** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2021 calendar year, or tax year beginning JUL 1, 2021 and ending JUN 30, 2022 Check if applicable: C Name of organization D Employer identification number Address change WHITNEY MUSEUM OF AMERICAN ART Name change 13-1789318 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final 99 GANSEVOORT STREET 212-570-3600 termin-ated 198,322,300, City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amende NEW YORK, NY 10014 H(a) Is this a group return Applica-F Name and address of principal officer: ADAM D. WEINBERG for subordinates? Yes 🗵 No SAME AS C ABOVE H(b) Are all subordinates included? Yes I Tax-exempt status: X 501(c)(3) 501(c) (527) (insert no.) 4947(a)(1) or If "No," attach a list. See instructions J Website: WHITNEY ORG H(c) Group exemption number Form of organization; X Corporation Trust Association Other > L Year of formation; 1926 M State of legal domicite; NY Part I Summary Briefly describe the organization's mission or most significant activities: WHITNEY MUSEUM OF AMERICAN ART Governance IS A MUSEUM DEVOTED TO AMERICAN ART OF THE 20TH AND 21ST CENTURIES. if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 51 Number of independent voting members of the governing body (Part VI, line 1b) 4 50 Activities & Total number of individuals employed in calendar year 2021 (Part V, line 2a) 482 5 Total number of volunteers (estimate if necessary) 125 6 16,685. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, Part I, line 11 59,329, **Prior Year Current Year** 48,648,000. 66,182,000. Contributions and grants (Part VIII, line 1h) 8 2,875,000. 9 Program service revenue (Part VIII, line 2g) 8,041,000, 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11,788,000. 31 767 000. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 4,396,000. 4,065,900. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 67,707,000, 110,055,900. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 316,000. 14 Benefits paid to or for members (Part IX, column (A), line 4) n 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 33,781,000. 35,389,000. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 81,584,000. 41,772,900, 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 115,365,000. 77,477,900. -47,658,000, 32,578,000. 10 **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 1,002,954,000. 925,433,000. Total liabilities (Part X, line 26) 135,878,000, 128,993,000. 22 Net assets or fund balances. Subtract line 21 from line 20 867,076,000. 796,440,000. 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 all information of which preparer has any knowledge. Desurge . Signature of officer Sign I.D. ARUEDE, CFO/CO-CHIEF OPERATING OFFICER Here Type or print name and title Date Check PTIN Print/Type preparer's name Preparer's signature SCOTT THOMPSETT Sith Shorpride Paid 5/11/2023 P00741490 self-employed Firm's name GRANT THORNTON LLP Preparer 36-6055558 Firm's EIN Firm's address > 757 THIRD AVENUE, 3RD FLOOR Use Only NEW YORK, NY 10017-2013 Phone no. (212) 599-0100

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

X Yes

13-1789318

Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE WHITNEY SEEKS TO BE THE DEFINING MUSEUM OF 20TH AND 21ST CENTURY
	AMERICAN ART. THE MUSEUM COLLECTS, EXHIBITS, PRESERVES, RESEARCHES AND
	INTERPRETS ART OF THE U.S. IN THE BROADEST GLOBAL, HISTORICAL AND
	INTERDISCIPLINARY CONTEXTS. (SEE SCHEDULE O)
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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 X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations 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 \$ 34,219,000. including grants of \$ 0.) (Revenue \$ 7,930,000.
	COLLECTION AND EXHIBITIONS OF AMERICAN ART
	IN FY22, THE WHITNEY MUSEUM OF AMERICAN ART PRESENTED 7 EXHIBITIONS.
	THESE INCLUDED: THE WHITNEY'S COLLECTION: SELECTIONS FROM 1900 TO 1965
	(JUNE 28, 2019 - PRESENT); JASPER JOHNS: MIND/MIRROR (SEPTEMBER 29,
	2021 - FEBRUARY 13, 2022); LABYRINTH OF FORMS: WOMEN AND ABSTRACTION,
	1930 - 1950 (OCTOBER 9, 2021 - MARCH 13, 2022); MY BARBARIAN (OCTOBER
	29, 2021 - FEBRUARY 27, 2022); JENNIFER PACKER: THE EYE IS NOT
	SATISFIED WITH SEEING (OCTOBER 30, 2021 - APRIL 17, 2022); WHITNEY
	BIENNIAL 2022: QUIET AS IT'S KEPT (APRIL 6, 2022 - SEPTEMBER 5, 2022);
	AND AT THE DAWN OF A NEW AGE: EARLY TWENTIETH-CENTURY AMERICAN
	MODERNISM (MAY 7, 2022 - FEBRUARY 26, 2023).(SEE SCHEDULE O)
4b	(Code:) (Expenses \$ 8,266,000. including grants of \$ 0.) (Revenue \$ 111,000.
	CURATORIAL AND RELATED SUPPORT
	IN FY22, THE WHITNEY MUSEUM OF AMERICAN ART CONTINUED ITS ONGOING STUDY
	INTO THE MORE THAN 26,000 OBJECTS IN THE COLLECTION BY OVER 3,700
	ARTISTS. THE WHITNEY CONTINUED ITS WORK ON A MULTI-YEAR,
	CROSS-DEPARTMENTAL, AND CROSS-INSTITUTIONAL RESEARCH PROJECT TO
	UNDERSTAND THE ORIGIN, SCOPE, EVOLUTION, USE, AND IMPACT OF THE
	MUSEUM'S COLLECTION, THE PROJECT, WHICH WILL CULMINATE IN THE WHITNEY'S
	FIRST EVER COLLECTION STRATEGIC PLAN IN SPRING 2023, WILL OFFER
	RECOMMENDATIONS, GOALS, AND OBJECTIVES FOR THE FUTURE OF THE WHITNEY'S
	COLLECTION THAT IS INFORMED BY THE INSTITUTION'S HISTORY AND ENRICHED
	BY ITS DESIRE TO MAKE ITS HOLDINGS USEFUL, DYNAMIC, (SEE SCHEDULE O)
4c	(Code:) (Expenses \$4 ,777 ,000. including grants of \$ 316 ,000.) (Revenue \$ 15 ,700.
-10	EDUCATION PROGRAMS
	DURING FY22. THE WHITNEY'S EDUCATION DEPARTMENT COLLABORATED WITH
	COLLEAGUES ACROSS THE MUSEUM TO DEVELOP AND STRENGTHEN THE WHITNEY'S
	INFRASTRUCTURE FOR HYBRID PROGRAMMING AS THE COVID-19 PANDEMIC
	CONTINUED. ALL TEAMS DEVELOPED PROGRAMS TO ENGAGE THE WHITNEY'S
	WORLD-CLASS COLLECTION OF AMERICAN ART AND REACH THE DIVERSE ONLINE
	AUDIENCE THAT TYPICALLY VISITS THE MUSEUM. DURING FY22 THE MUSEUM SAW A
	SIGNIFICANT GROWTH OF IN PERSON VISITORS, AND MAINTAINED A VIRTUAL
	INTERNATIONAL AUDIENCE AND ONLINE PROGRAMMING ABOUT THE WHITNEY
	COLLECTION AND EXHIBITIONS DESIGNED BY MUSEUM EDUCATORS.
	(SEE SCHEDULE O)
4d	
	(Expenses \$ 1,983,000. including grants of \$ 0.) (Revenue \$ 155,595.)
<u>4e</u>	Total program service expenses ► 49,245,000.

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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)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		,,	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			3,7
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	٠. ا		
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-		_v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40	v	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	1		x
00-	complete Schedule G, Part III	19		X
20a	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	20a		 ^
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
	domestic government out rait ix, column (-y, ille r: II res, complete schedule I, Parts I and II		I	

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Form 990 (2021) WHITNEY MUSEUM OF AMERICAN
Part IV Checklist of Required Schedules (continued)

	· (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		163	NO
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	x	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	· • •	23	x	
24 2	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
2 70	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	· · · · · · · · · · · · · · · · · · ·	24a	x	
h	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
·		240		x
٦	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		x
		<u> 24u</u>		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		x
L-	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	∠ɔa		-
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	051-		x
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			x
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			۱
	"Yes," complete Schedule L, Part IV	28c	<u> </u>	Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 321			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
		_	aan	(0004)

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No						
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return 2a 482									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х							
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.									
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х							
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х							
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a									
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х						
b	If "Yes," enter the name of the foreign country	14								
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х						
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х						
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit									
ou	any contributions that were not tax deductible as charitable contributions?	6a		х						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ou								
-	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).	0.0								
' a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	х							
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х							
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.0								
Ū	to file Form 8282?	7c		х						
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70								
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х						
g										
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h								
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
	sponsoring organization have excess business holdings at any time during the year?	8								
9	Sponsoring organizations maintaining donor advised funds.									
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities									
11	Section 501(c)(12) organizations. Enter:									
а	Gross income from members or shareholders									
b	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?	12 a								
b	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.									
а	Is the organization licensed to issue qualified health plans in more than one state?	13a								
	Note: See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans									
С	Enter the amount of reserves on hand									
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х						
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or									
	excess parachute payment(s) during the year?	15		Х						
	If "Yes," see the instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х						
	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any									
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17								
	If "Yes." complete Form 6069.									

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

	Check if Schedule O contains a response or note to any line in this Part VI			Х							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 51										
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.										
b	Enter the number of voting members included on line 1a, above, who are independent 1b 50										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other										
	officer, director, trustee, or key employee?	2	х								
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision										
	of officers, directors, trustees, or key employees to a management company or other person?	3		х							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х							
5											
6	Did the organization have members or stockholders?	6		Х							
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?	7a		х							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
	persons other than the governing body?	7b		х							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
а	The governing body?	8a	х								
b	Each committee with authority to act on behalf of the governing body?	8b	Х								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the										
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
			Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х							
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,										
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х								
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	on Schedule O how this was done	12c	Х								
13	Did the organization have a written whistleblower policy?	13	Х								
14	Did the organization have a written document retention and destruction policy?	14	Х								
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official	15a	Х								
b	Other officers or key employees of the organization	15b	Х								
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a										
	taxable entity during the year?	16a		Х							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's										
	exempt status with respect to such arrangements?	16b									
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ▶SEE SCHEDULE 0										
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availal	ole							
	for public inspection. Indicate how you made these available. Check all that apply.										
	X Own website Another's website X Upon request Other (explain on Schedule O)										
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	cial								
	statements available to the public during the tax year.										
20	State the name, address, and telephone number of the person who possesses the organization's books and records										
	I.D. ARUEDE, CFO/CO-CHIEF OPERATING OFFICER - 212-671-1820										
	99 GANSEVOORT STREET, NEW YORK, NY 10014										

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

Check this box if neither the organization no		orga I	niza			nper	sate			
(A)	(B)				C) ition	,		(D)	(E)	(F)
Name and title	Average		not c	heck	more	than o		Reportable .	Reportable	Estimated
	hours per week		, unle cer ar					compensation from	compensation from related	amount of other
	(list any	to						the	organizations	compensation
	hours for	director				D.		organization	(W-2/1099-MISC/	from the
	related	tee or	ıstee			ensate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	ndividual trustee or	nstitutional trustee		oyee	Highest compensated employee		1099-NEC)		and related
	below	ividua	titutio	Officer	Key employee	hest (Former			organizations
	line)	프	ııı	JJ 0	Ke)	e Hig	For			
(1) ADAM D. WEINBERG	35.00									
ALICE PRATT BROWN DIRECTOR	0.00	Х		Х	_		_	933,075.	0.	116,602.
(2) SCOTT ROTHKOPF - SR. DEP. DIR./	35.00									
NANCY&STEVEN CROWN FAM CHIEF CURATOR	0.00				Х			415,323.	0.	28,748.
(3) AMY ROTH	35.00									
CO-CHIEF OPERATING OFFICER	0.00			Х				372,743.	0.	44,064.
(4) IDEHEN ARUEDE	35.00									
CFO/CO-CHIEF OPERATING OFFICER	0.00			Х				387,433.	0.	29,295
(5) PAMELA BESNARD	35.00									
CHIEF ADVANCEMENT OFFICER	0.00			Х				363,544.	0.	44,144.
(6) CAROL C MANCUSI-UNGARO - MELVA	35.00									
BUCKSBAUM ASSO. DIR. CONSERV. & RSCH	0.00					Х		254,815.	0.	24,915
(7) STEPHANIE ADAMS	35.00									
DIR., INDIVIDUAL & PLANNED GIVING	0.00					Х		215,206.	0.	39,584.
(8) NICHOLAS S. HOLMES	35.00									
GENERAL COUNSEL/ASSISTANT SECRETARY	0.00			Х				205,783.	0.	38,271
(9) CHRISTY L PUTNAM - ASSO. DIR.	35.00									
EXHIBITIONS & COLLECTIONS MANAGEMENT	0.00				Х			214,227.	0.	23,937,
(10) CHRISTINE MELLAMPE	35.00									
CHIEF HUMAN RESOURCES OFFICER	0.00					Х		214,445.	0.	20,492
(11) EUNICE LEE	35.00									
DIR., STRG. PARTNERSHIPS & EVENTS	0.00					Х		203,525.	0.	22,769
(12) LINDSAY POLLOCK (THRU 04/2022)	35.00									
CHIEF COMMUNICATIONS & CONTENT OFF.	0.00					Х		204,612.	0.	13,734
(13) ADRIAN HARDWICKE (THRU 04/2021)	35.00									
CHIEF VISITOR EXPERIENCE OFFICER	0.00	L	L	L	L	L	х	160,034.	0.	11,690
(14) FERN KAYE TESSLER	1.00									
BOARD PRESIDENT	0.00	х	L	х	L	L	L	0.	0.	0 .
(15) ROBERT J. HURST	1.00									
CHAIRMAN OF EXECUTIVE COMMITTEE	0.00	х	L	х	L	L	L	0.	0.	0 .
(16) RICHARD M. DEMARTINI	1.00									
CHAIRMAN	0.00	х	\mathbb{L}_{-}	х	<u> </u>	\mathbb{L}_{-}	\mathbb{L}_{-}	0.	0.	0 .
(17) NANCY CARRINGTON CROWN	1.00								_	
VICE CHAIRMAN/TRUSTEE	0.00	х		х				0.	0.	0.
132007 12-09-21	•									Form 990 (2021

Form 990 (2021) WHITNEY MUSE	EUM OF AMERI	CAN	AR'	Т					13-178931	8 Page 8
Part VII Section A. Officers, Directors, Tru	stees, Key Emr	loy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)	
(A)	(B)		(C)					(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one				nne	Reportab l e	Reportable	Estimated
	hours per	box	, unles	nless person is both an and a director/trustee)			n an	compensation	compensation	amount of
	week (list any	_	Cer an	uau	i ecic	i/ii us	100)	from	from related	other
	hours for	irecto						the organization	organizations (W-2/1099-M I SC/	compensation from the
	related	e or d	tee			sated		(W-2/1099-M I SC/	1099-NEC)	organization
	organizations	Individual trustee or director	Institutional trustee		yee	mpen		1099-NEC)	1000 NEO)	and related
	below	idual	ution	₩.	oldm	est co oyee	ia	,		organizations
	line)	Indiv	Instit	Officer	Key employee	Highest compensated employee	Form			
(18) PAMELLA G. DEVOS	1.00									
VICE CHAIRMAN/TRUSTEE	0.00	х		х				0.	0.	0.
(19) BETH RUDIN DEWOODY	1.00									
VICE CHAIRMAN/TRUSTEE	0.00	Х		Х				0.	0.	0.
(20) MIYOUNG LEE	1.00									
VICE CHAIRMAN	0.00	Х		Х				0.	0.	0.
(21) NANCY POSES	1.00									
VICE CHAIRMAN	0.00	Х		Х				0.	0.	0.
(22) PAUL C. SCHORR, IV	1.00									
VICE CHAIRMAN	0.00	Х		Х				0.	0.	0.
(23) ANNE-CECILIE ENGELL SPEYER	1.00									
VICE CHAIRMAN	0.00	Х		Х				0.	0.	0.
(24) GAURAV K. KAPADIA	1.00									
VICE PRESIDENT	0.00	Х		Х				0.	0.	0.
(25) JULIE OSTROVER	1.00									
VICE PRESIDENT	0.00	Х	Ш	Х				0.	0.	0.
(26) SCOTT RESNICK	1.00									
VICE PRESIDENT	0.00	Х		Х				0.	0.	0.
1b Subtotal							>	4,144,765.	0.	458,245.
c Total from continuation sheets to Part V								0.	0.	0.
d Total (add lines 1b and 1c)							<u> </u>	4,144,765.	0.	458,245.
Total number of individuals (including but	not limited to th	റടേ	lista	d ah	OVE) wh	o re	ceived more than \$100	000 of reportable	

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

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			162	NO
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3	Х	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes." complete Schedule J for such person	5		X

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
TEMPORARY WALLS, INC.		
412 STONE ROW LANE, BANGOR, PA 18013	CONSTRUCTION	544,000.
MONTICELLO ASSOCIATES, 1800 LARIMER	INVESTMENT ADVISORY	
STREET, SUITE 2100, DENVER, CO 80202	COUNSULTANT	340,000.
KAUFF MCGUIRE & MARGOLIS, LLP, 950 THIRD		
AVENUE, 14TH FL, NEW YORK, NY 10022	LEGAL SERVICES	305,709.
MASTERPIECE INTERNATIONAL		
39 BROADWAY, SUITE 1410, NEW YORK, NY 10006	ART MOVING SERVICES	305,413.
AHERN HOLTZMAN INC		
530 WILLET AVENUE, PORTCHESTER, NY 19065	CONSTRUCTION	305,408.
2 Total number of independent contractors (including but not limited to those lister \$100,000 of compensation from the organization ▶ 28	ed above) who received more than	

SEE PART VII, SECTION A CONTINUATION SHEETS

	yee	s, aı	nd F	ligh	est (Compensated Employees (continued)				
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(cl	heck	all ·	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	l b				loyee		the	organizations	compensation
	(list any hours for	direct				demp		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	9 Or (stee			sateo		(***2/1099***********************************		and related
	organizations	Individual trustee or director	Institutional trustee		yee	Highest compensated employee				organizations
	below	idua	ution	la la	Key employee	est cc	le.			J
	line)	iĝ	Insti	Officer	Key	High	Former			
(27) ROBERT ROSENKRANZ	1.00									
VICE PRESIDENT	0.00	х		х				0.	0.	0
(28) DAVID W. ZALAZNICK	1.00									
VICE PRESIDENT/TRUSTEE	0.00	х		х				0.	0.	0
(29) BENNETT GOODMAN	1.00									
TREASURER	0.00	х		х				0.	0.	0
(30) RICHARD D. SEGAL	1.00									
TREASURER/TRUSTEE	0.00	х		х				0.	0.	0
(31) JOANNE LEONHARDT CASSULLO	1.00									
SECRETARY/TRUSTEE	0.00	х		х				0.	0.	0
(32) JUDY HART ANGELO	1.00									
TRUSTEE	0.00	x						0.	0.	0
(33) PAUL ARNHOLD	1.00									
TRUSTEE	0.00	x						0.	0.	0
(34) JILL BIKOFF	1.00									
TRUSTEE	0.00	x						0.	0.	0
(35) LESLIE BLUHM	1.00				\vdash			•		
TRUSTEE	0.00	x						0.	0.	0
(36) NEIL G. BLUHM	1.00	 			\vdash			•		
TRUSTEE	0.00	x						0.	0.	0
(37) DAVID CANCEL	1.00	 			\vdash					
TRUSTEE (AS OF 05/2022)	0.00	x						0.	0.	0
(38) DAVID CAREY	1.00	-			\vdash			•		
TRUSTEE	0.00	x						0.	0.	0
(39) HENRY CORNELL	1.00							•		
TRUSTEE	0.00	x						0.	0.	0
(40) FIONA IRVING DONOVAN	1.00							•	· ·	
TRUSTEE	0.00	x						0.	0.	0
(41) FAIRFAX N. DORN	1.00							**		
TRUSTEE	0.00	x						0.	0.	0
(42) LISE EVANS	1.00							**	· ·	
TRUSTEE	0.00	x						0.	0.	0
(43) VICTOR F. GANZI	1.00							· · · · · · · · · · · · · · · · · · ·	· ·	
TRUSTEE	0.00	x						0.	0.	0
(44) HENRY LOUIS GATES, JR.	1.00	ᢡ	\vdash	\vdash	\vdash	\vdash	\vdash	· ·	· ·	
TRUSTEE	0.00	x						0.	0.	^
(45) ROBERT B. GOERGEN	1.00	┢┸	\vdash	 	\vdash	\vdash	_	· ·		0
TRUSTEE (THRU 06/30/2022)	0.00	ļ "						0.	0.	_
(46) KATJA GOLDMAN	1.00	┢┸	\vdash	 	\vdash	\vdash	_	· ·		0
/ TO \ VVIOV GOIDHVI	1.00	Į.	l						0.	0
TRUSTEE	0.00	Х						0.		

Form 990 WHITNEY MUSI	SUM OF AMERI	CAN	AK	. 1					13-17893	010
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, aı	nd F	ligh	est (Compensated Employ	ees (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average			Pos	ition	1		Reportab l e	Reportable	Estimated
	hours	(с	heck	call:	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week					oyee		the	organizations	compensation
	(list any	irecto				emp		organization	(W-2/1099-MISC)	from the
	hours for related	e or d	tee			sated		(W-2/1099-MISC)		organization and related
	organizations	Individual trustee or director	Institutional trustee		уве	Highest compensated employee				organizations
	below	dual 1	ution	<u></u>	Key employee	st co	ا ا			o. gaa.i.o. i.o
	line)	ndiv	Instit	Officer	Key e	High	Former			
(47) KENNETH C. GRIFFIN	1.00									
TRUSTEE	0.00	х						0.	0.	0
(48) SUSAN K. HESS	1.00									
TRUSTEE	0.00	x						0.	0.	0
(49) MICHAEL E. KASSAN, EX OFFICO	1.00									
TRUSTEE	0.00	x						0.	0.	0
(50) NEAL K. KATYAL	1.00									
TRUSTEE (AS OF 03/2022)	0.00	x						0.	0.	0
(51) CLAUDIA LAVIADA	1.00							_		
TRUSTEE	0.00	x						0.	0.	0
(52) RAYMOND J. LEARSY	1.00									
TRUSTEE (THRU 05/2022)	0.00	x						0.	0.	0
(53) JONATHAN O. LEE	1.00									
TRUSTEE	0.00	x						0.	0.	0
(54) RAYMOND J. MCGUIRE	1.00									
TRUSTEE	0.00	x						0.	0.	0
(55) JULIE MEHRETU	1.00									
TRUSTEE (AS OF 09/2021)	0.00	x						0.	0.	0
(56) ERIC L. MOTLEY	1.00									
TRUSTEE	0.00	x						0.	0.	0
(57) BROOKE GARBER NEIDICH	1.00									
TRUSTEE	0.00	х						0.	0.	0
(58) JOHN C. PHELAN	1.00									
TRUSTEE	0.00	х						0.	0.	0
(59) JEN RUBIO	1.00									
TRUSTEE	0.00	х						0.	0.	0
(60) MARY E. BUCKSBAUM SCANLAN	1.00									
TRUSTEE	0.00	х						0.	0.	0
(61) JONATHAN S. SOBEL	1.00									
TRUSTEE	0.00	х						0.	0.	0
(62) LAURIE M. TISCH	1.00									
TRUSTEE	0.00	х	L	L	L	L	L	0.	0.	0
(63) THOMAS E. TUFT	1.00									
TRUSTEE	0.00	x						0.	0.	0
(64) FRED WILSON	1.00									
TRUSTEE	0.00	х						0.	0.	0
		L	L	L	L	L	L			
						L	L			
Total to Part VII, Section A, line 1c								1		

Form 990 (2021) WHITNEY MUR Part VIII Statement of Revenue

		Check if Schedule O contains a response of	or note to any lin	e in this Part VIII			
			,	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
ωω	1	Federated campaigns 1a					
ant H		Membership dues 1b	7,972,000.				
رة <u>ق</u>		Fundraising events 1c	4,998,000.				
fts,		Related organizations 1d	, ,				
<u> 2</u>		e Government grants (contributions)	14,636,000.				
Sizi		All other contributions, gifts, grants, and	, , ,				
je je je		similar amounts not included above 1f	38,576,000.				
흥리		Noncash contributions included in lines 1a-1f	4,540,000.				
Contributions, Gifts, Grants and Other Similar Amounts		Total. Add lines 1a-1f	, , ,	66,182,000.			
<u> </u>		Total / local miles la 1	Business Code	, , ,			
	2	ADMISSION INCOME	900099	7,648,000.	7,648,000.		
Ş	_	TRAVELING EXHIBITIONS	900099	282,000.	282,000.		
je je		ART LOAN FEES	900099	111,000.	111,000.		
E S		,		, .	, .		
Beg							
Program Service Revenue		All other program service revenue					
		Total. Add lines 2a-2f	•	8,041,000.			
	3	Investment income (including dividends, interes					
		other similar amounts)		1,627,000.		-66,820.	1,693,820.
	4	Income from investment of tax-exempt bond pr					
	5	Royalties		305,400.			305,400.
		(i) Real	(ii) Personal				
	6	Gross rents 6a 4,369,000.					
		Less: rental expenses 6b 127,000.					
		Rental income or (loss) 6c 4,242,000.					
		Net rental income or (loss)		4,242,000.			4,242,000.
		Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 15,120,000.					
		Less: cost or other basis					
e		and sales expenses 7b 84,980,000.					
ner Revenue		Gain or (loss) 7c 30,140,000.					
- Be		Net gain or (loss)		30,140,000.			30,140,000.
ē	8	Gross income from fundraising events (not					
₹		including \$4 ,998 ,000 . of					
		contributions reported on line 1c). See					
		Part IV, line 18 8a	144,000.				
		Less: direct expenses 8b	1,038,000.				
		Net income or (loss) from fundraising events		-894,000.			-894,000.
	9	a Gross income from gaming activities. See					
		Part IV, line 19 9a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
	10	Gross sales of inventory, less returns					
		and allowances 10a	2,299,000.				
		Less: cost of goods sold 10b	2,121,400.	4== 40=	4	65.00=	
-		Net income or (loss) from sales of inventory	>	177,600.	155,595.	22,005.	
က္ည		TNOUDANCE DECOVERY	Business Code	150.000			150 000
<u> </u>	11		900099	150,000.		61 500	150,000.
lan (ep		CATERING/EVENT INCOME TUITION FEES	900099	61,500.	15,700.	61,500.	
Miscellaneous Revenue		′ - 	900099	15,700. 7,700.	15,700.		7,700.
Ξ̈́		All other revenue		234,900.			7,700.
	12	Total. Add lines 11a-11d Total revenue. See instructions		110,055,900.	8,212,295.	16,685.	35,644,920.
	14	TOTAL TEVERING. OGG HIGH GULLOTTO		, ,	1 .,,	,,	,,,-

132009 12-09-21

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX **(D)** Fundraising Do not include amounts reported on lines 6b. Total expenses Management and general expenses Program service 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 316,000, 316,000 individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 3,263,000 trustees, and key employees 668,000. 1,185,000 1,410,000 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 24,106,000 7,944,000. 976,000. Other salaries and wages 15,186,000. 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 1,860,000 1,110,000 643,000 107,000. 4,419,000 2,197,000 2,012,000 210,000. Other employee benefits 98,000. 1,741,000 1,124,000 519,000. 10 Payroll taxes Fees for services (nonemployees): Management 955,000 955,000. b Legal 208,000 208,000. Accounting 78,000 78,000 Lobbying Professional fundraising services. See Part IV, line 17 1,015,000, 1,015,000 Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, 2,505,000 1,049,000 1,438,000 18,000. column (A), amount, list line 11g expenses on Sch O.) 2,268,000 2,058,000 209,000 1,000. Advertising and promotion 12 1,673,000 1,630,000 37,000. 6,000. Office expenses 13 Information technology 14 15 Royalties 5,821,000 3,713,000 2,108,000. Occupancy 16 749,000 388,000 272,000 89,000. 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 1,230,000 963,000 168,000 99 000. 20 Payments to affiliates 21 10,266,000 8,038,000 1,404,000 824,000. Depreciation, depletion, and amortization 22 2,277,000 891,000 1,386,000 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) ART ACQUISTIONS 3,317,000 3,317,000 BUILDING SUPPLIES & REP 107,000 2,167,000 2,060,000 0. EXHIBITION EXPENSES 1,704,000 1,702,000 2,000. ART PACKING/SHIPPING 1,402,000 1,401,000 1,000. d 4,137,900 2,792,000 1,180,900 165,000. е All other expenses 77,477,900, 49,245,000 24,970,900, 3,262,000. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2021) Part X Balance Sheet

Pai	rt X	Chapte if Sahadula O contains a vega area av		line in this Dest V			Х
		Check if Schedule O contains a response or	note to any	line in this Part X	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			17,235,000.	1	30,581,000.
	2	Savings and temporary cash investments Pledges and grants receivable, net			12,694,000.	2	15,640,000.
	3				22,046,000.	3	30,003,000.
	4	Accounts receivable, net			1,217,000.	4	1,420,000.
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of t				5	
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons descri		· ·		6	
G	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			4,644,000.	8	4,544,000.
As	9	B			2,778,000.	9	4,077,000.
	_	Land, buildings, and equipment: cost or other					
			10a	447,561,000.			
	b		10b	91,621,000.	364,464,000.	10c	355,940,000.
	11	Investments - publicly traded securities			89,062,000.	11	104,755,000.
	12	Investments - other securities. See Part IV, lir			468,643,000.	12	361,538,000.
	13	Investments - program-related. See Part IV, li	, ,	13	, ,		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11	20,171,000.	15	16,935,000.		
	16	Total assets. Add lines 1 through 15 (must e			1,002,954,000.	16	925,433,000.
	17	Accounts payable and accrued expenses	8,349,000.	17	7,453,000.		
	18	Grants payable				18	
	19	Deferred revenue			1,451,000.	19	1,969,000.
	20	Tax-exempt bond liabilities			98,923,000.	20	96,490,000.
	21	Escrow or custodial account liability. Comple				21	
"	22	Loans and other payables to any current or for				_ :	
Liabilities		trustee, key employee, creator or founder, su					
ipi		controlled entity or family member of any of t				22	
Lia	23	Secured mortgages and notes payable to un				23	
	24	Unsecured notes and loans payable to unrela		· · · · · · · · · · · · · · · · · · ·		24	
	25	Other liabilities (including federal income tax,	-				
		parties, and other liabilities not included on li					
		of Schedule D			27,155,000.	25	23,081,000.
	26				135,878,000.	26	128,993,000.
		Organizations that follow FASB ASC 958, or					
es		and complete lines 27, 28, 32, and 33.					
auc	27	Net assets without donor restrictions			415,927,000.	27	398,484,000.
Bal	28	Net assets with donor restrictions		Γ	451,149,000.	28	397,956,000.
pu		Organizations that do not follow FASB ASC					
Net Assets or Fund Balances		and complete lines 29 through 33.	,				
ō	29	Capital stock or trust principal, or current fun	ids			29	
sets	30	Paid-in or capital surplus, or land, building, or				30	
Ass	31	Retained earnings, endowment, accumulated				31	
نب	32	Total net assets or fund balances			867,076,000.	32	796,440,000.
<u> </u>							· · · · · · · · · · · · · · · · · · ·

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	110	,055	900.
2	Total expenses (must equal Part IX, column (A), line 25)	2		477,	
3	Revenue less expenses. Subtract line 2 from line 1	3	32,	578,	000.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	867,	076,	000.
5	Net unrealized gains (losses) on investments	5	-104	756,	000.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	1,	542,	000.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	796,	440,	000.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3 a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2021)

132012 12-09-21

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

13-1789318

WHITNEY MUSEUM OF AMERICAN ART

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

Га		neason for Public (onanty Status.	(All organizations must c	omplete tr	nis part.) S	ee instructions.	
The	organ	ization is not a private found	ation because it is: (l	For lines 1 through 12, c	heck only	one box.)		
1		A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1)(A)(i).	
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	n 990).)			
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).	
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state:						
5		An organization operated for section 170(b)(1)(A)(iv). (C		llege or university owned	l or operat	ed by a go	overnmental unit describe	ed in
				aantal unit daaaribad in		70/15//4// 8 \	()	
6	Х	A federal, state, or local gov	-				• •	aublia dagaribad in
7		An organization that norma		ntial part of its support if	om a gove	ernmentai	unit or from the general	oublic described in
_		section 170(b)(1)(A)(vi). (C						
8	\vdash	A community trust describe			•			ш
9		An agricultural research org	-			-	-	-
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of the college	e or
		university:						
10		An organization that norma		• • •			•	•
		activities related to its exen	•	•				
		income and unrelated busir		(less section 511 tax) fro	m busines	sses acqui	red by the organization a	after June 30, 1975.
		See section 509(a)(2). (Co	mplete Part III.)					
11	Ш	An organization organized a	•		•			
12		An organization organized a		,	•		,	• •
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section 509(a)(3).	Check the box on
		lines 12a through 12d that	describes the type o	f supporting organizatior	and com	plete lines	12e, 12f, and 12g.	
а			anization operated, s	upervised, or controlled	by its supp	oorted org	anization(s), typically by	giving
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	tors or trustees of the su	upporting
		organization. You must o	complete Part IV, Se	ections A and B.				
b		Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	ed organization(s), by hav	ving
		control or management o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntro l or manage the supp	oorted
		organization(s). You mus	t complete Part IV,	Sections A and C.				
С		Type III functionally inte	grated. A supportin	g organization operated	in connect	tion with, a	and functionally integrate	ed with,
		its supported organization	n(s) (see instructions). You must complete I	Part IV, Se	ctions A,	D, and E.	
d		Type III non-functionally	/ integrated. A supp	orting organization oper	ated in co	nnection v	vith its supported organiz	zation(s)
		that is not functionally int	egrated. The organiz	zation generally must sat	isfy a distr	ibution red	quirement and an attentiv	veness
		requirement (see instruct	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.	
е		Check this box if the orga						
		functionally integrated, or					31 7 31	
f	Ente	er the number of supported o	• •	, 5 11	3 3			
a	Prov	vide the following information	about the supporte	ed organization(s).				•
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	anization listed	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
				abovo (oco motraotiono)				
_								
Tota	 al							
	-							

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below. please complete Part III.)

Sec	ction A. Public Support	, noted below, pleas	so complete r art ii	,			
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and	(4) = 0	(2) 2010	(0) 20:0	(4) = 0= 0	(0) = 0 = 1	(1) 1014.
•	membership fees received. (Do not						
	include any "unusual grants.")	58,671,000 .	56,108,000.	82,725,000.	48,648,000.	66,182,000.	312,334,000.
2	Tax revenues levied for the organ-	, ,	· · ·	, ,	. ,	, ,	, ,
_	ization'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	Tatal Add lines 1 Herevelle O	58,671,000.	56,108,000.	82,725,000.	48,648,000.	66,182,000.	312,334,000.
	The portion of total contributions	,,	,,	,,		,,	,,
5	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)						39,395,459.
_							272,938,541.
	Public support. Subtract line 5 from line 4.						272,930,341.
_		() 0047	#1,0040	() 0040	4 B 0000	() 0004	(0 T. I. I
	ndar year (or fiscal year beginning in)	(a) 2017 58,671,000.	(b) 2018 56,108,000.	(c) 2019 82,725,000.	(d) 2020 48,648,000.	(e) 2021 66,182,000.	(f) Total 312,334,000.
	Amounts from line 4	38,671,000.	30,100,000.	82,723,000.	40,040,000.	00,102,000.	312,334,000.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	F 001 000	0 070 000	0 402 000	6 402 000	6 201 400	26 007 400
	and income from similar sources	5,821,000.	9,979,000.	8,403,000.	6,483,000.	6,301,400.	36,987,400.
9							
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	1,360,000.	1,477,000.	707,000.	720,000.	301,700.	4,565,700.
11	Total support. Add lines 7 through 10						353,887,100.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	45,950,295.
13	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
_	organization, check this box and stop						>
	ction C. Computation of Publi						
	Public support percentage for 2021 (li					14	77.13 %
	Public support percentage from 2020					15	75.89 %
16a	33 1/3% support test - 2021. If the o	organization did no	t check the box on	line 13, and line 1	4 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly suppo	orted organization				> X
b	33 1/3% support test - 2020. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a pub l icly s	upported organiza	tion			▶□
17a	10% -facts-and-circumstances test	- 2021. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	nd l ine 14 is 10%	or more,
	and if the organization meets the facts	s-and-circumstance	es test, check this	box and stop her	e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pul	olicly supported or	ganization		
b	10% -facts-and-circumstances test	- 2020. If the orga	anization did not c	heck a box on line			
	more, and if the organization meets th	ne facts-and-circum	stances test, chec	k this box and st	op here. Explain ir	n Part VI how the	
	organization meets the facts-and-circu				•		>
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	<u>, 16b, 17a, or 1</u> 7b	, check this box ar	nd see instructions	<u> </u>
							(Form 990) 2021

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

quality under the tests listed be Section A. Public Support	iow, piease comp	nete Fart II.)				_
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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 per-						
formed, 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 bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization'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			-	1	1	
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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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 on line 10b,						
whether or not the business is regularly carried on						
12 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)14 First 5 years. If the Form 990 is for the			faculta au fifth tac		01/5/(0)iti-	
•	J		*	•	````	
check this box and stop here Section C. Computation of Public	Support Per	centage				
15 Public support percentage for 2021 (lir			column (f))		15	%
16 Public support percentage from 2020 \$					16	/ 6
Section D. Computation of Invest					1	, <u>, , , , , , , , , , , , , , , , , , </u>
17 Investment income percentage for 202			ine 13, column (f))		17	%
18 Investment income percentage from 2					18	/ 6
19a 33 1/3% support tests - 2021. If the c						
more than 33 1/3%, check this box and						
b 33 1/3% support tests - 2020. If the c	-					
line 18 is not more than 33 1/3%, chec	•					
20 Private foundation. If the organization						
Lo i livate iounuation. Il the organization	ala not oneck a	DON OIT HITE 14, 19	a, or 130, official	iio box aiiu 500 IIIS	,uotiorio	·····

132023 01-04-22

Schedule A (Form 990) 2021

Yes No

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	3.		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	10b		
lule	A (Forn	n 990)	2021

Pa	rt IV Supporting Organizations _(continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations	•		
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
-	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations		<u> </u>	
	<i>y</i> ,		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
<u> </u>	supported organizations played in this regard.	3		
<u> </u>	tion E. Type III Functionally Integrated Supporting Organizations			
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions The organization satisfied the Activities Test. Complete line 2 below.).		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
-	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а				
u	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
b	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on	Nov. 20, 1970 (<i>explain in</i> I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus		·	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	Ily integrate	ed Type III supporting orga	nization (see
	instructions).	-	· · · · ·	

Schedule A (Form 990) 2021

Par	t V Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	nizations _{(continu}	ıed)	
<u>Secti</u>	on D - Distributions				Current Year
1_	Amounts paid to supported organizations to accomplish exer		1		
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
_7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
_9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	ıs	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
<u>a</u>	From 2016				
<u> b </u>	From 2017				
c	From 2018				
<u>d</u>	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i_	Carryover from 2016 not applied (see instructions)				
i_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2021 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
e	Excess from 2021				

Schedule A (Form 990) 2021

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
GROSS INCOME FROM FUNDRAISING EVENTS
2017 AMOUNT: \$ 948,000.
2018 AMOUNT: \$ 989,000.
2019 AMOUNT: \$ 415,000.
2020 AMOUNT: \$ 720,000.
2021 AMOUNT: \$ 144,000.
INSURANCE RECOVERY
2017 AMOUNT: \$ 0.
2018 AMOUNT: \$ 0.
2019 AMOUNT: \$ 0.
2020 AMOUNT: \$ 0.
2021 AMOUNT: \$ 150,000.
MISCELLANEOUS INCOME
2017 AMOUNT: \$ 412,000.
2018 AMOUNT: \$ 488,000.
2019 AMOUNT: \$ 292,000.
2020 AMOUNT: \$ 0.
2021 AMOUNT: \$ 7,700.

SCHEDULE C (Form 990)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.
■ Go to www.irs.gov/Form990 for instructions and the latest information.

2021
Open to Public

OMB No. 1545-0047

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

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

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

 Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization **Employer identification number** WHITNEY MUSEUM OF AMERICAN ART 13-1789318 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures **>**\$ 3 Volunteer hours for political campaign activities Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No 4a Was a correction made? Yes No b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political contributions received and filing organization's promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990) 2021

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Part II-A Complete if the orga	nization is ever		$\sim 501(c)(3)$ and file		.789318 Page 2
section 501(h)).	ilization is exer	npi under section		ed i Oilli 3700 (eli	ection under
	on belongs to an affi	liated group (and list in	Part IV each affiliated	group member's nam	ne, address, E I N,
expenses, and share	•	•		5 1	, , ,
	· -	nd "limited control" pro	ovisions apply.		
Limits	on Lobbying Expe			(a) Filing organization's totals	(b) Affiliated group totals
				เบเสเร	
1a Total lobbying expenditures to influe					
b Total lobbying expenditures to influe	-				
c Total lobbying expenditures (add line					
d Other exempt purpose expenditures					
e Total exempt purpose expenditures					
f Lobbying nontaxable amount. Enter		•			
If the amount on line 1e, column (a) or (bying nontaxable am	ount is:		
Not over \$500,000		the amount on line 1e.	.		
Over \$500,000 but not over \$1,000,0	' '	00 plus 15% of the exc	·		
Over \$1,000,000 but not over \$1,500		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,00		00 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.			
g Grassroots nontaxable amount (ente	or 25% of line 1f)				
h Subtract line 1g from line 1a. If zero					
i Subtract line 1f from line 1c. If zero c					
j If there is an amount other than zero					
reporting section 4911 tax for this ye					Yes No
		eraging Period Under			
(Some organizations that	t made a section 5		have to complete all c	of the five columns b	elow.
	Lobbying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2021

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(1	b)
of th	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?		Х		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Х		
С			Х		
d	Mailings to members, legislators, or the public?		Х		
е	, I		Х		
f	J J I		Х		
g		Х			78,000.
h			Х		
i	Other activities?		Х		70 000
j	Total. Add lines 1c through 1i				78,000.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х		
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? t III-A Complete if the organization is exempt under section 501(c)(4), sectio	n 501(c)(:	<u> </u> 5) or sec	ction	
Га	501(c)(6).	11 30 1 (0)(oj, or set	Juon	
	55 1(5)(5)i			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	1.00	110
2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization make only inviouse lobbying expenditures of \$2,000 or less: Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
	t III-B Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), or se	tion	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				3, is
	answered "Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Pa	t IV Supplemental Information				
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II	·A, l ines 1 a	ınd 2 (See	
	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				
PAR	! II-B, LINE 1, LOBBYING ACTIVITIES:				
THE	WHITNEY MUSEUM DOES NOT ENGAGE IN ANY DIRECT LOBBYING ACTIVITIES				
T M C 1	THE THE ETGGAL VEAD 2022 MILE MIGHIN ENGAGED MILE GEDVICEG OF A				
ITS	ELF. IN FISCAL YEAR 2022, THE MUSEUM ENGAGED THE SERVICES OF A				
ים ח. ז	SYIST TO ASSIST IN PREPARING MATERIALS AND CONDUCTING MEETINGS TO GAIN				
	VIDI TO WOOTDI IN INDIVITUO MAIDNIADO AND COMPOCITING MEDITAGO TO GAIN				
TAT TAT					
יענט יִּ	DING FOR THE MUSEUM'S CAPITAL PROJECTS IN STATE AND LOCAL BUDGETS				
MI	OING FOR THE MUSEUM'S CAPITAL PROJECTS IN STATE AND LOCAL BUDGETS.				

Schedule C (Form 990) 2021

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

►Go to www.irs.gov/Form990 for instructions and the latest information.

2021
Open to Public Inspection

Name of the organization

WHITNEY MUSEUM OF AMERICAN ART

Employer identification number

13-1789318

Pa	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds o	r Accour	nts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	· 6.		
		(a) Donor advised funds	(b) Fur	nds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advised	l funds	
	are the organization's property, subject to the organization's e	xclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?			Yes No
Pa	t II Conservation Easements. Complete if the organization	anization answered "Yes" on Form 990, Pa	ırt IV, line 7.	
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).		
	Preservation of land for public use (for example, recreati	on or education) Preservation of a	historically	important land area
	Protection of natural habitat	Preservation of a	certified his	storic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form of	a conserva	tion easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic structure	cture included in (a)	2c	
d	Number of conservation easements included in (c) acquired af	ter 7/25/06, and not on a historic structure	,	
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or terminated by the o	rganization	during the tax
	year ▶			
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it \boldsymbol{l}	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	andling of violations, and enforcing conser	vation ease	ements during the year
				
7	Amount of expenses incurred in monitoring, inspecting, handling	ing of violations, and enforcing conservatio	n easemen	ts 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 section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's financial statemen	ts that desc	cribes the
Da	organization's accounting for conservation easements.	Aut Historical Transcruss or Oth	ou Cincilo	w A t -
Pa	t III Organizations Maintaining Collections of		er Simila	r Assets.
	Complete if the organization answered "Yes" on Form 9			
1a	If the organization elected, as permitted under FASB ASC 958	•		
	of art, historical treasures, or other similar assets held for publ	, ,	nerance of	public
_	service, provide in Part XIII the text of the footnote to its finance			
b	If the organization elected, as permitted under FASB ASC 958	· ·		
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in further	rance of pul	blic service,
	provide the following amounts relating to these items:		_	
	(i) Revenue included on Form 990, Part VIII, line 1		_	\$
_				\$
2	If the organization received or held works of art, historical trea	· · ·	aın, provide	e
	the following amounts required to be reported under FASB AS	-	_	Φ.
a	Revenue included on Form 990, Part VIII, line 1			\$
-				

a Segment of the content of the c	Pai	t III Organizations Maintaining C	ollections of Art	t, Historical Tre	asures, or Oth	ner Si	milar Assets	(continue	d)
a	3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that make	e signif	icant use of its		
b Scholarly research e		collection items (check all that apply):							
c	а	X Public exhibition	d						
Part Device a description of the organization scollections and explain how they further the organization's content single assetts To be sold for raise funds rather than to be maintained as part of the organization answered. Yes' on Form 990, Part N, line 9, or Section 1 to be sold for raise funds rather than to be maintained as part of the organization answered. Yes' on Form 990, Part N, line 9, or Section 1 to 1	b	X Scholarly research	е	Other					
Part V Endowment Funds. Complete if the organization included an amount on Form 990, Part X, line 21. for escrive or custodial account liability? Yes No	С	X Preservation for future generations							
To be sold for relise funds rather than to be maintained as part of the organization's collection?	4	Provide a description of the organization's co	llections and explain	how they further th	e organization's ex	kempt	purpose in Part	XIII.	
Serrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 21. To Form 990, Part IV Service Segment Segment Part IV Service Segment	5			·	•			-	
Tesported an amount on Form 990, Part X, line 21. Tesported an angent, trustee, custodiar or other intermediary for contributions or other assets not included Yes No No Tesport No No Yes No No No Yes No No No Yes No No No No No No No N	_								No_
18 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	Pai			ete if the organizatio	n answered "Yes"	on For	m 990, Part I V, I	ine 9, or	
Type No No No No No No No N		·							
b	1a			-				7	— 1
Additions during the year 1							L	」 Yes	No
C Beginning balance C C C C C C	ь	If "Yes," explain the arrangement in Part XIII	and complete the foll	lowing table:		ſ		Amount	
d Additions during the year Ending belance 1		De attache a bellen e				ŀ		Amount	
Example Distributions during the year 1 Example									
Figure							_		
ab bit the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability Yes No bit Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Check here if the organization answered "Yes" on Form 990, Part IV, line 10. Image: Check here if the explanation has been provided on Part XIII. Check here if the organization answered "Yes" on Form 990, Part IV, line 10. Image: Check here if the explanation has been provided on Part XIII. Check here if the organization answered "Yes" on Form 990, Part IV, line 10. Image: Check here if the explanation has been provided on Part XIII. Check here if the organization answered "Yes" on Form 990, Part IV, line 10. Image: Check here if the explanation has been provided on Part XIII. Check here if the organization answered "Yes" on Form 990, Part IV, line 10. Image: Check here if the explanation has been provided on Part XIII. Check here if the organization has been provided on Part XIII. Check here if the organization shall be assumed to the organization answered "Yes" on Form 990, Part IV, line 10. Image: Check here is a store if Check here is a store if Check here if the organization shall be assumed to the organization is a store if the organization is a store if the organization shall be assumed to the organization is a store if the organization is a store if the organization is listed as required on Schedule R? Yes No a Provide the estimated percentage of the current year end balance (line 1g, column (a) held assumed to the part XIII be intended uses of the organization that are held and administered for the organization by:	_								
Description of property Endowment Funds. Complete if the organization answered "Yes" on Form 1990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Endower (d) Endow							<u> </u>	Vac	No.
Part V Endowment Funds. Complete if the organization answered "Ves" on Form 990, Part IV, line 10.						-		_ res	
1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years (d) Three									
1a Beginning of year balance 481,944,000. 371,839,000. 372,314,000. 357,673,000. 339,078,000. b Contributions 10,644,000. 9,199,000. 3,530,000. 12,031,000. 7,475,000. c Net investment earnings, gains, and losses of Grants or scholarships 6-66,710,000. 108,663,000. 11,834,000. 17,630,000. 24,942,000. e Other expenditures for facilities and programs 15,046,000. 7,757,000. 15,839,000. 15,020,000. 13,822,000. g End of year balance 410,832,000. 481,944,000. 371,839,000. 372,314,000. 357,673,000. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 410,832,000. 481,944,000. 371,839,000. 372,314,000. 357,673,000. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 410,832,000. 481,944,000. 371,839,000. 372,314,000. 357,673,000. 3 Are there endowment							Three vears back	(e) Four ve	ars back
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs 15,046,000, 7,757,000, 15,839,000, 15,020,000, 13,822,000, f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 12,3150 % b Permanent endowment ▶ 20,8769 % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organization's endowment tunds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's endowment tunds. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization answered "Yes" on Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization answered "Yes" on Form 990, Part X, line 10. Describe in Part XIII t	12	Beginning of year halance	. ,			+`-			
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs 15,046,000, 7,757,000, 15,839,000, 15,020,000, 13,822,000, f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 12,3150 % b Permanent endowment ▶ 66.8081 % c Term endowment ▶ 66.8081 % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment thurds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations by: (iii) Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (cother) depreciation (b) Buildings 12,000, 15,839,000, 15,020,000, 13,822,	_			· · · · · · · · · · · · · · · · · · ·		-			
d Grants or scholarships e Other expenditures for facilities and programs 15,046,000, 7,757,000, 15,839,000, 15,020,000, 13,822,000. 410,832,000, 481,944,000, 371,839,000, 372,314,000, 357,673,000. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 12,3150 % b Perma-ent endowment ▶ 66,8081 % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations 5 of line 3a(iii), are the related organizations listed as required on Schedule R? 4 Describe in Part XII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describing of property (a) Cost or other basis (other) basis (other) depreciation 1a Land Describing of property (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land Buildings 387,202,000, 85,463,000, 301,739,000, 0. 4 Equipment 2 2,002,000, 2,002,000, 0. 4 Equipment 2 2,002,000, 4,156,000, 19,060,000, 0. 4 Equipment 4 Describing of property Are the complete if the organization answered "Yes" on Form 990, Part X, column (B), line 10c. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c. 1 5 Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c. 1 5 Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c. 1 5 Total.			, ,	· · ·	· · ·	_			
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f Administrative expenses g End of year balance 410,832,000, 481,944,000, 371,839,000, 372,314,000, 357,673,000. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 12.3150 % b Permanent endowment ▶ 20.8769 % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations 5b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Description of property (a) Cost or other basis (investment) basis (other) (c) Accumulated depreciation (d) Book value depreciation 1a Land Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation 5 Buildings 387, 202,000, 85,463,000, 31,739,000, 0 6 Equipment 29,002,000, 2,002,000, 19,060,000, 0 479,000, 19,060,000, 0 479,000, 19,060,000, 0 555,940,000, 10,000,000, 0 555,940,000, 10,000,000, 0 555,940,000, 10,000,000,000,000,000,000,000,00	•		15,046,000.	7,757,000.	15,839,000	.	15,020,000.	13,82	2,000.
Find of year balance 410,832,000 481,944,000 371,839,000 372,314,000 357,673,000	f	. •						-	
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 12.3150 % b Permanent endowment ▶ 65.8081			410,832,000.	481,944,000.	371,839,000). 3	372,314,000.	357,67	3,000.
b Permanent endowment ▶ 66,8081	2	-	ent year end balance	e (line 1g, column (a)) held as:				
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The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations	b	Permanent endowment 66.8081	<u>%</u>	_					
Acre the re endowment funds not in the possession of the organization that are held and administered for the organization yes No	С	Term endowment ▶20.8769	 %						
by:		The percentages on lines 2a, 2b, and 2c show	uld equal 100%.						
(i) Unrelated organizations 3a(i) X (ii) Related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (c) Accumulated depreciation (d) Book value Description of property (a) Cost or other basis (investment) basis (other) (c) Accumulated depreciation 34,662,000. 34,662,000. 34,662,000. 34,662,000. 34,662,000. 34,662,000. 0.	За	Are there endowment funds not in the posses	ssion of the organiza	tion that are held an	d administered for	the or	ganization		
(ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 34,662,000. 34,662,000. 34,662,000. 58,463,000. 301,739,000. c Leasehold improvements 479,000. 479,000. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)		by:						Y	s No
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 34,662,000. 5 Buildings 387,202,000. 6 Leasehold improvements 2,002,000. 1 Equipment 23,216,000. 4,156,000. 1 9,060,000. 1 0 Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ■ 355,940,000.		(i) Unrelated organizations						3a(i)	Х
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (other) buildings 1a Land 34,662,000. b Buildings 387,202,000. c Leasehold improvements d Equipment Other Other Other Other Other Other Description of property (a) Cost or other basis (other) Column (d) must equal Form 990, Part X, column (B), line 10c.) 1a Land 34,662,000. 34,662,000. 34,662,000. 34,662,000. 34,662,000. 34,662,000. 34,662,000. 34,662,000. 34,662,000. 34,662,000. 34,662,000. 34,662,000. 34,662,000. 34,662,000. 34,662,000. 34,662,000. 34,900. 355,940,000.		(ii) Related organizations						3a(ii)	Х
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 34,662,000. 34,662,000. 34,662,000. b Buildings 387,202,000. 85,463,000. 301,739,000. c Leasehold improvements 2,002,000. 2,002,000. 0. d Equipment 23,216,000. 4,156,000. 19,060,000. e Other 479,000. 479,000. Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. column (B). line 10c.) > 355,940,000.	b		•					3b	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 34,662,000. 34,662,000. b Buildings 387,202,000. 85,463,000. 301,739,000. c Leasehold improvements 2,002,000. 2,002,000. 0. d Equipment 23,216,000. 4,156,000. 19,060,000. e Other 479,000. 479,000. 479,000. Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, column (B), line 10c.) 355,940,000.				wment funds.					
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 34,662,000. 34,662,000. b Buildings 387,202,000. 85,463,000. 301,739,000. c Leasehold improvements 2,002,000. 2,002,000. 0. d Equipment 23,216,000. 4,156,000. 19,060,000. e Other 479,000. 479,000. 479,000. Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. column (B), line 10c.) > 355,940,000.	Pai			Don't NV Broade O	F 000 Dt	V P	10		
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b Buildings 387,202,000. 85,463,000. 301,739,000. c Leasehold improvements 2,002,000. 2,002,000. 0. d Equipment 23,216,000. 4,156,000. 19,060,000. e Other 479,000. 479,000. Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, column (B), line 10c.) 355,940,000.		Land	<u> </u>		` /	ueprec	JaliOII	21 6	2 000
c Leasehold improvements 2,002,000. 2,002,000. 0. d Equipment 23,216,000. 4,156,000. 19,060,000. e Other 479,000. 479,000. 479,000. Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, column (B), line 10c.) 355,940,000.						9.5	463 000	•	
d Equipment 23,216,000. 4,156,000. 19,060,000. e Other 479,000. 479,000. 479,000. Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. column (B), line 10c.) ▶ 355,940,000.					' '			JU1, / S	
e Other 479,000. 479,000. Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. column (B), line 10c.) ▶ 355,940,000.	-				' ' 			19 06	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. column (B), line 10c.)						,		•	
Column (d) must equal to the column (b), min to to the column (•	V column (B) line 11	<u> </u>				
			<u>quai i Uilli 330. Fall /</u>	<u>л. сошни (в), ште Т(</u>	<i></i>			•	

PRIVATE EQUITY

Part VII	Investments -	Other Securities.
I alt viii	IIIVCSHICHG -	Other Occurres.

Complete if the organization answered Tes on Form 990, Fart IV, line TTb. See Form 990, Fart X, line 12.								
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value						
(1) Financial derivatives								
(2) Closely held equity interests								
(3) Other								
(A) EQUITY INVESTMENT FUNDS	120,796,000.	END-OF-YEAR MARKET VALUE						
(B) ALTT. INV.: MULTI-STRATEGY & OTHER	109,850,000.	END-OF-YEAR MARKET VALUE						
(C) EQUITY LONG/SHORT	64 409 000.	END-OF-YEAR MARKET VALUE						

END-OF-YEAR MARKET VALUE

54,007,000.

(D) 6,823,000. INVESTMENT REDEMPTION RECEIVABLES END-OF-YEAR MARKET VALUE REAL ASSETS 5,653,000. END-OF-YEAR MARKET VALUE (F) (G) (H)

361,538,000. Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX Other Assets.		

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
otal. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	>

Part X Other Liabilities.

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

1. (a) [Description of liability	(b) Book value
(1) Federal income taxes		
(2) OPERATING LEASE L	IABILITIES	17,694,000.
(3) ACCRUED PENSION O	BLIGATION	3,555,000.
(4) BOND INTEREST PAY	ABLE	1,832,000.
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal F	Form 990. Part X. col. (B) line 25.)	23,081,000.

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

Schedule D (Form 990) 2021

Sche	dule D (Form 990) 2021 WHITNEY MUSEUM OF AMERICAN ART			13-17893	18 Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Stater	ments With	Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	12a.			
1	Total revenue, gains, and other support per audited financial statements			1	5,717,000.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments		-104,756,000.		
b	Donated services and use of facilities		241,000.		
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d	1,542,000.		100 000 000
е	Add lines 2a through 2d				102,973,000.
3	Subtract line 2e from line 1			3	108,690,000.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	الما	1 004 000		
a	Investment expenses not included on Form 990, Part VIII, line 7b		1,004,000.		
b	Other (Describe in Part XIII.) Add lines 4a and 4b				1,365,900.
	Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			4c 5	110,055,900.
Pa	t XII Reconciliation of Expenses per Audited Financial State	ments With	Expenses per F	_	110,000,000.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1				
1	T. I			1	76,353,000.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				, , ,
- а	Donated services and use of facilities	2a	241,000.		
b	Prior year adjustments		•		
c	Other losses				
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	241,000.
3	Subtract line 2e from line 1			3	76,112,000.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,004,000.		
b	Other (Describe in Part XIII.)	4b	361,900.		
С	Add lines 4a and 4b			4c	1,365,900.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	77,477,900.
Pa	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a			; Part X, line	2; Part XI,
PART	III, LINE 1A:				
	ECTIONS OF ART, HISTORICAL TREASURES OR OTHER SIMILAR ASSET	'S:			
THE	MUSEUM HAS AN EXTENSIVE COLLECTION OF ART, INCLUDING PAINTI	NGS,			
SCUI	PTURE, PHOTOGRAPHS, DRAWINGS, PRINTS, AND FILMS AND VIDEOS.	THE			
	ECTION IS MAINTAINED UNDER THE CARE OF THE REGISTRATION DEP				
	F AND IS HELD FOR RESEARCH EDUCATION AND PUBLIC EXHIBITION				
	,				
FURT	HERANCE OF PUBLIC SERVICE, RATHER THAN FOR FINANCIAL GAIN.	PROCEEDS			
FRON	THE SALE OF COLLECTION ITEMS ARE USED TO ACQUIRE OTHER ITE	MS FOR THE			
COLI	ECTION. THE MUSEUM DOES NOT INCLUDE EITHER THE COST OR THE	VALUE OF			
ITS	COLLECTION IN THE STATEMENT OF FINANCIAL POSITION, NOR DOES	IT			
RECO	GNIZE GIFTS OF COLLECTION ITEMS AS REVENUES IN THE STATEMEN	T OF			
ACTI	VITIES. SINCE ITEMS ACQUIRED FOR THE COLLECTION BY PURCHASE	ARE NOT			

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2021
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Employer identification number

tairio (or the organization					Employer identi	noadon number
VHITN	EY MUSEUM OF AMER:	ICAN ART				13-1789318	
Part	I General Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organ	ization answered "	Yes" on
	Form 990, Part N	/, line 14b.					
	=	-		ds to substantiate the amount of its gra			
tl	he grantees' eligibility fo	or the grants or a	ssistance, and t	he selection criteria used to award the	grants or assis	tance?	」Yes No
2 F	or grantmakers Desc	ribe in Part V the	organization's r	procedures for monitoring the use of its	arante and at	aor accietance out	side the
	Jnited States.	inde in Fait v the	organization s p	brocedures for mornitoring the use of its	grants and oth	ier assistance out	side trie
		ne following Part	I, line 3 table ca	ın be duplicated if additional space is n	eeded.)		
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region	(e) If activ	vity listed in (d)	(f) Total
		offices	employees, agents, and	(by type) (such as, fundraising, pro-		gram service,	expenditures for and
		in the region	independent contractors	gram services, investments, grants to recipients located in the region)		specific type (s) in the region	investments
			in the region	recipients located in the region)	Of 3ervice	(3) III tile region	in the region
י ביתות בי	AL AMERICA AND						
	ARIBBEAN	0	0	INVESTMENTS			176,624,620.
							7,0,021,020:
NORTH	AMERICA	0	0	PROGRAM SERVICES	TRAVELING E	XHIBITIONS	4,000.
							+
							
3 a S	Subtotal	0	0				176,628,620.
	otal from continuation						
s	heets to Part I	0	0				0.
	otals (add lines 3a						
а	ınd 3b)	0	0				176,628,620.

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

Schedule F (Form 990) 2021

Page 2

Schedule F (Form 990) 2021

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

(i) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2021
(n) Description of noncash assistance					Sched
(g) Amount of noncash assistance					A A
(f) Manner of cash disbursement					ecognized as a tax ivalency letter
(e) Amount of cash grant					oreign country, r ion 501(c)(3) equi
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities
(c) Region					s listed above that are re r for which the grantee o entities
(b) IRS code section and EIN (if applicable)					recipient organization: nization by the IRS, or other organizations or
1 (a) Name of organization					 2 Enter total number of recipient organizations listed a exempt 501(c)(3) organization by the IRS, or for which 3 Enter total number of other organizations or entities

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13-1789318

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Schedule F (Form 990) 2021 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement (c) Number of recipients cash grant Part III can be duplicated if additional space is needed. (b) Region (a) Type of grant or assistance

Dart IV	Fausian Famas
raitiv	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, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X Yes	☐ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2021

Schedule F (Form 990) 2021 WHITNEY MUSEUM OF AMERICAN ART	13-1789318	Page 5
Part V Supplemental Information		
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accou	nting method: amounts of	
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method)		
(estimated number of recipients), as applicable. Also complete this part to provide any additional info	mation. See instructions.	
HODW 000 GOUEDING B. DADW TV		
FORM 990, SCHEDULE F, PART IV:		
THE MUSEUM INVESTS IN DOMESTIC AND FOREIGN INVESTMENT VEHICLES THAT MAY		
OWN AN INTEREST IN A FOREIGN CORPORATION, PASSIVE FOREIGN INVESTMENT		
COMPANY, OR FOREIGN PARTNERSHIP. NEVERTHELESS, THE MUSEUM'S INVESTMENT		
ACTIVITIES MAY NOT REACH THE THRESHOLDS REQUIRED FOR FILING THE FORMS		
926, 5471, 8621 OR 8865. TO THE EXTENT SUCH A FORM WAS COMPLETED, IT		
<u> </u>		
HAS BEEN FILED WITH THE ORGANIZATION'S FORM 990-T.		
HAS BEEN FIDED WITH THE ORGANIZATION S FORM 990-1.		
<u> </u>		

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization							ntification number
	SEUM OF AMERICAN ART					13-178931	
Part I Fundraising Activities. required to complete this part	Complete if the organization answe	ered "Y	es" or	ı Form 990, Part IV, li	ne 1	7. Form 990-EZ	filers are not
Indicate whether the organization rais	sed funds through any of the followin e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with providuals or entities (fundraisers) pursu-	tion of tion of fundra (includ	non-g gover ising of ing of	overnment grants nment grants events ficers, directors, trust undraising services?		Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contribu	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
otal			<u> </u>				
3 List all states in which the organizatio or licensing.			utions	or has been notified	it is e	exempt from reg	gistration

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

Schedule G (Form 990) 2021

		(: c: (: c: :: c c) : _ :	SEUM OF AMERICAN A			-1789318 Page 2
Pa	ırt I					
		of fundraising event contributions and gro				ots greater than \$5,000.
			(a) Event #1 GALA AND STUDIO	(b) Event #2	(c) Other events NONE	(d) Total events
			PARTY			(add col. (a) through
Φ			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	5,142,000.			5,142,000.
	2	Less: Contributions	4,998,000.			4,998,000.
	3	Gross income (line 1 minus line 2)	144,000.			144,000.
	4	Cash prizes				
	5	Noncash prizes				<u> </u>
Expenses	6	Rent/facility costs	56,000.			56,000.
Direct Ey	7	Food and beverages	162,000.			162,000.
Ω	8	Entertainment	11,300.			11,300.
	9	Other direct expenses				808,700.
	10	Direct expense summary. Add lines 4 through			>	1,038,000.
	11	Net income summary. Subtract line 10 from li			>	-894,000.
Pa	ırt I	II Gaming. Complete if the organization	answered "Yes" on Form	990, Part IV, line 19), or reported more than	
_		\$15,000 on Form 990-EZ, line 6a.	T	T	1	
e			(a) Bingo	(b) Pull tabs/instar bingo/progressive bir		(d) Total gaming (add col. (a) through col. (c))
Revenue				billigo/progressive bil	nigo	coi. (a) throught coi. (c))
Вè	_	Crees revenue				
	1	Gross revenue				+
ses	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %		_ %	,
	6	Volunteer labor	L No	L No	No No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		>	
9		ter the state(s) in which the organization condu				
		he organization licensed to conduct gaming a				Yes No
b	If "	No," explain:				
	_					
		ere any of the organization's gaming licenses re Yes," explain:			tax year?	Yes No
1320	32 10	l-21-21			Sch	edule G (Form 990) 2021

Sch	edule G (Form 990) 2021 WHITNEY MUSEUM OF AMERICAN ART	13-1/89318	Page 3
11	Does the organization conduct 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 conducted in:		
а	The organization's facility	13a	%
b	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events 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 \$ \$	nt	
С	If "Yes," enter name and address of the third party:		
	Name		
	Address >		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of conduct mondried N		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
а	retain the state gaming license?	Yes	No
h	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in t		
D	organization's own exempt activities during the tax year > \$	110	
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); are	nd Part III lines 0 (9h 10h
. u	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	ia i ait iii, iiiles 5, t	55, 105,
_	13b, 13c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		

Schedule G	i (Form 990)	WHITNEY	MUSEUM OF AMERICAN ART	13-1789318	Page 4
Part IV	(Form 990) Supplemental Info	rmation _{(c}	continued)		
		1.			

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part |

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

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

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public

Inspection

13-1789318

2 []

X Yes

Employer identification number 1 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 WHITNEY MUSEUM OF AMERICAN ART General Information on Grants and Assistance criteria used to award the grants or assistance?

	, line 21, for any	(h) Purpose of grant or assistance					Schodulo I (Eorm 000) 2021
	I Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any ed if additional space is needed.	(g) Description of noncash assistance					
	nization answered "Y	(f) Method of valuation (book, EMV, appraisal, other)					
States.	omplete if the orga	(e) Amount of noncash assistance					
funds in the United	: Governments. Conal space is need	(d) Amount of cash grant				listed in the line 1 table	
pring the use of grant	ations and Domestic	(c) IRC section (if applicable)				anizations listed in the	table
cedures for monito	Domestic Organiz 5,000. Part II can I	(b) EIN				nd government org	listed in the line 1
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Con recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	1 (a) Name and address of organization or government					3 Enter total number of other organizations listed in the line 1 table

(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 noncash assistance
FELLOWSHIPS	108	316,000.	0		
Part IV Supplemental Information. Provide the information required in		e 2; Part III, column	Part I, line 2; Part III, column (b); and any other additional information.	ditional information.	
PART I, LINE 2:					
THE WHITNEY MUSEUM'S INTERN PROGRAM OFFERS TRAINING AND		DIRECT EXPERIENCE			
WORKING IN ONE OF NEW YORK CITY'S MOST EXCITING MUSEUMS.		INTERNS ARE PLACED			
IN DEPARTMENTS ACROSS THE MUSEUM WHERE THEY ASSIST PROFESSIONAL STAFF	PROFESSIONAL	STAFF,			
INTERACT WITH THE PUBLIC, CONDUCT RESEARCH, PROVIDE	PROVIDE ADMINISTRATIVE SUPPORT	IVE SUPPORT,			
AND LEARN ABOUT MODERN AND CONTEMPORARY AMERICAN ART.	RT. INTERNS ALSO	LSO GAIN			
VALUABLE TRAINING, SKILLS, AND WORK EXPERIENCE AS WELL AS AN OPPORTUNITY	WELL AS AN OP	PORTUNITY TO			
BUILD A NETWORK OF PROFESSIONAL CONTACTS, INTERNS !	INTERNS ARE ASSIGNED TO A	TO A			
SPECIFIC MUSEUM DEPARTMENT FOR THE DURATION AND ARE PARTNERS WITH A MENTOR	E PARTNERS WI	TH A MENTOR			
132102 10-26-21					Schedule I (Form 990) 2021

Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

2021

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

WHITNEY MUSEUM OF AMERICAN ART

Employer identification number 13-1789318

	·		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
-	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
_	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	х	
	tradicion, and officers, moraling the object Executive billions, regarding the terms of content of mile tal.	_		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization:			
а	Describes a support of	4a	х	
a b		4b	Х	
		4c		х
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	The state of the state of the persons and provide the applicable amounts for each term in that in.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
Ŭ	contingent on the revenues of:			
а		5a		Х
		5b		X
J	Any related organization? If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
U	contingent on the net earnings of:			
2		6a		Х
a h		6b		X
D	Any related organization? If "Yes" on line 6a or 6b, describe in Part III.			
7				
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	7	х	
	not described on lines 5 and 6? If "Yes," describe in Part III	7	41	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			х
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Α
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		l

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

Schedule J (Form 990) 2021

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

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

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

	(B) Breakdown of W	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) ADAM D. WEINBERG (i)	716,343.	1,500.	215,232.	92,360.	24,242.	1,049,677.	0.
ALICE PRATT BROWN DIRECTOR	0.	0	0	0	0	0	0
(2) SCOTT ROTHKOPF - SR. DEP. DIR./ (i)	413,823.	1,500.	0	19,232.	9,516.	444,071.	0
NANCY&STEVEN CROWN FAM CHIEF CURATOR (II)	0.	0	0	0	0	0	0
(3) AMY ROTH (i)	371,243.	1,500.	• 0	19,822.	24,242.	416,807.	• 0
CO-CHIEF OPERATING OFFICER	0.	• 0	• 0	• 0	0	0	• 0
(4) IDEHEN ARUEDE (i)	385,933.	1,500.	0	19,822.	9,473.	416,728.	0
CFO/CO-CHIEF OPERATING OFFICER	0.	• 0	• 0	• 0	• 0	• 0	• 0
(5) PAMELA BESNARD (i)	362,044.	1,500.	0	19,902.	24,242.	407,688.	0
CHIEF ADVANCEMENT OFFICER	0.	0	0	0	0	0	0
(6) CAROL C MANCUSI-UNGARO - MELVA (i)	253,315.	1,500.	0	15,683.	9,232.	279,730.	• 0
BUCKSBAUM ASSO, DIR, CONSERV, & RSCH (ii)	0.	0	0	0	0	0	0
(7) STEPHANIE ADAMS (i)	213,706.	1,500.	0	15,511.	24,073.	254,790.	0
DIR., INDIVIDUAL & PLANNED GIVING (ii)	0.	• 0	• 0	• 0	0	•0	• 0
(8) NICHOLAS S. HOLMES	199,283.	009'9	• 0	14,225.	24,046.	244,054.	• 0
GENERAL COUNSEL/ASSISTANT SECRETARY (II)	0.	• 0	• 0	• 0	0	• 0	• 0
(9) CHRISTY L PUTNAM - ASSO. DIR. (i)	212,727.	1,500.	• 0	14,619.	9,318.	238,164.	• 0
EXHIBITIONS & COLLECTIONS MANAGEMENT (ii)	0.	• 0	• 0	*0	• 0	• 0	• 0
(10) CHRISTINE MELLAMPE (i)	212,945.	1,500.	• 0	*0	20,492.	234,937.	• 0
CHIEF HUMAN RESOURCES OFFICER	0.	• 0	• 0	*0	• 0	0.	• 0
(11) EUNICE LEE	197,025.	*009'9	• 0	*608'81	.096,8	226,294.	• 0
DIR., STRG. PARTNERSHIPS & EVENTS (ii)	0.	• 0	• 0	• 0	• 0	• 0	• 0
(12) LINDSAY POLLOCK (THRU 04/2022) (i)	203,112.	1,500.	• 0	13,166.	268.	218,346.	• 0
CHIEF COMMUNICATIONS & CONTENT OFF. (ii)) 0.	• 0	• 0	• 0	• 0	0.	• 0
(13) ADRIAN HARDWICKE (THRU 04/2021) (i)	83,546.	• 0	76,488.	* 1883 * T	7,407.	171,724.	• 0
CHIEF VISITOR EXPERIENCE OFFICER (ii)	0.	• 0	• 0	• 0	0	•0	• 0
(1)							
(ii))						
(9)							
(ii))						
())							
(ii))						
						Schedu	Schedule J (Form 990) 2021

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Schedule J (Form 990) 2021

Fart III Supplemental information reduited for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.	
COMPENSATION IS PAID OUT.	
ART I, LINE 7:	
HE MUSEUM DIRECTORS AUTHORIZED A \$1,500 BONUS TO ALL MUSEUM EMPLOYEES WHO	
ERFORMED EXCELLENTLY THROUGHOUT THE CHALLENGING COVID-19 PANDEMIC.	
DDITIONAL SMALL BONUSES WERE PROVIDED TO NICHOLAS HOLMES AND EUNICE LEE TO	
ECOGNIZE THEM FOR MEETING CERTAIN PERFORMANCE RELATED OBJECTIVES.	
Schedule J (Form 990) 202	202

SCHEDULE K

Department of the Treasury Internal Revenue Service (Form 990)

Name of the organization

4

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a, Provide descriptions, explanations, and any additional information in Part VI.
 Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

2021

Employer identification number

13-1789318

WHITNEY MUSEUM OF AMERICAN ART

Schedule K (Form 990) 2021 No (i) Pooled financing × Yes ŝ (g) Defeased (h) On behalf ŝ Δ of issuer Yes Yes ŝ × Yes N٥ ပ (f) Description of purpose Yes BELOW SEE PART V ŝ 8 101,213,818. Yes (e) Issue price 818. 276,052. 854,400, 100,083,367. × No 2021 101,213 ⋖ (d) Date issued 01/07/21 Yes × × × (c) CUSIP# 649717VM4 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Does the organization maintain adequate books and records to support the Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, Were the bonds issued as part of a refunding issue of taxable bonds (or, if (b) Issuer EIN 13-1789318 issued prior to 2018, an advance refunding issue)? if issued prior to 2018, a current refunding issue)? Has the final allocation of proceeds been made? THE TRUST FOR CULTURAL RESOURCES OF Working capital expenditures from proceeds Capital expenditures from proceeds Credit enhancement from proceeds Amount of bonds legally defeased Capitalized interest from proceeds Gross proceeds in reserve funds Proceeds in refunding escrows Year of substantial completion Issuance costs from proceeds final allocation of proceeds? (a) Issuer name THE CITY OF NEW YORK Other unspent proceeds Amount of bonds retired Total proceeds of issue Other spent proceeds Bond Issues Proceeds Part II Part I 8

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1

Schedule K (Form 990) 2021 WHITNEY MUSEUM OF AMERICAN ART			13-1	3-1789318				Page 2
Part III Private Business Use								
	A			В		c	Q	
1 Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
which owned property financed by tax-exempt bonds?		X						
2 Are there any lease arrangements that may result in private business use of	×							
	ł							
3a Are there any management or service contracts that may result in private business use of bond-financed property?	×							
b If "Yes" to line 3a does the organization routinely engage bond counsel or other outside								
	×							
c Are there any research agreements that may result in private business use of								
bond-financed property?		×						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other								
outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities								
other than a section 501(c)(3) organization or a state or local government		% 00.		%		%		%
5 Enter the percentage of financed property used in a private business use as a								
result of unrelated trade or business activity carried on by your organization,								
another section 501(c)(3) organization, or a state or local government		% 00°		%		%		%
6 Total of lines 4 and 5		.00 %		%		%		%
7 Does the bond issue meet the private security or payment test?		Х						
8a Has there been a sale or disposition of any of the bond-financed property to a non-								
governmental person other than a 501(c)(3) organization since the bonds were issued?		×						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or								
disposed of		%		%		%	•	%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								
1								
9 Has the organization established written procedures to ensure that all								
nonqualified bonds of the issue are remediated in accordance with the	×							
Dart IV Arbitrago								
	•					[-	
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
Penalty in Lieu of Arbitrage Rebate?		Х						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	×							
b Exception to rebate?		X						
c No rebate due?		X						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
3 Is the bond issue a variable rate issue?		×						
8						2	Schedule K (Form 990) 2021	n 990) 2021
13.0.7 27 12.0.7						5	/	1 300) 505

13-1789318		
WHITNEY MUSEUM OF AMERICAN ART		
Schedule K (Form 990) 2021	Part IV Arbitrage (continued)	

Page 3

	«			B		U		
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
ı								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		×						
7 Has the organization established written procedures to monitor the								
requirements of section 148?		×						
Part V Procedures To Undertake Corrective Action								
	A			В		ပ	O	
Has the organization established written procedures to ensure that violations	Yes	No	Yes	N _o	Yes	٩	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?	×							
Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions.	on Schedule	K. See instru	ctions.					
SCHEDULE K, SUPPLEMENTAL INFORMATION:								
IN JANUARY 2021, THE TRUST FOR CULTURAL RESOURCES OF THE CITY OF NEW								
YORK (THE "TRUST") ISSUED SERIES 2021 REFUNDING REVENUE BONDS PURSUANT								
TO THE REFUNDING REVENUE BOND RESOLUTION (WHITNEY MUSEUM OF AMERICAN								
ART), AS SUPPLEMENTED BY THE SERIES 2021 RESOLUTION, EACH ADOPTED BY								
THE TRUST ON DECEMBER 7, 2020, THE PROCEEDS OF WHICH HAVE BEEN LOANED								
BY AND BETWEEN THE MUSEUM AND THE TRUST, SUCH PROCEEDS HAVE BEEN								
APPLIED TO THE REFINANCING OF THE MUSEUM'S 2011 REVENUE BONDS WHICH								
WERE USED TO FINANCE THE MUSEUM'S NEW DOWNTOWN FACILITY LOCATED IN THE								
MEATPACKING DISTRICT IN MANHATTAN, NEW YORK.								
SCHEDULE K, PART II, LINE 1:								
THE MUSEUM'S TAX-EXEMPT BOND IS AN INTEREST-ONLY BOND; THE MUSEUM WILL								
BE REQUIRED TO REPAY THE BOND IN FULL IN THE YEAR ENDING JUNE 30, 2032.								
SCHEDULE K, PART II, LINE 10:								
OTHER SPENT PROCEEDS REFLECT \$270,982 OF AN UNDERWRITER'S DISCOUNT AND								
\$5,070 OF ADDITIONAL CASH PROCEEDS NOT IDENTIFIED ELSEWHERE ON THE								
SCHEDULE K.								
132123 10-08-21						Sct	Schedule K (Form 990) 2021	m 990) 2021

Schedule K (Form 990) 2021 WHITNEY MUSEUM OF AMERICAN ART	Page 4
Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions. (continued)	
THE MUSEUM ENTERS INTO VARIOUS LICENSE AGREEMENTS WHICH ARE ALLOCATED	
TO THE NON-FINANCED PORTION OF THE SPACE,	
132124 10-08-21	Schedule K (Form 990) 2021

SCHEDULE M (Form 990)

Noncash Contributions

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Employer identification number

13-1789318 WHITNEY MUSEUM OF AMERICAN ART Types of Property Part I (a) (b) (d) (c) Noncash contribution Check if Number of Method of determining contributions or amounts reported on noncash contribution amounts applicable Form 990, Part VIII, line 1g items contributed Х N/A Art - Works of art Art - Historical treasures 2 Art - Fractional interests 3 Books and publications 4 5 Clothing and household goods Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 Securities - Publicly traded Х 73 4,509,000. FAIR MARKET VALUE 9 10 Securities - Closely held stock Securities - Partnership, LLC, or 11 trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 15 Real estate - Residential Real estate - Commercial 16 17 Real estate - Other 18 Collectibles Food inventory 19 Drugs and medical supplies 20 Taxidermy 21 Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24 31,000. FAIR MARKET VALUE (LAPTOPS 38 Other 25 26 Other 27 Other 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 17 for which the organization completed Form 8283, Part V, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? Х 30a b If "Yes," describe the arrangement in Part II. Х Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a b If "Yes." describe in Part II. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) 2021

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
SCHEDULE M, LINE 32B:
TO THE EXTENT THE MUSEUM RECEIVES DONATIONS OF SECURITIES OR OTHER
INVESTMENT ASSETS, IT CONVERTS THOSE ASSETS, INTO CASH. IN ADDITION,
THE MUSEUM OCCASIONALLY COMMISSIONS LIMITED EDITION WORKS OF ART THAT
WILL BE SOLD TO SUPPLEMENT THE MUSEUM'S FUNDRAISING EFFORTS. THE MUSEUM
WILL ENGAGE THIRD PARTY VENDORS TO SELL THESE WORKS OF ART.
SCHEDULE M, LINE 33:
NO AMOUNT IS REPORTED ON FORM 990, PART VIII, STATEMENT OF REVENUE,
LINE 1G, BECAUSE THE WHITNEY DOES NOT CAPITALIZE ITS COLLECTIONS, AS
PERMITTED UNDER GENERALLY ACCEPTED ACCOUNTING PRINCIPLES.

SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-FZ

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021
Open to Public Inspection

Internal Revenue Service

Name of the organization

WHITNEY MUSEUM OF AMERICAN ART

Employer identification number 13-1789318

PART III LINE 1 (ORGANIZATION'S MISSION CONTINUED): AS THE PREEMINENT ADVOCATE FOR AMERICAN ART. WE FOSTER THE WORK OF LIVING ARTISTS AT CRITICAL MOMENTS IN THEIR CAREERS. THE WHITNEY EDUCATES A DIVERSE PUBLIC THROUGH DIRECT INTERACTION WITH ARTISTS OFTEN BEFORE THEIR WORK HAS ACHIEVED GENERAL ACCEPTANCE THE WHITNEY MUSEUM OF AMERICAN ART WAS FOUNDED BY GERTRUDE VANDERBILT WHITNEY IN 1930. AN ARTIST AND PHILANTHROPIST SHE BELIEVED THAT ARTISTS WERE ESSENTIAL TO DEFINING, CHALLENGING, AND EXPANDING CULTURE THE MUSEUM BECAME A SITE WHERE ARTISTS AND AUDIENCES ENGAGED OPENLY WITH UNTESTED IDEAS. TODAY. THIS HISTORY INFORMS WHO WE ARE AND HOW WE SERVE OUR PUBLIC. THE WHITNEY BELIEVES: IN THE POWER OF ARTISTS AND ART TO SHAPE LIVES AND COMMUNITIES; THAT WE MUST BE AS EXPERIMENTAL, RESPONSIVE, AND RISK-TAKING AS THE ARTISTS WITH WHOM WE COLLABORATE; IN CREATING EXPERIENCES THAT ENGAGE AND RAISE QUESTIONS FOR OUR AUDIENCES, AND, IN TURN, LEARNING FROM OUR AUDIENCES; THAT OUR WORK EMBRACES COMPLEXITY AND ENCOURAGES AN INCLUSIVE IDEA OF AMERICA; IN THE IMPORTANCE OF HISTORY: THAT THE PAST INFORMS OUR PRESENT AND THAT CONTEMPORARY ART CAN HELP US BETTER UNDERSTAND OUR PAST AND REALIZE OUR FUTURE; THAT WE MUST LEAD WITH EXPERTISE, DEBATE, SELF-REFLECTION INTEGRITY: THAT THE WHITNEY THRIVES BECAUSE OF RELATIONSHIP SAMONG ARTISTS

Schedule O (Form 990) 2021

PREMISED ON

STAFF, AND BOARD ALIKE FORGED FROM DIALOGUE,

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

<u>Schedule O (Form 990) 2021</u> Page **2**

Name of the organization **Employer** identification number WHITNEY MUSEUM OF AMERICAN ART 13-1789318 RESPECT, AND COMMITTED TO A SHARED PURPOSE. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: FY22 PERFORMANCES AT THE MUSEUM INCLUDED: MY BARBARIAN: TRANSPARENCY 2021 (NOVEMBER 5, 2021); MY BARBARIAN: SONGBOOK (DECEMBER 18, 2021); MY BARBARIAN: DOUBLE FUTURE (FEBRUARY 24 - 26, 2022); AWILDA STERLING-DUPREY: BLINDFOLDED (MARCH 20, 2022); JASON RHOADES: SUTTER'S MILL (APRIL 8 - SEPTEMBER 2, 2022); MOBY DICK; OR, THE WHALE (APRIL 15 17, 2022); AND ALEX DA CORTE: ROY G BIV (APRIL 20 - AUGUST 8, 2022). AN ONGOING SERIES OF OUTDOOR ART SHOWN ACROSS GANSEVOORT STREET FROM THE MUSEUM HAD ONE INSTALLATION: WHITNEY BIENNIAL 2022: QUIET AS IT'S KEPT (APRIL 6- SEPTEMBER 5, 2022). THE FOLLOWING EXHIBITIONS TOURED NATIONALLY: VANTAGE POINTS: CONTEMPORARY PHOTOGRAPHY FROM THE WHITNEY MUSEUM OF AMERICAN ART (TAUBMAN MUSEUM OF ART, ROANOKE, VA); JULIE MEHRETU, CO-ORGANIZED WITH LACMA (WALKER ART CENTER, MINNEAPOLIS, MN); AND DAWOUD BEY: AN AMERICAN PROJECT, CO-ORGANIZED WITH SFMOMA (THE MUSEUM OF FINE ARTS, HOUSTON, TX). FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: AND RELEVANT FOR TODAY AND THE FUTURE. THE WHITNEY CONTINUES TO REFINE AND EXPERIMENT WITH ITS STRATEGIES FOR DISPLAYING MORE OF THE PERMANENT COLLECTION WITHIN ITS GALLERY SPACES. THE RESULTING COLLECTION DISPLAYS CREATE THEMATIC. ART HISTORICAL CONTEXTS AND COUNTERPOINTS TO THE ONGOING SPECIAL EXHIBITIONS PROGRAM,

<u>Schedule O (Form 990) 2021</u>

Name of the organization **Employer** identification number WHITNEY MUSEUM OF AMERICAN ART 13-1789318 AND EXPLORE HOW THE INSTITUTION CAN CONTRIBUTE TO NEW NARRATIVES ABOUT AMERICAN CULTURE AND HISTORY. RICH DOCUMENTATION OF THESE INSTALLATIONS AND MANY OF THE ARTWORKS WITHIN THEM ALLOWED THESE EXHIBITIONS TO REMAIN ACCESSIBLE THROUGH THE MUSEUM'S WEBSITE. SINCE RE-OPENING TO THE PUBLIC IN FALL 2020, THE WHITNEY HAS ALSO CONTINUED TO FURTHER DEVELOP AND EXPAND MANY OF ITS DIGITAL AND HYBRID COLLECTION INITIATIVES THAT WERE FIRST INITIATED IN RESPONSE TO COVID-19 QUARANTINE RESTRICTIONS. WORK WAS ONGOING TO DIGITIZE THE MUSEUM'S COLLECTIONS, A PROJECT THAT IS A CRUCIAL ASPECT OF THE INCREASED SCOPE OF THE CURATORIAL CONSERVATION, AND RESEARCH RESOURCES TEAMS IN ITS GREATLY ENLARGED FACILITY. THE WHITNEY'S PERMANENT COLLECTION REMAINED ONLINE AND AVAILABLE TO THE PUBLIC AS A SEARCHABLE RESOURCE AND IS UPDATED REGULARLY AS NEW WORKS ENTER THE COLLECTION. IMPORTANT LIBRARY AND SPECIAL COLLECTIONS HOLDINGS ARE KEPT ON SITE, AS WELL AS ABOUT 16,000 WORKS ON PAPER THAT ARE STORED IN THE SONDRA GILMAN STUDY CENTER FACILITATING ACCESS TO THEM FOR CURATORS AND SCHOLARS. THE SONDRA GILMAN STUDY CENTER SUPPORTS CROSS-MEDIUM, CROSS-DISCIPLINARY RESEARCH ALLOWING MUSEUM STAFF, ARTISTS, SCHOLARS, AND RESEARCHERS ACCESS TO THE COLLECTION AND OPPORTUNITY FOR CLOSE MATERIAL AND TECHNICAL EXAMINATION OF OBJECTS. AS SUCH, THE STUDY CENTER IS AN EXCEPTIONAL RESOURCE FOR HISTORIANS AND CURATORS OF MODERN AND CONTEMPORARY ART, MAKING THE WHITNEY'S WORLD-CLASS HOLDINGS AVAILABLE FOR PRIMARY RESEARCH AND IN-DEPTH CONSULTATION. PART-WAY THROUGH FY22 (IN FALL 2021), THE STUDY CENTER RE-OPENED FOLLOWING ITS CLOSURE DUE TO COVID-19. SINCE RE-OPENING, 33 EXTERNAL VISITS, WITH 115 UNIQUE VISITORS (20 OF THOSE BEING REPEAT VISITORS) WERE HELD IN THE STUDY CENTER.

<u>Schedule O (Form 990) 2021</u>

Name of the organization **Employer** identification number WHITNEY MUSEUM OF AMERICAN ART 13-1789318 FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: THE WHITNEY SERVED A TOTAL OF 60,809 VISITORS IN PERSON AND ONLINE THROUGH SCHOOL, YOUTH, FAMILY, PUBLIC, AND ACCESS & COMMUNITY PROGRAMS. AN ADDITIONAL 947,720 ASYNCHRONOUS USERS ONLINE WERE SERVED THROUGH DIGITAL ENGAGEMENT WITH INTERPRETIVE CONTENT OF AUDIO GUIDES, RECORDED VIDEOS OF PROGRAMS ON YOUTUBE, AND PODCASTS. A TOTAL OF 10,242 OF THESE IN PERSON AND ONLINE VISITORS WERE K-12 STUDENTS. EDUCATION STAFF WORKED WITHIN AND ACROSS PROGRAM AREAS ON ZOOM TO PRESENT DYNAMIC PROGRAMMING THAT EXPLORED CRITICAL QUESTIONS ABOUT AMERICAN ART CULTURE, AND SOCIETY. THE SCHOOL PROGRAM TEAM COMPLETED 356 ONLINE LESSONS AND SERVED 9,506 K-12 STUDENTS IN ONLINE AND IN-PERSON PROGRAMMING; 1,849 K-12 STUDENTS WERE FROM OUR 9 PARTNERSHIP SCHOOLS. IN ADDITION. THE WHITNEY EDUCATION DEPARTMENT CONTINUED ALL TEEN YOUTH INSIGHTS COHORTS WITH A TOTAL OF 119 MEETINGS AND TEEN'S EVENTS SERVING A TOTAL OF 701 TEENS, OUT OF THESE NUMBER 101 TEENS PARTICIPATED INTO YOUTH INSIGHTS OR A LEADER PROGRAM. IN FY22 DEPARTMENT OFFERED ITS ANNUAL ART COLLEGE NIGHT FOR NYC TEENS. ON ZOOM. REPRESENTATIVES FROM COLLEGES IN THE NEW YORK AREA GAVE INFORMATION ABOUT SCHOLARSHIP OPPORTUNITIES. COLLEGE ESSAY WRITING TIPS. AND MUCH MORE. THE MUSEUM ALSO CONTINUED ITS COMMITMENT TO ACCESSIBILITY FOR VISITORS WITH DISABILITIES TO EXPERIENCE THE RICHNESS AND COMPLEXITY OF AMERICAN ART IN AN ACCESSIBLE AND INCLUSIVE ENVIRONMENT THROUGH REMOTE AND IN-PERSON OFFERINGS. THIS INCLUDES VISITORS WHO IDENTIFY AS DISABLED D/DEAF, DEAF-BLIND, NEURODIVERGENT, AUTISTIC, LOW VISION AND/OR EXPERIENCE A RANGE OF COGNITIVE, INTELLECTUAL, AND DEVELOPMENTAL

Schedule O (Form 990) 2021 Page **2**

Name of the organization **Employer** identification number WHITNEY MUSEUM OF AMERICAN ART 13-1789318 DISABILITY, PHYSICAL DISABILITY, CHRONIC ILLNESS AND/OR SENSORY SENSITIVITIES. WITH THE CONTINUATION OF THE COVID-19 PANDEMIC AND ITS ACUTE AND ONGOING IMPACT ON DISABILITY COMMUNITIES MOST PROGRAMMING REMAINED ONLINE. THE ACCESS TEAM FOCUSED ON EXPANDING ACCESS FEATURES ON THE MOBILE GUIDE TO SUPPORT VISITORS WITH DISABILITIES AS THEY ENGAGED WITH WHITNEY EXHIBITIONS, DURING FY22 401 PEOPLE ATTENDED AN ACCESS TOUR, AND A TOTAL OF 1,019 STUDENTS WITH DISABILITIES, FROM 19 DIFFERENT SCHOOLS, PARTICIPATED IN EITHER AN IN-PERSON GUIDED VISIT OR ONLINE LESSON. IN FY22 6,971 PEOPLE ATTENDED ARTMAKING WORKSHOPS, TOURS, AND COMMUNITY PROGRAMS. COMMUNITY PROGRAMS AT THE WHITNEY SERVED AS A FOCAL POINT FOR EXPLORATION, DIALOGUE, AND SELF-EXPRESSION FOR THE MUSEUM'S DIVERSE NEIGHBORS WITH A DESIRE TO CONNECT TO ART. COMMUNITY PROGRAMS DEVELOPED INDIVIDUALIZED EXTENDED PROGRAMS DESIGNED TO MEET THE SPECIFIC AND DIVERSE NEEDS OF OUR 14 DIFFERENT PARTNER ORGANIZATIONS AND TO PROVIDE EDUCATIONAL AND CULTURAL OPPORTUNITIES FOR UNDERSERVED AUDIENCES OF ALL AGES. PUBLIC PROGRAMS AND PUBLIC ENGAGEMENT PRESENTED PROVOCATIVE AND EXPERIMENTAL EVENTS THAT ENGAGE AUDIENCES IN CRITICAL DIALOGUES ON ART AND CULTURAL PRODUCTION. THE DIVISION PRESENTED 23 PROGRAMS AND 4 COURSES TO 25,978 VISITORS; RECORDINGS OF THESE PROGRAMS HAVE BEEN VIEWED APPROXIMATELY 37,730 TIMES AS OF JUNE 30, 2022. HIGHLIGHTS INCLUDED CONVERSATIONS, SYMPOSIA, READINGS, WORKSHOPS, AND SCREENINGS IN CONJUNCTION WITH DAWOUD BEY: AN AMERICAN PROJECT, DAVE MCKENZIE: THE STORY I TELL MYSELF, JULIE MEHRETU, JASPER JOHNS: MIND/MIRROR, MY BARBARIAN, JENNIFER PACKER: THE EYE IS NOT SATISFIED WITH SEEING

<u>Schedule O (Form 990) 2021</u> Page **2**

Name of the organization **Employer** identification number WHITNEY MUSEUM OF AMERICAN ART 13-1789318 MAKING KNOWING. AND WHITNEY BIENNIAL 2022: QUIET AS IT'S KEPT. THROUGHOUT THE YEAR, THE PUBLIC PROGRAMS MAILING LIST CONTINUED TO GROW, ADDING NEARLY 5,000 NEW SUBSCRIBERS FOR A TOTAL OF APPROXIMATELY 26,000 INDIVIDUALS, AND THE MUSEUM BEGAN TO COLLECT FEEDBACK FROM PROGRAM ATTENDEES THROUGH SHORT SURVEYS AFTER PROGRAMS. IN JULY 2021 PROGRAMS WERE DEVELOPED TO BE IN A HYBRID FORMAT, ENABLING SPEAKERS AND AUDIENCES TO PARTICIPATE IN-PERSON OR VIRTUALLY, AS WELL AS CREATING OPPORTUNITIES TO DEEPEN THE ACCESSIBILITY OF THESE EVENTS. TWO EARLY HYBRID PROGRAMS WERE BLACK/QUEER/ABSTRACT: A CONVENING ON THE OCCASION OF JULIE MEHRETU AND THE FILMS OF ANDY WARHOL; THE ANNUAL WALTER ANNENBERG LECTURE FEATURING DAWOUD BEY WAS ALSO PRODUCED IN A HYBRID FORMAT. PUBLIC PROGRAMS FOCUSED ON MAKING EVENTS MORE ACCESSIBLE, ALL EVENTS WERE OFFERED WITH CLOSED CAPTIONING AND ASL INTERPRETATION WHEN REQUESTED, AS WELL AS LIVE SPANISH TRANSLATION. FAMILY PROGRAMS HAD 43 IN PERSON AND ONLINE ART CLUBS AND WORKSHOP STUDIOS SERVING A TOTAL OF 9.901 PEOPLE IN PERSON (BETWEEN KIDS AND ADULTS). ONE SUCH INITIATIVE WAS WHITNEY KIDS ART CHALLENGE, DESIGNED FOR KIDS AND ADULTS TO DO TOGETHER WITH MATERIALS EASILY FOUND IN THE HOME BASED ON WORKS IN THE WHITNEY'S PERMANENT COLLECTION. THE FAMILY PROGRAMS TEAM LEAD ONE OF THE LARGEST FAMILY EVENTS HOSTED AT THE MUSEUM: PRIDE ON THE WHITNEY LAWN, WHICH FEATURED LIVE READINGS FROM LGBTQ+ POETS HOSTED BY CHAVISA WOODS, AND INTERGENERATIONAL POETRY WORKSHOPS LED BY REGIE CABICO, AND FAMILY-FRIENDLY ACTIVITIES INCLUDING HANDS-ON ARTMAKING, PERFORMANCES, PHOTO BOOTHS, GIVEAWAYS THIS EVENT HAD MORE THAN 5,000 ATTENDEES.

<u>Schedule O (Form 990) 2021</u> Page **2**

Name of the organization **Employer** identification number WHITNEY MUSEUM OF AMERICAN ART 13-1789318 FOR MORE INFORMATION ABOUT WHITNEY EDUCATION, PLEASE VISIT WHITNEY.ORG/EDUCATION. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: PUBLICATION AND RETAIL SALES: MUSEUM RELATED AUXILLARY SERVICES THAT PROVIDE PRODUCTS RELATED TO THE MUSEUM'S COLLECTION AND EXHIBITIONS. EXPENSES \$ 1,983,000. INCLUDING GRANTS OF \$ 0. REVENUE \$ 155,595. FORM 990, PART VI, SECTION A, LINE 1A: **VOTING MEMBERS:** IN ACCORDANCE WITH THE MUSEUM'S BY-LAWS, THE EXECUTIVE COMMITTEE CONSISTS ENTIRELY OF MUSEUM TRUSTEES. THE EXECUTIVE COMMITTEE CURRENTLY CONSISTS OF 22 MEMBERS AND IS COMPOSED OF CERTAIN TRUSTEE OFFICERS. CERTAIN TRUSTEE COMMITTEE CHAIRS, AND OTHER TRUSTEES ELECTED BY RESOLUTION OF THE BOARD OF TRUSTEES. BETWEEN MEETINGS OF THE BOARD OF TRUSTEES, AND SUBJECT TO THE GENERAL POLICIES ESTABLISHED BY THE BOARD. THE EXECUTIVE COMMITTEE HAS ALL THE POWERS OF THE FULL BOARD. EXCLUDING (I) THE REMOVAL OF TRUSTEES AND OFFICERS, (II) APPOINTING OF COMMITTEE CHAIRS, AND (II) AMENDING THE BY-LAWS. FORM 990, PART VI, SECTION A, LINE 2: FAMILY/BUSINESS RELATIONSHIPS: NEIL BLUHM (TRUSTEE) AND LESLIE BLUHM (TRUSTEE) HAVE A FAMILY RELATIONSHIP. DAVID W. ZALAZNICK (TRUSTEE) AND THOMAS E. TUFT (TRUSTEE), NEIL G. BLUHM (TRUSTEE) HAVE A BUSINESS RELATIONSHIP.

<u>Schedule O (Form 990) 2021</u>

Name of the organization **Employer** identification number WHITNEY MUSEUM OF AMERICAN ART 13-1789318 RICHARD M. DEMARTINI (CHAIRMAN) AND ROBERT J. HURST (CHAIRMAN OF EXECUTIVE COMMITTEE) HAVE A BUSINESS RELATIONSHIP. FORM 990, PART VI, SECTION B, LINE 11B: FORM 990 REVIEW PROCESS: THE MUSEUM'S FORM 990 TAX FILING IS COMPILED BASED ON INFORMATION OBTAINED FROM THE MUSEUM'S GENERAL LEDGER, AUDITED FINANCIAL STATEMENTS AND OTHER FINANCIAL SYSTEMS. THE MUSEUM'S CO-CHIEF OPERATING OFFICER AND CHIEF FINANCIAL OFFICER, SENIOR FINANCE/ACCOUNTING STAFF, GENERAL COUNSEL AND EXTERNAL TAX ADVISORS PARTICIPATE IN A SERIES OF DETAILED REVIEWS OF ALL INFORMATION TO BE INCLUDED IN THE FILING. ALL INFORMATION INCLUDED IN THE RETURN IS REVIEWED BY THE GROUP FOR ACCURACY AND CONTENT. THE COMPLETED FORM 990 AND RELATED SCHEDULES ARE ALSO PROVIDED TO THE MUSEUM'S SENIOR MANAGEMENT AND REVIEWED IN DETAIL WITH THE CO-CHIEF OPERATING OFFICER AND CHIEF FINANCIAL OFFICER. FINALLY, A PUBLIC INSPECTION COPY IS PROVIDED TO EACH MEMBER OF THE BOARD OF TRUSTEES PRIOR TO FILING THE RETURN. THE MUSEUM'S EXTERNAL TAX ADVISORS FILE THE FORM 990 ELECTRONICALLY WITH THE INTERNAL REVENUE SERVICE. FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST POLICY MONITORING & ENFORCEMENT: THE MUSEUM'S CODE OF ETHICS CONTAINS DETAILED DISCLOSURE REQUIREMENTS WITH RESPECT TO THE CONFLICTS OF INTERESTS FOR ITS BOARD AND STAFF. ON A REGULAR BASIS, THE BOARD AND OFFICERS OF THE MUSEUM COMPLETE A CONFLICTS OF INTEREST QUESTIONNAIRE. RESPONSES ARE COMPILED, REVIEWED WITH GENERAL COUNSEL AND THE CO-CHIEF OPERATING OFFICER AND CHIEF FINANCIAL OFFICER, AND FORWARDED TO THE AUDIT COMMITTEE. IF A CONFLICT IS DISCLOSED, BOARD MEMBERS WITH POTENTIAL CONFLICTS MAY NOT PARTICIPATE IN DELIBERATIONS AND NEED TO

Schedule O (Form 990) 2021

Name of the organization
WHITNEY MUSEUM OF AMERICAN ART

Page 2

Employer identification number
13-1789318

RECUSE THEMSELVES FROM VOTING ON PARTICULAR MATTERS. IN ADDITION, OFFICERS

AND KEY EMPLOYEES ARE ASKED ANNUALLY TO REVIEW AND ACKNOWLEDGE

COMPLIANCE WITH THE MUSEUM'S CODE OF ETHICS.

FORM 990, PART VI, SECTION B, LINE 15:

PROCESS FOR DETERMINING COMPENSATION:

THE MUSEUM HAS A HUMAN RESOURCES/COMPENSATION COMMITTEE OF THE BOARD

MEMBERS INCLUDE THE CHAIRMAN, PRESIDENT, CHAIR OF THE FINANCE COMMITTEE

ALONG WITH THREE OTHER TRUSTEES. THE COMMITTEE MEETS PERIODICALLY TO REVIEW

PERFORMANCE AND COMPENSATION FOR THE DIRECTOR AND CERTAIN OTHER SENIOR

STAFF. AS PART OF THE PROCESS, THE COMMITTEE REVIEWS COMPARATIVE DATA

OBTAINED FROM SEVERAL INDEPENDENT SOURCES WHICH PROVIDE DATA FOR SIMILAR

POSITIONS IN NEW YORK CITY AND NATIONALLY.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

 $\verb"AL,AK,AR,CA,CO,CT,DC,FL,GA,HI,IL,KY,ME,MD,MA,MI,MN,NH,NJ,NC,ND,OH,OK,OR,PA"$

RI,SC,UT,VA,WV,WI

FORM 990, PART VI, SECTION C, LINE 19:

HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC:

AUDITED FINANCIAL STATEMENTS AND THE FORM 990 ARE MADE AVAILABLE ON THE

MUSEUM'S WEBSITE. ALL OTHER DOCUMENTS ARE AVAILABLE UPON REQUEST AT

MANAGEMENT'S DISCRETION.

PART X, LINE 15:

THE FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") IMPLEMENTED A NEW

LEASE ACCOUNTING STANDARD THAT BECAME EFFECTIVE FOR WHITNEY MUSEUM OF

AMERICAN ART IN THE YEAR ENDING JUNE 30, 2021. THIS ACCOUNTING STANDARD

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021	Page 2
Name of the organization WHITNEY MUSEUM OF AMERICAN ART	Employer identification number 13-1789318
WAS EFFECTUATED TO IMPROVE THE TRANSPARENCY SURROUNDING KEY INFORMATION	
PERTAINING TO AN EXEMPT ORGANIZATION'S LEASING ARRANGEMENTS (AND TO	
ENSURE THAT ALL ORGANIZATIONS WERE RECORDING THE TRANSACTIONS UNIFORMLY	
ON THEIR BALANCE SHEETS).	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN POST-RETIREMENT HEALTH AND OTHER BENEFITS OTHER THAN NET PERIODIC	
PENSION CHARGES AND SERVICE COST 1,605,000.	
NET PERIODIC PENSION CHARGES OTHER THAN SERVICE COST -63,000.	
TOTAL TO FORM 990, PART XI, LINE 9 1,542,000.	
FORM 990 - GENERAL:	
AMOUNTS REFLECTED IN THE 2021 FORM 990 FOR THE YEAR ENDED JUNE 30, 2022	
HAVE BEEN ROUNDED TO THE NEAREST THOUSAND TO CONFORM WITH THE	
PRESENTATION IN THE MUSEUM'S AUDITED FINANCIAL STATEMENTS.	