

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)



		uary 2020)	Do not enter social security numbers on this form	n as it may b	e made public.	Open to Public						
Depar Interna	tment o al Rever	Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.										
A F	or the	e 2019 calend	ar year, or tax year beginning JUL 1, 2019 and	d ending J	UN 30, 2020	-						
B Ch ap	neck if plicabl	C Name of	forganization		D Employer identificat	ion number						
	Addre: chang	e MUSEUM	OF MODERN ART									
	Name chang											
	Initial return Final return/	11 Weg										
	termin ated	nin-										
	Ameno return	ded New Vo	rk, NY 10019		H(a) Is this a group retur	'n						
	Applic tion	^{a-} F Name a	nd address of principal officer: Glenn Lowry		for subordinates?							
	pendir	na	C above		H(b) Are all subordinates includ							
I Ta	ax-exe	empt status:	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1)) or 527	If "No," attach a list	. (see instructions)						
		te: 🕨 www.mo			H(c) Group exemption n	umber 🕨						
K Fo	orm of	f organization:	X Corporation Trust Association Other ►	L Year	· · · · · · · · · · · · · · · · · · ·	tate of legal domicile: NY						
	rt I	Summary				<u>v</u>						
	1	Briefly describ	e the organization's mission or most significant activities: The Mu	useum of 1	Modern Art							
e			s, preserves, and documents a (Continued in Sched									
Governance	2	Check this bo	x if the organization discontinued its operations or dispo	sed of more	than 25% of its net assets	5.						
Ver					3	52						
			lependent voting members of the governing body (Part VI, line 1b)			52						
8			of individuals employed in calendar year 2019 (Part V, line 2a)			1365						
itië			of volunteers (estimate if necessary)			270						
Activities &			d business revenue from Part VIII, column (C), line 12			4,342,409.						
Ă			business taxable income from Form 990-T, line 39			930,322.						
					Prior Year	Current Year						
	8	Contributions	and grants (Part VIII, line 1h)		244,100,473.	166,781,071.						
Ine			ce revenue (Part VIII, line 2g)		30,295,827.	14,199,882.						
Revenue		•	come (Part VIII, column (A), lines 3, 4, and 7d)		139,692,226.	53,022,689.						
۳,			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		29,894,119.	28,140,940.						
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		443,982,645.	262,144,582.						
			nilar amounts paid (Part IX, column (A), lines 1-3)		1,649,705.	1,995,123.						
			to or for members (Part IX, column (A), line 4)		0.	0.						
<u> </u>			r compensation, employee benefits (Part IX, column (A), lines 5-10)		107,416,732.	112,087,852.						
Expenses			undraising fees (Part IX, column (A), line 11e)		0.	0.						
ben			ing expenses (Part IX, column (D), line 25)									
Щ			es (Part IX, column (A), lines 11a-11d, 11f-24e)		157,489,922.	156,628,749.						
			s. Add lines 13-17 (must equal Part IX, column (A), line 25)		266,556,359.	270,711,724.						
			expenses. Subtract line 18 from line 12		177,426,286.	-8,567,142.						
논怨					ginning of Current Year	End of Year						
ets (anci	20	Total assets (F	Part X, line 16)		2,359,955,416.	2,331,703,503.						
Net Assets or Fund Balances			(Part X, line 26)		477,186,173.	478,381,326.						
Net , und			fund balances. Subtract line 21 from line 20		1,882,769,243.	1,853,322,177.						
Pa	rt II	Signature			_,,, •	_,,-,-,-,						
		-	I declare that I have examined this return, including accompanying schedule	es and statem	ents and to the hest of my kn	owledge and helief it is						
			. Declaration of preparer (other than officer) is based on all information of w			omougo una bonoi, it 13						
uu0,												

Sign	Signature of officer									
Here	James Gara, COO/Assistant Treasur									
	Type or print name and title									
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN					
Paid	Daniel Romano	-	5/12/2021	P00504182						
Preparer	Firm's name GRANT THORNTON LLP		Firm	s EIN 🕨 36	-6055558					
Use Only	Firm's address 🕨 757 Third Avenue, 3rd Fl	oor								
	New York, NY 10017-2013 Phone no. (212) 55									
May the If	RS discuss this return with the preparer shown abov	ve? (see instructions)			X Yes	No				
					000					

932001 01-20-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. See Schedule O for Organization Mission Statement Continuation

Form	1990 (2019) MUSEUM OF MODERN ART	13-1624100 Pag	_{ge} 2
	rt III Statement of Program Service Accomplishments		<u> </u>
	Check if Schedule O contains a response or note to any line in this Part III		Х
1	Briefly describe the organization's mission:		
	The Museum of Modern Art is a private, nonprofit educational		
	institution chartered by the Department of Education of the state of		
	New York in 1929 to foster public awareness of modern and contemporary		
	art. Continued in Schedule O.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes X	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 X	No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as m	• •	
	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	
4a	revenue, if any, for each program service reported. (Code:) (Expenses \$140,264,597including grants of \$1,995,123) (Revenue)	e\$ 35,489,76	7)
40	(Code:) (Expenses \$140,264,597. including grants of \$1,995,123.) (Revenue Museum Operations - Curatorial and curatorial support departments	35	<u>, </u>
	include conservation, education, exhibitions, creative, publications,		
	library and archives. The Museum was founded in 1929 as an educational		
	institution and maintains a vast breadth of educational programming,		
	which increased in the years after the opening of the renovated and		
	expanded main facility in 2004. In FY 2020, through diverse education		
	programs, approximately 1.3 million onsite visitors to MoMA had access		
	to or participated in interpretative programs to support their learning		
	in the galleries including labels, audio content (offered in nine		
	languages), gallery tours, interactive spaces, workshops, visual		
	description tours for the blind and partially sighted, and resources		
	for other individuals with special needs. Continued in Schedule O.		
4b	(Code:) (Expenses \$13,488,393. including grants of \$) (Revenue	e\$5,631,04	<u>8.</u>)
	In FY 2020, over 1,200 works were added to this collection, both by		
	donation and by purchase.		
4c	(Code:) (Expenses \$42,021,981. including grants of \$) (Revenue	e \$	<u>0.</u>)
	Security, operations, and maintenance of exhibition galleries and art		
	collection.		
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses > 195,774,971.	, 	
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MUSEUM OF MODERN ART

Pa	t IV Checklist of Required Schedules			9-
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
-	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
U		3		x
4	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
-		4	х	
-	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		x
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	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		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
	Schedule D, Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
U	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
15		15		x
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	10		x
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
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	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		v	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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? If "Yes." complete Schedule I. Parts I and II	21	Х	
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Pa	t IV Checklist of Required Schedules (continued)			age -
	continuea)		Yes	No
22	Did the exception report more than \$5,000 of grants or other exciptions to ar for demostic individuals on		162	NO
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			x
~~	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
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? If "Yes," complete		v	
	Schedule J	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? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	Х	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	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		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
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? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior 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		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		x
с	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	x	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part VI	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	х	
Pa				
	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 870			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
с	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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Form	990 (2019) MUSEUM OF MODERN ART 13-16241	00	Р	age 5
Par	t 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 1365	5		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	х	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
ти	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	х	
h	If "Yes," enter the name of the foreign country b United Kingdom	та		
D				
Fa	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	En		x
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>		
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?	<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
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. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-		
11	Section 501(c)(12) organizations. Enter:	-		
a	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
5				
10-	amounts due or received from them.) [11b] Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
		128		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	-		
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15	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?	16		X
	If "Yes," complete Form 4720, Schedule O.			
		Forn	n 990	(2019)

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	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 thro to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.				
	Check if Schedule O contains a response or note to any line in this Part VI				X
Sec	ction A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	52		
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	52		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with any other			
	officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the	direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 99				X
5	Did the organization become aware during the year of a significant diversion of the organization's asse				X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or app	point one or			
	more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto	ockholders, or			
	persons other than the governing body?		. 7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	by the following:			
а	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach	hed at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		X
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Rev	enue Code.)			
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such cha	pters, 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?	9 11a	Х	
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		12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	o conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye	es," describe			
	in Schedule O how this was done		. 12c	Х	
13	Did the organization have a written whistleblower policy?		13	Х	
14	Did the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review and approval	by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		15a	Х	
b	Other officers or key employees of the organization		15b	Х	
	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	ent with a			
16a	taxable entity during the year?		. 16a		X
16a		ite participation			
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ris participation			
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organiz				
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organiz exempt status with respect to such arrangements?	zation's	16b		
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organiz	zation's	16b		
b Sec	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organiz exempt status with respect to such arrangements?	zation's	16b		
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organiz exempt status with respect to such arrangements? ction C. Disclosure	zation's ',FL,GA,HI,IL,KS		availa	ble
b Sec 17	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organize exempt status with respect to such arrangements? Extion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶AK, AL, AR, AZ, CA, CO, CT Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and for public inspection. Indicate how you made these available. Check all that apply.	zation's ',FL,GA,HI,IL,KS		availa	ble
b Sec 17	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organiz exempt status with respect to such arrangements? Extion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶AK, AL, AR, AZ, CA, CO, CT Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and for public inspection. Indicate how you made these available. Check all that apply.	zation's ',FL,GA,HI,IL,KS		availa	ble
b Sec 17 18	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organiz exempt status with respect to such arrangements? Extion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶AK, AL, AR, AZ, CA, CO, CT Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and for public inspection. Indicate how you made these available. Check all that apply.	zation's , FL , GA , HI , IL , KS d 990-T (Section 501(c on Schedule O)	c)(3)s only)		ble
b Sec 17 18	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organize exempt status with respect to such arrangements? Extion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶AK, AL, AR, AZ, CA, CO, CT Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain of Another's website X Upon request Other (explain of the states of the states of	zation's , FL , GA , HI , IL , KS d 990-T (Section 501(c on Schedule O)	c)(3)s only)		ble
b Sec 17	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organize exempt status with respect to such arrangements? exempt status with respect to such arrangements? Exercise on 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain of Describe on Schedule O whether (and if so, how) the organization made its governing documents, con	zation's , FL , GA , HI , IL , KS d 990-T (Section 501(c on Schedule O) iflict of interest policy,	c)(3)s only)		ble
b Sec 17 18 19	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organizexempt status with respect to such arrangements? Example 1 List the states with which a copy of this Form 990 is required to be filed ►AK, AL, AR, AZ, CA, CO, CT Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain of Describe on Schedule O whether (and if so, how) the organization made its governing documents, constatements available to the public during the tax year.	zation's , FL , GA , HI , IL , KS d 990-T (Section 501(c on Schedule O) iflict of interest policy,	c)(3)s only)		ble
b Sec 17 18 19	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organize exempt status with respect to such arrangements? exempt status with respect to such arrangements? extinct C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶AK, AL, AR, AZ, CA, CO, CT Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain or constatements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's book	zation's , FL , GA , HI , IL , KS d 990-T (Section 501(c on Schedule O) iflict of interest policy,	e)(3)s only) and financ		

Form 990 (2		13-1624100	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Co	mpensated	
	Employees, and Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		X
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
	to this table for all parsons required to be listed. Popert componentian for the calendar year ording a	with or within the organization	'e tax voar

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.

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

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

(A)	(B)		(C)					(D)	(E)	(F)	
Name and title	Average	(do		Pos		۱ than e	ne	Reportable	Reportable Reportable		
	hours per	box	, unles	ss per	son i	s both	n an	compensation	compensation	amount of	
	week		Jer an	ia a a	recio	n/trus	lee)	from	from related	other	
	(list any	irecto						the	organizations	compensation	
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization	
	organizations	ruste	ll trus		/ee	mpen		(00-271033-10130)		and related	
	below	ndividual trustee or director	Institutional trustee	-	Key employee	Highest compensated employee	er			organizations	
	line)	Indivi	Instit	Officer	Key e	Highe	Former				
(1) Glenn D Lowry	40.00										
Director/Ex-Officio Trustee	1.00			х				1,905,602.	0.	945,156.	
(2) James Gara	40.00										
COO/Assistant Treasurer	1.00			х				1,277,900.	0.	115,737.	
(3) Anthony Wai	40.00										
Chief Investment Officer	0.00				х			788,976.	0.	51,166.	
(4) Peter Reed	40.00										
Sr Deputy Dir for Curatorial Affairs	0.00				х			671,977.	0.	89,945.	
(5) Ruth Shapiro	40.00										
Director of Business Development	0.00					X		289,392.	0.	326,931.	
(6) Todd Bishop	40.00										
Sr Deputy Dir of External Affairs	0.00				Х			525,171.	0.	85,962.	
(7) Patty Lipshutz	40.00										
General Counsel/Secretary	1.50			Х				468,585.	0.	94,045.	
(8) Jean Savitsky	40.00										
Dir. Real Estate Expansion	0.00					X		511,222.	0.	49,953.	
(9) Emmanuel Plat	40.00										
Director, Merchandising	0.00					X		500,298.	0.	59,971.	
(10) Thomas Randon	40.00										
General Mgr - Retail	0.00				х			457,892.	0.	41,068.	
(11) Ann Temkin	40.00										
Chief Curator-Painting&Sculpture	0.00				х			391,703.	0.	104,608.	
(12) Christopher Hudson	40.00										
Publisher	0.00					X		378,082.	0.	108,728.	
(13) Ramona Bannayan	40.00							200.050		00 505	
Sr Deputy Dir for Exhibitions	0.00				х			389,258.	0.	83,506.	
(14) Jan Postma	40.00										
Chief Financial Officer	0.00				х			396,927.	0.	72,886.	
(15) Christophe Cherix	40.00										
Chief Curator - Drawings and Prints	0.00				х			387,655.	0.	81,330.	
(16) Odessa Matsubara	40.00										
Chief Human Resources Officer	0.00	<u> </u>			X			381,586.	0.	58,988.	
(17) Rajenda Roy	40.00	•						250.005			
Chief Curator - Film	0.00				X			370,207.	0.	67,545.	
932007 01-20-20				-	-					Form 990 (2019)	

13220511 153424 0176030-000019

2019.05094 MUSEUM OF MODERN ART

Form 990 (2019) MUSEUM OF MODERN ART 13-1624100										0	P	age 8	
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A) (B) (C) (D) (E)												(F)	
Name and title	Average	(de	not o	Pos		۱ than o		Reportable	Reportable		Es	timat	ed
	hours per	box	, unle	ss per	rson i	is both	n an	compensation	compensatio	n	ar	nount	of
	week	offi	cer ar	nd a d	irecto	or/trus	tee)	from	from related	ated othe			
	(list any	ector						the	organization	s	com	pensa	ation
	hours for	or dire				ted		organization	(W-2/1099-MIS	SC)	ft	om th	ne
	related	stee c	trustee			ensa		(W-2/1099-MISC)			org	aniza	tion
	organizations	altrus	inal ti		loyee	e mp					an	d relat	ted
	below	ndividual trustee or director	Institutional t	Officer	ƙey employee	Highest compensated employee	Former				orga	anizat	ions
(40)	line)	Ind	lnst	Offi	Key	e mi	For						
(18) Nancy Adelson	40.00							204 488				124	272
Deputy General Counsel	0.00		<u> </u>			X		294,488.		0.		134,	,273.
(19) Tunji Adeniji Director of Facilities and Security	40.00				x			201 064				40	EDE
(20) Stuart Comer	40.00		-		^	-		321,964.		0.		42,	,525.
Chief Curator-Media&Performance Art	0.00				x			200 272		٥.		27	210
(21) Martino Stierli					^			309,372.		<u> </u>		37,	,349.
· · · · · · · · · · · · · · · · · · ·	40.00							270 117				10	722
Chief Curator - Arch. and Design (22) Ronald S Lauder	0.00				х	-		278,117.		0.		40,	,733.
	1.00												0
Honorary Chairman/Trustee	0.50	х		X				0.		0.			0.
(23) Robert B Menschel	0.50												
Chairman Emeritus/Life Trustee	0.00	Х		X				0.		0.			0.
(24) Jerry I Speyer	1.00												
Chairman Emeritus/Trustee	0.00	Х		X				0.		0.			0.
(25) Agnes Gund	0.50												
President Emerita/Life Trustee	0.50	Х		X				0.		٥.			٥.
(26) Marie-Josee Kravis	1.00												
President Emeritus/Trustee	0.00	Х		Х				٥.		٥.			0.
1b Subtotal								11,296,374.		٥.	2,700,405.		
c Total from continuation sheets to Part VI								0.		٥.	0.		
d Total (add lines 1b and 1c)								11,296,374.		٥.	2,700,405.		
2 Total number of individuals (including but n							o re	eceived more than \$100,	000 of reportable				
compensation from the organization													244
												Yes	No
3 Did the organization list any former officer,	director, trust	ee, k	key e	empl	oye	e, or	hig	hest compensated empl	oyee on				
line 1a? If "Yes," complete Schedule J for su	uch individual										3		X
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150	-		-						-		4	Х	
5 Did any person listed on line 1a receive or a	,										-		
rendered to the organization? If "Yes." com											5		X
Section B. Independent Contractors	piele Scheduk	50 1	01 31		5613	011 .				····· 1	v		L
1 Complete this table for your five highest cor	mpensated inc	lene	nde	nt co	ontr	actor	rs th	nat received more than \$	100 000 of comr	hensa	tion fro	m	
the organization. Report compensation for t										1011341			
(A)	ine calendar ye		/ IGII	ig w				(B)			(0	<u>יי</u>	
(ح) Name and business	address							رط) Description of s	ervices	С	ompe		n
COLLINS BUILDING SERVICES INC													
24-01 44th Road, Long Island City, N	7 11101							Janitorial Cleanin	a		3	667	733.
MINDSHARE USA, LLC, 16368 COLLECTIONS							-		9		5	,007,	,155.
	2							Nducatiaing			2	770	502
CENTER DRIVE, Chicago, IL 60693							-1	Advertising			2	, , , , ,	,502.
UNIVERSAL PROTECTION SERVICE, LP								a			1	070	F 0 1
P.O. BOX 828854, Philadelphia, PA 193							-	Security			1	,076,	,501.
IMEREX, INC, 666 Third Street South	t⊥UZ,							Advortision			-	007	100
Naples, FL 34102							-	Advertising			1	,007,	,108.
MASTERPIECE INTERNATIONAL LTD								Art Transport				860	3/1
39 Broadway, New York, NY 10006		ot !!:		4 4 4	+ le - c		_	Art Transport	we there			002,	,341.
2 Total number of independent contractors (ir	•	ot IIn	nteo	1 [0]	thos 8		ted	above) who received mo	ore than				
\$100,000 of compensation from the organiz See Part VII, Section A Continu		te			0	5					Fa	990	(2019)
Dee Tart VII, Dection A Continu	LACTON SHEE										rorm	550	(2019)

932008 01-20-20

Part VII Section A. Officers, Directors, Tru	nployees, and Highest (est (Compensated Employe			
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(c	heck	all	that	app	ly)	compensation	compensation	amount of
	per week					e		from the	from related organizations	other compensatior
	(list any	tor				ploye		organization	(W-2/1099-MISC)	from the
	hours for	r direc				ed em		(W-2/1099-MISC)	()	organization
	related	tee or	ustee			ensati		, ,		and related
	organizations	al trus	nal tr		lo yee	dwoo				organizations
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pen sated em ployee	Former			
	line)	pul		0ff	, Ke	Ξ̈́Ξ	For			
(27) Donald B Marron	1.00									,
Pres Emeritus/Trustee thru Dec, 2019 (28) Leon D Black	0.50	X		X				0.	0.	(
Chairman/Trustee	0.00	x		x				0.	0.	(
(29) Ronnie Heyman	5.00	^		^				0.	υ.	
President/Trustee	0.00	x		x				0.	0.	(
(30) Sid R Bass	1.00	A		~	-	-		J.	0.	
Jice Chairman/Trustee	0.00	x		x				0.	0.	(
(31) Mimi Haas	1.00							· ·		
Jice Chairman/Trustee	0.00	x		x				0.	0.	
(32) Marlene Hess	1.00							- •		
/ice Chairman/Trustee	0.00	x		x				0.	0.	
(33) Richard E Salomon	1.00									
/ice Chairman/Treasurer/Trustee	0.00	x		x				0.	Ο.	
(34) Sarah Arison	1.00									
Trustee	0.00	х						0.	Ο.	
(35) Lawrence B Benenson	1.00									
frustee	0.00	х						0.	Ο.	
(36) David Booth	1.00									
frustee	0.00	х						0.	Ο.	
(37) Clarissa Alcock Bronfman	1.00									
Irustee	0.00	х						٥.	0.	
(38) Patricia Phelps de Cisneros	1.00									
Trustee	0.00	х						0.	0.	
(39) Edith Cooper	1.00									
Trustee	0.00	х						0.	0.	
(40) Paula Crown	1.00									
Trustee	0.00	Х						0.	0.	
(41) Steven Cohen	1.00									
frustee	0.00	х						0.	0.	
(42) David Dechman	1.00									
Irustee	0.00	х						0.	0.	
(43) Anne Dias Griffin	1.00									
Trustee	0.00	X						0.	0.	
(44) Glenn Dubin	1.00									
Trustee	0.00	Х			-	-		0.	0.	
(45) Lonti Ebers	1.00									
Trustee	0.00	X						0.	0.	
(46) Joel S Ehrenkranz	1.00								_	
Irustee	0.00	Х						0.	0.	

04-01-19

Part VII Section A. Officers, Directors,	nployees, and Highest (est (Compensated Employe			
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(c	heck	all	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week (list any	or				Highest com pen sated em ployee		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direct				d em		(W-2/1099-MISC)	(W 2/1000 MICO)	organization
	related	tee or	istee			en sate				and related
	organizations	trust	nal tru		oyee	ompe				organizations
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	hest c	Former			
	line)	pul	lus	0ff	Key	Ηġ	For			
(47) John Elkann	1.00									
Irustee	0.00	Х						0.	0.	
(48) Laurence D Fink	1.00	x						0.	0.	
Irustee (49) Glenn Fuhrman	1.00	~						· · ·	υ.	
rustee	0.00	x						0.	0.	
(50) Kathleen Fuld	1.00	^						0.	υ.	
Trustee	0.00	x						0.	0.	
(51) AC Hudgins	1.00							`` •		
Trustee	0.00	x						0.	0.	
(52) Barbara Jakobson	1.00									
Irustee	0.00	x						0.	Ο.	
(53) Werner H Kramarsky	0.50									
Frustee thru August, 2019	0.00	х						0.	Ο.	
(54) Jill Kraus	1.00									
Trustee	0.00	х						0.	Ο.	
(55) Khalil Gibran Muhammad	1.00									
Irustee	0.00	х						٥.	0.	
(56) Philip S Niarchos	1.00									
Trustee	0.00	Х						0.	0.	
(57) James G Niven	1.00									
Trustee	0.00	Х						0.	0.	
(58) Peter Norton	1.00									
Trustee	0.00	Х						0.	0.	
(59) Daniel S Och	1.00									
frustee	0.00	х						0.	0.	
(60) Maja Oeri	1.00									
Irustee	0.00	Х						0.	0.	
(61) Eyal Ofer	1.00								0	
Trustee as of October, 2019	0.00	X						0.	0.	
(62) Michael S Ovitz Frustee	1.00	x						0.	0.	
(63) Sharon Percy Rockefeller	1.00	^	-			-		· · ·	0.	
Trustee	0.00	x						0.	0.	
(64) Emily Rauh Pulitzer	1.00	A	-		-	-		<u> </u>	υ.	
Trustee	0.00	x						0.	0.	
(65) Richard Roth	1.00							<u>.</u>		
Frustee as of June, 2020	0.00	x						0.	0.	
(66) Anna Marie Shapiro	1.00							· · ·	••	
rustee	0.00	x						0.	0.	

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Part VII Section A. Officers, Directors	est (t Compensated Employees (continued)								
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(cl	heck	(all i	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week (list any	or				ployer		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direct				ed em		(W-2/1099-MISC)	(112/1000 11100)	organization
	related	tee or	istee			en sate				and related
	organizations	I trus	nal tri		oyee	om pe				organizations
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pen sated em ployee	Former			
	line)	Ind	lus	0#U	Key	Hig	For			
(67) Anna Deavere Smith	1.00									
Trustee	0.00	X						0.	0.	0
(68) Jon Stryker Frustee	0.00	x						0.	0.	0
(69) Daniel Sundheim	1.00	Λ						0.	0.	0
Frustee	0.00	x						0.	0.	0
(70) Tony Tamer	1.00								```	
Trustee	0.00	x						0.	0.	0
(71) Steve Tananbaum	1.00									
Trustee	0.00	х						0.	0.	٥
(71) Xin Zhang	1.00									
frustee	0.00	х						٥.	0.	C
(72) Alice M Tisch	1.00									
frustee	0.00	х						0.	0.	0
(73) Gary Winnick	1.00									
Trustee	0.00	Х						0.	0.	0
(75) Edgar Wachenheim III	1.00									
Irustee	0.00	х						0.	0.	0
(76) Eli Broad	0.50									
Life Trustee (77) Douglas S Cramer	0.00	X						0.	0.	0
Life Trustee	0.00	x						0.	0.	
(78) Howard Gardner	0.50	^				-		<u>0.</u>	0.	0
Life Trustee	0.00	x						0.	0.	C
(79) David Rockefeller Jr	0.50									
Life Trustee	0.00	x						0.	0.	0
(80) Jeanne C Thayer	0.50									
Life Trustee	0.00	x						0.	0.	C
(81) Wallis Annenberg	0.50									
Life Trustee	0.00	х						0.	0.	C
(82) June Noble Larkin	0.50									
Life Trustee	0.00	х						0.	0.	0
		-								
						<u> </u>				
		I								

932201 04-01-19

ar	t VIII	Statement of Re	venu	le						
		Check if Schedule O o	<u>conta</u>	ins a respo	onse	or note to any line	e in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue exclue from tax und sections 512 -
ţs	1 a	Federated campaigns		1a						
n	b	Membership dues		1b		1,129,826.				
Ĕ	с	Fundraising events		1c		6,697,328.				
ar /	d	Related organizations		1d						
E	е	Government grants (contr	ibutic	ons) 1e		49,965.				
and Other Similar Amounts	f	All other contributions, gifts,	grants	s, and						
Ę		similar amounts not included	above			158,903,952.				
p	g	Noncash contributions included in				25,017,357.	1.55 804 084			
a	h	Total. Add lines 1a-1f					166,781,071.			
	_) de la calance				Business Code	12 260 024	12 260 024		
	2 a	Admissions				712100 712100	13,260,934.		272 525	
Program Service Revenue	b	Other Programs				/12100	938,948.	005,425.	273,525.	
ven	C A									
Re	d e									
		All other program service	reven	ue						
		Total. Add lines 2a-2f					14,199,882.			
	3	Investment income (includ					· ·			
		other similar amounts)	•				16,667,961.		491,496.	16,176,4
	4	Income from investment of								
	5	Royalties	. <u></u>	<u></u>		>	31,300.	31,300.		
				(i) Rea		(ii) Personal				
	6 a	Gross rents	6a	608,	542.					
	b	Less: rental expenses \dots	6b		0.					
	с	Rental income or (loss)	6c	608,	542.					
		Net rental income or (loss))	(i) O			608,642.			608,6
	7 a	Gross amount from sales of		(i) Securi		(ii) Other				
		assets other than inventory	7a 4	98,719,	500.	5,631,048.				
,	D	Less: cost or other basis	71.	67 995	320	0				
	•	and sales expenses Gain or (loss)		67,995, 30 723		5,631,048.				
		Net gain or (loss)					36,354,728.	5,631,048.	444,029.	30,279,6
5		Gross income from fundraisi			······		,,	-,,		,,-
	0 4	including \$ 6,6								
		contributions reported on								
		Part IV, line 18		-	8a	195,470.				
	b	Less: direct expenses			8b	276,057.				
	с	Net income or (loss) from	fundr	aising eve	nts	►	-80,587.			-80,5
	9 a	Gross income from gamin	-)					
		Part IV, line 19			9a					
		Less: direct expenses			9b					
		Net income or (loss) from			s	▶				
	10 a	Gross sales of inventory, I				51 204 120				
	•	and allowances				51,284,130. 26,618,661.				
		Less: cost of goods sold				10,010,001.	24,665,469.	21,532,110.	3,133,359.	
+	C	Net income or (loss) from	3a185	or invento	ıy	Business Code	,000,400.	,002,110.	2,100,000.	
	11 a	Tax Refunds				930000	2,167,188.			2,167,1
nue	b	Museum Restaurants				722310	748,928.			748,9
Revenue	c						, -			,
Å		All other revenue								
						►	2,916,116.			
	12	Total revenue. See instruction					262,144,582.	41,120,815.	4,342,409.	49,900,2

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Form 990 (2019) MUSEUM OF MODERN AR MUSEUM OF MODERN ART

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	Check if Schedule O contains a response	se or note to any line in t	his Part IX		
	not include amounts reported on lines 6b, 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	1,995,123.	1,995,123.		
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	16,274,213.	3,675,794.	11,832,225.	766,19
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	71,901,064.	56,002,291.	10,177,361.	5,721,41
8	Pension plan accruals and contributions (include	, ,	. ,		
-	section 401(k) and 403(b) employer contributions)	5,635,807.	3,814,382.	1,406,764.	414,66
9	Other employee benefits	15,458,050.	10,462,194.	3,858,511.	1,137,34
10	Payroll taxes	2,818,718.	1,897,172.	702,297.	219,24
11	Fees for services (nonemployees):	, , .	, , .	, <u> </u>	/
a	Management				
b		1,586,203.		1,586,203.	
c		439,136.		439,136.	
		60,000.		60,000.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	10,206,325.		10,206,325.	
f	Investment management fees	10,200,525.		10,200,323.	
g	Other. (If line 11g amount exceeds 10% of line 25,	21 640 027	14 674 010	5 011 000	1 762 17
	column (A) amount, list line 11g expenses on Sch 0.)	21,649,927.	14,674,919. 6,589,113.	5,211,833.	1,763,17
12	Advertising and promotion	7,813,088.		1 000 082	1,223,97
13	Office expenses	16,680,282.	15,122,881.	1,090,083.	467,31
14	Information technology	1,598,184.	006 046	1,598,184.	
15	Royalties	206,346.	206,346.	4 2 4 4 . 0 0 0	
16	Occupancy	12,463,698.	7,828,698.	4,341,000.	294,00
17	Travel	2,285,595.	1,556,769.	265,755.	463,07
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	224,284.	31,942.	192,173.	16
20	Interest	6,616,658.	6,616,658.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	37,183,977.	32,107,977.	5,076,000.	
23	Insurance	2,169,153.	2,085,306.	83,847.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	Art Aquisition	13,488,393.	13,488,393.		
b	Other Pension Costs	11,488,000.	7,775,216.	2,867,540.	845,24
с	Admin & Other Exp	10,076,529.	9,648,841.	322,789.	104,89
d	UBI Tax Expense	89,000.	0.	89,000.	
	All other expenses	303,971.	194,956.	89,695.	19,32
25	Total functional expenses. Add lines 1 through 24e	270,711,724.	195,774,971.	61,496,721.	13,440,03
26	Joint costs. Complete this line only if the organization	. , -	, , ,	, , ,	
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

932010 01-20-20

Check here

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

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932011 01-20-20

	1	Cash - non-interest-bearing			5,771,353.	1	14,083,221.
	2	Savings and temporary cash investments			126,031,862.	2	76,545,907.
	3	Pledges and grants receivable, net			222,869,741.	3	204,650,054.
	4	Accounts receivable, net			6,900,407.	4	6,486,867.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa					
		controlled entity or family member of any of these			0.	5	
	6	Loans and other receivables from other disqualifi	-			_	
	-	under section 4958(f)(1)), and persons described	•		0.	6	
	7	Notes and loans receivable, net			0.	7	
	8	Inventories for sale or use			16,211,975.	. 8	15,618,047.
Į	9			14,143,844.	9	8,329,418.	
		Land, buildings, and equipment: cost or other		, , .	5		
	104	basis. Complete Part VI of Schedule D	102	1,118,331,935.			
	h	Less: accumulated depreciation	392,181,860.	712,078,468.	100	726,150,075.	
	11	Investments - publicly traded securities			741,898,549.	11	727,528,053.
	11 12	Investments - other securities. See Part IV, line 1		481,664,360.	12	520,872,270.	
	13	Investments - program-related. See Part IV, line 1		0.	13	0.	
	13 14		0.	13			
	14 15	Intangible assets	32,384,857.	14	31,439,591.		
	15 16	Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equa	2,359,955,416.	16	2,331,703,503.		
	17		72,656,864.	17	27,935,172.		
	18	Accounts payable and accrued expenses		0.	17	0.	
	10 19	Grants payable			2,285,029.	10 19	1,439,626.
	19 20	Deferred revenue			312,175,081.	20	309,814,453.
	20 21	Tax-exempt bond liabilities	0.	20	0.		
	22	Escrow or custodial account liability. Complete P			۰.	21	•.
1	22	Loans and other payables to any current or former					
		trustee, key employee, creator or founder, substa			0.	22	0.
	23	controlled entity or family member of any of these	-		0.		0.
	23 24	Secured mortgages and notes payable to unrelat			17,800,000.	23 24	32,800,000.
		Unsecured notes and loans payable to unrelated			17,000,000.	24	52,000,000.
1	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	-		72,269,199.	25	106,392,075.
	26	of Schedule D		·····	477,186,173.	25 26	478,381,326.
ť	20	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check		► X	177,100,173.	20	1,0,001,010;
		and complete lines 27, 28, 32, and 33.	SK HELE				
	07	• • • •			749,751,844.	27	1,101,508,272.
	27	Net assets without donor restrictions			1,133,017,399.	27	751,813,905.
1	28	Net assets with donor restrictions			1,133,017,333.	20	,51,015,505.
		Organizations that do not follow FASB ASC 95					
	~~	and complete lines 29 through 33.				00	
	29 20	Capital stock or trust principal, or current funds				29	
	30	Paid-in or capital surplus, or land, building, or equ				30	
	31	Retained earnings, endowment, accumulated inc			1,882,769,243.	31	1 852 200 177
	32	Total net assets or fund balances			2,359,955,416.	32 33	1,853,322,177. 2,331,703,503.
	33						

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

(B) End of year

(A) Beginning of year

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Form 990 (2019) Part X Balance Sheet

Form	990 (2019) MUSEUM OF MODERN ART	13-1624100		Pad	_{ge} 12
	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	262,	144,	582.
2	Total expenses (must equal Part IX, column (A), line 25)	2	270,	711,	724.
3	Revenue less expenses. Subtract line 2 from line 1	3	-8,	567,	142.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,882,	769,	243.
5	Net unrealized gains (losses) on investments	5	4,	352,	299.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-25,	232,	223.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,853,	322,	177.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b	Х	L
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c	Х	L
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		. 3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Голт	ggn /	(0010)

Form **990** (2019)

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SCI	IED	ULE	Α
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Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047	
2019	

Open to Public

Inspection

Employer identification number

		MUSEUM OF MODERN ART	13-1624100
Part	:1	Reason for Public Charity Status (All organizations must complete this part.) See instructions	
The or	gan	ization 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 un	it 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	Х	An organization that normally receives a substantial part of its support from a governmental unit or from the	e 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	and-grant college
		or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of	he college or
_		university:	
10		An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membersh	ip 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	s support from gross investment
		income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organized	anization 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 car	ry out the purposes of one or
		more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 5	09(a)(3). Check the box in
		lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and $$	12g.
а		Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), ty	pically by giving
		the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustee	s 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	n(s), by having
		control or management of the supporting organization vested in the same persons that control or manag	e the supported
	_	organization(s). You must complete Part IV, Sections A and C.	
с		Type III functionally integrated. A supporting organization operated in connection with, and functionall	y integrated with,
		its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.	

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d 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.

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III е functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information													
(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed	(v) Amount of monetary	(vi) Amount of other							
organization		(described of lines 1-10	Yes	No	support (see instructions)	support (see instructions)							
		above (see instructions))	103										
Total													

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 932021 09-25-19 Schedule A (Form 990 or 990-EZ) 2019

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Schedule A (Form 990 or 990-EZ) 2019 MUSEUM OF MODERN ART

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Page **2**

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) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 293,352,283. 283,314,867. 244,100,473. 166,781,071, 1289373283. 301,824,589 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 0 0 0. 0 Ο. 3 The value of services or facilities furnished by a governmental unit to the organization without charge 0 0 0 0 0 0. 301 824 589. 293 352 283. 283 314 867. 244 100 473. 166 781 071. 1289373283. 4 Total. Add lines 1 through 3 The portion of total contributions 5 by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 288,153,958. 1001219325. 6 Public support. Subtract line 5 from line 4 Section B. Total Support <u>(c) 2</u>017 <u>(e) 2019</u> Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (d) 2018 (f) Total 301,824,589. 293,352,283, 283,314,867. 244,100,473. 166,781,071, 1289373283. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, 22,103,647. 17,307,903. 92,274,144. 15,184,334. 17,428,734 20,249,526 and income from similar sources 9 Net income from unrelated business activities, whether or not the 999,201 524,759 3,667,244 310,883, 944.398. 6,446,485. business is regularly carried on **10** Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 4,199,138. 2,678,785. 3,053,993 2,453,768. 2,916,116. 15,301,800. 1403395712. **11 Total support.** Add lines 7 through 10 67,971,409. 12 **12** Gross receipts from related activities, etc. (see instructions) 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) 13 organization, check this box and stop here ► Section C. Computation of Public Support Percentage 71.34 14 14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f) % 15 Public support percentage from 2018 Schedule A, Part II, line 14 73 29 15 % 16a 33 1/3% support test - 2019. 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 ► X b 33 1/3% support test - 2018. 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 17a 10% -facts-and-circumstances test - 2019. 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 b 10% -facts-and-circumstances test - 2018. 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 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

Schedule A (Form 990 or 990-EZ) 2019

932022 09-25-19

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

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(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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 201	9 (f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 201	9 (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	s first, second, thi	rd, fourth, or fifth t	ax year as a section	n 501(c)(3) or	ganization,
						>
Section C. Computation of Publi	c Support Per	rcentage				
15 Public support percentage for 2019 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	%
16 Public support percentage from 2018					16	%
Section D. Computation of Inves		•				
17 Investment income percentage for 2018 Investment income percentage from 3		'			17 18	<u> </u>
19a 33 1/3% support tests - 2019. If the					· · · ·	
more than 33 1/3%, check this box ar						
b 33 1/3% support tests - 2018. If the						/3%, and
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization						
932023 09-25-19			, , ,			m 990 or 990-EZ) 2019
		18	}	2011		,,

10 05004

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

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

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Schedule A (Form 990 or 990-EZ) 2019

Yes No

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

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			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		100	110
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations	110		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		103	
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	-		
•	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
000			Vaa	Ne
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		Yes	No
•				
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations	•		
			Yes	No
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, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions)		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
_	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	_		
	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	01		
0000	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	0 57	2040
932025	5 09-25-19 Schedule A (Form 9 20	90 OF 99	,∩-⊏∠)	2019

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Schedule A	(Form 990 or 990-EZ) 2019	MUSEUM	OF	MODERN	ARI
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Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Part V 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 1 other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 1 2 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3. 5 5 Depreciation and depletion 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 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 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 3 Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, 4 see instructions). 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 Current Year 1 1 Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1. 2 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 3 Enter greater of line 2 or line 3. 4 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2019

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Pa	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	
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	ne organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
с	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
с	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
-	and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			
e	LAUG00 IIUIII 2013			

Schedule A (Form 990 or 990-EZ) 2019

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Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule A, Part II, Line 10

General Explanation - Other income includes gross income from

fundraising and corporate events and ancillary revenue from the

restaurant operations.

Schedule A (Form 990 or 990-EZ) 2019

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SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

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

2019 Open to Public

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

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

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

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

 Section 501(c)(4), (5), 	or (6) organizations: Complete Part III.
Name of organization	

Name of org	anization			Empl	oyer identification number
	MUSEUM OF 1				13-1624100
Part I-A	Complete if the org	janization is exempt under	section 501(c) o	r is a section 527 org	ganization.
2 Politica3 Volunte	campaign activity expendit er hours for political campai	gn activities		▶\$	
Part I-B	Complete if the org	anization is exempt under		·	
	,	incurred by the organization under		▶\$	
		incurred by organization managers			
3 If the or	ganization incurred a sectio	n 4955 tax, did it file Form 4720 fo	this year?		Yes No
4a Was a d	correction made?				Yes No
	' describe in Part IV.				
Part I-C	Complete if the org	anization is exempt under	section 501(c), e	except section 501(c)	(3).
1 Enter th	e amount directly expended	d by the filing organization for section	on 527 exempt functio	on activities >\$	
2 Enter th	e amount of the filing organ	ization's funds contributed to othe	r organizations for sec	tion 527	
exempt	function activities			> \$	
3 Total ex	empt function expenditures	. Add lines 1 and 2. Enter here and	on Form 1120-POL,		
line 17b)			►\$	
		1120-POL for this year?			Yes No
5 Enter th	e names, addresses and en	nployer identification number (EIN)	of all section 527 polit	ical organizations to which	the filing organization
made p	ayments. For each organiza	tion listed, enter the amount paid fi	rom the filing organiza	tion's funds. Also enter the	amount of political
contribu	utions received that were pre	omptly and directly delivered to a s	eparate political orgar	nization, such as a separate	e segregated fund or a
politica	action committee (PAC). If	additional space is needed, provide	e information in Part IV	Ι.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization

For Paperwork Reduction A	Act Notice, see the Instruction	ons for Form 990 or 990-EZ.	Schedule	C (Form 990 or 990-EZ) 2019
I HA				

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If none, enter -0-.

Schedule C (Form 990	or 99	0-F7) 2	019	MUSEUM	OF	MODERN	ART
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Part II-A Complete if the organizatio	n is exempt under section 501(c)(3) and file	d Form 5768 (ele	ction under
section 501(h)).			
A Check 🕨 🗌 if the filing organization belong	gs to an affiliated group (and list in Part IV each affiliated g	group member's name	, address, EIN,
expenses, and share of exces	s lobbying expenditures).		
B Check if the filing organization check	ed box A and "limited control" provisions apply.		
	oying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence publ	ic opinion (grassroots lobbying)	0.	0.
b Total lobbying expenditures to influence a leg	jislative body (direct lobbying)	60,000.	0.
c Total lobbying expenditures (add lines 1a and	i 1b)	60,000.	0.
		198,029,627.	0.
e Total exempt purpose expenditures (add lines	F	198,089,627.	0.
f Lobbying nontaxable amount. Enter the amou		1,000,000.	0.
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25% of	line 1f)	250,000.	0.
h Subtract line 1g from line 1a. If zero or less, e	,	0.	
i Subtract line 1f from line 1c. If zero or less, er		0.	
	r line 1h or line 1i, did the organization file Form 4720		
-	, ,		Yes No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)(a) 2016(b) 2017(c) 2018(d) 2019							
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.		
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					6,000,000.		
c Total lobbying expenditures	60,000.	60,000.	60,000.	60,000.	240,000.		
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.		
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.		
f Grassroots lobbying expenditures							

Schedule C (Form 990 or 990-EZ) 2019

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
of the lobbying activity.	Yes	No	Amo	ount
 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? 				
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).			Yes	Νο
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered " answered "Yes."	No" OR (I	b) Part I		3, is
1 Dues, assessments and similar amounts from members		. 1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	al			
a Current year		. 2 a		
b Carryover from last year				
c Total				
		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po				
expenditure next year?		. 4		
5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information		5		
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list): Part II-A	lines 1 a	nd 2 (see	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990 or 990-EZ) 2019

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SCHEDULE D

Department of the Treasury

Internal Revenue Service

(Form	990)
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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.



Nam	e of the organization MUSEUM OF MODERN ART		Em	ployer identification number
Pa		Funds or Other Similar Funds or	<u>Δοροιι</u>	13-1624100
Pa			ACCOUL	Lo. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	(a) Donor advised funds	(b) Eur	nds and other accounts
	Tatal mumber at and after an		(6) 1 01	
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	witing that the apparts hold in denor advised t	undo	
5	Did the organization inform all donors and donor advisors in v	-		
6	are the organization's property, subject to the organization's e			Yes No
6	Did the organization inform all grantees, donors, and donor ac			
	for charitable purposes and not for the benefit of the donor or impormissible private benefit?		•	
Pa		anization answered "Yes" on Form 990 Part	IV line 7	
1	Purpose(s) of conservation easements held by the organization		10, 1110 7	•
•	Preservation of land for public use (for example, recreat	· · · · · · · · · · · · · · · · · · ·	istorically	important land area
	Protection of natural habitat	Preservation of a c		
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form of a	conserva	ation easement on the last
~	day of the tax year.			Held at the End of the Tax Year
а			2a	
b				-
c	Number of conservation easements on a certified historic stru			-
d	Number of conservation easements included in (c) acquired a		20	
ŭ	listed in the National Register	-	2d	
3	Number of conservation easements modified, transferred, rele		· · · · · ·	during the tax
•	year >		anzaton	
4	Number of states where property subject to conservation eas	ement is located		
5	Does the organization have a written policy regarding the peri			
-	violations, and enforcement of the conservation easements it			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h			
-		5		5 ,
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conservation	easemen	its during the vear
	► \$	5		5
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?	, 1 ()(Yes No
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footne			
	organization's accounting for conservation easements.	5		
Pa	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Othe	r Simila	r Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statement and	balance s	heet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in furthe	erance of	public
	service, provide in Part XIII the text of the footnote to its finan	cial statements that describes these items.		
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statement and bala	nce sheet	t works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthera	nce of pu	blic service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1		►	\$
			•	\$
2	If the organization received or held works of art, historical trea			e
	the following amounts required to be reported under FASB AS			
а	Revenue included on Form 990, Part VIII, line 1	-	►	\$
b				\$
LHA	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2019
	10-02-19			
		32		

^{2019.05094} MUSEUM OF MODERN ART

Sche	dule D (Form 990) 2019 MUSEUM OF M	IODERN ART						13-162	4100	Р	age 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Hist	torical Tre	asures, or	Other	Similar .	Assets	(contin	ued)	
3	Using the organization's acquisition, accession	on, and other record	ls, chec	k any of the f	ollowing that	make sig	nificant us	se of its	•	,	
	collection items (check all that apply):			-	C C	0					
а	X Public exhibition	c	x x	Loan or exc	hange prograi	m					
b	X Scholarly research	e		1	0 1 0						
с	X Preservation for future generations										
4	Provide a description of the organization's co	lections and explain	n how t	hev further th	e organization	n's exemi	ot purpose	e in Part	XIII.		
5	During the year, did the organization solicit o										
•	to be sold to raise funds rather than to be ma								Yes	X	No
Par	t IV Escrow and Custodial Arran							Part IV I			
	reported an amount on Form 990, Par			le organizatio	in anowered		0111 000,	r arc rv, r	110 0, 01		
10	Is the organization an agent, trustee, custodi		liany for	contribution	or other ass	ats not in	cluded				
Id									Yes		No
h	on Form 990, Part X?							∟			
D	If "Yes," explain the arrangement in Part XIII	and complete the to	llowing	table:					A		
									Amount		
	Beginning balance						1c				
	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1 f		1		
	Did the organization include an amount on Fe						y?	∟	Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Par	t V Endowment Funds. Complete i		1			, 					
		(a) Current year		Prior year	(c) Two years		d) Three ye		(e) Four	-	
1a	Beginning of year balance	1,198,064,000.					784,32		605,		
b	Contributions	131,036,416.		7,675,000.			251,80	8,000.	254,		
С							-30,	-30,458,000.			
d	Grants or scholarships			0.		0.		0.			0.
е	Other expenditures for facilities										
	and programs	453,623,543.	92	2,237,000.	82,404	,000.	36,33	4,000.	45,	573,	000.
f	Administrative expenses			0.		0.		0.			0.
g	End of year balance	891,045,788.	1,198	3,064,000.	1,075,718	,000.1	,038,90	7,000.	784,	321,	000.
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1	g, column (a)) held as:						
а	Board designated or quasi-endowment	16.00	%								
b	Permanent endowment > 53.00	%									
с	Term endowment 31.00	%									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
3a	Are there endowment funds not in the posse	•	ation th	at are held ar	nd administere	ed for the	organizat	ion			
	by:								Г	Yes	No
	(i) Unrelated organizations								3a(i)		X
	(ii) Related organizations								3a(ii)		x
h	If "Yes" on line 3a(ii), are the related organizations								3b		
1	Describe in Part XIII the intended uses of the								50		Ĺ
Par	t VI Land, Buildings, and Equipm		witterit	iunus.							
	Complete if the organization answere		Dort I	V line 112 S	oo Eorm 000	Dart V li	no 10				
								.			
	Description of property	(a) Cost or o basis (investr		• •	or other	. ,	cumulated reciation	1	(d) Book	valu	е
			nenių		(other)	uepi	GOIALIOIT		0.0	100	016
	Land				<u>,499,946.</u>	2.0		E 0		-	946.
	Buildings				<u>,224,980.</u>		8,055,7		501,	,	
	Leasehold improvements				,752,020.		2,178,8			,	173.
d	Equipment				,242,556.	6	1,947,2	55.	119,		
	Other				,612,433.						433.
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	<u>X. colu</u>	<u>mn (B), line 1</u>	0c.)				726,		
							S	chedule	D (Form	990)	2019

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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) Private Equity Securities	296,683,020.	End-of-Year Market Value				
(B) Credit Securities	94,109,820.	End-of-Year Market Value				
(C) Multi-Strat & Other	123,345,110.	End-of-Year Market Value				
(D) Event Driven Securities	392,390.	End-of-Year Market Value				
(E) Real Estate Securities	6,341,930.	End-of-Year Market Value				
(F)						
(G)						
(H)						
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	520,872,270.					

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 of 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 2	25.
1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Pension and post retirement benefits	106,392,075.
(3)	
(4)	

(6) (7) (8) (9) 106,392,075. 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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

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(5)

Schedul	e D (Form 990) 2019 MUSEUM OF MODERN ART		13-1624100 Page 4
Part >	I Reconciliation of Revenue per Audited Financial Statemer	nts With Revenue per Re	eturn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 To	tal revenue, gains, and other support per audited financial statements		1
2 Ar	nounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Ne	et unrealized gains (losses) on investments	2a	
b Do	onated services and use of facilities	2b	
c Re	ecoveries of prior year grants	2c	
d O	her (Describe in Part XIII.)	2d	
e Ad	dd lines 2a through 2d		2e
3 Si	ubtract line 2e from line 1		3
4 Ar	nounts included on Form 990, Part VIII, line 12, but not on line 1:		
a In	vestment expenses not included on Form 990, Part VIII, line 7b	4a	
b Of	her (Describe in Part XIII.)	4b	
c Ad	d lines 4a and 4b		4c
5 To	tal revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5
Part X	KII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses per	Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 To	tal expenses and losses per audited financial statements		1
2 Ar	nounts included on line 1 but not on Form 990, Part IX, line 25:		
a Do	onated services and use of facilities	2a	
b Pr	ior year adjustments	2b	
c Of	her losses	2c	
d Of	her (Describe in Part XIII.)	2d	
e Ad	d lines 2a through 2d		2e
3 Si	ubtract line 2e from line 1		3
	nounts included on Form 990, Part IX, line 25, but not on line 1:		
a In	vestment expenses not included on Form 990, Part VIII, line 7b	4a	
b O	her (Describe in Part XIII.)	4b	
c Ad	dd lines 4a and 4b		4c
5 To	tal expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)		5
Part >	KIII Supplemental Information.		
Provide	the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I	V, 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 addit	ional information.	

Schedule D, Part III, Line 1

The Museum's collections, acquired through purchase and contributions	, are
---	-------

not recognized as assets on the consolidated statements of financial

position. Purchases of collection items are recorded in the year in which

the items were acquired as decreases in unrestricted net assets.

Contributed collection items are not reflected in the consolidated

financial statements. Proceeds from deaccessions, which are reflected as

increases in temporarily restricted net assets, are primarily used to

acquire other items for the collection and care of the collection.

Schedule D, Part III, Line 4

The museum is chartered as an educational institution whose collection of

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Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 MUSEUM OF MODERN ART	13-1624100	Page 5
Part XIII Supplemental Information (continued)		
modern and contemporary art is made available to its members and the		
public to encourage an ever-deeper understanding and enjoyment of such art		
by the diverse local, national, and international audiences that it		
serves. In pursuit of this goal, the museum has collected over 200,000		
works of painting, sculpture, drawing, printmaking, photography, film,		
performance, media, architecture, and industrial and graphic design.		
Through the leadership of its board of trustees and staff, the museum		
strives to establish, reserve, and document a permanent collection of the		
highest order that reflects the vitality, complexity and unfolding		
patterns of modern and contemporary art; present exhibitions and		
educational programs of unparalleled significance; sustain a library,		
archives and conservation laboratory that are recognized as international		
centers of research; and support scholarship and publications of		
preeminent intellectual merit.		
Schedule D, Part V, Line 4		
Line 4 The Museum's endowment funds consist of approximately 175		
individual funds established for a variety of purposes, including art		
acquisitions, exhibitions, publications, educational and operating		
support. Its endowment includes both donor restricted endowment funds and		
funds designated by the Board to function as endowments. As required by		
Generally Accepted Accounting Principles, net assets associated with		
endowments funds, including funds designated by the board to function as		
endowments, are classified and reported based on the existence or absence		
of donor-imposed restrictions. The long term focus of the Museum's		
investment portfolio is to support the Museum's mission by providing a		
reliable source of funds for current and future use. The value of the		
museum's investments have and will fluctuate in response to changing		
	Schedule D (Form	n 990) 2019

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market conditions.

Schedule D (Form 990) 2019

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

0

Totals (add lines 3a

and 3b)

С

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Statement of Activities Outside the United States

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

Attach to Form 990.

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

Inspection Employer identification number MUSEUM OF MODERN ART 13-1624100 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the 2 United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) (b) Number of (c) Number of (d) Activities conducted in the region (f) Total (a) Region employees, agents, and expenditures offices (by type) (such as, fundraising, prois a program service, for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region Central America and the Caribbean Investments .27,800,572. Europe (Including Iceland & Greenland) 4,326,702. Investments 0 0 32,127,274. 3 a Subtotal **b** Total from continuation 0 0 Ο. sheets to Part I

01760301

32,127,274.

Schedule F (Form 990) 2019



SCHEDULE F (Form 990)

Name of the organization

Department of the Treasury
nternal Revenue Service

3 Enter total number of other organizations or entities

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

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

Schedule F (Form 990) 2019

1

(a) Name

MUSEUM OF MODERN ART

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Page 2

Schedule F (Form 990) 2019

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(f) Amount of

noncash assistance (g) Description of

noncash assistance

(e) Manner of

cash disbursement

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

(c) Number of

recipients

(d) Amount of

cash grant

Part III can be duplicated if additional space is needed.

MUSEUM OF MODERN ART

(b) Region

(a) Type of grant or assistance

Page 3

(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2019

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

Schedule F (Form 990) 2019

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Part I, Line 2:

The Museum of Modern Art invests in domestic and foreign limited

partnerships that may own an interest in a foreign corporation, passive

foreign investment company, or foreign partnership. Nevertheless, the

Museum's investment activities may not reach the thresholds required for

filing the Forms 926, 5471, 8621 or 8865. To the extent such a form was

completed, it has been filed with the Museum's Form 990-T.

Schedule F (Form 990) 2019

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SCHEDULE G	Suppleme	/ities	OMB No. 1545-0047									
(Form 990 or 990-EZ)		e organization answered "Yes" organization entered more than				or 19,	, or if the	2019				
Department of the Treasury		Attach to Form \$						Open to Public				
Internal Revenue Service Name of the organization		to www.irs.gov/Form990 for in	struction	s and	the latest informati	on.	Employer id	Inspection entification number				
Name of the organization	MUSEUM OF M	ODERN ART					13-16241					
		Complete if the organization and	swered "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-E2	I filers are not				
	complete this part											
a Mail solicitat		ed funds through any of the follo e Solid	•		overnment grants							
	email solicitations			-	nment grants							
d In-person so		r oral agreement with any individ	ual (inclue	ina of	ficare directore true	toos	or					
		art VII) or entity in connection wit				lees	, or Ye:	s 🗌 No				
b If "Yes," list the 10 compensated at le	•	iduals or entities (fundraisers) pu organization.	rsuant to	agreei	ments under which th	he fu	ndraiser is to b	e				
			(iii)	Did		(v)	Amount paid	() Amount poid				
(i) Name and addres or entity (fund		(ii) Activity	(iii) fundi have c or cor contrib	ustody trol of	(iv) Gross receipts from activity	tò (or retained by) fundraiser sted in col. (i)	(vi) Amount paid to (or retained by) organization				
			Yes	No								
Total	· · · · · · · ·		·····					L				
3 List all states in white or licensing.	ch the organizatio	n is registered or licensed to solid	cit contrib	utions	or has been notified	it is	exempt from re	gistration				
LHA For Paperwork Re	eduction Act Noti	ce, see the Instructions for For	m 990 or	990-E	Z. 9	Sche	dule G (Form S	990 or 990-EZ) 2019				

Schedule G (Form 990 or 990 EZ) 2019 MUSEUM OF MODERN ART

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

	of fundraising event contributions and gro		, ,	• ·	s greater than \$5,000.
		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		David Rockefeller	Party in the		(add col. (a) through
		Award Luncheon	Garden	2	col. (c)
ъ		(event type)	(event type)	(total number)	
Hevenue	Gross receipts	3,013,000.	2,773,000.	1,106,798.	6,892,798.
2	2 Less: Contributions	3,013,000.	2,773,000.	911,328.	6,697,328.
3	Gross income (line 1 minus line 2)			195,470.	195,470.
4	Cash prizes				
5	5 Noncash prizes				
	Rent/facility costs			56,493.	56,493.
	7 Food and beverages			54,491.	54,491.
ادً 8	B Entertainment			58,731.	58,731.
9		12,362.	150.	93,830.	106,342.
1	0 Direct expense summary. Add lines 4 through	9 in column (d)		►	276,057.
1					-80,587.
art	Gaming. Complete if the organization a \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	990, Part IV, line 19, or r	eported more than	
anu		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Levelue					

Revenue			(a) Bingo bingo/progressive bingo (c) Other gaming c										
leve													
ш.	1	Gross revenue											
es	2	Cash prizes											
Expense	3 Noncash prizes												
Direct I	4	Rent/facility costs											
	5	Other direct expenses											
	6	Volunteer labor	Yes 9	% [[Yes No	%		Yes No	%				
	 7 Direct expense summary. Add lines 2 through 5 in column (d) 												
		Net gaming income summary. Subtract line 7)					🕨				
		See Part IV for full list of states											
		ter the state(s) in which the organization condu											
		the organization licensed to conduct gaming ac								Yes	X No		
b	lf "	No," explain:											
10-		ere any of the organization's gaming licenses re	wokod suspondod or	torm	vipatod du	ring the tax y	unar?			Yes	X No		
		Yes," explain:								165			
	_							<u>.</u> .					
93208	32 09	9-11-19						Schee	dule G (For	m 990 or 990)-EZ) 2019		

Schedule G (Form 990 or 990-EZ) 2019 MUSEUM OF MODERN ART	13-162	4100	Page 3
11 Does the organization conduct gaming activities with nonmembers?	[Yes	X No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity for			
to administer charitable gaming?	[Yes	X No
13 Indicate the percentage of gaming activity conducted in:			
a The organization's facility		13a	%
b An outside facility		I3b	%
14 Enter the name and address of the person who prepares the organization's gaming/special events books a	nd records:		
Name			
Address 🕨			
15a Does the organization have a contract with a third party from whom the organization receives gaming rever	nue?[Yes	X No
b If "Yes," enter the amount of gaming revenue received by the organization > \$ and	d the amount		
of gaming revenue retained by the third party \blacktriangleright \$			
c If "Yes," enter name and address of the third party:			
Name			
Address 🕨			
16 Gaming manager information:			
Name			
Gaming manager compensation 🕨 💲			
Description of services provided			
Director/officer Employee Independent contractor			
17 Mandatory distributions:			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	Г	Vee	X No
retain the state gaming license?		Yes	L▲ NO
 b Enter the amount of distributions required under state law to be distributed to other exempt organizations organization's own exempt activities during the tax year 	or spent in the		
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (ii	ii) and (v); and Part I	I, lines 9,	9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
Schedule G, Part III, Line 9, List of States with Gaming Actvities:			
AK, AL, AR, CA, CO, CT, GA, HI, IL, KS, KY, MA, MD, ME, MI, MN, MS, NH, NJ, NM, OH, OK, OR, PA, RI			
SC,TN,UT,VA,WA,WI,WV			
Schedule G, Part II, Events #1 and #2			
Due to the COVID-19 pandemic the annual museum galas were held			
virtually with no benefits provided to the attendees.			
	akadul: 0/E	00 000	
932083 09-11-19 S	Schedule G (Form 9	90 or 990	-EZ) 2019

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SCHEDULE I (Form 990)	Go	irants and Oth vernments, ar ete if the organizatio	nd Individua	ls in the Ŭni [.]	ted States		OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	Comp		Attach to For s.gov/Form990 for	m 990.			Open to Public Inspection
Name of the organization MUSEUM OF MOD	ERN ART						Employer identification number 13-1624100
Part I General Information on Grants a	and Assistance						
1 Does the organization maintain records criteria used to award the grants or assi	stance?				0	stance, and the selecti	
2 Describe in Part IV the organization's pr Part II Grants and Other Assistance to					nization anoward "N	(aall an Earm 000 Dard	W/ line O1 for only
Part II Grants and Other Assistance to recipient that received more than	-				anization answered i	es on Form 990, Pan	TV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
MoMA PS1 Contemporary Art Center Inc - 46-01 21st Street - Long Island City, NY 11101	23-7379091	501c(3)	1,995,123.	0.			Operating Support
 2 Enter total number of section 501(c)(3) a 3 Enter total number of other organization LHA For Paperwork Reduction Act Notice 	is listed in the line 1	table	e line 1 table				1.

932101 10-26-19

Schedule I (Form 990) (2019)

MUSEUM OF MODERN ART

13-1624100

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
rt IV Supplemental Information. Provide the information requ	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	lditional information.	
= I, Line 2:					

The Museum as sole member of PS1 Contemporary Art Center, Inc (DBA MoMA PS1). In 2000 MoMA PSA and the museum entered into an affiliation to

promote the study, knowledge, enjoyment and appreciation of modern and

contemporary art through a collaborative program of exhibitions, research,

special projects and other educational and curatorial activities. MoMA PS1

retained its separate corporate status and is a support corporation of the

museum with the museum as its sole corporate member. The Museum has the

right to appoint all members of the MoMA PS1 board of directors. MoMA PS1

and the Museum entered into a management assistance and services agreement

whereby the museum provides management assistance and service to MoMA PS1 in certain areas, including accounting and payroll, fundraising and development, coordination of MoMA PS1's information technology, insurance and legal affairs. Schedule I (Form 990) 932291 04-01-19 49 13220511 153424 0176030-000019 2019.05094 MUSEUM OF MODERN ART 01760301

SC	HEDULE J	I	OMB No.	1545-004	47		
	rm 990)	-	ation Information rs, Trustees, Key Employees, and Highest		20	10	
			ensated Employees nswered "Yes" on Form 990, Part IV, line 23.		20	IJ)
Depa	tment of the Treasury		ach to Form 990.		Open to		
Intern	al Revenue Service	Go to www.irs.gov/Form990) for instructions and the latest information.		Inspe		
Nam	e of the organization			Employer id		on nui	mber
		MUSEUM OF MODERN ART		13-16	24100		
Pa	rt I Question	s Regarding Compensation					
_						Yes	No
1a			of the following to or for a person listed on Form	990,			
		line 1a. Complete Part III to provide any releve					
	First-class or c						
		ation and gross-up payments	Payments for business use of personal res				
	Discretionary spending account Personal services (such as maid, chauffeur						
		spending account					
b	If any of the boxes	on line 1a are checked, did the organization f	ollow a written policy regarding payment or				
			ove? If "No," complete Part III to explain		1b	х	
2			or allowing expenses incurred by all directors,				
	•		arding the items checked on line 1a?		2	х	
	,		5				
3	Indicate which, if a	ny, of the following the organization used to e	establish the compensation of the organization's				
			boxes for methods used by a related organization				
	establish compensation	ation of the CEO/Executive Director, but expl	ain in Part III.				
	X Compensation	committee	X Written employment contract				
	X Independent of	ompensation consultant	X Compensation survey or study				
	X Form 990 of o	ther organizations	X Approval by the board or compensation c	ommittee			
4	During the year, did	any person listed on Form 990, Part VII, Sec	ction A, line 1a, with respect to the filing				
	organization or a re	lated organization:					
а		e payment or change-of-control payment?					X
b			ified retirement plan?			X	
С			nsation arrangement?		<u>4c</u>		X
	If "Yes" to any of lir	es 4a-c, list the persons and provide the app	licable amounts for each item in Part III.				
	Only continue 504(s						
F)(3), 501(c)(4), and 501(c)(29) organizations	-	n			
5	contingent on the r		the organization pay or accrue any compensatio	11			
а	•				5a		x
	Any related organiz						x
	, ,	r 5b, describe in Part III.					
6			the organization pay or accrue any compensatio	n			
•	contingent on the r						
а	0	0			6a		x
b							X
		r 6b, describe in Part III.					
7	For persons listed of	n 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				. 7	Х	
8			led pursuant to a contract that was subject to th				
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III						x
9	If "Yes" on line 8, d						
	Regulations section	53.4958-6(c)?		<u></u>	9		
LHA	For Paperwork R	eduction Act Notice, see the Instructions f	Schedu	le J (Forr	n 990)) 2019	

932111 10-21-19

13-1624100

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(i)-(D)	reported as deferred on prior Form 990	
(1) Glenn D Lowry	(i)	944,378.	956,588.	4,636.	585,694.	359,462.	2,850,758.	539,251.	
Director/Ex-Officio Trustee	(ii)	Ο.	0.	0.	0.	0.	0.	0.	
(2) James Gara	(i)	542,710.	712,990.	22,200.	76,975.	38,762.	1,393,637.	337,990.	
COO/Assistant Treasurer	(ii)	Ο.	0.	0.	0.	0.	0.	0.	
(3) Anthony Wai	(i)	613,656.	168,400.	6,920.	19,000.	32,166.	840,142.	168,400.	
Chief Investment Officer	(ii)	Ο.	0.	0.	0.	0.	0.	0.	
(4) Peter Reed	(i)	419,205.	250,000.	2,772.	57,881.	32,064.	761,922.	0.	
Sr Deputy Dir for Curatorial Affairs	(ii)	Ο.	0.	0.	0.	0.	0.	0.	
(5) Ruth Shapiro	(i)	249,726.	18,750.	20,916.	281,607.	45,324.	616,323.	0.	
Director of Business Development	(ii)	Ο.	0.	0.	0.	0.	0.	0.	
(6) Todd Bishop	(i)	404,385.	100,000.	20,786.	55,449.	30,513.	611,133.	100,000.	
Sr Deputy Dir of External Affairs	(ii)	Ο.	0.	0.	0.	0.	0.	0.	
(7) Patty Lipshutz	(i)	446,385.	0.	22,200.	54,583.	39,462.	562,630.	0.	
General Counsel/Secretary	(ii)	Ο.	0.	0.	0.	0.	0.	0.	
(8) Jean Savitsky	(i)	409,416.	100,000.	1,806.	16,800.	33,153.	561,175.	0.	
Dir. Real Estate Expansion	(ii)	Ο.	0.	0.	0.	0.	0.	0.	
(9) Emmanuel Plat	(i)	377,666.	121,700.	932.	16,800.	43,171.	560,269.	0.	
Director, Merchandising	(ii)	Ο.	0.	0.	0.	0.	0.	0.	
(10) Thomas Randon	(i)	349,115.	90,000.	18,777.	16,800.	24,268.	498,960.	0.	
General Mgr - Retail	(ii)	Ο.	0.	0.	0.	0.	0.	0.	
(11) Ann Temkin	(i)	370,952.	0.	20,751.	64,697.	39,911.	496,311.	0.	
Chief Curator-Painting&Sculpture	(ii)	Ο.	0.	0.	0.	0.	0.	0.	
(12) Christopher Hudson	(i)	351,036.	5,000.	22,046.	67,049.	41,679.	486,810.	0.	
Publisher	(ii)	Ο.	0.	0.	0.	0.	0.	0.	
(13) Ramona Bannayan	(i)	369,529.	0.	19,729.	44,051.	39,455.	472,764.	0.	
Sr Deputy Dir for Exhibitions	(ii)	0.	0.	0.	0.	0.	0.	0.	
(14) Jan Postma	(i)	391,514.	5,000.	413.	27,439.	45,447.	469,813.	0.	
Chief Financial Officer	(ii)	0.	0.	0.	0.	0.	0.	0.	
(15) Christophe Cherix	(i)	376,352.	0.	11,303.	38,192.	43,138.	468,985.	0.	
Chief Curator - Drawings and Prints	(ii)	0.	0.	0.	0.	0.	0.	0.	
(16) Odessa Matsubara	(i)	361,379.	3,551.	16,656.	16,800.	42,188.	440,574.	0.	
Chief Human Resources Officer	(ii)	٥.	0.	0.	0.	0.	0.	0.	

Schedule J (Form 990) 2019

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(i)-(D)	reported as deferred on prior Form 990
(17) Rajenda Roy	(i)	369,620.	0.	587.	32,392.	35,153.	437,752.	0.
	(ii)	Ο.	0.	0.	0.	0.	0.	0.
	(i)	268,518.	5,000.	20,970.	84,826.	49,447.	428,761.	0.
	(ii)	Ο.	0.	0.	0.	0.	0.	0.
(19) Tunji Adeniji	(i)	296,567.	5,000.	20,397.	19,000.	23,525.	364,489.	0.
	(ii)	Ο.	0.	0.	0.	0.	0.	0.
(20) Stuart Comer	(i)	308,645.	0.	727.	8,334.	29,015.	346,721.	0.
	(ii)	Ο.	0.	0.	0.	0.	0.	0.
(21) Martino Stierli	(i)	258,690.	0.	19,427.	16,800.	31,933.	326,850.	0.
	(ii)	Ο.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
((ii)							
	(i)							
((ii)							
	(i)							
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	(i)							
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	(i)							
((ii)							
	(i)							
((ii)							
	(i)							
((ii)							
	(i)							
((ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2019

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.

Part I, Line 1a:

As a condition of employment, the Museum requires the director to reside in

MUSEUM OF MODERN ART

the Museum's apartment on the premises in Museum tower in furtherance of

the Museum's operations and mission and for the convenience of the Museum.

Health club membership dues of the director are paid for by the Museum and

included in the director's compensation.

Part I, Line 4b:

Glenn Lowry received a supplemental retirement plan payment described in

comment below.

Part I. Line 7:

Glenn Lowry- director full-time employee, officer and ex-officio trustee.

In 2019 Glenn Lowry earned \$944,378 in pre-pandemic base compensation.

Column b (ii) includes an annual bonus of \$417,337 and a previously

scheduled pre-pandemic payment of a multi-year supplemental retirement

plan, dating to 2014, of \$539,251 for a total of \$956,588.

These amounts compare to \$896,939 in base compensation and an annual bonus

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.

of \$405,183 in 2018. Column c includes an accrual of \$296,939 under the

supplemental retirement plan to be paid next year.

James Gara - Chief Operating Officer and Assistant Treasurer. Full time

employee and officer, not a Trustee. Included in column b(ii), are amounts

attributable to earned and paid portions of a pre-pandemic

performance-based bonus and a pre-pandemic retention bonus. The performance

bonus was awarded based on the achievement by Mr. Gara of certain service

and performance requirement in areas such as in operations and investments.

The retention bonus was based on Mr. Gara remaining an active employee at

the Museum for an agreed upon period of time.

Anthony Wai - Chief Investment Officer. Full-time employee but not a

trustee. Eligible for retention and annual bonus based on achievement of

performance measures.

Peter Reed - Former Deputy Director of Curatorial Affairs. Full time

employee but not a Trustee. Included in column B (ii) is a pre-pandemic

retention bonus based on the achievement of certain service requirements.

Schedule J (Form 990) 2019

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.

Ruth Shapiro - Director of Business Development. Full-time employee but not

a Trustee. Included in Column C, are amounts attributable to the Voluntary

Retirement Plan the Museum completed in fiscal year 2020 for employees

meeting specific service and age criteria.

Todd Bishop - Senior Deputy Director - External Affairs. Full-time employee

but not a Trustee. Included in column (b)(ii) is a pre-pandemic performance

bonus. The plan was subject to the achievement of service and performance

requirements.

Patty Lipshutz - General Counsel and Secretary. Full-time employee and

Officer but not a Trustee.

Jean Savitsky - Director of Real Estate Expansion. Full time employee but

not a Trustee. Included in column B (ii) is a pre-pandemic performance

bonus based on metrics tied to completion of the New MoMA building project.

Emmanuel Plat - Director of Merchandising, Retail, Full time employee but

Schedule J (Form 990) 2019 MUSEUM OF MODERN ART	13-1624100	Page 3
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	e this part for any additional information	n.
not a Trustee. Included in column B (ii) is a pre-pandemic performance		
bonus based on achievement of certain benchmarks by the Museum's retail		
operation.		
Thomas Randon - General Manager, Retail. Full time employee but not a		
Trustee. Included in column B (ii) is a pre-pandemic performance bonus		
based on achievement of certain benchmarks by the Museum's retail		
operation.		
Christopher Hudson Publisher. Full-time employee but not a trustee.		
Included in Column C, are amounts attributable to the Voluntary Retirement		
Plan the Museum completed in fiscal year 2020 for employees meeting		
specific service and age criteria.		
Nancy Adelson Deputy General Counsel. Full-time employee but not a		
trustee. Included in Column C, are amounts attributable to the Voluntary		
Retirement Plan the Museum completed in fiscal year 2020 for employees		
meeting specific service and age criteria.		

Schedule J (Form 990) 2019

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.

Part II, Column (C)

Amounts reported as deferred compensation, to the extent they include

valuation increases, are based on actuarial calculations done for June

30, 2020 as opposed to calendar year 2019.

Compensation Reporting Generally

All compensation reported on Form 990 in parts VII and Schedule J,

including bonuses, are based on calendar year 2019, pursuant to

employment contracts with the persons listed.

13-1624100

Department of the Treasury	orm 990) partment of the Treasury Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.													
Name of the organization								Emp	loyer	identifi	icatio	n num	ber	
MUSEUM OF MODER	N ART								13-16	24100)			
Part I Bond Issues		-												
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issu	e price	(f) Description	on of purpose	(g) De	feased	(h) On				
									of iss		finan	-		
						L.		Yes	No	Yes	No	Yes	No	
The Trust for Cultural Resources		C 4 0 7 4 7 7 7 7					money project							
A City of New York Series 2016	91-1882413	649717TE5	08/02/16	330,1	17,210.	and refund p	rior issues		x		х		х	
_														
В				_										
6														
<u> </u>														
D														
Part II Proceeds											I			
			Α			В	С				D			
1 Amount of bonds retired						_	•							
2 Amount of bonds legally defeased														
			220	,389,580.										
4 Gross proceeds in reserve funds														
5 Capitalized interest from proceeds														
7 Issuance costs from proceeds			1	,723,748.										
8 Credit enhancement from proceeds														
9 Working capital expenditures from proceeds									_					
10 Capital expenditures from proceeds				,227,251.					_					
11 Other spent proceeds			178	,403,305.					_					
				35,277.					_					
13 Year of substantial completion				2019					_					
			Yes	No	Yes	No	Yes	No	_	Yes	_	No		
14 Were the bonds issued as part of a refunding	•			x										
if issued prior to 2018, a current refunding iss				Δ					+		_			
	5													
	issued prior to 2018, an advance refunding issue)?													
 <u>16</u> Has the final allocation of proceeds been made <u>17</u> Does the organization maintain adequate boo 				X					+					
final allocation of proceeds?			x											

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

Schedule K (Form 990) 2019

Schedule K (Form 990) 2019 MUSEUM OF MODERN ART

13-1624100	13	-1	6	2	4	1	0	0	
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Page 2

Par	t III Private Business Use			-					
			Α	I	В		С		D
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
	which owned property financed by tax-exempt bonds?		x						
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?		х						
3a	Are there any management or service contracts that may result in private								
	business use of bond-financed property?		х						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
	counsel to review any management or service contracts relating to the financed property?								
с	Are there any research agreements that may result in private business use of								
	bond-financed property?		х						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
	counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by								
	entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5	Enter the percentage of financed property used in a private business use as a result of								
	unrelated trade or business activity carried on by your organization, another								
	section 501(c)(3) organization, or a state or local government		%		%		%		%
6	Total of lines 4 and 5		%		%		%		%
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond-financed property to a non-								
	governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed								
	of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections								
	1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified								
	bonds of the issue are remediated in accordance with the requirements under								
	Regulations sections 1.141-12 and 1.145-2?	Х							
Par	t IV Arbitrage								
			A		B		<u>ç</u>	I	<u>p</u>
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		Х						
2	If "No" to line 1, did the following apply?		1				1		т
	Rebate not due yet?	Х							
	Exception to rebate?		X						
C	No rebate due?		X						
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
	performed		r				1		<u>т</u>
3	Is the bond issue a variable rate issue?		Х						

Schedule K (Form 990) 2019 MUSEUM OF MODERN ART

13-1624100

Page 3

								i u
Part IV Arbitrage (continued)	-				_			
		A	I	B	()	[)
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		Х						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х						
7 Has the organization established written procedures to monitor the requirements of								
section 148?	x							
Part V Procedures To Undertake Corrective Action								
		A	1	В	0	;)
Has the organization established written procedures to ensure that violations of	Yes	No	Yes	No	Yes	No	Yes	No
federal tax requirements are timely identified and corrected through the voluntary								
closing agreement program if self-remediation isn't available under applicable								
regulations?	x							
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	e K. See instru	uctions	•		•		-
chedule K, Part I, Column e								
The difference between Part I(e) and Part II, Line 3 is due to interest								
arnings on bond proceeds.								
chedule K, Part I, Column f								
he bonds refunded the Borrower's Series 2008-One-A (issued 7/23/08)								
nd Series 2012-One-D (issued 5/1/12).								
chedule K, Part III, Line 4								
he refunding portion of the bonds refunded prior bonds issued before								
anuary 1, 2003. The new money portion of the bonds financed a new								
oney project, which was placed in service in fiscal year 2020. The								
onds did not finance any private uses.								
chedule K, Part III, Line 7								
s provided in treasury regulation section 1.141-4(c)(2)(i)(b), the								
mount of private payments taken into account under the private payment								
est may not exceed the amount of private business use and/or unrelated								
rade or business use. Accordingly, the amount of private payments for								
he reporting period does not exceed the amount stated in Part III.								
						0.	hadula K (Far	

Schedule K (Form 990) 2019	MUSEUM OF MODERN ART	13-1624100	Page 4
	ation. Provide additional information for respor	nses to questions on Schedule K. See instructions (continued)	
	has not undertaken an analysis of		
	t to the bonds, as the level of pr		
	ated trade or business reported in		
	of amounts permitted under section		
code.			

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

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.

2019 **Open to Public** . Inspection

Name of the	organization
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SEUM	OF	MODERN	ART	

Employer	İ	der	h	tif	ic	ca	It	ic	on	nu	m	b	e
		-											

 •••					
	13-	162	241	00	

	MUSEUM OF MODERN A	RT			13-	162410	0	
Pa	t 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	(Method of noncash contri		•	:s
1	Art - Works of art	Х	614	0.	Not applicable			
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	X	301	25,017,357.	Selling Price			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ► ()							
27	Other ► ()							
28	Other 🕨 ()							
29	Number of Forms 8283 received by the organiz	zation during	the tax year for c	ontributions				
	for which the organization completed Form 82	83, Part IV, I	Donee Acknowledg	gement			26	
							Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least three years from the date	e of the initia	l contribution, and	which isn't required to be us	sed for			
	exempt purposes for the entire holding period?	?				30a		x
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	policy that re	quires the review of	of any nonstandard contribut	tions?	31	Х	
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash				
	contributions?					32a	Х	
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) for	r a type of property	/ for which column (a) is cheo	cked,			
	describe in Part II.							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2019

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Schedule M (Form 990) 2019 MUSEUM OF MODERN ART

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, Part I, Column (b):

Nonmonetary contributions are recorded at estimated fair value at date

of receipt if the Museum received certain goods and services that meet

criteria under generally accepted accounting principles for recognition

as contributions. In accordance with Accounting Standards Codification,

the Museum does not treat donations of art as revenue or record these

art works on the Statement of Financial Position as these art works are

used to support the Museum's educational mission. Proceeds from the

deaccession of artwork are used primarily to acquire and maintain other

items for the collection.

Schedule M, Part I, Line 1

Loans of artwork to the Museum - From time to time Trustees of the

Museum may loan artworks to the Museum for a limited duration of time

for specific exhibitions.

Schedule M, Part I, Line 9

Gifts of stock from the same person, on the same trade date, are

considered in the aggregate as one gift.

Schedule M, Line 32b:

A third party bank is authorized to sell donated securities as soon as

possible upon confirmation by the Museum. The Museum also contracts

periodically with various auction houses to facilitate approve

deaccessioned of art work.

Schedule M (Form 990) 2019

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13-1624100

SCHEDULE O (Form 990 or 990-EZ)	or 990-EZ) Complete to provide information for responses to specific questions on					
Department of the Treasury	Form 990 or 990-EZ or to provide any additional inform Attach to Form 990 or 990-EZ.		Open to Public			
Internal Revenue Service Name of the organizatior	Go to www.irs.gov/Form990 for the latest information MUSEUM OF MODERN ART	Employe	Inspection r identification number 624100			
			024100			
Form 990, Part I,	Line 1, Description of Organization Mission:					
permanent collecti	on of modern and contemporary art, presents					
exhibitions and ed	ucational programs, sustains a library, archives, and					
conservation labor	atory and supports scholarship and publications. The					
Form 990 is one of	several reports the museum makes available each					
year. The Museum e	ncourages it to be read with the audited financial					
statements, which	provide additional financial context. these documents					
as well as previou	s years reports can be found on moma.org. as can be					
seen in the audite	d financial statements, operating expenses of \$230.4					
million exceeded of	perating revenues of \$226.0 million by \$4.4 million.					
In FY 2020, the Mu	seum finished with an operating deficit, while at the					
same time re-align	ing its cost structure to ensure long term fiscal					
sustainability con	current with a macro-economic business recovery from					
the pandemic.						
Form 990, Part III	, Line 1					
Organization's Mis	son Continued					
In pursuit of this	goal, the Museum has collected over 200,000 works of					
art, including wor	ks of paintings, sculpture, drawing, printmaking,					
photography, film,	media, performance, architecture, and industrial and					
graphic design. Th	e Museum also operates a publishing program, conducts					
an extensive educa	tional program, and maintains a major library and					
archives. its exhi	bitions are circulated nationally and					
internationally. T	he Museum's primary sources of support are admissions					
fees and membershi	p dues, grants from individuals, foundations, and					
LHA For Paperwork Re 932211 09-06-19	eduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Schedule O (For	n 990 or 990-EZ) (2019)			

13220511 153424 0176030-000019

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization MUSEUM OF MODERN ART	Employer identification number 13-1624100
corporations, endowment income and revenue from retail sales of museum	
related products. The Museum is managed by a board of trustees,	
consisting of 52 voting members. A director and an administrative and	
curatorial staff oversee its operations and implement policy set by the	
Board.	
Each year the Museum acquires through donation or purchase, in each of	
its curatorial departments, numerous works for its collection.	
Acknowledged worldwide for its collection of 20th and 21st century art,	
the Museum has been instrumental in introducing the art of this period	
into the mainstream of modern life. The range of the Museum's program	
of exhibitions extends from retrospective studies of the work of major	
modern and contemporary artists to examinations of the cultural and	
aesthetic contexts of major historical moments, and also supports the	
work of less well known living artists through continuing exhibitions	
to review the latest trends in contemporary art.	
The Museum's programs are organized through six curatorial (drawings $\&$	_
prints, paintings & sculptures, architecture & design, film,	
photographs, media & performance) and a number of curatorial support	
departments. The curatorial support departments include collection	
management, collection and exhibition information, conservation,	
exhibition administration, exhibition design and production, film	
operations and preservation, imaging, digital asset management,	
outgoing loans, provenance, and registrar.	
In addition, the quality and depth of the Museum's collection enable	
the Museum to maintain an extensive loan program, which serves	
932212 09-06-19	Schedule O (Form 990 or 990-EZ) (2019)

Schedule O (Form 990 or 990-EZ) (2019)	Page
Name of the organization MUSEUM OF MODERN ART	Employer identification number 13-1624100
institutions both in the united states and abroad. Each year the Museum	
lends numerous works beyond those exhibited in its own galleries.	
The Museum was founded in 1929 as an educational institution and	
maintains a vast breadth of educational programming, which increased in	
the years after the opening of the renovated and expanded main facility	
in 2004. In FY 2020, during the approximately five month period the	
Museum was open following the completion of the New MoMA Project and	
prior to closure due to the Covid-19 pandemic, through diverse	
education programs approximately 1.3 million onsite visitors to MoMA	
had access to or participated in interpretative programs to support	
their learning in the galleries including labels, audio content	
(offered in nine languages), gallery tours, interactive spaces,	
workshops, visual description tours for the blind and partially	
sighted, and resources for other individuals with special needs. Since	
the start of the pandemic the Museum has made significant enhancements	
to facilitate digital access for onsite visitors to use their own	
devices in the Museum.	
The education center provides a central location for a wide array of	
educational resources including three classrooms, a theater, a publicly	
accessible library, an archive reading room, and three curatorial study	
centers, and MoMA's online self guided courses. While the worldwide	
Covid-19 pandemic has limited public access to these spaces,	
programming teams have pivoted to providing virtual programming, adding	
to the Museum's existing digital education offerings.	

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Schedule O (Form 990 or 990-EZ) (2019)

Schedule O (Form 990 or 990-EZ) (2019)	Page
Name of the organization MUSEUM OF MODERN ART	Employer identification number 13-1624100
Form 990, Part III, Line 4a	
Since the start of the pandemic the Museum has made significant	
enhancements to facilitate digital access for onsite visitors to use	
their own devices in the Museum.	
After over three years of construction, including a planned four-month	
temporary closure of the Museum to the public in order to complete	
construction and art re-installation, an expanded new MoMA opened on	
October 21, 2019, with a reimagined presentation of modern and	
contemporary art, catalyzed by a 30% increase in overall gallery space	
and an improved quality of visitor experience through reconceived	
entrances, circulation, and amenities, concurrent with an increase in	
public space, including an expanded below-grade store and a new	
restaurant with terrace on the sixth floor. The expansion, developed by	
MoMA with architects Diller Scofidio + Renfro, in collaboration with	
Gensler, added more than 40,000 square feet of gallery spaces and	
enables the Museum to exhibit significantly more art in new and	
interdisciplinary ways.	
FORM 990, PART IV, LINE 30	
Gifts of artwork are considered by individual item.	
Form 990, Part VI, Section B, line 11b:	
The Museum's form 990 is prepared by Grant Thornton LLP in coordination	
with the Museum's controller's office with input from many museum	
departments. It is then reviewed by Museum senior staff including the	Schedule O (Form 990 or 990-EZ) (2019
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Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization MUSEUM OF MODERN ART	Employer identification number 13-1624100
Director, the Chief Operating Officer, the Chief Financial Officer, and the	
General Counsel. The 990 is then presented to the Museum's Audit Committee	
of the Board of Trustees for review and approval. A copy of the 990 is	
provided to each member for the Board of Trustees electronically or in	
printed copy prior to filing the return. The 990 is available to the public	
through the Museum's website www.moma.org.	
Form 990, Part VI, Section B, Line 12c:	
On an annual basis, the Museum distributes its code of conduct to all	
trustees and designated employees and requires that conflict of interest	
questionnaires be completed and returned for initial review by the office	
of the General Counsel and the Director of Human Resources respectively.	
Amongst other things, the conflict of interest questionnaire requires the	
responder: confirm that he or she has read and understands the code of	
conduct, agree to abide by it, identify whether he or she or a family	
member has any relationship with the Museum that may represent a conflict	
of interest as defined by the code and report any knowledge of a	
transaction which should be reported under the code, etc. When potential	
employee conflicts of interest are reported or identified, when necessary,	
an investigation is conducted to determine the facts and circumstances and	
recommendation of action, if warranted. Such action may include, but is not	
limited to, prohibiting the individual from participating in deliberations	
and decisions regarding the transaction in question, or taking disciplinary	
action, which in appropriate circumstances may include suspension or	
termination. The employee's supervisor is notified of an employee with	
identified conflicts and the action to be taken, if any. When potential	
trustee conflicts of interest are reported or identified, the general	
counsel's office makes a report to a committee of the board of trustees	
932212 09-06-19 68	Schedule O (Form 990 or 990-EZ) (2019)

Schedule O (Form 990 or 990 EZ) (2019)	Page 2
Name of the organization MUSEUM OF MODERN ART	Employer identification number 13-1624100
with a recommendation for action, if warranted, including but not limited	
to disclose to the board of trustees, prohibiting the trustee from	
participating in and/or voting on the transaction in question, resignation	
from the board of trustees, etc. The code of conduct further provides that	
the committee make a recommendation to the Chairman of the Board for	
decision by the Board.	
Form 990, Part VI, Section B, Line 15:	
The process for determining the compensation for the Museum director and	
certain key employees includes reviews and approval by the board of	
trustees' compensation subcommittee of the executive committee (the	
"committee") a committee of the governing body consisting of independent	
trustees, and not including the director or other staff members. In making	
its determination, the committee obtains and reviews comparability data	
with respect to compensation levels paid for comparable job positions	
obtained through the assistance of an expert compensation consultant which,	
in appropriate instances, includes survey data regarding compensation	
levels paid by similarly situated organizations for comparable employment	
positions, form 990 data from other leading Museums and cultural and	
education institutions, as well as for profit institutions which may be	
interested in recruiting the Museum staff. The determination, deliberation	
and decisions made by the committee are contemporaneously substantiated and	
documented in minutes of the meeting which include the committee members	
present and participation, the compensation terms approved, the data relied	
upon and how it was obtained. The committee periodically meets and reviews,	
the last meeting was held on December 1, 2020.	

Form 990, Part VI, Line 17, List of States receiving copy of Form 990:

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Schedule O (Form 990 or 990-EZ) (2019)

AK, AL, AR, AZ, CA, CO, CT, FL, GA, HI, IL, KS, KY, MA, MD, ME, MI, MN, MS, NC, NH, NJ, NM, NY, OH
OK, OR, PA, RI, SC, TN, UT, VA, VT, WA, WI, WV
Form 990, Part VI, Section C, Line 19:
The Museum's governing documents are available for review. Conflict of
interest policy, code of conduct policy, prior years audited financial
statements and prior years 990 are available to the public through the
Museum's website https://www.moma.org/about/who-we-are/documents-policies.
Form 990, Part VII
The hours disclosed for officers, key employees and highly compensated
individuals is 40 hours which represents a full-time designated
employee. For those listed on Part VII the hours worked, in reality,
are significantly more than the standard full-time employee norm.
Form 990, Part XI, Line 9
Other Changes in Net Assets
The other changes in net assets are related to Defined Benefit Plan
changes other than net periodic benefit costs partially offset by
organizations that file a separate return\$25,232,223

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Page 2

Employer identification number

13 - 1624100

Schedule O (Form 990 or 990-EZ) (2019)

MUSEUM OF MODERN ART

Name of the organization

New	Yor

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

See Part VII for Continuations

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Name of the organization

Department of the Treasury Internal Revenue Service

SCHEDULE R (Form 990)

Part I

MUSEUM OF MODERN ART

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
NFE LLC - 20-2379359					
.1 West 53rd Street					
New York, NY 10019	Real Estate	New York	-290,157.	3,097,625.	Museum of Modern Art

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt Part II organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	cont	(g) 512(b)(13) htrolled ntity?	
				501(c)(3))		Yes	No	
Modern and Contemporary Art Support Corp -								
13-3910972, 11 West 53rd Street, New York,	Receive, acquire & hold				Museum of Modern			
NY 10019	title	Delaware	501(c)(3)	Line 12a, I	Art	х		
PS1 Contemporary Art Center Inc - 23-7379091								
46-01 21st Street	Contemporary Art				Museum of Modern			
New York, NY 11101	Exhibitions	New York	501(c)(3)	Line 7	Art	x		
The International Council of The Museum of								
Modern Art - 13-6143744, 11 West 53rd	1							
Street, New York, NY 10019	Support Corporation	New York	501(c)(3)	Line 12a, I	N/A		х	
MoMA Auxiliaries - 13-3975341								
11 West 53rd Street	1				Museum of Modern			
New York, NY 10019	Manage Retail Operations	Delaware	501(c)(3)	Line 12a, I	Art	x		

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Schedule R (Form 990) 2019

2019 Open to Public Inspection

Employer identification number

13-1624100

OMB No. 1545-0047

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

		,										
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j		(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule	Gene mana partr	ral or iging her?	Percentage ownership
		country)		sections 512-514)		455615	Yes	No	K-1 (Form 1065)	Yes	No	
]											
	1											
	-											
	-											
	{											
	{											
	4											

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	512(cont	(i) ction b)(13) rolled tity?
		country)						Yes	No
Alta Cultura - 13-4114902									
11 West 53rd Street	General Business								
New York, NY 10019	Corporation	DE	N/A	C CORP			100%	x	
5 Charitable Trusts									
Various]								
New York, NY 10019	Trust	NY	N/A	TRUST					х
	-								
	-								
	-								
									<u> </u>
]								
]								

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Ye	es
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II	IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		
Gift, grant, or capital contribution to related organization(s)		X	
Gift, grant, or capital contribution from related organization(s)		X	
Loans or loan guarantees to or for related organization(s)		X	
Loans or loan guarantees by related organization(s)			\neg
Dividends from related organization(s)			
Sale of assets to related organization(s)	1g		
Purchase of assets from related organization(s)			
Exchange of assets with related organization(s)	1i		
Lease of facilities, equipment, or other assets to related organization(s)			
Lease of facilities, equipment, or other assets from related organization(s)	<u>1k</u>		
Performance of services or membership or fundraising solicitations for related organization(s)		X	
n Performance of services or membership or fundraising solicitations by related organization(s)	1m		
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			
Sharing of paid employees with related organization(s)		X	
Reimbursement paid to related organization(s) for expenses	<u>1p</u>	x	
Reimbursement paid by related organization(s) for expenses		X	_
Other transfer of cash or property to related organization(s)	<u>1r</u>	x	
Cther transfer of cash or property from related organization(s)	1s	X	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) The International Council of The Museum of Modern Art	с	470,757.	FMV
(2) The International Council of The Museum of Modern Art	0	455,919.	Cost
(3) The International Council of The Museum of Modern Art	Q	52,646.	Cost
(4) The International Council of The Museum of Modern Art	R	254,013.	Cost
(5) PS1 Contemporary Art Center Inc	L	699,720.	Cost
(6) PS1 Contemporary Art Center Inc	R	561,127.	Cost

Schedule R (Form 990) MUSEUM OF MODERN ART

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(7) MoMA Auxiliaries	Р	3,359,950.	Cost
(8) PS1 Contemporary Art Center Inc	D	2,000,000.	FMV
(9) PS1 Contemporary Art Center Inc	В	1,433,996.	Cost
(10) The International Council of The Museum of Modern Art	S	137,290.	Cost
(11) Modern and Contemporary Art Support Corp	Q	190,428.	Cost
(12)			
(13)			
(14)			
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			

Schedule R (Form 990) 2019 MUSEUM OF MODERN ART

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are partne 501(org Yes	(f) Share of total income	(g) Share of end-of-year assets	(r Dispr tior allocat Yes	opor- late tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genera manag partne Yes N	or Percentage ownership

Schedule R (Form 990) 2019

Schedule R (Form 990) 2019 MUSEUM OF MODERN ART	13-1624100	Page 5
Part VII Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions.		
Part I, Identification of Disregarded Entities:		
Name, Address, and EIN of Disregarded Entity:		
AFE LLC		
EIN: 20-2379359		
11 West 53rd Street		
New York, NY 10019		
Primary Activity: Real Estate		
Direct Controlling Entity: Museum of Modern Art		
Dent II. Identification of Deleted Men Buennt Augeningtions.		
Part II, Identification of Related Tax-Exempt Organizations:		
Name, Address, and EIN of Related Organization:		
Modern and Contemporary Art Support Corp		
EIN: 13-3910972		
11 West 53rd Street		
New York, NY 10019		
Primary Activity: Receive, acquire & hold title		
Direct Controlling Entity: Museum of Modern Art		
Name, Address, and EIN of Related Organization:		
PS1 Contemporary Art Center Inc		
EIN: 23-7379091		
46-01 21st Street		
New York, NY 11101		
Primary Activity: Contemporary Art Exhibitions		
Direct Controlling Entity: Museum of Modern Art		
022165 00.10.10	Schedule B (Form	000) 2010

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Schedule R (Form 990) 2019 MUSEUM OF MODERN ART Part VII Supplemental Information		Page 5
Provide additional information for responses to questions on Schedule R. See instructions.		
Name, Address, and EIN of Related Organization:		
The International Council of The Museum of Modern Art		
EIN: 13-6143744		
11 West 53rd Street		
New York, NY 10019		
Primary Activity: Support Corporation		
Direct Controlling Entity: N/A		
Name, Address, and EIN of Related Organization:		
MoMA Auxiliaries		
EIN: 13-3975341		
11 West 53rd Street		
New York, NY 10019		
Primary Activity: Manage Retail Operations		
Direct Controlling Entity: Museum of Modern Art		
Part IV, Identification of Related Organizations Taxable as Corp or Trust:		
Name, Address, and EIN of Related Organization:		
Alta Cultura		
EIN: 13-4114902		
11 West 53rd Street		
New York, NY 10019		
Primary Activity: General Business Corporation		
Direct Controlling Entity: N/A		
Name and Address of Related Organization:		
5 Charitable Trusts		
932165 09-10-19	Schedule R (Forn	000) 2010

MUSEUM OF MODERN ART

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Various
New York, NY 10019
Primary Activity: Trust
Direct Controlling Entity: N/A
Schedule R, Part I
There is a \$2 million line of credit guaranteed by MoMA.
Schedule R, Part V, Line 1r
The Museum is under an agreement with the Internal Council of the
Museum of Modern Art and MoMA PS1 Contemporary Art Center to invest and
manage the Council's and PS1's endowment funds. The amounts transferred
for investment and spending from these endowments are reflected in Part
Ϋ.

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