="" type="checkbox"/>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> <input checked="" type="checkbox"/>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> <input checked="" type="checkbox"/>	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> <input checked="" type="checkbox"/>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> <input checked="" type="checkbox"/>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> <input checked="" type="checkbox"/>	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i> <input checked="" type="checkbox"/>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> <input checked="" type="checkbox"/>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> <input checked="" type="checkbox"/>	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V 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. 255		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. 0		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return. 829		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	Yes	
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 or securities account)?		No
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.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
d	If "Yes," indicate the number of Forms 8282 filed during the year. 7d		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources 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?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.		
13b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
13c	Enter the aggregate amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section 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		
1b	Enter the number of voting members included in line 1a, above, who are independent		
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?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
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		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		No
11b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
12b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
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?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the States with which a copy of this Form 990 is required to be filed _____
- 18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 MARCHELL KING
 1001 BISSONNET
 HOUSTON, TX 770051803
 (713) 639-7566

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees 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, or 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 organizations compensated any current or former officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							2,196,137	0	132,153	

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 **21**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3 Yes	
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? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

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	(C) Compensation
TRIBBLE AND ASSOC PO BOX 890689 HOUSTON, TX 77289	GENERAL CONSTRUCTION	1,204,722
NICHOLSON CONSTRUCTION CO PO BOX 721 FULSHEAR, TX 77441	GENERAL CONSTRUCTION	1,058,600
FAYEZ SAROFIM & CO PO BOX 973701 HOUSTON, TX 75397	INVESTMENT MANAGEMENT	804,991
CITY KITCHEN PO BOX 262409 HOUSTON, TX 77027	CATERING SERVICES	686,225
JF PAINTING LLC 3010 STETSON LN HOUSTON, TX 77043	PAINTING/MAINTAINENCE	612,895

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **17**

Part VIII Statement of Revenue

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a					
	b	Membership dues 1b					
	c	Fundraising events 1c	3,481,001				
	d	Related organizations 1d					
	e	Government grants (contributions) 1e	858,305				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	21,429,706				
	g	Noncash contributions included in lines 1a-1f \$ <u>6,387,841</u>					
	h	Total. Add lines 1a-1f ▶	25,769,012				
Program Service Revenue			Business Code				
	2a	MEMBERSHIPS	900099	2,749,251	2,749,251		
	b	SCHOOL TUITION	611600	1,765,121	1,765,121		
	c	ADMISSION/TOURS/LECTUR	900099	1,593,969	1,593,969		
	d	OTHER PROGRAM SERVICE	900099	752,066	752,066		
	e						
	f	All other program service revenue					
g	Total. Add lines 2a-2f ▶		6,860,407				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) ▶		16,968,308		16,968,308	
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties ▶		1,236,479		1,236,479	
	6a	(i) Real		(ii) Personal			
			Gross rents	284,603			
		b	Less rental expenses	0			
		c	Rental income or (loss)	284,603			
	d	Net rental income or (loss) ▶		284,603		284,603	
	7a	(i) Securities		(ii) Other			
			Gross amount from sales of assets other than inventory	81,887,312			
		b	Less cost or other basis and sales expenses	55,575,987			
		c	Gain or (loss)	26,311,325			
	d	Net gain or (loss) ▶		26,311,325		26,311,325	
	8a	Gross income from fundraising events (not including \$ <u>3,481,001</u> of contributions reported on line 1c) See Part IV, line 18					
a			178,875				
b	Less direct expenses b		1,061,480				
c	Net income or (loss) from fundraising events . . ▶		-882,605		-882,605		
9a	Gross income from gaming activities See Part IV, line 19						
a							
b	Less direct expenses b						
c	Net income or (loss) from gaming activities . . ▶						
10a	Gross sales of inventory, less returns and allowances						
a			2,234,461				
b	Less cost of goods sold b		3,107,732				
c	Net income or (loss) from sales of inventory . . ▶		-873,271	-873,271			
		Miscellaneous Revenue	Business Code				
11a	OTHER INCOME	900099	699,894			699,894	
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d ▶		699,894				
12	Total revenue. See Instructions ▶		76,374,152	5,987,136	0	44,618,004	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

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

Do not include amounts reported on lines 6b, 7b, 8b, 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	118,839	118,839		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	12,888	12,888		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,032,792		1,032,792	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	23,109,729	18,476,602	3,013,079	1,620,048
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	769,081	579,706	135,554	53,821
9	Other employee benefits	3,274,019	2,487,941	603,041	183,037
10	Payroll taxes	1,768,447	1,402,127	255,136	111,184
11	Fees for services (non-employees)				
a	Management				
b	Legal	17,698		17,698	
c	Accounting	257,046		257,046	
d	Lobbying				
e	Professional fundraising See Part IV, line 17	42,000			42,000
f	Investment management fees	1,442,870		1,442,870	
g	Other	3,832,663	3,038,357	772,951	21,355
12	Advertising and promotion	1,826,423	1,217,389	60,113	548,921
13	Office expenses	1,490,119	632,025	810,771	47,323
14	Information technology	494,889	372,660	53,417	68,812
15	Royalties				
16	Occupancy	4,398,090	3,980,658	355,562	61,870
17	Travel	859,681	581,908	255,557	22,216
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	47,209	28,534	3,564	15,111
20	Interest	33,168		33,168	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,132,471	4,199,091	697,925	235,455
23	Insurance	1,345,999	1,126,283	204,227	15,489
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	ACCESSIONS	20,609,711	20,609,711	0	0
b	SHIPPING AND FREIGHT	3,143,388	2,893,508	202,466	47,414
c	PROGRAMS & PREVIEWS	2,872,193	2,637,684	145,441	89,068
d	PRINTING & PUBLICATIONS	1,589,696	1,355,170	185,556	48,970
e					
f	All other expenses	3,561,294	2,620,808	815,953	124,533
25	Total functional expenses. Add lines 1 through 24f	83,082,403	68,371,889	11,353,887	3,356,627
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	2,492,319	1	4,060,592
	2 Savings and temporary cash investments	29,736,706	2	10,764,105
	3 Pledges and grants receivable, net	9,939,941	3	6,490,359
	4 Accounts receivable, net	643,234	4	601,457
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	1,268,668	8	1,258,291
	9 Prepaid expenses and deferred charges	1,828,247	9	432,004
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	191,631,584		
	b Less accumulated depreciation	80,857,341	10c	110,774,243
	11 Investments—publicly traded securities	650,204,036	11	627,690,460
	12 Investments—other securities See Part IV, line 11	333,234,730	12	351,058,787
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	3,778,045	15	4,994,317
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,145,125,560	16	1,118,124,615	
Liabilities	17 Accounts payable and accrued expenses	19,073,272	17	11,661,536
	18 Grants payable		18	
	19 Deferred revenue	3,843,795	19	3,639,247
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	22,917,067	26	15,300,783
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	199,520,064	27	192,823,415
	28 Temporarily restricted net assets	239,785,956	28	226,309,239
	29 Permanently restricted net assets	682,902,473	29	683,691,178
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	1,122,208,493	33	1,102,823,832	
34 Total liabilities and net assets/fund balances	1,145,125,560	34	1,118,124,615	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	76,374,152
2	Total expenses (must equal Part IX, column (A), line 25)	2	83,082,403
3	Revenue less expenses Subtract line 2 from line 1	3	-6,708,251
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,122,208,493
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-12,676,410
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1,102,823,832

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2011

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization
THE MUSEUM OF FINE ARTS HOUSTON

Employer identification number

74-1109655

Part I 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 **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).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% 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 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e 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)
- f 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
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
 (ii) a family member of a person described in (i) above?
 (iii) a 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in IRC 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

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	55,597,192	41,186,413	68,216,102	78,424,123	28,518,263	271,942,093
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	55,597,192	41,186,413	68,216,102	78,424,123	28,518,263	271,942,093
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						93,634,506
6 Public Support. Subtract line 5 from line 4						178,307,587

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	55,597,192	41,186,413	68,216,102	78,424,123	28,518,263	271,942,093
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	26,473,059	20,548,437	16,195,739	17,244,980	18,489,390	98,951,605
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	410,349	278,664	1,003,812	4,388,054	699,894	6,780,773
11 Total support (Add lines 7 through 10)						377,674,471
12 Gross receipts from related activities, etc (See instructions)					12	32,436,445
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	47 210 %
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	15	48 740 %
16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 10%-facts-and-circumstances test—2010. 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 supported organization <input checked="" type="checkbox"/>		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions <input checked="" type="checkbox"/>		

Part III Support Schedule for Organizations Described in IRC 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
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 the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	

- 19a 33 1/3% support tests—2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b 33 1/3% support tests—2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

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

Facts And Circumstances Test

Explanation

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2011

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization THE MUSEUM OF FINE ARTS HOUSTON

Employer identification number 74-1109655

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4: Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements. Complete if the organization answered "Yes" 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, Protection of natural habitat, Preservation of open space, Preservation of an historically importantly land area, Preservation of a certified historic structure.

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Table with 2 columns: Description, Held at the End of the Year. Rows 2a-2d: Total number of conservation easements, Total acreage restricted by conservation easements, Number of conservation easements on a certified historic structure included in (a), Number of conservation easements included in (c) acquired after 8/17/06.

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) 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, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1
b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	1,012,962,776	813,907,371	756,642,104	812,084,015	
b Contributions	788,704	45,026,888	10,184,688	405,606	
c Investment earnings or losses	31,839,451	202,761,960	97,440,410		
d Grants or scholarships					
e Other expenditures for facilities and programs	46,908,472	45,130,319	47,042,366	52,809,768	
f Administrative expenses	3,359,360	3,603,124	3,317,465	3,037,749	
g End of year balance	995,323,099	1,012,962,776	813,907,371	756,642,104	

2 Provide the estimated percentage of the year end balance held as

- a** Board designated or quasi-endowment ▶ 10 870 %
- b** Permanent endowment ▶ 68 690 %
- c** Term endowment ▶ 20 440 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations	3a(i)	No
(ii) related organizations	3a(ii)	No

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? **3b**

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		24,345,847		24,345,847
b Buildings		149,661,741	68,342,603	81,319,138
c Leasehold improvements				
d Equipment		17,623,996	12,514,738	5,109,258
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				110,774,243

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include Financial derivatives, Closely-held equity interests, Other, and various fund categories like EQUITIES LONG/SHORT HEDGE FUNDS, PRIVATE EQUITY FUNDS, ENERGY/NATURAL RESOURCES FUNDS, REAL ESTATE FUNDS, DISTRESSED DEBT FUNDS, MULTI-STRATEGY HEDGE FUNDS, and VENTURE CAPITAL FUNDS. Total value is 351,058,787.

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

Table with 3 columns: (a) Description of investment type, (b) Book value, (c) Method of valuation. This section is currently empty.

Part IX Other Assets. See Form 990, Part X, line 15.

Table with 2 columns: (a) Description, (b) Book value. This section is currently empty.

Part X Other Liabilities. See Form 990, Part X, line 25.

Table with 2 columns: (a) Description of Liability, (b) Amount. Row 1 includes Federal Income Taxes. Total value is 0.

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

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	76,374,152
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	83,082,403
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-6,708,251
4	Net unrealized gains (losses) on investments	4	-12,574,339
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-102,071
9	Total adjustments (net) Add lines 4 - 8	9	-12,676,410
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-19,384,661

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	67,969,025
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-12,574,339
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	4,169,212
e	Add lines 2a through 2d	2e	-8,405,127
3	Subtract line 2e from line 1	3	76,374,152
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	76,374,152

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	87,353,686
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	102,071
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	4,169,212
e	Add lines 2a through 2d	2e	4,271,283
3	Subtract line 2e from line 1	3	83,082,403
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	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	83,082,403

Part XIV 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 IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
	PART III, LINE 1A	WITH APPROXIMATELY 64,709 WORKS, THE MUSEUM'S PERMANENT COLLECTION OF WORLD ART SPANS 6,000 YEARS AND SIX CONTINENTS THE MUSEUM ACQUIRES ITS ART COLLECTION THROUGH PURCHASES OR BY GIFTS THE COST OF ALL ART OBJECTS PURCHASED, TOGETHER WITH THE VALUE OF ART OBJECTS OBTAINED BY GIFT (FOR WHICH THE MUSEUM RECEIVES A REASONABLE ESTIMATE), IS REPORTED AS A PART OF COLLECTION EXPENSE IN ACCORDANCE WITH POLICIES FOLLOWED BY MANY ART MUSEUMS, NO VALUE HAS BEEN ASSIGNED IN THE STATEMENT OF FINANCIAL POSITION TO THE MUSEUM'S ART COLLECTION
	PART III, LINE 4	COLLECTION OF WORLD ART AND ART EDUCATION SEE SCHEDULE O DESCRIPTION OF ORGANIZATION'S EXEMPT PURPOSE
PART XI, LINE 8 - OTHER ADJUSTMENTS		DONATED SERVICES -102,071
		PT V LINE 4 OPERATIONS OF THE MUSEUM AND ACCESSIONS FOR ART PURCHASES PT XII LINE 2B DONATED LEGAL SERVICES PT XIII LINE 2D FUNDRAISING DIRECT EXPENSES AND COST OF GOODS SOLD

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2011

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization THE MUSEUM OF FINE ARTS HOUSTON

Employer identification number 74-1109655

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [] No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

3 Activities per Region (Use Part V if additional space is needed)

Table with 6 columns: (a) Region, (b) Number of offices in the region, (c) Number of employees or agents in region or independent contractors, (d) Activities conducted in region (by type), (e) If activity listed in (d) is a program service, describe specific type of service(s) in region, (f) Total expenditures for region/investments in region. Includes rows for EUROPE and summary rows 3a, 3b, 3c.

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).* Yes No

Part V Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier	Return Reference	Explanation
		<p>IN 2007, THE MUSEUM OF FINE ARTS, HOUSTON BEGAN A THREE-YEAR PROJECT CONCEIVED BY NANCY BROWN NEGLEY AND FUNDED BY THE BROWN FOUNDATION, INC, OF HOUSTON TO CREATE AN INTERNATIONAL RESIDENCY PROGRAM FOR TALENTED MIDCAREER SCHOLARS, ARTISTS, AND OTHERS ACTIVE IN THE HUMANITIES THE BROWN FOUNDATION FELLOWS ARE INVITED TO SPEND ONE TO THREE MONTHS ON THEIR SPECIAL PROJECTS AT THE DORA MAAR HOUSE, A BEAUTIFUL, EIGHTEENTH CENTURY COUNTRY HOME IN THE SOUTH OF FRANCE THAT WAS PREVIOUSLY OWNED BY DORA MAAR, ARTIST, PHOTOGRAPHER, AND PABLO PICASSO'S MUSE THE WORK CARRIED OUT BY GWEN STRAUSS, ON-SITE ASSISTANT DIRECTOR OF THE BROWN FOUNDATION FELLOWS PROGRAM, IS CRITICAL SHE INITIATES CONTACT WITH THE FELLOWS BEFORE THEY ARRIVE, MEETS THEM AT THEIR PLANES OR TRAINS, AND ENSURES THAT THEY HAVE THE INFORMATION, EQUIPMENT, AND CONTACTS THEY NEED FOR PRODUCTIVE RESIDENCIES THE MUSEUM OF FINE ARTS, HOUSTON STAFF MEMBER, DIRECTOR OF THE DORA MAAR HOUSE, VISITS AND MONITORS THE PROGRAMS THREE TO SIX TIMES A YEAR ALL SCHOLARSHIP FUNDS ARE USED TO PAY FOR THE FELLOWS' LIVING EXPENSES DURING THEIR STAY AT DORA MAAR GRANT RECIPIENTS RECEIVE CASH REIMBURSEMENT FOR QUALIFYING EXPENSES EACH PERSON WHO RECEIVES A FELLOWSHIP AGREES TO DO SOMETHING FOR THE VILLAGE OF MENERBES TO THANK ITS RESIDENTS FOR THEIR HOSPITALITY THE DORA MAAR HOUSE IS ORGANIZED UNDER THE LAWS OF FRANCE WITH THE APPROPRIATE BY-LAWS AND ARTICLES OF INCORPORATION WHICH ARE REGISTERED WITH THE FRENCH GOVERNMENT PT I LINE 3 COL (E) - MANAGES FACILITY FOR RESEARCH SEE SCHEDULE O DESCRIPTION OF PROGRAM ACCOMPLISHMENTS FOR MORE DETAIL</p>

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2011

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization THE MUSEUM OF FINE ARTS HOUSTON

Employer identification number

74-1109655

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations, b Internet and e-mail solicitations, c Phone solicitations, d In-person solicitations, e Solicitation of non-government grants, f Solicitation of government grants, g Special fundraising events

2a Did the organization have a written or oral agreement with any individual... Yes No

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.

Table with 6 columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col (i), (vi) Amount paid to (or retained by) organization. Includes entry for THE LUKENS COMPANY.

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		GALA BALL (event type)	ONE GREAT NIGHT (event type)	5 (total number)	(Add col (a) through col (c))
Revenue	1 Gross receipts	1,431,375	522,677	1,705,824	3,659,876
	2 Less Charitable contributions	1,388,675	487,177	1,605,149	3,481,001
	3 Gross income (line 1 minus line 2)	42,700	35,500	100,675	178,875
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Food and beverages	62,512	81,904	208,411	352,827
	8 Entertainment	49,796	2,432	24,673	76,901
	9 Other direct expenses	165,943	58,038	407,771	631,752
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(1,061,480)
11 Net income summary Combine lines 3 and 10 in column (d) ▶				-882,605	

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7 Direct expense summary Add lines 2 through 5 in column (d) ▶				()	
8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶					

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," Explain _____

- 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 entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a
b An outside facility	13b

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
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Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) 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) LIVING EXPENSES	11	21,700	20,214	BOOK	AIRFARE AND SHIPPING
(2) SCHOOL SCHOLARSHIPS	322	76,925	0	BOOK	N/A

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

Identifier	Return Reference	Explanation
		PT I LINE 2 - GRANTEES MUST MAKE A PRESENTATION OF WORK IN ORDER TO RECEIVE FINANCIAL ASSISTANCE FOR SCHOLARSHIPS AND LIVING EXPENSES SCHOLARSHIP FUNDS ARE DIRECTLY APPLIED TO RECIPIENTS' TUITION ACCOUNTS OR USED TO COVER DIRECT TRAVEL EXPENSES FOR QUALIFYING PROGRAMS ON THEIR BEHALF THE GLASSELL SCHOOL OF ART OFFERS A VARIETY OF CLASSES, WORKSHOPS, AND EDUCATIONAL OPPORTUNITIES FOR STUDENTS DIVERSE IN AGE, INTERESTS, EXPERIENCE LEVEL, AND NEED THE JUNIOR SCHOOL OFFERS YEAR-ROUND ART CLASSES AND WORKSHOPS FOR CHILDREN AGES FOUR THROUGH EIGHTEEN THIS YEAR'S ENROLLMENT REACHED 6,272, INCLUDING 322 STUDENTS RECEIVING TUITION SCHOLARSHIPS SOME OF THESE SCHOLARSHIPS ARE AWARDED IN RECOGNITION OF TALENT THROUGH PROGRAMS SUCH AS THE SKETCHING COMPETITION, OTHERS ARE BASED ON NEED, THUS ENSURING ACCESS TO ART EDUCATION FOR YOUNG PEOPLE THROUGHOUT THE COMMUNITY THE STUDIO SCHOOL OF THE GLASSELL SCHOOL OF ART OFFERS COURSES IN ART HISTORY AND STUDIO ART TO ADULTS THE CORE ARTIST-IN-RESIDENCE PROGRAM AND THE CORE CRITICAL STUDIES PROGRAM INCLUDE EIGHT ARTISTS AND THREE CRITICAL WRITERS EACH IS A NINE-MONTH POSTGRADUATE PROGRAM RENEWABLE FOR A SECOND TERM UPON SUCCESSFUL COMPLETION OF THE FIRST YEAR THE CORE ARTISTS MOUNT AN EXHIBITION OF THEIR WORK IN THE LAURA LEE BLANTON GALLERY, WHICH IS ACCOMPANIED BY A CATALOGUE THAT DOCUMENTS THE ARTISTS' PRODUCTION OVER THE COURSE OF THE YEAR AND INCLUDES ESSAYS CONTRIBUTED BY THE CRITICAL STUDIES RESIDENTS

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
THE MUSEUM OF FINE ARTS HOUSTON

Employer identification number

74-1109655

Part 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
- Travel for companions
- Tax idemnification and gross-up payments
- Discretionary spending account
- Housing allowance or residence for personal use
- Payments for business use of personal residence
- Health or social club dues or initiation fees
- Personal services (e g , maid, chauffeur, chef)

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain

1b Yes

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

2 Yes

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply

- Compensation committee
- Independent compensation consultant
- Form 990 of other organizations
- Written employment contract
- Compensation survey or study
- Approval by the board or compensation committee

4 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

a Receive a severance payment or change-of-control payment?

4a No

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

4b Yes

c Participate in, or receive payment from, an equity-based compensation arrangement?

4c No

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only 501(c)(3) and 501(c)(4) organizations only 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

a The organization?

5a No

b Any related organization?

5b No

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

a The organization?

6a No

b Any related organization?

6b No

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 Yes

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 Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III

8 No

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

9

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MS GWENDOLYN H GOFFE	(i)	444,594	445,000	10,371	12,250	13,288	925,503	0
	(ii)	0	0	0	0	0	0	0
(2) JOHN WILLARD HOLMES	(i)	244,373	10,000	792	12,250	22,256	289,671	0
	(ii)	0	0	0	0	0	0	0
(3) AMY PURVIS	(i)	211,476	0	4,916	10,625	8,905	235,922	0
	(ii)	0	0	0	0	0	0	0
(4) EDGAR PETER BOWRON	(i)	157,386	10,000	3,897	8,078	11,903	191,264	0
	(ii)	0	0	0	0	0	0	0
(5) DARREN A BARTSCH	(i)	186,952	0	108	9,375	6,215	202,650	0
	(ii)	0	0	0	0	0	0	0
(6) MARY HAUS	(i)	161,036	5,000	236	8,103	8,905	183,280	0
	(ii)	0	0	0	0	0	0	0
(7) PETER MARZIO	(i)	0	300,000	0	0	0	300,000	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	HOUSING ALLOWANCE - RECEIVED BY THE DIRECTOR. HOUSING ALLOWANCE, ALONG WITH ALL OTHER COMPENSATION, WAS CONSIDERED WHEN SETTING TOTAL COMPENSATION USING THE METHODS INDICATED IN SCHEDULE J, LINE 3. SOCIAL CLUB DUES - RECEIVED BY THE DIRECTOR. CLUB DUES ARE PAID BY THE ORGANIZATION AND ARE USED EXCLUSIVELY FOR THE ORGANIZATION'S BUSINESS PURPOSES. THE NONTAXABLE CLUB DUES ARE HELD BY THE DIRECTOR.
	PART I, LINE 4B	THE ORGANIZATION HAS A DEFERRED COMPENSATION AGREEMENT FOR SENIOR STAFF. UPON THE DEATH OF THE DIRECTOR PETER C. MARZIO IN DECEMBER, 2010, THE ORGANIZATION PAID THE SURVIVING SPOUSE, FRANCES MARZIO, THE BENEFITS DUE THE DIRECTOR UNDER A DEFERRED PERFORMANCE AGREEMENT.
	PART I, LINE 7	THE COMPENSATION COMMITTEE DETERMINES BONUSES BY REVIEWING PERFORMANCE OVER THE PREVIOUS YEAR AND ACCESSING ACCOMPLISHMENTS MADE TO GROW, PROTECT, PRESENT, AND PRESERVE THE ASSETS AND PROGRAMS OF THE MFAH. PRIOR TO FINAL APPROVAL OF NON-FIXED PAYMENTS, THE TOTAL COMPENSATION PACKAGE, INCLUDING BONUSES, ARE REVIEWED USING THE METHODS INDICATED IN SCHEDULE J, LINE 3.

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2011

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization THE MUSEUM OF FINE ARTS HOUSTON

Employer identification number 74-1109655

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

Table with 3 main columns: (a) Name of disqualified person, (b) Description of transaction, (c) Corrected? (Yes/No)

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 \$
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

Table with 7 main columns: (a) Name of interested person and purpose, (b) Loan to or from the organization?, (c) Original principal amount, (d) Balance due, (e) In default?, (f) Approved by board or committee?, (g) Written agreement?

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 3 main columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) F MARZIO	FAMILY MBR OF FMR OFFICER	143,719	COMPENSATION		No

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

OMB No 1545-0047

2011

Open to Public Inspection

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**

Name of the organization
THE MUSEUM OF FINE ARTS HOUSTON

Employer identification number
74-1109655

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art	X	661	6,387,841	MARKET VALUE
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 31

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	Yes	
b If "Yes," describe in Part II		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II

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

Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTORS	PART I, COLUMN (B)	THE AMOUNTS IN COLUMN B OF PART I DESCRIBE THE NUMBER OF ITEMS CONTRIBUTED DURING THE TAX YEAR
THIRD PARTY USE	PART I, LINE 32B	THE ORGANIZATION HIRES AN OUTSIDE THIRD PARTY TO DISPOSE OF NONCASH CONTRIBUTIONS

Schedule M (Form 990) 2011

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
THE MUSEUM OF FINE ARTS HOUSTON

Employer identification number

74-1109655

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	FORM 990 WAS DISTRIBUTED TO THE AUDIT COMMITTEE VIA A DELIVERY SERVICE PRIOR TO FILING THE DOCUMENT WAS REVIEWED BY THE CHIEF FINANCIAL OFFICER (ASSOCIATE DIRECTOR, INVESTMENT AND FINANCE) IN PERSON, WITH THE CONTROLLER A PAID INDEPENDENT ACCOUNTING FIRM REVIEWED FORM 990 THE CFO, CONTROLLER, AND INTERIM DIRECTOR WERE AVAILABLE TO ALL MEMBERS OF THE AUDIT COMMITTEE TO ANSWER QUESTIONS
	FORM 990, PART VI, SECTION B, LINE 12C	ALL TRUSTEES AND COMMITTEE MEMBERS, VOTING OR NON-VOTING, RECEIVE A CONFLICT OF INTEREST QUESTIONNAIRE AT THE START OF EACH FISCAL YEAR THE COMPLETED FORMS ARE RETURNED TO THE OFFICE OF THE ASSOCIATE DIRECTOR, INVESTMENT AND FINANCE EACH TRUSTEE COMMITTEE CHAIR IS FAMILIAR WITH THE MUSEUM OF FINE ARTS, HOUSTON'S CONFLICT OF INTEREST POLICY AND ENFORCES THE POLICY AT THE COMMITTEE LEVEL AS REQUIRED ANY CONFLICTS IDENTIFIED AT A COMMITTEE MEETING ARE REFLECTED IN THE COMMITTEE MINUTES AND THE CONFLICTED PARTY LEAVES THE ROOM AND DOES NOT PARTICIPATE IN THE VOTE
	FORM 990, PART VI, SECTION B, LINE 15	THE MUSEUM OF FINE ARTS, HOUSTON HAS A COMPENSATION SUB-COMMITTEE CHAIRED BY THE CHAIRMAN OF THE COMMITTEE INCLUDES FIVE VOTING TRUSTEE MEMBERS AND ONE COMMITTEE CONSULTANT COMPARATIVE DATA FOR SIMILAR POSITIONS IN THE UNITED STATES MUSEUMS ARE REVIEWED ALONG WITH A MINIMUM OF A FOUR TO FIVE YEAR COMPENSATION HISTORY ADDITIONALLY, THE COMMITTEE ESTABLISHES SPECIFIC CRITERIA FOR COMPENSATION DECISIONS
	FORM 990, PART VI, SECTION C, LINE 19	ALL DOCUMENTS REQUIRED BY LAW TO BE MADE AVAILABLE TO THE PUBLIC ARE AVAILABLE THE ANNUAL REPORT, INCLUDING THE AUDITED FINANCIAL STATEMENTS, IS MADE AVAILABLE THROUGH THE MUSEUM OF FINE ARTS, HOUSTON WEBSITE
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -12,574,339 DONATED SERVICES -102,071 TOTAL TO FORM 990, PART XI, LINE 5 -12,676,410

Form **4562**

**Depreciation and Amortization
(Including Information on Listed Property)**

OMB No 1545-0172
2011
Attachment
Sequence No **179**

Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return THE MUSEUM OF FINE ARTS HOUSTON	Business or activity to which this form relates FORM 990 PAGE 10	Identifying number 74-1109655
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Part I Election To Expense Certain Property Under Section 179
Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	500,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost	
7 Listed property Enter the amount from line 29	7		
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7		8	
9 Tentative deduction Enter the smaller of line 5 or line 8		9	
10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562		10	
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)		11	
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11		12	
13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12	13		

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2011	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B—Assets Placed in Service During 2011 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	

Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System

20a Class life					S/L
b 12-year			12 yrs		S/L
c 40-year			40 yrs	MM	S/L

Part IV Summary (see instructions)

21 Listed property Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	0
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

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

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? Yes No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation/deduction, (i) Elected section 179 cost.

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) **25**

26 Property used more than 50% in a qualified business use

27 Property used 50% or less in a qualified business use

28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 **28**

29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 **29**

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table for Section B with columns (a) through (f) for Vehicle 1 through Vehicle 6. Rows include 30-33 (miles driven) and 34-36 (availability and use).

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

Table for Section C with columns Yes/No. Rows 37-41: 37. Written policy prohibiting personal use; 38. Written policy prohibiting personal use except commuting; 39. Treat all use as personal use; 40. Provide more than five vehicles; 41. Meet requirements for qualified demonstration use.

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

Table for Section VI with columns (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year.

42 Amortization of costs that begins during your 2011 tax year (see instructions)

43 Amortization of costs that began before your 2011 tax year **43**

44 Total. Add amounts in column (f) See the instructions for where to report **44**

Additional Data

Software ID:
Software Version:
EIN: 74-1109655
Name: THE MUSEUM OF FINE ARTS HOUSTON

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 1,727,838 including grants of \$) (Revenue \$ 2,749,251)

MEMBERSHIP ACTIVITIES

(Code) (Expenses \$ including grants of \$) (Revenue \$)

FORM 990, PART III, LINE 4 - DESCRIPTION OF PROGRAM SERVICES ESTABLISHED IN 1900 AS A MODEST EDUCATION INITIATIVE TO BRING ART TO HOUSTON PUBLIC SCHOOLS, THE MUSEUM OF FINE ARTS, HOUSTON (MFAH) REMAINS STEADFAST IN ITS MISSION TO SERVE AS A PLACE FOR ALL PEOPLE THROUGH EXCELLENCE IN THE COLLECTION, EXHIBITION, PRESERVATION, CONSERVATION, AND INTERPRETATION OF ART TO THAT END, MFAH PUBLIC PROGRAMMING ACTIVELY SEEKS TO CONNECT THE INSTITUTION WITH THE COMMUNITY THROUGH EXHIBITIONS AND ACTIVITIES HELD ACROSS HOUSTON EACH YEAR, OVER TWO MILLION VISITORS ENGAGE WITH THE MUSEUM'S PERMANENT COLLECTION OF NEARLY 60,000 MASTERPIECES FROM AROUND THE WORLD, AND WITH THE ARTISTS AND OBJECTS FEATURED IN SPECIAL PRESENTATIONS AND PROGRAMS THE MFAH IS THE LARGEST CULTURAL INSTITUTION SOUTH OF CHICAGO, WEST OF WASHINGTON, D C , AND EAST OF LOS ANGELES, WITH A TOTAL OF 300,000 SQUARE FEET OF SPACE DEDICATED TO THE DISPLAY OF ART THE MAJORITY OF THE MUSEUM'S EXHIBITIONS AND ACTIVITIES TAKE PLACE ON ITS MAIN CAMPUS, WHICH COMPRISES THE CAROLINE WIESS LAW BUILDING, THE AUDREY JONES BECK BUILDING, THE GLASSELL SCHOOL OF ART, THE GLASSELL JUNIOR SCHOOL, AND THE LILLIE AND HUGH ROY CULLEN SCULPTURE GARDEN WITHIN THESE BUILDINGS, EXHIBITION GALLERIES AND AN EDUCATIONAL RESOURCE CENTER RESIDE ALONGSIDE THE OLDEST REPERTORY CINEMA IN HOUSTON AND ONE OF THE LARGEST ART LIBRARIES IN THE SOUTHWEST THE ROSINE BUILDING ENCOMPASSES THE MFAH ARCHIVES - ONE OF THE COUNTRY'S FIRST PUBLIC ART MUSEUM RECORDS REPOSITORIES - AND A STATE-OF-THE-ART CONSERVATION AND STORAGE FACILITY NEARBY ARE TWO REMARKABLE HOUSE MUSEUMS - BAYOU BEND, GIVEN TO THE MUSEUM BY TEXAS PHILANTHROPIST IMA HOGG, AND RIENZI, THE FORMER HOME OF ART PATRONS CARROLL AND HARRIS MASTERSON, III - PROVIDING EXQUISITE SETTINGS FOR VISITORS TO EXPERIENCE THE MUSEUM'S RENOWNED AMERICAN AND EUROPEAN DECORATIVE ARTS COLLECTIONS IN CONTEXT OVER THE YEARS, THE MFAH HAS BEEN PRIVILEGED TO ACQUIRE OUTSTANDING WORKS OF ART REPRESENTING A WIDE VARIETY OF GEOGRAPHIC REGIONS AND HISTORIC PERIODS PARTICULAR STRENGTHS LIE IN PRE-COLUMBIAN ART, RENAISSANCE AND BAROQUE PAINTING AND SCULPTURE, 19TH- AND 20TH-CENTURY ART, AFRICAN-AMERICAN ART, PHOTOGRAPHY, AND LATIN AMERICAN ART BAYOU BEND HOUSES ONE OF THE FINEST ASSEMBLAGES OF EARLY AMERICAN FURNITURE, SILVER, CERAMICS, AND PAINTINGS OUTSIDE OF NEW ENGLAND, AND RIENZI SHOWCASES ONE OF THE MOST IMPORTANT COLLECTIONS OF ENGLISH PORCELAIN OUTSIDE OF THE UNITED KINGDOM CHIEF AMONG THE MUSEUM'S CURRENT ACQUISITION, EXHIBITION, AND SCHOLARSHIP PRIORITIES ARE THE ARTS OF THE AMERICAS, THE ISLAMIC WORLD, AND ASIA IN 2001, THE MFAH ESTABLISHED THE INTERNATIONAL CENTER FOR THE ARTS OF THE AMERICAS, A RESEARCH INSTITUTION DESIGNED TO ADDRESS THE WIDESPREAD LAG IN SCHOLARSHIP AND COLLECTION OF LATIN AMERICAN AND LATINO ART THE MUSEUM HAS RECENTLY ESTABLISHED A NEW DEPARTMENT OF ISLAMIC ART, WHICH IS DEVOTED TO BUILDING A RENOWNED PERMANENT COLLECTION, ORGANIZING INNOVATIVE EXHIBITIONS OF ISLAMIC ART, AND HOSTING STIMULATING EDUCATIONAL AND INTERPRETIVE PROGRAMS AT THE SAME TIME, THE MUSEUM IS ALSO DEEPENING ITS COMMITMENT TO ASIAN ART, ACTIVELY SEEKING TO INCREASE ITS RELEVANT HOLDINGS AND PROMOTE CULTURAL UNDERSTANDING, BEGINNING WITH THE DECEMBER 2007 OPENING OF THE NEWLY RENOVATED ARTS OF KOREA GALLERY, FOLLOWED BY THE ESTABLISHMENT OF THE INDONESIAN GOLD GALLERY AND THE MAY 2009 OPENING OF THE NIDHIKA AND PERSHANT MEHTA ARTS OF INDIA GALLERY THIS WORK TO EXPLORE THE RICH TRADITIONS OF EACH COUNTRY BY JUXTAPOSING ANCIENT AND CONTEMPORARY WORKS CONTINUED WITH THE ESTABLISHMENT OF DEDICATED GALLERIES FOR THE ART OF CHINA AND JAPAN IN 2010 IN SEPTEMBER 2010, BAYOU BEND COLLECTION AND GARDENS, THE MFAH HOUSE MUSEUM FOR AMERICAN DECORATIVE ARTS, OPENED THE LORA JEAN KILROY VISITOR AND EDUCATION CENTER THE VISITOR CENTER FEATURES AN ORIENTATION GALLERY, A LIBRARY, A RETAIL SHOP, TWO MEETING ROOMS, PUBLIC TERRACES, AND AMPLE PARKING DESIGNED BY HOUSTON ARCHITECT LESLIE K ELKINS, THE BUILDING ACHIEVED A LEED SILVER CERTIFICATION FOR ITS ENVIRONMENTAL EFFICIENCIES IN FY 12, THE MUSEUM WELCOMED MORE THAN 250,000 VISITORS TO TUTANKHAMUN THE GOLDEN KING AND THE GREAT PHAROAHS (OCTOBER 16 - APRIL 15), AND PRESENTED GIFTS OF THE SULTAN THE ART OF GIVING AT THE ISLAMIC COURTS (OCTOBER 23 - JANUARY 16) FROM NOVEMBER TO FEBRUARY, THE RENOWNED VAN OTTERLOO COLLECTION OF SEVENTEENTH-CENTURY DUTCH AND FLEMISH PAINTINGS WAS DISPLAYED, AND IN JANUARY, THE MUSEUM'S RESEARCH CENTER FOR LATIN AMERICA AND LATINO ART, THE INTERNATIONAL CENTER FOR THE ARTS OF THE AMERICAS, LAUNCHED AN UNPRECEDENTED DIGITAL ARCHIVE FEATURING THOUSANDS OF PRIMARY-SOURCE MATERIALS THAT HAVE ALREADY PROVED TO BE INVALUABLE TO STUDENTS, SCHOLARS, AND COLLECTORS IN ADDITION TO OFFERING ART EDUCATION, STUDIO INSTRUCTION, AND COMMUNITY OUTREACH, THE MFAH IS DEDICATED TO SUPPORTING RESEARCH AND CULTIVATING INNOVATION WITHIN THE ARTS AND RELATED DISCIPLINES TO THAT END, THE MFAH IS PARTNERING WITH RICE UNIVERSITY TO STRENGTHEN ART INSTRUCTION AT UNDERGRADUATE AND GRADUATE LEVELS AND TO PURSUE LEADING-EDGE SCIENTIFIC RESEARCH AIMED AT ADVANCING CURRENT TECHNIQUES FOR ART CONSERVATION WITH GENEROUS SUPPORT FROM THE ANDREW W MELLON FOUNDATION, THE MUSEUM HAS ESTABLISHED A RESEARCH SCIENCE PROGRAM DEDICATED TO THOROUGH SCIENTIFIC INVESTIGATION AND ANALYSIS OF WORKS OF ART IN A RELATED EFFORT, THE MUSEUM IS DEVELOPING AN ART CONSERVATION DATABASE (ACD), A WEB-BASED DATABASE THAT WILL PROVIDE A SYSTEM FOR EASILY ACCESSING CONSERVATION RECORDS, INFORMING ALL COLLECTION PROCEDURES AND POLICIES, AND SERVING AS A NATIONAL MODEL FOR CONSERVATION DATA MANAGEMENT AND COLLECTION CARE IN ACKNOWLEDGMENT OF THE ACD'S IMPACT ON THE FIELD, THE INSTITUTE FOR MUSEUM AND LIBRARY SERVICES HAS RECOGNIZED THE MUSEUM WITH A NATIONAL LEADERSHIP AWARD BY PROVIDING A BROAD RANGE OF EDUCATIONAL AND ARTISTIC ACTIVITIES, THE MUSEUM SEEKS TO CAPTURE THE VIBRANT PATCHWORK OF HOUSTON'S UNIQUE CULTURE AND TO RESPOND TO THE INTERESTS AND NEEDS OF A DIVERSE POPULATION THUS, THE VISION OF INCLUSION AND ACCESSIBILITY ON WHICH THE MFAH WAS FOUNDED ENDURES IN ITS INNOVATIVE PROGRAMS, WHICH ENGAGE THE ENTIRE COMMUNITY IN THE ARTS AND IN A CELEBRATION OF THE DIVERSE FORMS OF CREATIVITY THAT INTRIGUE, INSPIRE, AND EXCITE US ALL

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MR EDWARD JOSEPH HUDSON LIFE TRUSTEE	1 00	X						0	0	0
MR FRANK J HEVRDEJS LIFE TRUSTEE	1 00	X						0	0	0
MR ISAAC ARNOLD JR LIFE TRUSTEE	1 00	X						0	0	0
MR JOSEPH D JAMAIL LIFE TRUSTEE	1 00	X						0	0	0
MR RICHARD D KINDER LIFE TRUSTEE	1 00	X						0	0	0
MRS ANNE S DUNCAN LIFE TRUSTEE, ASSISTANT SECRETARY	1 00	X		X				0	0	0
MRS CORNELIA C LONG LIFE TRUSTEE, CHAIRMAN OF THE BOARD	1 00	X		X				0	0	0
MRS ISLA RECKLING LIFE TRUSTEE	1 00	X						0	0	0
MRS NANCY ABENDSHEIN LIFE TRUSTEE	1 00	X						0	0	0
DR MARJORIE G HORNING LIFE TRUSTEE, ASSISTANT SECRETARY	1 00	X		X				0	0	0
MS ALICE C SIMKINS LIFE TRUSTEE, SECRETARY	1 00	X		X				0	0	0
MR RICHARD W WORTHAM III LIFE TRUSTEE, TREASURER	1 00	X		X				0	0	0
MRS WILLIAM S KILROY LIFE TRUSTEE, VICE CHAIRMAN	1 00	X		X				0	0	0
DR LUIS T CAMPOS TRUSTEE	1 00	X						0	0	0
HON PETER R CONEWAY TRUSTEE	1 00	X						0	0	0
MR ANDRIUS KONTRIMAS TRUSTEE	1 00	X						0	0	0
MR BRAD BUCHER TRUSTEE	1 00	X						0	0	0
MR CHARLES BUTT TRUSTEE	1 00	X						0	0	0
MR DON A SANDERS TRUSTEE	1 00	X						0	0	0
MR ELISE JOSEPH TRUSTEE	1 00	X						0	0	0
MR FRANK N CARROLL JR TRUSTEE	1 00	X						0	0	0
MR H JOHN RILEY JR TRUSTEE	1 00	X						0	0	0
MR JAMES EDWARD MALONEY TRUSTEE	1 00	X						0	0	0
MR JESSE H JONES II TRUSTEE	1 00	X						0	0	0
MR KASE LAWAL TRUSTEE	1 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MR LENOIR M JOSEY II TRUSTEE	1 00	X						0	0	0
MR MARTYN E GOOSSEN TRUSTEE	1 00	X						0	0	0
MR MICHAEL C LINN TRUSTEE	1 00	X						0	0	0
MR SAMUEL F GORMAN TRUSTEE	1 00	X						0	0	0
MR THOMAS S GLANVILLE TRUSTEE	1 00	X						0	0	0
MRS SIMA LADJEVARDIAN TRUSTEE	1 00	X						0	0	0
MRS ANN BOOKOUT TRUSTEE	1 00	X						0	0	0
MRS ANN G TRAMMELL TRUSTEE	1 00	X						0	0	0
MRS ANNE CHAO TRUSTEE	1 00	X						0	0	0
MRS CYNTHIA PETRELLO TRUSTEE	1 00	X						0	0	0
MRS BARBARA G GAMSON TRUSTEE	1 00	X						0	0	0
MRS CAROL C BALLARD TRUSTEE	1 00	X						0	0	0
MRS JUDY TATE TRUSTEE	1 00	X						0	0	0
MRS CHERIE FLORES TRUSTEE	1 00	X						0	0	0
MRS CHONG-OK LEE MATTHEWS TRUSTEE	1 00	X						0	0	0
MRS CLAYTON ERIKSON TRUSTEE	1 00	X						0	0	0
MRS DENNIS N JOHNSTON TRUSTEE	1 00	X						0	0	0
MRS FRANCI N CRANE TRUSTEE	1 00	X						0	0	0
MRS GAIL ADLER TRUSTEE	1 00	X						0	0	0
MRS HARRY H CULLEN TRUSTEE	1 00	X						0	0	0
MRS MACEY REASONER TRUSTEE	1 00	X						0	0	0
MRS KIRBY COHN MCCOOL TRUSTEE	1 00	X						0	0	0
MRS LAURA E ARNOLD TRUSTEE	1 00	X						0	0	0
MRS LELA GIBBS TRUSTEE	1 00	X						0	0	0
MRS LILLY K ANDRESS TRUSTEE	1 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MRS JUDY MARGOLIS TRUSTEE	1 00	X						0	0	0
MR WILLIAM N MATHIS TRUSTEE	1 00	X						0	0	0
MRS LISA M MEARS TRUSTEE	1 00	X						0	0	0
MRS NIDHIKA MEHTA TRUSTEE	1 00	X						0	0	0
MRS NANCY POWELL MOORE TRUSTEE	1 00	X						0	0	0
MRS BARBARA E NAU TRUSTEE	1 00	X						0	0	0
MRS NANCY PETERKIN TRUSTEE	1 00	X						0	0	0
MRS COURTNEY LANIER SAROFIM TRUSTEE	1 00	X						0	0	0
MRS ELIZA STEDMAN TRUSTEE	1 00	X						0	0	0
MRS LINNET F DEILY TRUSTEE	1 00	X						0	0	0
MRS MELINDA HILDEBRAND TRUSTEE	1 00	X						0	0	0
MRS PAMELA F OTT TRUSTEE	1 00	X						0	0	0
MRS RANIA DANIEL TRUSTEE	1 00	X						0	0	0
MRS PHOEBE TUDOR TRUSTEE	1 00	X						0	0	0
MRS ROLANETTE LAWRENCE TRUSTEE	1 00	X						0	0	0
MRS SANDRA GODFREY TRUSTEE	1 00	X						0	0	0
MRS SARA DODD-SPICKELMIER TRUSTEE	1 00	X						0	0	0
MRS SARA S MORGAN TRUSTEE	1 00	X						0	0	0
MRS JOAN MORGENSTERN TRUSTEE	1 00	X						0	0	0
MRS BARBARA WEBBER TRUSTEE	1 00	X						0	0	0
DR FRAZIER WILSON TRUSTEE	1 00	X						0	0	0
DR CYVIA G WOLFF TRUSTEE	1 00	X						0	0	0
MS BETTIE CARTWRIGHT TRUSTEE	1 00	X						0	0	0
MS CARLA KNOBLOCH TRUSTEE	1 00	X						0	0	0
MS CECILY E HORTON TRUSTEE	1 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MS MARTHA LONG TRUSTEE	1 00	X						0	0	0
MS MARY LAWRENCE PORTER TRUSTEE	1 00	X						0	0	0
MS SOFIA ADROGUE TRUSTEE	1 00	X						0	0	0
MS WILHELMINA E ROBERTSON TRUSTEE	1 00	X						0	0	0
MS GWENDOLYN H GOFFE INTERIM DIRECTOR	35 00			X				899,965	0	25,538
JOHN WILLARD HOLMES ASSOC DIR - ADMIN	35 00					X		255,165	0	34,506
AMY PURVIS ASSOC DIR - DEVELOPMENT	35 00					X		216,392	0	19,530
EDGAR PETER BOWRON CURATOR	35 00					X		171,283	0	19,981
DARREN A BARTSCH INVESTMENT OFFICER	35 00					X		187,060	0	15,590
MARY HAUS DIRECTOR, MARKETING & COMMUNICATIONS	35 00					X		166,272	0	17,008
PETER MARZIO FORMER MUSEUM DIRECTOR	0 00						X	300,000	0	0