

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2018

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning **OCT 1, 2018** and ending **SEP 30, 2019**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization MONTGOMERY MUSEUM OF FINE ARTS ASSOCIATION Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite ONE MUSEUM DRIVE City or town, state or province, country, and ZIP or foreign postal code MONTGOMERY, AL 36117 F Name and address of principal officer: DAVID CHANDLER SAME AS C ABOVE	D Employer identification number 63-6049847 E Telephone number 334-625-4372 G Gross receipts \$ 5,323,806. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.MMFA.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1964 M State of legal domicile: AL

Part I Summary

1	Briefly describe the organization's mission or most significant activities: THE PURPOSE OF THE MONTGOMERY MUSEUM OF FINE ARTS IS TO COLLECT, PRESERVE, EXHIBIT, AND INTERPRET		
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	37
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	37
5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	40
6	Total number of volunteers (estimate if necessary)	6	149
7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 38	7b	0.
8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9	Program service revenue (Part VIII, line 2g)	942,578.	1,220,224.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	227,733.	232,573.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	425,978.	445,807.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	217,929.	231,237.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,814,218.	2,129,841.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	546,411.	559,680.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 17,863.	0.	0.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,899,150.	939,639.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,445,561.	1,499,319.
19	Revenue less expenses. Subtract line 18 from line 12	-1,631,343.	630,522.
20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21	Total liabilities (Part X, line 26)	13,069,875.	12,867,836.
22	Net assets or fund balances. Subtract line 21 from line 20	600,888.	399,872.
22		12,468,987.	12,467,964.

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.

Sign Here	Signature of officer DAVID CHANDLER, TREASURER Type or print name and title	Date _____		
Paid Preparer Use Only	Print/Type preparer's name M. CHAD SINGLETARY, CPA	Preparer's signature M. CHAD SINGLETARY,	Date 08/17/20	Check <input type="checkbox"/> if self-employed PTIN P00166368
	Firm's name ▶ CARR, RIGGS & INGRAM, LLC Firm's address ▶ 7550 HALCYON SUMMIT DRIVE MONTGOMERY, AL 36117	Firm's EIN ▶ 72-1396621 Phone no. 334.271.6678		

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

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ASSOCIATION

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Part 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 PURPOSE OF THE MONTGOMERY MUSEUM OF FINE ARTS IS TO COLLECT, PRESERVE, EXHIBIT, AND INTERPRET ART OF THE HIGHEST QUALITY FOR THE ENRICHMENT, ENLIGHTENMENT, AND ENJOYMENT OF ITS PUBLIC.

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ 63,379. including grants of \$ _____) (Revenue \$ 451,638.)

EDUCATION:

DURING THE FIRST FULL YEAR OF THE JOHN AND JOYCE CADDELL SCULPTURE GARDEN, THE MUSEUM SOUGHT TO TAKE FULL ADVANTAGE OF THE NEW OUTDOOR GALLERY AND CREATIVE SPACE. THIS INCLUDED RELOCATING THE FLIMP FESTIVAL, MMFA'S SIGNATURE FAMILY EVENT, TO THE GARDEN, WHERE VISITORS EXPERIENCED MYRIAD CREATIVE ACTIVITIES. THE 2018-19 FISCAL YEAR ALSO SAW AN EXPANSION OF THE MUSEUM'S OFFSITE PROGRAMMING AND CONTINUED STRENGTH IN ITS SCHOOL PROGRAMS, INCLUDING THE ADDITION OF A GRADE LEVEL AT THE MUSEUM'S LEARNING THROUGH ART ARTIST IN RESIDENCE PROGRAM AT WARES FERRY ROAD ELEMENTARY SCHOOL. ADDITIONALLY THE YEAR WAS SHAPED BY THE LEADUP TO ALABAMA'S BICENTENNIAL OF STATEHOOD AND THE

4b (Code: _____) (Expenses \$ 242,508. including grants of \$ _____) (Revenue \$ _____)
PERMANENT COLLECTION ACQUISITIONS

THE MUSEUM'S MISSION TO COLLECT, PRESERVE, AND INTERPRET ART FOR OUR COMMUNITY IN MONTGOMERY AND CENTRAL ALABAMA IS GROUNDED IN THE WORKS OF ART HELD IN ITS PERMANENT COLLECTION. IN FY 2019 THE MUSEUM ACQUIRED 10 OUTSTANDING WORKS OF ART FOR ITS COLLECTION, REPRESENTING VARIOUS MEDIA, AND ENHANCING MULTIPLE AREAS OF OUR PERMANENT HOLDINGS. ACQUISITION HIGHLIGHTS INCLUDE A PAINTING BY NEW ORLEANS ARTIST JACQUELINE BISHOP (AMERICAN, BORN 1955), TWO ETCHINGS DEPICTING PARIS FROM AROUND 1630 BY THE FRENCH PRINTMAKER, JACQUES CALLOT (FRENCH, 1592-1635), A GLAZED CERAMIC PLATE BY VIOLA FREY (AMERICAN, 1933-2004), AND THREE WORKS OF STUDIO ART GLASS, TWO BY GINNY RUFFNER (AMERICAN,

4c (Code: _____) (Expenses \$ 361,310. including grants of \$ _____) (Revenue \$ _____)
EXHIBITIONS

IN ADDITION TO SEMI-PERMANENT AND TEMPORARY INSTALLATIONS FROM OUR PERMANENT COLLECTION, THE MUSEUM OFFERED AN ASSORTMENT OF TEMPORARY LOAN EXHIBITIONS IN ITS GALLERIES. WITH THE OPENING OF THE CADDELL SCULPTURE GARDEN IN THE FALL OF 2018, THE MUSEUM ADDED AN "OUTDOOR GALLERY" TO OUR FACILITY. THE INAUGURAL EXHIBITION OF TEMPORARY SCULPTURE PLACEMENTS IN THE GARDEN EXTENDS INTO 2020. KEY LOANS INCLUDED THREE CERAMIC PIECES BY JUN KANEKO (BORN JAPAN, 1942), A CAST BRONZE SCULPTURE BY DEBORAH BUTTERFIELD (AMERICAN, BORN 1949), AND A NUMBER OF WORKS BY ALABAMA CONTEMPORARY ARTISTS PRODUCING SCULPTURE FOR EXHIBITION IN NATURE.

4d Other program services (Describe in Schedule O.)
(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses **667,197.**

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

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Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	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 and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	X

Part V Statements Regarding Other IRS Filings and Tax Compliance

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	90
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a		40
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		7d
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	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	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in 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?		X
If "Yes," see 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?		X
If "Yes," complete Form 4720, Schedule O.			

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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 in Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	1a 37		
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b 37		
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
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?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **JANET CARROLL - 334-625-4372**
ONE MUSEUM DRIVE, MONTGOMERY, AL 36117

**MONTGOMERY MUSEUM OF FINE ARTS
ASSOCIATION**

Form 990 (2018)

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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 instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BARRETT AUSTIN BOARD MEMBER	1.00	X						0.	0.	0.
(2) CEDRIC BRADFORD BOARD MEMBER	1.00	X						0.	0.	0.
(3) KAREN CAMPBELL BOARD MEMBER	1.00	X						0.	0.	0.
(4) GINNY CUMBUS BOARD MEMBER	1.00	X						0.	0.	0.
(5) HELENA DUNCAN BOARD MEMBER	1.00	X						0.	0.	0.
(6) CAMILLE FINLEY BOARD MEMBER	1.00	X						0.	0.	0.
(7) WILLIAM FORD BOARD MEMBER	1.00	X						0.	0.	0.
(8) JASON GOODSON BOARD MEMBER	1.00	X						0.	0.	0.
(9) MYRTLE GOORE BOARD MEMBER	1.00	X						0.	0.	0.
(10) POLLY HARDEGREE BOARD MEMBER	1.00	X						0.	0.	0.
(11) LUCY JACKSON BOARD MEMBER	1.00	X						0.	0.	0.
(12) DEREK JOHNSON BOARD MEMBER	1.00	X						0.	0.	0.
(13) ROHN JONES BOARD MEMBER	1.00	X						0.	0.	0.
(14) BARBARA LARSON BOARD MEMBER	1.00	X						0.	0.	0.
(15) ROSETTA LEDYARD BOARD MEMBER	1.00	X						0.	0.	0.
(16) ALLISON MUHLENDORF BOARD MEMBER	1.00	X						0.	0.	0.
(17) MARY OWENS BOARD MEMBER	1.00	X						0.	0.	0.

**MONTGOMERY MUSEUM OF FINE ARTS
ASSOCIATION**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) CATHERINE PORTER BOARD MEMBER	1.00	X					0.	0.	0.	
(19) KERRY POWELL BOARD MEMBER	1.00	X					0.	0.	0.	
(20) SUSAN PRICE BOARD MEMBER	1.00	X					0.	0.	0.	
(21) SHERON ROSE BOARD MEMBER	1.00	X					0.	0.	0.	
(22) BOB RUNKLE BOARD MEMBER	1.00	X					0.	0.	0.	
(23) LESLIE SANDERS BOARD MEMBER	1.00	X					0.	0.	0.	
(24) KATHY SAWYER BOARD MEMBER	1.00	X					0.	0.	0.	
(25) ADAM SCHLOSS BOARD MEMBER	1.00	X					0.	0.	0.	
(26) MARK SNEAD BOARD MEMBER	1.00	X					0.	0.	0.	
1b Sub-total							0.	0.	0.	
c Total from continuation sheets to Part VII, Section A							209,178.	0.	0.	
d Total (add lines 1b and 1c)							209,178.	0.	0.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 1

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		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
W.K. UPCHURCH CONSTRUCTION 1001 MONTICELLO COURT, MONTGOMERY, AL 36117	SCULPTURE GARDEN CONSTRUCTION	661,569.
PATE LANDSCAPING COMPANY 3408 GREENPINE CIRCLE, MONTGOMERY, AL 36108	SCULPTURE GARDEN LANDSCAPING	402,619.
JENNIE WELLER CATERING, LLC. 231 NORTH HULL STREET, MONTGOMERY, AL 36104	EVENT CATERER	128,873.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 3

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2018)

MONTGOMERY MUSEUM OF FINE ARTS
ASSOCIATION

Form 990

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) WINIFRED STAKELY BOARD MEMBER	1.00	X						0.	0.	0.
(28) BARBARA THOMPSON BOARD MEMBER	1.00	X						0.	0.	0.
(29) MELISSA TUBBS BOARD MEMBER	1.00	X						0.	0.	0.
(30) JANET WALLER BOARD MEMBER	1.00	X						0.	0.	0.
(31) GRIFFITH WALLER BOARD MEMBER	1.00	X						0.	0.	0.
(32) LAURIE WEIL BOARD MEMBER	1.00	X						0.	0.	0.
(33) KELLI WISE BOARD MEMBER	1.00	X						0.	0.	0.
(34) DAVID CHANDLER TREASURER	1.00	X		X				0.	0.	0.
(35) MARY STOWERS DUNN SECRETARY	2.00	X		X				0.	0.	0.
(36) CATHY MARTIN VICE PRESIDENT	2.00	X		X				0.	0.	0.
(37) PETE KNIGHT PRESIDENT	2.00	X		X				0.	0.	0.
(38) ED BRIDGES INTERIM DIRECTOR	40.00			X				178,000.	0.	0.
(39) ANGIE DODSON EXECUTIVE DIRECTOR	40.00			X				31,178.	0.	0.
Total to Part VII, Section A, line 1c								209,178.		

**MONTGOMERY MUSEUM OF FINE ARTS
ASSOCIATION**

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Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b 233,487.				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e 272,769.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 713,968.				
	g Noncash contributions included in lines 1a-1f: \$	30,335.				
	h Total. Add lines 1a-1f	▶ 1,220,224.				
	Program Service Revenue	2 a CATERING INCOME	Business Code 711190	137,479.	137,479.	
b BEVERAGE SERVICE INCOME		711190	32,944.	32,944.		
c PROGRAM FEES		711190	28,866.	28,866.		
d CONTRACT LABOR INCOME		711190	27,011.	27,011.		
e J.E.B.		711190	5,000.	5,000.		
f All other program service revenue		711190	1,273.	1,273.		
g Total. Add lines 2a-2f		▶ 232,573.				
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)	▶ 402,904.			402,904.
	4 Income from investment of tax-exempt bond proceeds	▶				
	5 Royalties	▶				
	6 a Gross rents	(i) Real	55,075.			
		(ii) Personal				
		b Less: rental expenses	0.			
		c Rental income or (loss)	55,075.			
	d Net rental income or (loss)	▶ 55,075.			55,075.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities	3,170,033.			
		(ii) Other				
		b Less: cost or other basis and sales expenses	3,127,130.			
		c Gain or (loss)	42,903.			
	d Net gain or (loss)	▶ 42,903.	42,903.			
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
		b Less: direct expenses	b			
c Net income or (loss) from fundraising events		▶				
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities	▶				
10 a Gross sales of inventory, less returns and allowances	a 105,755.					
	b Less: cost of goods sold	b 66,835.				
	c Net income or (loss) from sales of inventory	▶ 38,920.	38,920.			
Miscellaneous Revenue		Business Code				
11 a CHANGE IN BENEFICIAL INTEREST	900099	122,449.	122,449.			
	b MISCELLANEOUS INCOME	900099	14,793.	14,793.		
	c					
	d All other revenue					
e Total. Add lines 11a-11d	▶ 137,242.					
12 Total revenue. See instructions	▶ 2,129,841.	451,638.	0.	457,979.		

**MONTGOMERY MUSEUM OF FINE ARTS
ASSOCIATION**

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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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	65,090.	19,527.	43,610.	1,953.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	418,029.	125,518.	282,430.	10,081.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	36,966.	8,894.	28,072.	
10 Payroll taxes	39,595.	1,692.	36,982.	921.
11 Fees for services (non-employees):				
a Management	64,566.		64,566.	
b Legal	1,216.	1,216.		
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	113.		113.	
13 Office expenses	1,759.	965.	794.	
14 Information technology				
15 Royalties				
16 Occupancy	31,066.	5,016.	26,050.	
17 Travel	30,155.	24,420.	5,641.	94.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,885.		1,885.	
23 Insurance	88,689.	87.	88,602.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a ACQUISITIONS	227,250.	227,250.		
b CATERING AND BEVERAGE	170,252.	11,821.	158,431.	
c FEES FOR SPECIAL SERVIC	92,831.	54,112.	37,791.	928.
d CONTRACT LABOR	86,952.	71,928.	15,024.	
e All other expenses _____	142,905.	114,751.	24,268.	3,886.
25 Total functional expenses. Add lines 1 through 24e	1,499,319.	667,197.	814,259.	17,863.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

**MONTGOMERY MUSEUM OF FINE ARTS
ASSOCIATION**

Form 990 (2018)

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	1,051,239.	1	482,522.	
	2 Savings and temporary cash investments	1,518,358.	2	3,690,051.	
	3 Pledges and grants receivable, net	256,014.	3	198,319.	
	4 Accounts receivable, net	313,377.	4	59,979.	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L			6	
	7 Notes and loans receivable, net			7	
	8 Inventories for sale or use	4,993.	8	4,158.	
	9 Prepaid expenses and deferred charges	3,557.	9	13,058.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	197,362.			
	b Less: accumulated depreciation	167,627.			
		31,620.	10c	29,735.	
	11 Investments - publicly traded securities	9,486,269.	11	7,863,117.	
	12 Investments - other securities. See Part IV, line 11		12		
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
15 Other assets. See Part IV, line 11	404,448.	15	526,897.		
16 Total assets. Add lines 1 through 15 (must equal line 34)	13,069,875.	16	12,867,836.		
Liabilities	17 Accounts payable and accrued expenses	433,152.	17	265,704.	
	18 Grants payable		18		
	19 Deferred revenue	167,736.	19	134,168.	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25		
	26 Total liabilities. Add lines 17 through 25	600,888.	26	399,872.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	6,321,953.	27	6,531,465.	
	28 Temporarily restricted net assets	6,147,034.	28	5,936,499.	
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
33 Total net assets or fund balances	12,468,987.	33	12,467,964.		
34 Total liabilities and net assets/fund balances	13,069,875.	34	12,867,836.		

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**MONTGOMERY MUSEUM OF FINE ARTS
ASSOCIATION**

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,129,841.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,499,319.
3	Revenue less expenses. Subtract line 2 from line 1	3	630,522.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12,468,987.
5	Net unrealized gains (losses) on investments	5	-531,394.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-100,151.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	12,467,964.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
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?
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:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** 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?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form **990** (2018)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

2018

Open to Public Inspection

Name of the organization **MONTGOMERY MUSEUM OF FINE ARTS ASSOCIATION** Employer identification number **63-6049847**

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

MONTGOMERY MUSEUM OF FINE ARTS

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1403797.	912,141.	736,665.	942,578.	1220224.	5215405.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1403797.	912,141.	736,665.	942,578.	1220224.	5215405.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						5215405.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	1403797.	912,141.	736,665.	942,578.	1220224.	5215405.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	914,882.	383,583.	328,927.	490,888.	500,882.	2619162.
9 Net income from unrelated business 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.)	11,715.	46,177.	37,795.	314,522.	14,796.	425,005.
11 Total support. Add lines 7 through 10						8259572.
12 Gross receipts from related activities, etc. (see instructions)					12	1,014,641.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	63.14 %
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	65.76 %
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) 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).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls... b A family member... c A 35% controlled entity...

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority... Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated...

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year... Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected... Row 3: By reason of the relationship described in (2), did the organization's supported organizations have a significant voice...

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a The organization satisfied the Activities Test... b The organization is the parent of each of its supported organizations... c The organization supported a governmental entity... Row 2: Activities Test. Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes... b Did the activities described in (a) constitute activities that, but for the organization's involvement... Row 3: Parent of Supported Organizations. Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees... b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations?

MONTGOMERY MUSEUM OF FINE ARTS

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	

Section 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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	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 1-1/2% 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 .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

MONTGOMERY MUSEUM OF FINE ARTS

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

MONTGOMERY MUSEUM OF FINE ARTS

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.)

Multiple horizontal lines for supplemental information.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2018

Name of the organization

**MONTGOMERY MUSEUM OF FINE ARTS
ASSOCIATION**

Employer identification number

63-6049847

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization MONTGOMERY MUSEUM OF FINE ARTS ASSOCIATION	Employer identification number 63-6049847
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAMES D. LOWE 163 LAKE BEND DR ELMORE, AL 36025	\$ 265,358.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	ALABAMA STATE COUNCIL ON THE ARTS 201 MONROE ST MONTGOMERY, AL 36104-3735	\$ 112,175.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	JOHN A. CADDELL 1455 BELL RD MONTGOMERY, AL 36117	\$ 105,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	POARCH BAND OF CREEK INDIANS 5811 JACK SPRINGS RD ATMORE, AL 36502	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	FRED A. RICHARD 4490 VIRGINIA LOOP RD. MONTGOMERY, AL 36116	\$ 41,923.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	JADO FUND 3236 BANKHEAD AVE MONTGOMERY, AL 36106	\$ 34,932.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MONTGOMERY MUSEUM OF FINE ARTS ASSOCIATION	Employer identification number 63-6049847
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	ALABAMA POWER COMPANY P. O. BOX 160 MONTGOMERY, AL 36101-0160	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	ALFRED J. NEWMAN 3359 BANKHEAD MONTGOMERY, AL 36106-1103	\$ 26,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	HANS LUQUIRE 1742 RADCLIFFE ROAD MONTGOMERY, AL 36106-2620	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization MONTGOMERY MUSEUM OF FINE ARTS ASSOCIATION	Employer identification number 63-6049847
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization MONTGOMERY MUSEUM OF FINE ARTS ASSOCIATION	Employer identification number 63-6049847
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

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.**

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization **MONTGOMERY MUSEUM OF FINE ARTS ASSOCIATION** **Employer identification number**
63-6049847

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

	(a) Donor advised funds	(b) Funds 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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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

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

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

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2018

MONTGOMERY MUSEUM OF FINE ARTS
ASSOCIATION

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

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

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

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

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

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

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

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

	Amount
1c	
1d	
1e	
1f	

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	12,759,331.	12,325,133.	11,119,843.	10,392,542.	15,719,066.
b Contributions	95.	115.	765.	1,960.	8,453.
c Net investment earnings, gains, and losses	436,013.	735,841.	1,287,946.	802,598.	-360,262.
d Grants or scholarships					
e Other expenditures for facilities and programs	87,332.	301,758.	83,421.	77,257.	4,974,715.
f Administrative expenses					
g End of year balance	12,699,162.	12,759,331.	12,325,133.	11,119,843.	10,392,542.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 41.00 %
- b Permanent endowment %
- c Temporarily restricted endowment 59.00 %

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

	Yes	No
3a(i)		X
3a(ii)		X
3b		

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 (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		197,362.	167,627.	29,735.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				29,735.

**MONTGOMERY MUSEUM OF FINE ARTS
ASSOCIATION**

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (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)	
Total. (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)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

MONTGOMERY MUSEUM OF FINE ARTS
ASSOCIATION

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	1,533,881.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-531,394.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	-64,566.	
e	Add lines 2a through 2d	2e		-595,960.
3	Subtract line 2e from line 1	3		2,129,841.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		2,129,841.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	1,434,753.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		0.
3	Subtract line 2e from line 1	3		1,434,753.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	64,566.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		64,566.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		1,499,319.

Part XIII Supplemental Information.

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

PART III, LINE 1A:

IN CONFROMITY WITH THE PRACTICE FOLLOWED BY MANY MUSEUMS, ART OBJECTS PURCHASED BY OR DONATED TO THE ASSOCIATION ARE NOT INCLUDED IN IN THE STATEMENT OF FINANCIAL POSITION. THE ASSOCIATION MAINTAINS A SEPARATE RECORD OF ALL ITS ART OBJECTS.

PART III, LINE 4:

THE MONTGOMERY MUSEUM OF FINE ARTS HOLDS SOME 4,000 OBJECTS IN ITS COLLECTION, CONSISTING PRIMARILY OF AMERICAN WORKS OF ART FROM THE EIGHTEENTH CENTURY INTO THE TWENTY-FIRST CENTURY. THE COLLECTION INCLUDES ART FROM THE SOUTHEASTERN UNITED STATES, DECORATIVE ARTS IN THE FORM OF PORCELAIN AND GLASS, AND OLD MASTER PRINTS. THE AMERICAN COLLECTIONS, AS

Part XIII Supplemental Information (continued)

WELL AS THE EUROPEAN OLD MASTER PRINTS, FORM AN OUTSTANDING HISTORICAL
CONTEXT FOR THE APPROXIMATELY 250 WORKS FROM THE MUSEUM'S GEOGRAPHIC
REGION, WHICH DATE FROM THE LATE-NINETEENTH CENTURY TO THE PRESENT.
THE MUSEUM'S AMERICAN COLLECTION IS A COMPREHENSIVE SURVEY OF STYLES,
TECHNIQUES, AND SUBJECT MATTER FROM THE 18TH THROUGH THE 20TH CENTURIES
ILLUSTRATING MAJOR ART MOVEMENTS FROM COLONIAL TIMES TO THE PRESENT.
PORTIONS OF THE COLLECTION ARE ON PERMANENT EXHIBITION IN VARIOUS
INSTALLATIONS THAT EXPLORE DIFFERENT THEMES OR HISTORICAL PERSPECTIVES.
THE CORE OF THE AMERICAN ART INSTALLATION IS THE BLOUNT COLLECTION,
CONTAINING 41 HISTORICALLY SIGNIFICANT PAINTINGS BY 33 AMERICAN ARTISTS
INCLUDING COPLEY, MORAN, HOMER, SARGENT, HOPPER, AND O'KEEFFE. THIS
CHRONOLOGICAL SURVEY OF AMERICAN PAINTINGS SIGNIFICANTLY ENHANCES THE
OVERALL MUSEUM COLLECTIONS, AND THE MUSEUM'S EDUCATIONAL ROLE BY PROVIDING
A COMPREHENSIVE VIEW OF IMPORTANT STYLES AND MOVEMENTS IN AMERICAN ART.
WHILE THE MUSEUM'S AMERICAN ART COLLECTION IS AMONG THE STRONGEST IN THE
SOUTHEASTERN U.S., THE MUSEUM'S PRINT COLLECTION IS ALSO HIGHLY
SIGNIFICANT. THE RICH COLLECTION OF OLD MASTER PRINTS INCLUDES MULTIPLE
WORKS BY OUTSTANDING EUROPEAN PRINTMAKERS FROM THE FIFTEENTH TO THE
NINETEENTH CENTURIES SUCH AS SCHOENGAUER, D RER, REMBRANDT, CANALETTO,
GOYA, AND WHISTLER. THE COLLECTION NOW INCLUDES OVER 1,500 OUTSTANDING
IMPRESSIONS. THESE WORKS EMBODY VARIOUS PRINTMAKING TECHNIQUES AND
DEMONSTRATE THE SCOPE AND QUALITY OF THIS DISTINCTIVE COLLECTION.
UTILIZING THE MUSEUM'S WEIL PRINT ENDOWMENT, THE MUSEUM CONSISTENTLY
PURCHASES OLD MASTER PRINTS MADE BEFORE 1900 TO ENHANCE THE MUSEUM'S
HOLDINGS. THE COLLECTION OF WORKS ON PAPER ALSO INCLUDES POPULAR ENGRAVERS
SUCH AS CURRIER AND IVES AND EXTENDS TO WORKS BY MAJOR MODERN PRINTMAKERS
INCLUDING ROSENQUIST, WARHOL, AND STELLA. THE MUSEUM'S HOLDINGS OF
HISTORICAL AND MODERN PHOTOGRAPHY ARE ALSO INCREASING, PARTICULARLY IN THE

Part XIII Supplemental Information (continued)

AREA OF WORKS BY SOUTHERN PHOTOGRAPHERS.

IN 1930, THE MUSEUM WAS FOUNDED WITH THE INTENTION OF EXHIBITING WORKS BY ALABAMA ARTISTS AND TO PROMOTE THE CULTURAL, ARTISTIC, AND EDUCATIONAL LIFE OF THE PEOPLE OF ALABAMA. PAINTINGS WERE DONATED BY THE DIRECTOR OF THE MUSEUM'S ART SCHOOL, KELLY FITZPATRICK, AS WELL AS BY HIS STUDENTS TO FORM THE CORE OF EARLY HOLDINGS. TODAY, WORKS BY ALABAMA ARTISTS AND, IN A LARGER CONTEXT, WORKS BY SOUTHERN REGIONAL ARTISTS, REMAIN A SOURCE OF GREAT PRIDE FOR THE MONTGOMERY AREA AND ARE ACCESSIBLE REMINDERS OF ITS CULTURAL AND ARTISTIC HERITAGE. HISTORICAL AND CONTEMPORARY WORKS BY ARTISTS FROM ALABAMA AND THE SOUTHEAST FORM AN ESSENTIAL AND EXPANDING COMPONENT OF MMFA'S COLLECTION; MORE THAN TWO HUNDRED EXAMPLES OF PAINTING, WORKS ON PAPER AND SCULPTURE ARE NOW IN THE COLLECTION. REPRESENTED ARE NINETEENTH-CENTURY PORTRAITISTS, NICOLA MARSCHALL AND JACQUES AMANS, AND LANDSCAPE PAINTERS, JOSEPH RUSLING MEEKER, WALTER ANDERSON AND WILL HENRY STEVENS. ARTISTS OF THE WPA ERA INCLUDE J. KELLY FITZPATRICK, ARTHUR BAIRNSFARTHER, ANNE GOLDTHWAITE AND CHARLES SHANNON. MANY OF THESE WORKS WERE EXECUTED FOR WPA PROJECTS IN ALABAMA AND DONATED TO THE MUSEUM BY THE PROJECT OR BY THE ARTISTS. IMPORTANT CONTEMPORARY, REGIONAL ARTISTS REPRESENTED ARE ROGER BROWN, WILLIAM CHRISTENBERRY, AND FRANK FLEMING. WORKS BY SELF-TAUGHT ARTISTS ARE ALSO AN EXPANDING PART OF THE MUSEUM'S PERMANENT COLLECTION. QUILTS BY ALABAMA QUILTMAKERS OF THE MID-TO-LATE TWENTIETH CENTURY, AS WELL AS A SELECTION OF WORKS BY ALABAMA ARTISTS SUCH AS JIMMY LEE SUDDUTH, MOSE TOLLIVER AND BILL TRAYLOR, FORM AN IMPORTANT FACET OF THE MUSEUM'S REPRESENTATION OF WORKS BY REGIONAL ARTISTS.

THE LOCATION OF THE MUSEUM IN THE BEAUTIFUL WYNTON M. BLOUNT CULTURAL PARK AND THE ARCHITECTURE OF THE BUILDING INSPIRED THE GOAL OF ACQUIRING WORKS OF SCULPTURE. REGIONAL SCULPTORS FRANK FLEMING, WILLIAM CHRISTENBERRY, AND

Part XIII Supplemental Information (continued)

ED HENDRICKS WERE COMMISSIONED AND HAVE PROVIDED SCULPTURE FOR THE MUSEUM AND GROUNDS. TWELVE WORKS BY LOCAL SELF-TAUGHT SCULPTOR CHARLIE LUCAS WERE ACQUIRED AND ARE NOW ON PERMANENT DISPLAY. THE MUSEUM HAS ALSO ASSEMBLED AN OUTSTANDING INSTALLATION OF THIRTY PIECES OF AMERICAN STUDIO ART GLASS, WHICH INCLUDES A LARGE WINDOW INSTALLATION COMMISSIONED FROM SEATTLE ARTIST CAPPY THOMPSON.

IN ADDITION TO THE COLLECTION AREAS OUTLINED ABOVE, THE MUSEUM ALSO OWNS STUDY COLLECTIONS OF FIRST PERIOD WORCESTER PORCELAIN AND CHINESE EXPORT PORCELAIN, AS WELL AS AMERICAN HISTORICAL ART GLASS.

THE MUSEUM'S COLLECTIONS AND THEIR IMPACT ON THE COMMUNITY ARE OF PRIMARY CONCERN TO MMFA. THE MUSEUM'S MISSION IS TO "COLLECT, PRESERVE, EXHIBIT AND INTERPRET ART OF THE HIGHEST QUALITY FOR THE ENRICHMENT, ENLIGHTENMENT AND ENJOYMENT OF ITS PUBLIC." THE PERMANENT COLLECTION HAS BEEN BUILT WITH THIS MISSION STATEMENT IN MIND.

COMMUNITY YOUTH HAVE TRADITIONALLY BEEN VIEWED AS AN UNDERSERVED AUDIENCE BY MMFA. ALABAMA'S PUBLIC ELEMENTARY AND JUNIOR HIGH SCHOOLS PROVIDE LITTLE OR NO ART EDUCATION. AS A RESULT, THE MUSEUM HAS DEVELOPED MANY PROGRAMS SPECIFICALLY FOR THIS AUDIENCE. ARTWORKS, THE LEADING INTERACTIVE EDUCATIONAL ART GALLERY IN THE STATE, WAS CREATED TO OFFER CHILDREN AND ADULTS AN INTERACTIVE EXPLORATION OF THE ELEMENTS OF ART. A FIELD TRIP TO MMFA IS PART OF THE CURRICULUM FOR EVERY KINDERGARTEN AND FIFTH-GRADE STUDENT IN MONTGOMERY PUBLIC SCHOOLS; THE FIELD TRIP INCLUDES A GALLERY TOUR, TIME TO EXPLORE ARTWORKS, AND A STUDIO ART-MAKING ACTIVITY. OTHER SCHOOL GROUPS TOUR VARIOUS EXHIBITIONS FOR CURRICULUM-RELATED, ARTS-IN-EDUCATION EFFORTS DESIGNED BY THE CURATOR OF EDUCATION. COMMUNITY OUTREACH PROGRAMS ARE DEVELOPED TO INFORM AND EDUCATE AUDIENCES ABOUT SPECIAL EXHIBITIONS IN AN EFFORT TO MAKE GALLERY VISITS MORE ENRICHING.

DURING CAMP SUNSHINE, A WEEK-LONG SUMMER PROGRAM IN CONJUNCTION WITH THE

MONTGOMERY MUSEUM OF FINE ARTS
ASSOCIATION

Part XIII Supplemental Information (continued)

GIRL SCOUTS, MMFA OFFERS STUDIO ART PROGRAMS FOR SEVERAL HUNDRED FIVE- TO 14-YEAR OLD ECONOMICALLY DISADVANTAGED GIRLS. WEEKEND STUDIO/GALLERY CLASSES AND SUMMER ART CAMPS, BOTH WITH SCHOLARSHIP OPPORTUNITIES, SERVE PRE-SCHOOL THROUGH HIGH-SCHOOL YOUTH. THESE SUCCESSFUL EFFORTS TO REACH THIS AUDIENCE HAVE LED TO MODELS OF OUTREACH AND AUDIENCE DEVELOPMENT THAT MMFA SEEKS TO UTILIZE WITH OTHER UNDERSERVED AUDIENCES, ESPECIALLY ADULTS AGED 18 TO 35.

PART X, LINE 2:

THE ASSOCIATION HAS NOT RECOGNIZED ANY RESPECTIVE LIABILITY FOR UNRECOGNIZED TAX BENEFITS AS IT HAS NO KNOWN TAX POSITIONS THAT WOULD SUBJECT THE ASSOCIATION TO ANY MATERIAL INCOME TAX EXPOSURE. THE TAX YEARS THAT REMAIN SUBJECT TO EXAMINATION ARE THE PERIODS BEGINNING ON OCTOBER 1, 2015 FOR ALL MAJOR TAX JURISDICTIONS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

INVESTMENT FEES -64,566.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

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.

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization **MONTGOMERY MUSEUM OF FINE ARTS ASSOCIATION** Employer identification number **63-6049847**

Part I Questions Regarding Compensation

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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

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?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** 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 contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2018

MONTGOMERY MUSEUM OF FINE ARTS
ASSOCIATION

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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ED BRIDGES INTERIM DIRECTOR	(i)	178,000.	0.	0.	0.	0.	178,000.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ 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.

Name of the organization **MONTGOMERY MUSEUM OF FINE ARTS ASSOCIATION** Employer identification number **63-6049847**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art	<input checked="" type="checkbox"/>	6	0.	APPRAISED VALUE
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (MEDIA COVERAG)	<input checked="" type="checkbox"/>	15	30,335.	FMV
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

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

	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?		<input checked="" type="checkbox"/>
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		<input checked="" type="checkbox"/>
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		<input checked="" type="checkbox"/>
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.		

Part II **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 33:

THE MUSEUM REPORTS ONLY THE APPRAISED VALUE OF THESE WORK OF ART CONTRIBUTIONS, WHICH THE DONOR REPORTS ON THEIR TAX RETURN. THE TOTAL APPRAISED VALUE OF THE VARIOUS WORKS OF ART RECEIVED DURING 10/1/18-9/30/19 WAS \$63,000.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public
Inspection

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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
 ART OF THE HIGHEST QUALITY FOR THE ENRICHMENT, ENLIGHTENMENT, AND
 ENJOYMENT OF ITS PUBLIC.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
 ARRIVAL OF A NEW DIRECTOR WITH VAST EDUCATION AND STRATEGIC PLANNING
 EXPERIENCE.

SCHOOLS:
 SYSTEMWIDE TOURS -
 DURING THE 2018-19 SCHOOL YEAR, THE MUSEUM CONTINUED THE
 BICENTENNIAL-THEMED FIFTH GRADE TOUR PROGRAM TIED TO SOCIAL STUDIES
 STANDARDS. BECOMING ALABAMA INCLUDED A TIMELINE ACTIVITY IN THE
 CLASSROOM FEATURING WORKS OF ART, A GALLERY TOUR EXPLORING HISTORICAL
 CONNECTIONS, A STUDIO LESSON TIED TO "STARS FELL ON ALABAMA", AND
 INTERACTIVE CREEK FOLK TALES. ALL MPS KINDERGARTEN STUDENTS ENJOYED
 THE ART OF BAKING PUPPET SHOW AND DISCUSSED ORIGINAL WORKS OF ART IN
 THE GALLERIES FOLLOWING. INCLUDING THESE AND OTHER GROUPS, THE MUSEUM
 SAW 5,962 MPS STUDENTS DURING THE FISCAL YEAR.

OTHER FREE TOUR OFFERINGS INCLUDED THIRD SATURDAYS (OPEN TO THE
 PUBLIC), TOURS FOR SENIOR CITIZENS AND SPECIAL NEEDS GROUPS, AND VISITS
 FROM SUMMER ACADEMIES.

LEARNING THROUGH ART -
 WITH SUPPORT FROM THE KIWANIS CLUB, THE MUSEUM'S LEARNING THROUGH ART

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2018)

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ARTIST IN RESIDENCE PROGRAM AT WARES FERRY ROAD ELEMENTARY SCHOOL OFFERED WEEKLY ART LESSONS TO THIRD, FOURTH, AND FIFTH GRADE STUDENTS DURING FY 18-19. PREVIOUSLY THIRD AND FOURTH GRADE STUDENTS AT THE SCHOOL HAD PARTICIPATED. THE NEW FIFTH GRADE CURRICULUM INCLUDED AN INTERDISCIPLINARY ARTS COMPONENT WITH A DANCE UNIT AND STUDENTS' CURATORIAL INVOLVEMENT IN THE END OF THE YEAR EXHIBITION AT THE MUSEUM.

AS IN YEARS PAST, THE CURRICULUM FOR ALL GRADES INCLUDED STUDENT-DRIVEN DISCUSSIONS OF NARRATIVE WORKS FROM THE MUSEUM'S COLLECTION, JOURNAL ENTRIES ABOUT THE SAME, AND RELATED ART PROJECTS IN VARIED MEDIA. STUDENTS ALSO HAD THE OPPORTUNITY TO WORK WITH PROFESSIONAL ARTISTS AND TO PAY VISITS TO THE MUSEUM. AS A RESULT STUDENTS CONTINUE TO SHOW SIGNIFICANT INCREASES IN MANY KEY SKILLS AND CURRICULUM STANDARDS. 227 STUDENTS WERE ENROLLED IN THE FLAGSHIP PROGRAM. ITS IMPACT ALSO CONTINUES TO BE AMPLIFIED AT A FEW OTHER LOCATIONS THROUGH TEACHER TRAINING AND SUMMER LEARNING OPPORTUNITIES.

AP ART HISTORY -

TEN STUDENTS FROM THREE LOCAL SCHOOLS TOOK A FREE AP ART HISTORY COURSE OFFERED AT THE MUSEUM DAILY. THE STUDENTS EARNED THE FOLLOWING SCORES: 1 5, 4 4'S, 3 3'S, AND 2 1'S ON THE NATIONAL EXAM. THE MUSEUM OFFERS ONLY ONE OF TWO AP ART HISTORY COURSES IN THE RIVER REGION AND ONE OF A SMALL NUMBER STATEWIDE.

EXHIBITIONS OF STUDENT ART

IN ADDITION TO DISPLAYING THE WORK OF THE LEARNING THROUGH ART STUDENTS, FIVE JURIED EXHIBITIONS OF STUDENT ART WERE TIED TO THE THEMES AND TECHNIQUES OF LARGER MUSEUM EXHIBITIONS. 369 WORKS WERE

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SHOWN FROM 19 DIFFERENT SCHOOLS. AND 379 INDIVIDUALS ATTENDED THE
EXHIBITION OPENINGS CELEBRATING THE WORKS OF THE STUDENTS.

TEACHER WORKSHOPS

ART RELATED TEACHER WORKSHOPS WERE HELD THROUGHOUT THE YEAR. 183
TEACHERS BENEFITED.

ARTWORKS INTERACTIVE GALLERY

AS IN YEARS PAST, ROUGHLY HALF OF THE MUSEUM'S VISITORS (54,346)
EXPLORED THE ARTWORKS INTERACTIVE GALLERY, WHERE YOUNG LEARNERS ENJOY
INTERACTIVE WORKS OF ART AND STATIONS, INCLUDING CONNECTIONS TO WORKS
IN THE MUSEUM'S COLLECTION AND WORKS OF ART CREATED ESPECIALLY FOR
ARTWORKS.

YOUTH AND FAMILY

DROP IN ACTIVITIES WERE OFFERED IN ARTWORKS INCLUDING A WEEKLY STUDY OF
GLOBAL CULTURES THAT FOCUSES ON A DIFFERENT COUNTRY EACH MONTH, A
MONTHLY SPECIAL NEEDS ACTIVITY, AND EXHIBITION RELATED PROJECTS.

3,316 MONTGOMERIANS ATTENDED THE FLIMP FESTIVAL MENTIONED ABOVE, MAKING
IT THE MOST POPULAR DAY OF THE YEAR. THE FESTIVAL FEATURED MANY ART
MAKING ACTIVITIES, A CHALK ART COMPETITION, AND PERFORMANCES; OTHER
LARGESCALE FAMILY EVENTS INCLUDED THE ANNUAL NATIVE AMERICAN FAMILY
DAY, MILITARY OPEN HOUSE, AND HOLIDAY OPEN HOUSE.

FAMILIES COULD ALSO PARTICIPATE IN THE PROGRAMS MENTIONED ABOVE OFFERED
IN SECOND SUNDAYS WITH JAZZ AND ART MAKING ACTIVITIES. STUDIO PROGRAMS
WERE ALSO OFFERED FOR ALL AGES, ALONG WITH SUMMER ART CAMPS FOR SCHOOL

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AGE ARTISTS. 1,038 PEOPLE TOOK PAID STUDIO CLASSES AT THE MUSEUM. AND THE TEEN COUNCIL HAD BEHIND THE SCENES ACTIVITIES AND OFFERED PROGRAMS FOR THEIR PEERS, INCLUDING AN ARTS SHOWCASE AND A CHANCE TO LEARN FROM PROFESSIONALS WORKING IN THE ARTS.

4,932 PEOPLE ATTENDED YOUTH AND FAMILY PROGRAMS (INCLUDING TEEN PROGRAMS.)

1,808 PEOPLE ATTENDED OFFSITE PROGRAMS THE MUSEUM WAS PART OF (SOME DESCRIBED BELOW.)

ADULTS AND DOCENTS

THE MUSEUM FORMED NEW PARTNERSHIPS WITH THE CAPRI THEATER AND MONTGOMERY BUILDS/MONTGOMERY ARTS PROJECT IN ORDER TO OFFER MORE OFFSITE PROGRAMMING, BOTH AT THE CAPRI AND AT THE RENOVATED KRESS ON DEXTER, A MULTI-USE HISTORICAL BUILDING AND CREATIVE SPACE DOWNTOWN. THE LATTER PARTNERSHIP ALSO ALLOWED THE MUSEUM TO PARTICIPATE IN INSIDE OUT: WE ARE THE DREAM, A LARGESCALE PUBLIC ART PROJECT ON HISTORIC DEXTER AVENUE FEATURING PORTRAITS OF THE CITIZENS OF MONTGOMERY. ADDITIONALLY A CONTINUED PARTNERSHIP WITH THE MONTGOMERY THERAPEUTIC AND RECREATION CENTER ENGAGED SPECIAL POPULATIONS IN GALLERY DISCUSSIONS AND ART MAKING.

FOR ADULTS, THE MUSEUM ALSO OFFERED THE TRADITIONAL: LECTURES, GALLERY TALKS, FILMS, AND SHORT COURSES RELATED TO TEMPORARY EXHIBITIONS AND OTHER TOPICS. EKPHRASIS, A BOOK CLUB RELATED TO ART, AND ARTFUL YOGA WERE OFFERED TO MEMBERS. NON-MEMBERS COULD ALSO PAY TO ATTEND THE YOGA SESSIONS. LOCAL ARTISTS PARTOOK IN ARTTALK, A CRITIQUE FOR ARTISTS,

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AND A SERIES ON BRAND BUILDING FOR ARTISTS, BOTH OFFERED IN CONJUNCTION WITH THE MONTGOMERY ART GUILD.

2,508 ADULTS ATTENDED PROGRAMS AT THE MUSEUM.

THE MUSEUM ALSO CONTINUED TO OFFER REGULAR TRAINING ON TOURING STYLES, CURRICULUM, COLLECTIONS, AND SPECIAL EXHIBITIONS DURING THE SCHOOL YEAR FOR 40+ DOCENTS WHO LED TOUR COMPONENTS INCLUDING GALLERY DISCUSSION, STUDIO ACTIVITIES, AND EXPERIENCES IN ARTWORKS. DOCENTS ALSO LED ACTIVITIES FOR MANY FAMILY EVENTS AT THE MUSEUM AND ELSEWHERE IN THE COMMUNITY. EVERY KINDERGARTENER AND FIFTH GRADER ALONG WITH MANY OTHERS WHO VISITED THE MUSEUM WERE ENGAGED BY DOCENTS IN DISCUSSION AND ARTISTIC RESPONSE.

SELF GUIDED TOURS INCLUDED THE CELL PHONE AUDIO TOURS, SOME OF WHICH ARE ALSO LED BY DOCENTS. PEOPLE LISTENED, 2,688 TIMES.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

BORN 1952), AND ONE BY THE GREAT ITALIAN GLASSMAKER, LINO TAGLIAPIETRA (ITALIAN, BORN 1934). FURTHER, IN MAY 2019, THE MUSEUM ENTERED INTO AN HISTORIC 3 YEAR PURCHASE AGREEMENT WITH THE SOULS GROWN DEEP FOUNDATION TO ACQUIRE FIVE WORKS BY CONTEMPORARY AFRICAN AMERICAN ARTISTS FROM ALABAMA. THESE INCLUDE THREE EXAMPLES BY QUILT MAKERS OF GEE'S BENDJOANNA PETTWAY (AMERICAN, 1924-1993), MINNIE SUE COLEMAN (AMERICAN, 1926-2012), AND EMMA MAE HALL PETTWAY (AMERICAN, BORN 1932) A 1988 WORK BY JIMMY LEE SUDDUTH (AMERICAN, 1910-2007), AND A 2008 MIXED-MEDIA CONSTRUCTION BY THORNTON DIAL, SR., (AMERICAN, 1928-2016) TITLED LOST AMERICANS. THE MUSEUM CONTINUES TO DEVELOP AND EXPAND ITS ONLINE

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COLLECTIONS DATABASE WITH INFORMATION FOR THE PUBLIC REGARDING THE
WORKS HELD IN THE COLLECTION.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

OTHER TEMPORARY EXHIBITIONS INCLUDED CONTINUUM: 1808 TO 2017/GOYA TO
ERDREICH, 9/29/18-1/6/19; VIEWS OF THE SOUTH: PHOTOGRAPHS FROM THE DO
GOOD FUND, 9/29/18-1/6/19; LINO TAGLIAPIETRA: MASTER OF BEAUTY,
11/10/18-1/20/19; ABOUT FACE: CONTEMPORARY CERAMIC SCULPTURE,
2/2/19-5/12/19; BOUKE DE VRIES: WAR AND PIECES, 2/2/19-6/2/19; 43RD
MONTGOMERY ART GUILD MUSEUM EXHIBITION, 6/1/19-7/21/19; RICHARD MILLS:
INVISIBLE (FEATURED ARTIST, 43RD MONTGOMERY ART GUILD MUSEUM
EXHIBITION) 6/1/19-7/21/19; HISTORY, LABOR, AND LIFE: THE PRINTS OF
JACOB LAWRENCE, 8/3/2019-10/27/2019, AND LAQUITA THOMSON: TAKING
FLIGHT, 8/10/19-10/13/19.

FORM 990, PART VI, SECTION A, LINE 6:

THE MONTGOMERY MUSEUM OF FINE ARTS IS A NONPROFIT ORGANIZATION WITH BOARD
MEMBERS WHO HAVE THE RIGHT TO PARTICIPATE IN THE ORGANIZATION'S GOVERNANCE,
ELECT MEMBERS OF THE GOVERNING BODY AND APPROVE SIGNIFICANT DECISIONS OF
THE GOVERNING BODY. MEMBERS DO NOT RECEIVE DISTRIBUTIONS OF INCOME OR
ASSETS FROM THE ORGANIZATION NOR MAY THEY RECEIVE A SHARE OF THE
ORGANIZATION'S PROFITS, EXCESS DUES OR A SHARE OF THE ORGANIZATION'S NET
ASSETS UPON THE ORGANIZATION'S DISSOLUTION. THE MUSEUM IS A DEPARTMENT OF
THE CITY OF MONTGOMERY, GOVERNED BY THE CITY'S RULES AND REGULATIONS,
OVERSEEN BY THE CITY'S MAYOR AND CITY COUNCIL. THE CITY OF MONTGOMERY SETS
GENERAL POLICY AND PROCEDURES FOR ALL ITS DEPARTMENTS INCLUDING THE MUSEUM.

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FORM 990, PART VI, SECTION A, LINE 7B:

MEMBERS OF THE ASSOCIATION MAY MAKE CHANGES TO THE BY-LAWS AT AN ANNUAL MEETING.

FORM 990, PART VI, SECTION B, LINE 11B:

A COPY OF THE FORM 990 WAS EMAILED TO KEY BOARD MEMBERS BEFORE IT WAS FILED. IT WAS ALSO REVIEWED BY THE TREASURER AND ACCOUNTANT BEFORE THE TAX RETURN WAS FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

A COPY OF THE MONTGOMERY MUSEUM OF FINE ARTS' CODE OF ETHICS WILL BE PROVIDED TO EACH MEMBER OF THE MUSEUM'S BOARD AND STAFF AT THE BEGINNING OF THEIR RELATIONSHIP WITH THE MUSEUM AND WILL BE SIGNED BY EACH MEMBER. BOARD AND STAFF SHOULD DISCLOSE ANY POTENTIAL CONFLICT OF INTEREST TO THE MUSEUM AT THAT TIME. THE MUSEUM'S CODE OF ETHICS IS IMPLEMENTED BY AND WILL BE UPDATED OR REVISED BY A VOTE OF THE FULL BOARD. THE MUSEUM'S EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES SERVES AS THE ETHICS COMMITTEE OF THE BOARD OF TRUSTEES. THE ETHICS COMMITTEE WILL BE RESPONSIBLE FOR EXAMINING REPORTS OR REQUESTS CONCERNING PERSONAL COLLECTING, GIFTS, ACQUISITIONS, SALES, TRADES OR OTHER MATTERS AS THEY RELATE TO BOARD MEMBERS OR MUSEUM STAFF WHEN SUCH MATTERS MAY PRESENT THE POTENTIAL FOR A CONFLICT.

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

THE EXECUTIVE COMMITTEE REVIEWED DATA OF COMPENSATION OF OTHER ART MUSEUM DIRECTORS: IN THE GEOGRAPHICAL REGION, BY METROPOLITAN AREA POPULATION, AND BY OPERATING BUDGET SIZE. COMPENSATION DOCUMENTATION AND MINUTES OF MEETINGS ARE KEPT ON RECORD IN THE MUSEUM'S BOARD FILES AND PERSONNEL FILES.

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

THE MONTGOMERY MUSEUM OF FINE ARTS GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AUDIT, ANNUAL REPORT, AND OTHER POLICIES ARE AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C

THE ORGANIZATION'S AUDIT EXECUTIVE COMMITTEE OVERSEES THE AUDIT OF THE ORGANIZATION.