Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

Open to Public Inspection

A Fo	r the 2012	calendar year, or tax year beginning 01-01-2012 , 2012, and ending	12-31-2	2012			
B Che	eck if applicab	le C Name of organization THE MARINERS' MUSEUM			D Employ	er identif	ication number
— Add	dress change				54-054	1801	
— Nai	me change	Doing Business As					
— _{Init}	tial return	Number and street (or P O box if mail is not delivered to street address) Ro	om/suite		E Telephon	e number	
— Ter	mınated	100 MUSEUM DRIVÈ	,				
– _{Am}	ended return	City or town, state or country, and ZIP + 4			(757)5	91-770	01
— Apr	olication pendi	NEWPORT NEWS, VA 23606			G Gross red	ainte ¢ 0	088 877
	•	F Name and address of principal officer		U(a) Takk			
		ELLIOT GRUBER	'	H(a) Is thi affilia		eturn fo	r □ Yes 🔽 No
		100 MUSEUM DRIVE NEWPORT NEWS,VA 23606					
		NEWFORT NEWS, VA 23000					d? │ Yes │ No
T a	x-exempt stat	tus		If "No	o," attach a	ılıst (se	ee instructions)
ı w	ebsite: ► \	NWW MARINER ORG	─	H(c) Grou	p exemptio	n numb	er ►
						.	
		non		L Year of fo	mation 193) M Sta	nte of legal domicile VA
Ра		describe the organization's mission or most significant activities					
s & Governance	ABOU PROM THE N OPPO THE N	GITS ART AND ARTIFACTS TO EDUCATE LOCAL, NATIONAL A IT THE VITAL ROLE OF THE SEA IN MANKIND'S DEVELOPMENT IOTING AN APPRECIATION OF THE MARITIME WORLD - PAST, MARINERS' MUSEUM PARK AND LAKE MAURY OFFER THE RESID IRTUNITY TO EXPERIENCE THE BEAUTY AND PEACE OF AN OA NOLAND TRAIL AND TO ENHANCE THEIR APPRECIATION OF THE K this box If the organization discontinued its operations or dispose	THE M PRESEN PENTS O SIS IN T HE NATU	USEUM AS IT AND FU F AND VIS THE CITY, JRAL HABI	SPIRES TO TURE INC SITORS TO TO ENJOY	BE THE IDENT 1 THE A HEALT HE PAR	E LEADER IN TO THE WHOLE, REA THE THY EXERCISE ON K
Activities &					5% OLIES I		
<u> </u>		er of voting members of the governing body (Part VI, line 1a)		.	3	19	
4.		er of independent voting members of the governing body (Part VI, lin		• •	4	19	
		number of individuals employed in calendar year 2012 (Part V, line 2	•			5	122
		number of volunteers (estimate if necessary)			· ·	6	115
		unrelated business revenue from Part VIII, column (C), line 12				7a	2,945
	D Net u	illerated business taxable illcome from Form 990-1, life 34	· · ·			7b	-2,166
	8 Cor	ntributions and grants (Part VIII, line 1h)	-	Prio	r Year 6,971,90	77	Current Year 5,057,074
9		gram service revenue (Part VIII, line 2g)	-		571,3		667,447
Rayenue	1	estment income (Part VIII, column (A), lines 3, 4, and 7d)	- F	343,028		_	484,489
ά.		er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e	-	1,064,682			540,281
	1	al revenue—add lines 8 through 11 (must equal Part VIII, column (A	· -				0.0,201
		<u> </u>			8,951,00	0.2	6,749,291
	13 Gra	nts and similar amounts paid (Part IX, column (A), lines 1–3) \cdot				0	0
	1	efits paid to or for members (Part IX, column (A), line 4)				0	0
χ	15 Sala 5-1	aries, other compensation, employee benefits (Part IX, column (A), l	ines		3,926,376		3,947,028
Expenses		fessional fundraising fees (Part IX, column (A), line 11e)	†		3,920,370		
0		I fundraising expenses (Part IX, column (D), line 25) ▶622,188	· · ·				
Ш	1	per expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>		4,792,24	10	4,648,113
		al expenses Add lines 13–17 (must equal Part IX, column (A), line			8,718,6	_	8,595,141
		renue less expenses Subtract line 18 from line 12	· · -		232,3	_	-1,845,850
Net Assets or Fund Balances					of Current ear	_	End of Year
eger Ger	20 Tot	al assets (Part X, line 16)		1	.36,995,7	52	140,116,643
절		al liabilities (Part X, line 26)			15,548,5	27	15,902,608
žĒ		assets or fund balances Subtract line 21 from line 20	<u>. </u>	1	21,447,2	25	124,214,035
Unde my kı	r penalties nowledge an arer has any	gnature Block of perjury, I declare that I have examined this return, including accord belief, it is true, correct, and complete Declaration of preparer (ot knowledge ****** Ignature of officer LLIOT GRUBER PRESIDENT AND CEO		officer) is			
		ype or print name and title					
	1.7	Print/Type preparer's name IAMES M HAGGARD	Date	Che	ck 🗔 ıf	PTIN	
Paid	d	JAMES M HAGGARD Firm's name ► DIXON HUGHES GOODMAN LLP		self-	employed 's EIN 🕨 56-		<u> </u>
	parer	FRANCE F SEAST HOULD GOODFIAN LE					
	Only	Firm's address ► 701 TOWN CENTER DRIVE SUITE 700		Pho	ne no (757)	873-1033	
		NEWDORT NEWS VA 226064205					

FOIIII	Page 2
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission
EXPL ARTI SEA MAR OFFE OAS	MARINERS' MAKES A DIFFERENCE IN PEOPLES' LIVES, INVITING THEM TO DISCOVER THEIR RELATIONSHIP TO THE SEA BY ORING MARITIME CULTURE, SCIENCE AND HISTORY THE MARINERS' MUSEUM IS COMMITTED TO USING ITS ART AND FACTS TO EDUCATE LOCAL, NATIONAL AND INTERNATIONAL AUDIENCES OF ALL AGES ABOUT THE VITAL ROLE OF THE IN MANKIND'S DEVELOPMENT THE MUSEUM ASPIRES TO BE THE LEADER IN PROMOTING AN APPRECIATION OF THE ITIME WORLD - PAST, PRESENT AND FUTURE INCIDENT TO THE WHOLE, THE MARINERS' MUSEUM PARK AND LAKE MAURY RETHER RESIDENTS OF AND VISITORS TO THE AREA THE OPPORTUNITY TO EXPERIENCE THE BEAUTY AND PEACE OF AN IS IN THE CITY, TO ENJOY HEALTHY EXERCISE ON THE NOLAND TRAIL AND TO ENHANCE THEIR APPRECIATION OF THE JRAL HABITAT OF THE PARK
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
3	services?
	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 \$ 5,468,500 including grants of \$) (Revenue \$ 747,093)
	EXHIBITIONS, COLLECTIONS, CONSERVATION, AND MAINTENANCE OF MUSEUM APPROXIMATELY 69,883 SERVED
4b	(Code) (Expenses \$ 329,802 including grants of \$) (Revenue \$ 3,303)
	LIBRARY - COLLECTION AND MAINTENANCE OF CURRENT AND HISTORICAL BOOKS AND PERIODICALS, INFORMATION INQUIRIES ADDRESSED APPROXIMATELY 764 INDIVIDUALS SERVED
	(Code) (Expenses \$ 270,157 including grants of \$) (Revenue \$ 102,304)
	EDUCATION - PROGRAMS WITH SPECIAL STUDENT TOURS APPROXIMATELY 42,214 INDIVIDUALS SERVED
	(Code) (Expenses \$ 139,795 including grants of \$) (Revenue \$ 41,827) PHOTOGRAPHY - COLLECTION AND MAINTENANCE OF CURRENT AND HISTORICAL PHOTOGRAPHS, INFORMATION INQUIRIES ADDRESSED
4d	Other program services (Describe in Schedule O)
	(Expenses \$ 139,795 including grants of \$) (Revenue \$ 41,827)
4e	Total program service expenses ► 6,208,254

art IV	Check	list of	Required	Schedules

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

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization if the United States on Part IX, column (A), line 1° If "Yes," complete Schedule I, Parts I and II	n 21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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</i> "Yes," complete Schedule J	23		No
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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, of disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	2 6		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantia 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</i> "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
L	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes,"	28a		No
U	complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M *	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line $1 \ldots \ldots$	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36	_	No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 193	, ,	Yes	

Par				_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 39		165	NO
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		140
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
	services provided to the payor?	7a 7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	70	165	
-	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
LO	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
L 1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
l2a	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			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

Se	ection 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								
b	Enter the number of voting members included in line 1a, above, who are independent								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No					
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No					
6	Did the organization have members or stockholders?	6		No					
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No					
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		N o					
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		Yes						
	a The governing body?								
	Each committee with authority to act on behalf of the governing body?	8b	Yes						
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No					
Se	<u>even</u> u								
40-	Ded the consequence have been been been been been specificated 2	10-	Yes	No					
	Did the organization have local chapters, branches, or affiliates?	10a		No_					
	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?								
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes						
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	4.5	.,						
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes						
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes						
13	Did the organization have a written whistleblower policy?	13	Yes						
14 	Did the organization have a written document retention and destruction policy?	14	Yes						
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
	The organization's CEO, Executive Director, or top management official	15a	Yes						
Ь	Other officers or key employees of the organization	15b	Yes						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No					
Ь	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							
Se	ection C. Disclosure								
17	List the States with which a copy of this Form 990 is required to be filed ►VA								
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)								

- Own website Another's website V 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶THE OFFICERS 100 MUSEUM DRIVE NEWPORT NEWS, VA (757)591-7701

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

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) (B) (C)								(D)	(E)	
(A) Name and Title	(B) A verage hours per week (list any hours for related	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-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	MISC)	MISC)	organization and related organizations
(1) JOHN R LAWSON II	1 00	Х		х				0	0	0
CHAIRMAN (2) POPERT LEREEMAN IR					_					
(2) ROBERT L FREEMAN JR SECRETARY	1 00	х		х				0	0	0
(3) CHARLES L CABELL	1 00	х						0	0	0
TRUSTEE (4) JOHN T CASTEEN III	1 00									
TRUSTEE		Х						0	0	0
(5) STEVEN BARNUM	1 00	х						0	0	0
TRUSTEE (6) RICHARD F BARRY III	1 00									
TRUSTEE		x						0	0	0
(7) ELIZABETH HARDEN	1 00	х						0	0	0
TRUSTEE (8) DAVID F HOST	1.00									_
TRUSTEE	1 00	х						0	0	0
(9) ANN HUNNICUT	1 00									
TRUSTEE		Х						0	0	0
(10) TERESA SULLIVAN	1 00	, , , , , , , , , , , , , , , , , , ,								
TRUSTEE		Х						0	0	0
(11) SHEPERD W MCKENNEY	1 00	х						0	0	0
TRUSTEE		$\stackrel{}{\vdash}$						0		
(12) MATTHEW J MULHERIN	1 00	x						0	0	0
TRUSTEE (13) VIRGINIA FITZHUGH WILSON	1 00									
	1 00	х						0	0	0
TRUSTEE (14) CHARLES W WORNOM	1 00			<u> </u>	_					
TRUSTEE		х						0	0	0
(15) TIMOTHY J SULLIVAN	1 00	Ţ								2
TRUSTEE		X						0	0	0
(16) ANNE C H CONNER	1 00	x						0	0	0
TRUSTEE					<u> </u>			Ŭ		
(17) JOHN R COOKE	1 00	х						0	0	0
TRUSTEE]									

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not bo tha	checl x, unle n office rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensati from relate organizatio (W- 2/1099	on d ns	(F Estim amount o compen from	ated of other sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	MISC)		organiz and re organiz	lated
(18) CONR	AD HALL	1 00	х						0		0		(
TRUSTEE									ŭ				
(19) RICHA	ARD L MCCLUNEY JR	1 00	l x						o		o		(
TRUSTEE						<u> </u>							
(20) CASSA	ANDRA GREENE	35 00			x				45,701		0		2,468
	RESIDENT & CHIEF EXECUTIVE OFFICER								·				
(21) CHRIS	STOPHER M LEAHY	35 00			x				128,750		0		392
TREASURER		25.00		_	 		1						
(22) MARGI		35 00			х				64,890		0		3,955
ASSISTANT	SECRETARY				 	-							
					 	-							
						-					\dashv		
1b Sub	b-Total				:	<u> </u>	F				T'		
c Tot	tal from continuation sheets to Part	t VII, Section A											
d Tot	tal (add lines 1b and 1c)						►		239,341		0		6,815
	al number of individuals (including t 00,000 of reportable compensation				ed al	bov	e) who	rec	eived more than				
					_							Yes	No
	the organization list any former off					nplo	yee, o	r hig	jhest compensate	d employee	ı		
on I	line 1a? <i>If</i> "Yes," complete Schedule .	for such individ	iuai .	•	•	•	•	•			3		Νo
	any individual listed on line 1a, is t anization and related organizations									om the			
	amzation and related organizations	greater triali \$1	• •		, es	, c •	Jiiipiei •	30			4		No
	any person listed on line 1a receiv	e or accrue com	pensat	ion f	rom	anv	unrel	atec	d organization or in	idividual for		+	.,,,
	vices rendered to the organization?								_		5		No
	_											1	140
Section	on B. Independent Contract	ors											
	mplete this table for your five highes												
com	npensation from the organization Ro		tion fo	the	cale	enda	ryear	enc			ion's T	tax year (C	
	(A) (B) Name and business address Description of services									Comper	-		
											\dashv		
											\dashv		
										_			
	l number of independent contractors 0,000 of compensation from the org		not lim	ited	to th	ose	listed	abo	ove) who received	more than			

Form 99								Page 9
Part V	/ • • •	Statement o	o f Revenue ule O contains a respon	ise to any question i	in this Part VIII			
		Check it Selled	are o contains a respon	se to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
α£	1a	Federated cam	paigns 1a					
ant	ь	Membership du	es 1b	158,981				
5 0	c	Fundraising eve	ents 1c					
ffs, F. A	d	Related organiz	zations 1d					
:ō:≌	e	Government grants		112,887				
Sin		_		4,785,206				
iğ işi	f	similar amounts no	ons, gifts, grants, and 1f ot included above	4,783,206				
멸충	g	Noncash contribute	ons included in lines					
Contributions, Giffs, Grants and Other Similar Amounts	h	Total. Add lines	s 1a-1f		5,057,074			
				Business Code				
E e	2a	ADMISSIONS		900099	307,380	307,380		
e Ke	ь	EDUCATION PROGI	RAM FEES	611710	102,304	102,304		
Program Serwoe Revenue	c	PHOTOGRAPHY	_	900099	41,827	41,827		
	d	MEMBERSHIP DUES	 S	900099	19,289	19,289		
38	e	LIBRARY		900099	3,303	3,303		
<u>ran</u>	f	All other progra	am service revenue	300033	193,344	193,344		
နို		Total Addison	- 3- 36	<u> </u>	·	,		
	g 3		s 2a-2f ome (including dividend		667,447			
		and other simila	ar amounts)	🛌	463,008			463,008
	4		stment of tax-exempt bond p					
	5	Royalties						
		Gross rents	(ı) Real 279,118	(II) Personal				
	6a b	Less rental	0					
	_ c	expenses Rental income	279,118					
		or (loss)	·		270 440			270 440
	d	Net rental incol	me or (loss) (i) Securities		279,118			279,118
	7a	Gross amount		(II) Other				
		from sales of assets other	3,114,005					
	ь	than inventory Less cost or						
	"	other basis and sales expenses	3,092,524					
	С	Gain or (loss)	21,481					
	d	Net gain or (los	s)		21,481			21,481
Δı	8a	Gross income f						
ž		events (not inc \$	idding					
Other Revenue		of contributions See Part IV, lin	reported on line 1c)					
Ģ.		See Falciv, iiii	a					
₽ E	ь	Less direct ex	penses b					
δ	С	Net income or ((loss) from fundraising (events 🛌				
	9a		rom gaming activities					
		See Part IV, lin	a					
	ь	Less direct ex	penses b					
	c	Net income or (ا loss) from gamıng actı\	/ities				
	10a	Gross sales of						
		returns and allo	owances . a	223,295				
	ь	Less cost of go	oods sold b	147,062				
			loss) from sales of inve		76,233	42,150	2,945	31,138
		Miscellaneous	s Revenue	Business Code				
	11a	OTHER INCOM	1E	900099	134,690	134,690		
	Ь	CHRIS CRAFT	REVENUE	900099	36,492	36,492		
	С	PUBLICATION		900099	7,034	7,034		
	d		ue [_	6,714	6,714		
	е	Total. Add lines			184,930			
	12	Total revenue.	See Instructions	· · · · •	6,749,291	894,527	2,945	794,745

Form	990 (2012)				Page 10
	Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns Al	l other organizat	ons must comp	lete column (A)	
	Check if Schedule O contains a response to any question in this Pa	rt IX			<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and				
	key employees	242,161	106,591	70,655	64,915
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	3,088,601	2,303,541	497,050	288,010
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	333,245	241,162	56,802	35,281
10	Payroll taxes	283,021	204,796	48,239	29,986
11	Fees for services (non-employees)				
а	Management				
b	Legal	79,464	69,647	4,934	4,883
C	Accounting	40,576	19,538	10,644	10,394
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 Schedule O)	221,820	124,328	51,349	46,143
12	Advertising and promotion	262,598	234,075	· -	24,751
13	Office expenses	213,924	168,140		18,538
14	Information technology	86,662	38,477	33,703	14,482
15	Royalties	33,032	55,	55,155	1.,.02
16	Occupancy	1,417,864	904,882	491,881	21,101
17	Travel	65,294	37,363	<u> </u>	6,233
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	,	,	,	· · · · · · · · · · · · · · · · · · ·
19	Conferences, conventions, and meetings	36,505	30,446	945	5,114
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,871,915	1,460,094	374,383	37,438
23	Insurance	46,421	32,165	10,947	3,309
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)				
а	OTHER EXPENSES	203,605	136,021	58,186	9,398
b	PHOTOGRAPHY & DIGITAL I	62,757	62,665	82	10
c	EXHIBIT CONSTRUCTION	26,432	26,432		
d	DUES AND LICENSES	12,276	7,891	2,183	2,202
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	8,595,141	6,208,254	1,764,699	622,188
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)				

Part X Balance Sheet

Pa	T X	Check if Schedule O contains a response to any question in the	his Part >	<			
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			4,720,658	1	4,271,554
	2	Savings and temporary cash investments	1,359,283	2	1,385,069		
	3	Pledges and grants receivable, net			3,373,454	3	2,934,940
	4	Accounts receivable, net			12,992	4	12,424
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete & Schedule L		5			
Assets	6	Loans and other receivables from other disqualified persons (section 4958(f)(1)), persons described in section 4958(c)(3 employers and sponsoring organizations of section 501(c)(9) beneficiary organizations (see instructions) Complete Part II	contributing ry employees'		6		
82	7	Notes and loans receivable, net				7	
₹	8	Inventories for sale or use			281,395	8	214,717
	9	Prepaid expenses and deferred charges			100,946	9	63,659
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	64,282,758	,		
	Ь	Less accumulated depreciation	10b	30,925,512	34,762,708	10c	33,357,246
	11	Investments—publicly traded securities			11,462,491	11	13,236,840
	12	Investments—other securities See Part IV, line 11	1,486,362	12	1,399,218		
	13	Investments—program-related See Part IV, line 11			<u> </u>	13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			79,435,463	15	83,240,976
	16	Total assets. Add lines 1 through 15 (must equal line 34).			136,995,752	16	140,116,643
	17	Accounts payable and accrued expenses			550,100	17	442,125
	18	Grants payable			555,755	18	
	19	Deferred revenue			5,370,650	19	5,760,442
	20	Tax-exempt bond liabilities			9,513,381	20	9,600,000
	21	Escrow or custodial account liability Complete Part IV of Sci			0,010,001	21	
lities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqua	tors, tru			21	
室		persons Complete Part II of Schedule L				22	
Liabiliti	23	Secured mortgages and notes payable to unrelated third parti				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to rel and other liabilities not included on lines 17-24) Complete P	ated thir	d parties,		2-4	
		D			114,396	25	100,041
	26	Total liabilities. Add lines 17 through 25		-	15,548,527	26	15,902,608
s es		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	ু and ৹	complete			
аD	27	Unrestricted net assets	39,235,001	27	37,837,404		
- - -	28	Temporarily restricted net assets	2,271,421	28	2,600,644		
돧	29	Permanently restricted net assets			79,940,803	29	83,775,987
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.	here ►	and			
٠ د د	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	_
ASS	32	Retained earnings, endowment, accumulated income, or other				32	
Net	33	Total net assets or fund balances		•	121,447,225	33	124,214,035
Z	34	Total liabilities and net assets/fund balances			136,995,752	34	140,116,643
		· otal maximus and met assets, tama salament		· •	100,000,102	5 1	1 10,1 10,0 10

Pai	Reconcilliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	· ·		• •	
1	Total revenue (must equal Part VIII, column (A), line 12)	₁		6 <i>.</i> 7	749,291
2	Total expenses (must equal Part IX, column (A), line 25)	2			595,141
3	Revenue less expenses Subtract line 2 from line 1	3			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			
5	Net unrealized gains (losses) on investments	5			574,115
6	Donated services and use of facilities	6			1,443
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			37,102
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		124.3	214,035
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. 🔽
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis			1	
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	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	arate			
	Separate basis Consolidated basis Both consolidated and separate basis			1	
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	ın		ii	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	ne	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b	Yes	

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As Filed Data -

DLN: 93493319058653

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

THE MARINERS' MUSEUM

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. ▶ See separate instructions.

Open to Public Inspection

									54-0541		
Par				iblic Charity Sta						instruction	S.
	rganı: —			te foundation becaus							
1	<u>_</u>		•	ion of churches, or a				section 170	(b)(1)(A)(i).	•	
2	<u>_</u>			d in section 170(b)(1							
3				perative hospital se							
4	Γ	hospita	al's name, c	h organization opera [:] ity, and state							
5	Γ	An org	anızatıon op	erated for the benefi	t of a college	or univers	ity owned or	operated by	y a governme	ntal unit des	cribed in
		sect ior	170(b)(1)((A)(iv). (Complete P	art II)						
6	Γ	A fede	ral, state, or	local government o	r government	tal unıt des	cribed in sect	tion 170(b)	(1)(A)(v).		
7		_		at normally receives on 170(b)(1)(A)(vi).		•	s support fron	n a governr	nental unit or	from the ge	neral public
8	Γ	A com	munity trust	: described in sect ioi	170(b)(1)(A)(vi) (Co	mplete Part 1	ΙΙ)			
9	Γ	An org	anızatıon th	at normally receives	(1) more th	an 331/3%	of its support	t from conti	ıbutıons, mer	nbership fee	es, and gross
		receipt	s from activ	rities related to its e	xempt functı	ons—subje	ct to certain (exceptions	, and (2) no m	ore than 33	1/3% of
		ıts sup	port from gr	oss investment inco	me and unre	lated busın	ess taxable ı	ncome (les	s section 511	L tax) from b	ousinesses
		acquire	ed by the org	ganızatıon after June	30,1975 S	ee section	509(a)(2). (0	Complete P	art III)		
10	\sqcap	An org	anızatıon or	ganized and operated	d exclusively	to test for	public safety	See sect i	on 509(a)(4)		
11	Γ	one or the box	more public that descr	ganized and operated ly supported organiz ibes the type of supp b Type II c	ations descr orting organ	ibed in sec ization and	tion 509(a)(1 complete lin	l) or sectio es 11e thro	n 509(a)(2) : ough 11h	See section	509(a)(3). Check
е	Γ	other t		ox, I certify that the ion managers and ot							
f		If the c		received a written d	etermınatıon	from the I	RS that it is a	Type I, Ty	pe II, or Typ	e III suppor	ting organization,
g				2006, has the organ	ızatıon accer	oted any gi	ft or contribut	ion from ar	y of the		,
			ng persons?								
				rectly or indirectly o	•		-	n persons d	escribed in (i		Yes No
		•		governing body of th		_	on?				.g(i)
		• •	•	er of a person descr	• •						g(ii)
				lled entity of a perso						119	g(iii)
h		Provide	e the followi	ng information about	the support	ed organıza	ition(s)				
s) Nam uppoi ganiz		(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is organization col (i) lis your gove docume	ion in ted in rning	(v) Did yo the organ in col (i) suppo	ızatıon of your	(vi) Is organiza col (i) or in the l	ition in ganized	(vii) A mount of monetary support
				instructions))	Yes	No	Yes	No	Yes	No	
											_
Total											

Schedule A (Form 990 or 990-EZ) 2012 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.)

S	ection A. Public Support	tion range to que	and and an and a		ii piodoo coiii	, a, c 1111,	
	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	8,189,607	5,905,428	5,201,802	6,971,907	5,058,517	31,327,261
_	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 5	Total. Add lines 1 through 3 The portion of total contributions	8,189,607	5,905,428	5,201,802	6,971,907	5,058,517	31,327,261
	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						1,727,522
6	(f) Public support. Subtract line 5 from line 4						29,599,739
	ection B. Total Support						
Cale	endar year (or fiscal year	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	beginning in) > A mounts from line 4	8,189,607	5,905,428	5,201,802	6,971,907	5,058,517	31,327,261
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	388,575	671,021	678,769	622,597	742,126	3,103,088
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 IV)	567,584	198,417	122,652	648,068	184,930	1,721,651
11	Total support (Add lines 7 through 10)						36,152,000
	Gross receipts from related activition					12	4,076,209
13	First five years. If the Form 990 is this box and stop here	<u> </u>	<u> </u>				zation, check
14	Public support percentage for 2012			1.1 . column (f))		14	81 880 %
15	Public support percentage for 2011		•	,		15	84 350 %
	33 1/3% support test—2012. If the	-	•	on line 13 and lin	ne 14 is 33 1/30/6 i		
	and stop here. The organization qua	lifies as a publicl	y supported organ	nization			► ✓
	33 1/3% support test—2011. If the box and stop here. The organization 10%-facts-and-circumstances test-is 10% or more, and if the organization meet arganization meet organization.	n qualifies as a pu – 2012. If the orga tion meets the "fa	blicly supported o inization did not c icts-and-circumst	organization heck a box on lind tances" test, che	e 13, 16a, or 16b ck this box and s i	o, and line 14 top here. Explain	► □
ь	organization 10%-facts-and-circumstances test- 15 is 10% or more, and if the organ Explain in Part IV how the organization	ızatıon meets the	facts-and-circu	mstances" test, o	check this box an	d stop here.	·
18	supported organization Private foundation. If the organizations				-	·	° ▶□

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	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						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					<u> </u>
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. 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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

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DLN: 93493319058653

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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

Supplemental Financial Statements

Open to Public

tema	Revenue Service	orm 990. ► See separate instructions.			Inspec	tion
	me of the organization		Emp	loyer ident if icat	ion numbe	er
ПП	E MARINERS' MUSEUM		54-0	0541801		
Pa	rt I Organizations Maintaining Donor A	dvised Funds or Other Similar F			Comple	te if the
	organization answered "Yes" to Form 99		1			
		(a) Donor advised funds		(b) Funds and o	theraccou	unts
•	Total number at end of year					
!	Aggregate contributions to (during year)		+			
3	Aggregate grants from (during year)		1			
ŀ	Aggregate value at end of year					
•	Did the organization inform all donors and donor adv funds are the organization's property, subject to the		or advi	ısed	☐ Yes	┌ No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ber conferring impermissible private benefit?				┌ Yes	┌ No
Pa	rt III Conservation Easements. Complete	ıf the organization answered "Yes" t	o Forn	n 990, Part IV,	, line 7.	
L 2	Purpose(s) of conservation easements held by the o Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held easement on the last day of the tax year	on or education) Preservation of an Preservation of a G	certifie	d historic struct	ure	
				Held at the I	End of the	Year
а	Total number of conservation easements		2a			
ь	Total acreage restricted by conservation easements	5	2b			
c	Number of conservation easements on a certified his	storic structure included in (a)	2c			
d	Number of conservation easements included in (c) a historic structure listed in the National Register	cquired after 8/17/06, and not on a	2d			
3	Number of conservation easements modified, transfe	erred, released, extinguished, or terminate	d by th	ne organization d	uring	
	the tax year ►					
ŀ	Number of states where property subject to conserv	ation easement is located 🗠				
5	Does the organization have a written policy regardin enforcement of the conservation easements it holds		dling of	violations, and	┌ Yes	┌ No
5	Staff and volunteer hours devoted to monitoring, ins	pecting, and enforcing conservation easer	nents c	during the year		
,	Amount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	s durin	g the year		
	▶ \$					
3	Does each conservation easement reported on line 2 and section $170(h)(4)(B)(II)$?	2(d) above satisfy the requirements of sec	tion 17	70(h)(4)(B)(ı)	┌ Yes	┌ No
)	In Part XIII, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation eases	the footnote to the organization's financial				
aı	t III Organizations Maintaining Collection Complete if the organization answered	ons of Art, Historical Treasures,	or Ot	her Similar A	ssets.	
.a	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar as service, provide, in Part XIII, the text of the footnote	5 116 (ASC 958), not to report in its reversets held for public exhibition, education,	or rese	arch in furtherar		
b	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar as service, provide the following amounts relating to the	sets held for public exhibition, education,				lıc
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X			► \$		
2	If the organization received or held works of art, hist following amounts required to be reported under SFA		r finan	cial gain, provid	e the	
а	Revenues included in Form 990, Part VIII, line 1			► \$		

b Assets included in Form 990, Part X

Раг	Organizations Maintaining Co	HECHOIS OF AFT	ι, πis	LOFICE	птеа	sures, or o	une	r Sillillar As	set	5 (COI	<u>ıtınuea)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	rds, ch	neck an	y of the 1	following that a	are a	significant use	e of i	:s	
а	Public exhibition		d	Γ I	oan or e	xchange progr	ams				
b	Scholarly research		e	<u>v</u>	Other Pl	UBLICATIONS	S (BC	OOKS, MOVIE	S		
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and expla	ain hov	w they f	urther th	ne organization	ı's ex	empt purpose	ın		
5	During the year, did the organization solicit							ıılar			
Dat	assets to be sold to raise funds rather than to the sold to raise funds rather than to the sold to the				_			oc" to Form (Y		√ No
4.	Part IV, line 9, or reported an ar					lion answere	u i	es to roilli	, ,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interm	edıary	for cor	itributior	ns or other ass	ets r	not	ΓY	es	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follov	wing tab	le	_					
								Aı	nour	t	
С	Beginning balance					_	1c				
d	Additions during the year					L	1d				
e	Distributions during the year					_	1e				
f	Ending balance					L	1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, lin	e 21?	•					ΓY	es	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anation	has bee	n provided in P	art >	(III			Γ
Pa	rt V Endowment Funds. Complete										
		(a)Current year	(b)	Prior yea		c)Two years back	+	·	(e)F		ars back
1a	Beginning of year balance	11,404,264		11,48		9,021,482	_	7,752,244			0,728,226
Ь	Contributions	829,924		12	0,838	1,795,908	1	1,237			1,158,119
С	Net investment earnings, gains, and losses	1,212,300		11	7,633	1,054,150		1,641,264		-:	2,763,348
d	Grants or scholarships										
e	Other expenditures for facilities and programs	353,435		31	2,344	376,523	3	366,686		:	1,361,719
f	Administrative expenses	9,590			9,219	7,661	1	6,577			9,034
g	End of year balance	13,083,463		11,40	4,264	11,487,356	5	9,021,482			7,752,244
2	Provide the estimated percentage of the cur	rent year end balan	ce (lın	ne 1g, c	olumn (a	a)) held as					
а	Board designated or quasi-endowment ►	64 840 %									
b	Permanent endowment ► 35 160 %										
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
3a	Are there endowment funds not in the posse	ssion of the organiz	ation	that are	e held an	ıd admınıstere	d for	the	_		
	organization by (i) unrelated organizations							3a	-	Yes	No No
	(ii) related organizations						•	3a			No
ь	If "Yes" to 3a(II), are the related organization						٠. ٔ	3			
4	Describe in Part XIII the intended uses of the										
Pai	t VI Land, Buildings, and Equipme	ent. See Form 99	90, Pa								
	Description of property				ost or othe Investmen			(c) Accumulated depreciation	' '	d) Boo	ok value
1a	Land					1,995	,993		\top	1	1,995,993
b	Buildings		•			50,585	,292	23,030,29	94		7,554,998
c	Leasehold improvements							<u> </u>	\top		
d	Equipment					6,183	,502	5,757,96	59		425,533
e	Other	<u> </u>	•			5,517	,971	2,137,24	19	3	3,380,722
	I. Add lines 1a through 1e <i>(Column (d) must e</i>			ımn (B),	line 10(c).)		🕨	floor	33	3,357,246
Tota	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, colu	ımn (B),	line 10(c).)	•	Schedule	 D (Fo		

Investments—Other Securities. See	Form 990, Part X, line 12	<u>′</u> .	
(a) Description of security or category	(b) Book value	(c) Method	of valuation
(including name of security)		Cost or end-of-	year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value		of valuation
(-,	(2,233		year market value
			•
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		
			(b) Book value
(a) Descrip	CIOII		
(a) Descrip			83 240 976
(a) Descrip (1) FUNDS HELD IN TRUST BY OTHERS - SEE SCHEDUL			83,240,976
			83,240,976
			83,240,976
			83,240,976
			83,240,976
			83,240,976
			83,240,976
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			83,240,976
			83,240,976
			83,240,976
			83,240,976
			83,240,976
(1) FUNDS HELD IN TRUST BY OTHERS - SEE SCHEDUL	E O		
(1) FUNDS HELD IN TRUST BY OTHERS - SEE SCHEDUL Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	.)		83,240,976
(1) FUNDS HELD IN TRUST BY OTHERS - SEE SCHEDUL Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X	.)		
(1) FUNDS HELD IN TRUST BY OTHERS - SEE SCHEDUL Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of liability Federal income taxes CHARITABLE GIFT ANNUITIES	.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X (a) Description of liability Federal income taxes	.)		

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	per Retu	rn
1	Total revenue, gains, and other support per audited financial statements	1	11,509,013
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants]	
d	Other (Describe in Part XIII)]	
e	Add lines 2a through 2d	2e	4,759,722
3	Subtract line 2e from line 1	3	6,749,291
4	Amounts included on Form 990, Part VIII, line 12, but not on line $oldsymbol{1}$		
а	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	C
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	6,749,291
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expense	s per Re	urn
1	Total expenses and losses per audited financial statements	1	8,742,203
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	_	
b	Prior year adjustments	_	
C	Other losses		
d	Other (Describe in Part XIII)	<u>:</u>	
e	Add lines 2a through 2d	2e	147,062
3	Subtract line 2e from line 1	3	8,595,141
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)............ 4b		
c	Add lines 4a and 4b	4c	(
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	8,595,141

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part 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

Identifier	Return Reference	Explanation
	PART III, LINE 1A	BEGINNING IN 2008, UNDER THE PROVISION OF SFAS NO 116, THE VALUE OF THE COLLECTION HAS BEEN EXCLUDED FROM THE STATEMENT OF FINANCIAL POSITION ONLY CURRENT YEAR PURCHASES AND PROCEEDS FROM SALE ARE REFLECTED IN THE STATEMENT OF ACTIVITIES IT IS THE POLICY OF THE MUSEUM THAT PROCEEDS FROM THE SALE OF ANY COLLECTION ITEMS ARE TO BE USED FOR THE ACQUISITION OF OBJECTS FOR THE PERMANENT COLLECTIONS OR FOR THE CONSERVATION OF ITEMS CURRENTLY OWNED BY THE MUSEUM EXTERNAL CONSERVATORS
	PART III, LINE 4	THE COLLECTION INCLUDES MARITIME RELATED OBJECTS AND EPHEMERA USED FOR EDUCATIONAL PURPOSES
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE MARINERS' MUSEUM ENDOWMENT (ENDOWMENT) WAS ESTABLISHED TO SUPPORT ITS MISSION THE ENDOWMENT SUBSTANTIALLY CONTRIUBTES TO THE GROWTH, FINANCIAL SECURITY AND THE LONG-TERM STABILITY OF THE MUSEUM
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE MUSEUM IS A NONSTOCK CORPORATION WHICH HAS BEEN DETERMINED BY THE INTERNAL REVENUE SERVICE TO BE EXEMPT FROM TAXES ON INCOME DERIVED FROM ACTIVITIES RELATED TO ITS EXEMPT PURPOSE UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE THE MUSEUM IS SUBJECT TO INCOME TAXES ON PROFITS, IF ANY, GENERATED FROM THE SALE OF ITEMS IN ITS GIFT SHOP WHICH ARE UNRELATED TO ITS EXEMPT PURPOSE THE INTERNAL REVENUE SERVICE HAS ALSO DETERMINED THAT THE MUSEUM IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A)(1) THE MUSEUM HAS DETERMINED THAT IT DOES NOT HAVE ANY MATERIAL UNRECOGNIZED TAX BENEFITS OR OBLIGATIONS AS OF DECEMBER 31, 2012 AND 2011 FISCAL YEARS ENDING ON OR AFTER DECEMBER 31, 2009, REMAIN SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAX AUTHORITIES
PART XI, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD 147,062 DISCOUNT TO NET PRESENT VALUE 49,121 CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS -12,019
PART XII, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD 147,062

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DLN: 93493319058653 OMB No 1545-0047

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

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

Open to Public

	tment of the Treasury al Revenue Service		► Attach to F	Form 990.	See separate	instruc	ctions	i .					Open to P Inspecti		
	of the organization									Emp	oloyer id	lentifica	ation numb	er	
IHE	MARINERS' MUSEUM									54-	05418	01			
Pa	rt I Bond Issues			_						<u> </u>					
										(-) 5	c		On .	(i) I	Pool
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue p	(e) Issue price (f) Description of purpose				(g) De	7		alf of financing		ncing
									Yes	No	Yes	No Y	'es	No	
	ECONOMIC DEVELOPMENT						FINA	NCE ACQUI	ISITION AND						
	AUTHORITY OF LANCASTER COUNTY VIRGINIA	54-6001382		03-14-2012	9,600	,000	CONS	STRUCTION	I OF EXHIBITS		Х		x		Χ
							AND	USS MONII	OR CENTER						
Par	tIII Proceeds				1		Ī	_							
1	A mount of bonds retired				A	<u> </u>		E	3		С			D	
2	Amount of bonds legally defeas	sed													
3	Total proceeds of issue					9,600									
4	Gross proceeds in reserve fund	ls				9,600	,000								
5	Capitalized interest from proce														
6	Proceeds in refunding escrows														
7	Issuance costs from proceeds														
8	Credit enhancement from proce	eeds													
9	Working capital expenditures fr														
10	Capital expenditures from proc				9,600,000										
11	Other spent proceeds					9,000	7,000								
12	O ther unspent proceeds														
13	Year of substantial completion				200	n 7									
					Yes	No.		Yes	l No l	Yes	I 6	lo	Yes	1	No
14	Were the bonds issued as part	of a current refundi	ng issue?		X	- 140		1.03	110		<u> </u>				
15	Were the bonds issued as part		_ _		1	X	,								
16	Has the final allocation of proce	eeds been made?			X										
17	Does the organization maintain	adequate books ar	nd records to supp	ort the final	X										
Dar	allocation of proceeds? TITE Private Business Us														
LGI	TITE FIIVACE DUSINESS US				A	\		E	3		С			D	
					Yes	No	0	Yes	No	Yes	N	lo	Yes		No
1	Was the organization a partner property financed by tax-exem		a member of an Ll	_C, which owned		Х									

Are there any lease arrangements that may result in private business use of bond-

Χ

3a Are thof bon b If "Yes couns proper c Are the finance d If "Yes couns 4 Enter other s 5 Enter unrela (c)(3) 6 Total s 6 Total s 6 Total s 6 Total s 7 Does s 7 Does s 7 Does s 1 1 4 1 9 Has the bonds Regul. Part IV	pere any management or service contracts that may result in private definanced property? s" to line 3a, does the organization routinely engage bond counsel or el to review any management or service contracts relating to the finanty? pere any research agreements that may result in private business used property? s" to line 3c, does the organization routinely engage bond counsel or el to review any research agreements relating to the financed property the percentage of financed property used in a private business use be than a section 501(c)(3) organization or a state or local government the percentage of financed property used in a private business use a sted trade or business activity carried on by your organization, another organization, or a state or local government of lines 4 and 5 the bond issue meet the private security or payment test? There been a sale or disposition of any of the bond financed property to	other outside anced e of bond- other outside ty? y entities s a result of	Yes	A No X X X X X X X X X X X X X X X X X X	Yes B	No %	Yes	C No	Yes	D No
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other unrela (c)(3) 6 Total (c)(3) 7 Does (c) 8a Has the nongon issue (c) b If "Yes (c) 1141 9 Has the bonds Regular Part IV	than a section 501(c)(3) organization or a state or local government the percentage of financed property used in a private business use a ited trade or business activity carried on by your organization, another organization, or a state or local government of lines 4 and 5 the bond issue meet the private security or payment test?	s a result of				%		%		•
unrela (c)(3) 6 Total 7 Does 8a Has th nongo issued b If "Yes 1 141 9 Has th bonds Regula Part IV	ited trade or business activity carried on by your organization, another organization, or a state or local government of lines 4 and 5 the bond issue meet the private security or payment test?			%						%
7 Does 1 8a Has the nongo issue of the second secon	the bond issue meet the private security or payment test?					%		%		0/6
8a Has the nongo issued b If "Yes 1 141 9 Has the bonds Regular Part IV				%		%		%		%
nongo issued b If "Yes c If "Yes 1 141 g Has th bonds Regul	nere been a sale or disposition of any of the bond financed property to			Х						
c If "Yes 1 141 9 Has th bonds Regul	vernmental person other than a 501(c)(3) organization since the bor			х						
1 141 9 Has the bonds Regular Part IV	s" to line 8a, enter the percentage of bond-financed property sold or o	disposed of		%	•	%		%		%
bonds Regul	s" to line 8a, was any remedial action taken pursuant to Regulations : -12 and 1 145-2?									
Part IV	ne organization established written procedures to ensure that all nono of the issue are remediated in accordance with the requirements und ations sections 1 141-12 and 1 145-2?			x						
										1
	Ai biti age	Α			В		С .			
		Yes	No	Yes	No	Yes		No	Yes	No
1 Hastr	ne issuer filed Form 8038-T?		Х							
2 If "No	" to line 1, did the following apply?			I				l .		
a Rebat	e not due yet?		X							
b Excep	tion to rebate?		Х							
c No reb	pate due?		Х							
	checked "No rebate due" in line 2c, provide in Part VI ate the rebate computation was performed			•		l	I .			
3 Is the	bond issue a variable rate issue?		Х							
	ne organization or the governmental issuer entered qualified hedge with respect to the bond issue?		Х							
b Name	of provider									
c Term	of hedge									
d Was th										
e Was a	he hedge superintegrated?									

Pai	t IV Arbitrage (Continued)					_		_	
		Α		В	_	C		D	-
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		x						
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		Х						
7	Has the organization established written procedures to monitor the requirements of section 148?		x						
Pa	rt V Procedures To Undertake Corrective Action			_		_		_	
		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?								
			1 6						
P	Supplemental Information. Complete this part to p	rovide addition	<u>ial informati</u>	on for respor	ises to ques	stions on Sch	edule K (see	e instructions)
	Identifier Return Reference				Explan	ation			

Schedule K (Form 990) 2012

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493319058653

Employer identification number

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

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

Noncash Contributions

► Attach to Form 990. Internal Revenue Service Name of the organization THE MARINERS' MUSEUM

					54-0541801			
Pa	It 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 d noncash contrib	etermı	_	ts
1	Art—Works of art	Х	97	0	APPRAISAL			
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—O ther							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	O ther ► ()							
26	O ther ▶()							
27	O ther ▶()							
28	O ther ► ()							
29	Number of Forms 8283 received for which the organization comple				29			
							Yes	No
30a	During the year, did the organiza							
	must hold for at least three year			on, and which is not require	d to be used			
	for exempt purposes for the enti					30a		No
Ь	If "Yes," describe the arrangem	ent in Part 1	I					
31		Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 Yes						
32a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell	noncash • • •	32a	Yes	
ь	If "Yes," describe in Part II							
33	If the organization did not report	t an amount	in column (c) for a type of	property for which column (a) is checked,			
	describe in Part II				•			

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

number of items received, or a combination of both. Also complete this part for any additional information.				
I dentifier	Return Reference	Explanation		
THIRD PARTY USE	,	FROM TIME TO TIME, THE MUSEUM WILL SEND WORKS OF ART TO AUCTION FOR SALE PROCEEDS FROM THESE SALES ARE RESTRICTED TO FUTURE ACQUISITION OF DBJECTS FOR THE COLLECTION		
NON REPORTING OF REVENUE	, , , , , , , , , , , , , , , , , , ,	BEGINNING IN 2008, UNDER THE PROVISION OF SFAS NO 116, THE VALUE OF THE COLLECTION HAS BEEN EXCLUDED FROM THE STATEMENT OF FINANCIAL POSITION THUS, THE VALUE OF DONATED COLLECTION ITEMS ARE EXCLUDED FROM REVENUE FAIR MARKET VALUES OF THE DONATED WORKS OF ART RECEIVED IN 2012 FOR WHICH THE ORGANIZATION COMPLETED FORMS 8283 ARE APPROXIMATELY \$1,620,000		

Schedule M (Form 990) (2012)

OMB No 1545-0047

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2012

Open to Public Inspection

Name of the organization THE MARINERS' MUSEUM **Employer identification number**

54-0541801

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	A DRAFT COPY OF THE ORGANIZATION'S FORM 990 IS SENT TO EVERY TRUSTEE. THE FINANCE COMMITTEE ASKS QUESTIONS AND PROVIDES REVISIONS TO THE FORM 990 IF APPROVED BY THE FINANCE COMMITTEE, A RECOMMENDATION IS MADE BY THE FINANCE COMMITTEE FOR THE BOARD TO REVIEW THE FORM 990 AND APPROVE ULTIMATELY, THE FULL BOARD WILL APPROVE THE FORM 990 AND THE FORM 990 IS FILED
	FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION'S BOARD REVIEWS THE CONFLICT OF INTEREST POLICY, PROVIDE QUESTIONNAIRES FOR THE BOARD MEMBERS TO REPORT CONFLICTS OF INTEREST, AND REPORT ON ANY FINDINGS OF CONFLICTS OF INTERESTS
	FORM 990, PART VI, SECTION B, LINE 15	THE ORGANIZATION'S BOARD OF TRUSTEES REVIEWS AND APPROVES THE COMPENSATION OF THE TOP MANAGEMENT OFFICIAL AND OFFICERS AND KEY EMPLOYEES OF THE ORGANIZATION
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC FOR REVIEW UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	DISCOUNT TO NET PRESENT VALUE 49,121 CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS -12,019
		FORM 990, PART XII, LINE 2C THERE WERE NO CHANGES TO THE FINANCE COMMITTEE'S PROCEDURES REGARDING THE OVERSIGHT OF THE AUDIT AND SELECTION OF THE INDEPENDENT AUDITORS
OTHER ASSETS - FUNDS HELD IN TRUST BY OTHERS	SCHEDULE D, PART IX	FUNDS HELD IN TRUST BY OTHERS CONSIST PRIMARILY OF IRREVOCABLE TRUSTS ESTABLISHED BY THE MUSEUM FOUNDER, ARCHER M HUNTINGTON, WHO HAS DIRECTED THAT THE ASSETS OF THE TRUSTS BE INVESTED IN PERPETUITY AND THAT THE RELATED INCOME BE PAID TO THE MUSEUM THE MUSEUM RECEIVES INVESTMENT INCOME ON THE SECURITIES HELD BY THE TRUSTS THIS INVESTMENT INCOME IS REPORTED, NET OF EXPENSES REALIZED AND UNREALIZED GAINS AND LOSSES, AS WELL AS ALL OTHER EARNINGS ON THE MARKET VALUE OF FUNDS HELD BY OTHERS, ARE RECORDED AS PERMANENTLY RESTRICTED GAINS AND LOSSES AS OF JANUARY 1, 2002, THE MUSEUM ADOPTED A TOTAL RETURN POLICY WITH RESPECT TO INCOME RECEIVED FROM ITS JP MORGAN CHASE BANK TRUSTS THIS TOTAL RETURN POLICY ALLOWS THE MUSEUM TO RECEIVE INCOME BASED UPON 45% OF THE MOST RECENT THREE-YEAR ROLLING AVERAGE OF THE FAIR MARKET VALUE OF THE TRUSTS THEREFORE, THE INCOME DISTRIBUTION MAY CONSIST OF DIVIDENDS, INTEREST, AND PROCEEDS FROM SECURITIES SALES THE REMAINING TRUSTS DISTRIBUTE INCOME BASED ON DIVIDENDS AND INTEREST ONLY