Form 8453-E0

*** Form 990 Online Filers: Please fax completed and signed form to 866-699-3916 or email a scanned PDF copy of the signed form to efflesigforms@urban.org 3-E0 Exempt Organization Declaration and Signature for Electronic Filing

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Part III	De	eclarat	ion of E	lectron	ic Return	Origi	nator (ERO) ar	nd Pai	d Pre	par	er (se	ee ins	truc	tions)	···		
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OMB No. 1545-1879

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047 13

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Check it spotcable Chemo of organization MUSELIN QF MODERN ART Designations As Designations A	A	For the	2013 cale	endar year, or tax year beginning 07/01 , 201	3, and endi	ng 06	/30	, 20 14	
Name change Initiar elam Init	В	Check if	applicable:	C Name of organization MUSEUM OF MODERN ART			D Employ	er identification number	
Tax-exempt status:		Address	change	Doing Business As				13-1624100	
Initial return Terminated City or two, talls or province, country, and ZiP or foreign postal code City or two, talls or province, country, and ZiP or foreign postal code City or two, talls or province, country, and ZiP or foreign postal code City or two, talls or province, country, and ZiP or foreign postal code City or two, talls or province, country, and ZiP or foreign postal code City or two, talls or province, country, and ZiP or foreign postal code City or two, talls or province, country, and ZiP or foreign postal code City or two, talls or province, country, and ZiP or foreign postal code City or two, the city of the		Name c	nange	Number and street (or P.O. box if mail is not delivered to street address)	Room/si	uite	E Telepho	ne number	
Terminated Americant return			-	11 West 53rd Street				212-708-9801	
Amended return Mew York, NY. 10019 Gross receipts \$ \$85,528,641 Application pending Filams and address of principal officer: Marie-Josee Kravis High's tike signs prefer for anotherist Yes No High are and subcreased principal officer: Marie-Josee Kravis High's tike signs prefer for anotherist Yes No High are and subcreased principal officer: Marie-Josee Kravis High's tike signs prefer for anotherist Yes No High are anotherist Yes Yes No High are anotherist Yes Yes No High are anothe	\Box								
Application panding F Name and suddress of principal officer. Marie Josee Kravis Hole Storage path for abductionate Ves. No.	$\overline{\Box}$			New York, NY, 10019			G Gross re	eceipts \$ 566,528,643	
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Tex-exempt status:	_	Applicat	ion pending			1			
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Part Summary	<u>-</u>				01 1-1 321	·		•	
Summary Schedule	<u>, , , , , , , , , , , , , , , , , , , </u>				Vear of forms				
Briefly describe the organization's mission or most significant activities: The Museum of Modern Art establishes, preserves, and documents a permanent collection of modern and contemporary art, presents exhibitions and educational programs.	_				. 1641 01 1011112	1929	W State	or regal dominate. 141	
and documents a permanent collection of modern and contemporary art, presents exhibitions and educational programs, sustains a library, archives, and conservation laboratory and supports scholarship and publications. 2 Check this box — If it the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a). 3 3 43 4 Number of independent voting members of the governing body (Part VI, line 1a). 4 38 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a). 5 1,224 6 Total number of volunteers (estimate if necessary). 6 6 396 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 6,173,345 b Net unrelated business taxable income from Form 990-T, line 34 7b 1,433,642 Total unrelated business taxable income from Form 990-T, line 34 7b 1,433,642 Prior Year Current Year 8 Contributions and grants (Part VIII, line 1h). 88,978,253 123,940,602 8 Contributions and grants (Part VIII, line 2g). 38,801,669 38,241,021 10 Investment income (Part VIII, line 2g). 38,801,669 38,241,021 11 Other revenue (Part VIII, column (A), lines 2g). 38,801,669 38,241,021 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12). 214,122,158 321,283,226 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 1,067,150 599,300 14 Benefits paid to or for members (Part IX, column (A), lines 1-3). 1,067,150 599,300 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16 Professional fundraising fees (Part IX, column (A), lines 5-10) 17 Other expenses (Part IX, column (A), lines 11e). 5,0,000 300,000 18 Total fundraising expenses (Part IX, column (A), lines 5-10) 19 Revenue less expenses. Subtract line 18 from line 125,720,774 97,162,870 19 Revenue less expenses. Subtract line 18 from line 125,720,774 97,162,870 19 Revenue less expenses. Subtract line 21 from line 20 1,068,680,338 1,207,912,887 19 Prior year pr		_			ings The I		6		
B Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year	•]]	-	<u>-</u>	*******				
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B Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year	'n								
B Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year	Š	1					I	its net assets.	
B Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year	ဖိ	3						43	
B Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year	≪	4		•)		38	
B Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year	ţį	5	Total nur	nber of individuals employed in calendar year 2013 (Part V,	line 2a)		5	1,224	
B Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year	3	6	Total nur	nber of volunteers (estimate if necessary)			6	396	
8 Contributions and grants (Part VIII, line 1h)	Ac	7a	Total unr	elated business revenue from Part VIII, column (C), line 12			7a	6,173,345	
8		b	Net unre	lated business taxable income from Form 990-T, line 34 .			7b	1,433,642	
9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 3, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), lines 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16 Professional fundraising expenses (Part IX, column (A), line 1e) 17 Other expenses (Part IX, column (A), line 1e) 18 Total expenses (Part IX, column (A), line 2b) 19 Revenue less expenses. Subtract line 18 from line 12 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 22 Net assets or fund balances. Subtract line 21 from line 20 23 Signature of officer 19 James Gara, Chief Operating Officer 19 Type or print name and title 19 Print/Type preparer's name 20 Print/Type reparer's name 20 Print/Type reparer's name 20 Print/Type reparer's name 20 Print/Type reparer's name 21 Print/Type reparer's name 22 Print/Type reparer's name 23 Print/Type reparer's name 24 Print/Type reparer's name 25 Print/Type reparer's name 26 Print/Type reparer's name 27 Print/Type reparer's name 28 Print/Type reparer's name 29 Print/Type reparer's name 20 Print/Type reparer's name 21 Print/Type reparer's name 22 Print/Type reparer's name 23 Print/Type reparer's name 24 Print/Type reparer's name 25 Print/Type reparer's name 26 Print/Type reparer's name 27 Print/Type reparer's name 27 Print/Type reparer's name 28 Print/Type reparer's name 29 Print/Type reparer's name 29 Print/Type reparer'						Prior Ye	ear	Current Year	
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12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 214,122,158 321,283,226 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 1,067,150 599,390 14 Benefits paid to or for members (Part IX, column (A), lines 5–10) 5 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 84,974,132 87,012,505 16a Professional fundraising fees (Part IX, column (A), line 11e) 50,000 300,000 15 Total fundraising expenses (Part IX, column (D), line 25) 14,484,044 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 134,751,650 136,208,361 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 220,842,932 224,120,256 19 Revenue less expenses. Subtract line 18 from line 12 6,720,774 97,162,970 18 Total assets (Part X, line 16) 1,511,429,623 1,630,045,534 20 Total assets (Part X, line 26) 424,623,285 422,132,667 21 Total liabilities (Part X, line 26) 1,086,806,338 1,207,912,867 22 Net assets or fund balances. Subtract line 21 from line 20 1,086,806,338 1,207,912,867 21 Total profiles (Part X, line 26) 1,086,806,338 1,207,912,867 21 Total profiles (Part X, line 26) 1,086,806,338 1,207,912,867 22 Total profiles (Part X, line 26) 1,086,806,338 1,207,912,867 23 Total profiles (Part X, line 26) 1,086,806,338 1,207,912,867 24 Total profiles (Part X, line 26) 1,086,806,338 1,207,912,867 25 Total profiles (Part X, line 26) 1,086,806,338 1,207,912,867 25 Total profiles (Part X, line 26) 1,086,806,338 1,207,912,867 26 Total profiles (Part X, line 26) 1,086,806,338 1,207,912,867 27 Total profiles (Part X, line 26) 1,086,806,338 1,207,912,867 27 Total profiles (Part X, line 26) 1,086,806,338 1,207,912,867 28 Total profiles (Part X, line 26) 1,086,806,338 1,207,912,867 29 Total profiles (Part X, line 26) 1,086,806,338 1,207,912,867 20 Total profiles (P	ď	1		· · · · · · · · · · · · · · · · · · ·					
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14 Benefits paid to or for members (Part IX, column (A), line 4)								f	
Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 50,000 300,000 17 Other expenses (Part IX, column (D), line 25) ▶ 14,484,044 18 Total expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 19 Revenue less expenses. Subtract line 18 from line 12 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 23 India subtract line 21 from line 20 24 Index pensities of perjury, 1 declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature Date Check if PTIN		1							
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Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 220,842,932 224,120,256 19 Revenue less expenses. Subtract line 18 from line 12	쏬	_b			-				
19 Revenue less expenses. Subtract line 18 from line 12		17						1	
Beginning of Current Year End of Year),842,932	224,120,256	
20 Total assets (Part X, line 16)		19	Revenue	less expenses. Subtract line 18 from line 12					
Total liabilities (Part X, line 26)	50					Beginning of Co	irrent Year	End of Year	
Total liabilities (Part X, line 26)	sets	20	Total ass	sets (Part X, line 16)		1,51	1,429,623	1,630,045,534	
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here James Gara, Chief Operating Officer Type or print name and title Print/Type preparer's name Preparer's signature Date Check ☐ if self-employed Firm's name Firm's name Firm's name Firm's address Phone no.	t As	21	Total liab	oilities (Part X, line 26)		424	,623,285	422,132,667	
Under penalities of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here James Gara, Chief Operating Officer Type or print name and title Print/Type preparer's name Preparer's signature Date Check ☐ if Self-employed Firm's name Firm's name Firm's name Phone no.	ž	22	Net asse	ets or fund balances. Subtract line 21 from line 20		1,08	5,806,338	1,207,912,867	
Sign Here Signature of officer Date	P	art II	Signa	ture Block					
Sign Here James Gara, Chief Operating Officer Date	Ur	nder pena	alties of perju	ury, I declare that I have examined this return, including accompanying sche-	dules and stat	ements, and to t	he best of	my knowledge and belief, it is	
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Here James Gara, Chief Operating Officer Type or print name and title Paid Preparer Preparer's signature Date Check ☐ if Self-employed Firm's name ► Firm's name ► Firm's address ► Phone no.	Sig	gn	Sign	nature of officer		Da	ite		
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Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	See schedule O
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$
4b	Notable acquisitions in FY 2014 included 13 important vintage works from the 1950s by William Klein, an American photographer actively exhibited and collected by MoMA; Tetsumi Kudo's Fossil in Hiroshima (1976), a set of five embossings with spray paint additions by an artist featured in MoMA's recent exhibition Tokyo 1955-1970: A New Avant-Garde; Maria Lassnig's Sciencia (1998), featured at MoMA PS1 this year in the artist's first American retrospective; a set of 24 contemporary films, posters, and accompanying material by the various filmmakers associated with Anna Sanders Films, an avant-garde production company based in Paris; Isa Genzken's Rose II (2007); and Charles Gaines's Manifestos 2 (2013), a new multimedia installation featured in MoMA's Sites of Reason exhibition and performed live at the Museum in September of this year.
4c	(Code:) (Expenses \$ 25,751,030 including grants of \$ 0) (Revenue \$ 0) Security operation and maintenance of exhibition galleries and art collection.
4d	Other program services (Describe in Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
4e	Total program service expenses ► 162,771,420

Part	₩ Checklist of Required Schedules			. age c
recin:	Oneckist of required ochedules		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			
9		1	√	-
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	✓	
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		√
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	✓	
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
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			1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		\ <u>\</u>
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7		✓
9	complete Schedule D, Part III	8	✓	
3	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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	√	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	√	
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		
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
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		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	√	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b	✓	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising business investment and program continue activities autoide the United Ottons are appropriate and program appropriate activities autoide the United Ottons are appropriate.			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	1	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? 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 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		,	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	17	1	
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		Υ	
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19		V
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		-

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	√	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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 Schedule J	23	✓	
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	√	
c b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c	√	✓
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	1
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<i>'</i>
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		√
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<i>'</i>
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):	EI		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	√	
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	1	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L. Part IV	28c		
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29	✓	
31	conservation contributions? If "Yes," complete Schedule M	30	✓	
32	Part I	31		1
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	:	1
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		√
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	<	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	✓	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		√
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		✓
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	1	

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			. 🗆
		Police Street Const.	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 572	실		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	4		
Ū	reportable gaming (gambling) winnings to prize winners?	4	7	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	/	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1224	L		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	√	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	1	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	✓	
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		,	
b	If "Yes," enter the name of the foreign country: See Schedule O, Statement 2	4a	✓	
	See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		7
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
L	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
7	gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	6b		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	√	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u>/</u>	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
ď	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7h		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	4.3		
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	***************************************	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a b	Initiation fees and capital contributions included on Part VIII, line 12			
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b] Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	***************************************	
þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
D	the experience in licensed to increase wellfield be the view			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		/
h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	144		··

Form 99	90 (2013)			F	age 6
Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes	s in Schedule O. S	iee ins	tructi	ons.
Casti	Check if Schedule O contains a response or note to any line in this Part VI	· · · · · ·			✓
Secti	on A. Governing Body and Management		· · · · · · · · · · · · · · · · · · ·	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1a 43			
ь 2	Enter the number of voting members included in line 1a, above, who are independent. Did any officer, director, trustee, or key employee have a family relationship or a business any other officer, director, trustee, or key employee?		2	√	
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, or trustees, or key employees to a management company or other		3		✓
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 90 Did the organization become aware during the year of a significant diversion of the organization Did the organization have members or stockholders?	on's assets? elect or appoint	4 5 6 7a	√	√
b	Are any governance decisions of the organization reserved to (or subject to approval stockholders, or persons other than the governing body?		7b		✓
8	Did the organization contemporaneously document the meetings held or written actions un the year by the following:	dertaken during			,
a	The governing body?		8a	/	
9 b	Each committee with authority to act on behalf of the governing body?	ot be reached at	8b 9	V	√
Section	on B. Policies (This Section B requests information about policies not required by the	e Internal Reven	ue Co	ode.)	
		•••		Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	pt purposes?	10a 10b		✓
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	_	11a	✓	
b 12a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> . Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			√ √	
С	Did the organization regularly and consistently monitor and enforce compliance with the predescribe in Schedule O how this was done.	•	12c	1	
13	Did the organization have a written whistleblower policy?		13	✓	
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation	and approval by and decision?	14	✓	
a b	The organization's CEO, Executive Director, or top management official		15a 15b	√	
16a	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 simi with a taxable entity during the year?		16a		<u> </u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?	o safeguard the	16b		
Section	on C. Disclosure		1.50	1	
17 18	List the states with which a copy of this Form 990 is required to be filed ► See Schedule O, Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a available for public inspection. Indicate how you made these available. Check all that apply.	nd 990-T (Section	n 501(d	c)(3)s	only)
19	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Sci Describe in Schedule O whether (and if so, how) the organization made its governing docume financial statements available to the public during the tax year.		erest p	oolicy	, and
20	State the name, physical address, and telephone number of the person who possesses the beorganization: Inha C Bailey - Controller (212)708-9801	ooks and records	of the		

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization no	r any relate	d org	aniz	atic	n c	ompe	ensa	ated any currer	t officer, directo	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any	(do n	not ch unles	Pos neck ss pe d a d	c) ition more	e than o is both or/trus	one n an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
David Rockefeller	1									
Honorary Chairman/Life Trustee	0	✓		1				0	0	0
Ronald S Lauder	1		Т				 			
Honorary Chairman/Trustee	0	✓		✓				0	0	0
Robert B Menschel	1									
Chairman Emeritus/Life Trustee	0	✓		1				0	0	0
Agnes Gund	1									
President Emerita/Trustee	0	✓		1				0	0	0
Donald B Marron	1									
President Emeritus/Life Trustee	0	✓		<				0	0	0
Jerry I Speyer	10									****
Chairman/Trustee	0	✓		✓				0	0	0
Marie-Josee Kravis	10									
President /Trustee	0	✓		✓				0	0	0
Sid R Bass	1									
Vice Chairman/Trustee	0	✓		✓				0	0	0
Leon D Black	1									
Vice Chairman/Trustee	0	✓		✓				0	0	0
Mimi Haas	1									
Vice Chairman/Trustee	0	✓		1				о	o	0
Richard E Salomon	1									
Vice Chairman/Treasurer/Trustee	0	✓		1			:	0	0	0_
Wallis Annenberg	0.5									
Trustee	0	✓						0	0	0
Lawrence B Benenson	1									
Trustee	0	V						0	0	0
Clarissa Alcock Bronfman	0.5									
Trustee	0	✓						0	0	0

C) Position (do not check more than one body where the position of the pos		1			•	~ 1					
Name and Title					-	-					
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Patricia Phelps de Cisneros				1							
Patricia Phelps de Cisneros		hours for	Indi or d	Inst	윺	ē.	eng Hig	Fgn	the	organizations	compensation
Patricia Phelps de Cisneros			irec	l it	eq	em) iest	럩			
Patricia Phelps de Cisneros			tor tor	onal		탕	e 01		(44-27 1099-141130)		
Patricia Phelps de Cisneros		line)	rust	tru		è	npe	l			organizations
Patricia Phelps de Cisneros			96	stee			nsate				٠
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Trustee 0 √ 0 0 0 Paula Crown 1 1 7 0 0 0 Trustee 0 √ 0 0 0 0 David Dechman 1 1 0	Patricia Phelps de Cisneros	1									
Paula Crown	Trustee	-p	✓						0	o	0
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· (A) Name and Title	(B)			neck	more	e than o		(D)	(E)	(F)
Name and Title	Average hours per	box,	unles	ss pe	rson lirect	is both or/trusi	n an	Reportable compensation	Reportable compensation from	Estimated amount of
	week (list any				1			from	related	other
	hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	m gigs	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	ecto	Į į	4	쁑	st c	₽,	(W-2/1099-MISC)		organization
	below dotted line)	7 =	횰		Ş	"ä				and related
	lille)	stee	sur		ő) ax				organizations
		49	ee			Highest compensated employee				
			-		_					
Jill Kraus	1									
Trustee	.0	✓						0	0.	0
Thomas H Lee	1									
Trustee	0	✓						0	0	0
Michael Lynne	11									
Trustee	0	✓						0	0	. 0
Philip S Niarchos	1									
Trustee	0	✓						0	0	0
James G Niven	1									
Trustee	0	✓						0	0	0
Peter Norton	1									
Trustee	0	✓						0	0	0
Maja Oeri	1									
Trustee	0	✓						0	0	0
Michael S Ovitz	1									
Trustee	0	\						0	0	0
David Rockefeller Jr	1									
Trustee	0	\						0	0	0
Daniel S Och	1									
Trustee as of 12/2013	0	✓						0	0	0
Richard D Parsons	1									
Trustee thru 4/2014	0	✓						0	0	0
Sharon Percy Rockefeller	1									
Trustee	0	\						0	o	0
Ronald O Perelman	1									
Trustee	0	✓						0	o	0
Marcus Samuelsson	1									
Trustee	0	1						o	o	0
									····	Earm 900 (2012)

				(4	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average					than o		Reportable	Reportable	Estimated
	hours per	office	er and	as pe	lirect	or/trus	tee)	compensation	compensation from	
	week (list any hours for	오크		,				from the	related	other
	related	함함	l₩	Officer	e e	nplo	Former	organization	organizations (W-2/1099-MISC)	compensation from the
	organizations		Institutional trustee	٦	Key employee	st c	4	(W-2/1099-MISC)		organization
	below dotted line)	٦ã	<u>al</u>		oye	ä				and related organizations
		stee	Tust-		r r	èns				Organizations
			8			Highest compensated employee				
Anna Deavere Smith	11									
Trustee	0	✓						0	0	0
Ricardo Steinbruch	1									
Trustee	0	✓						0	0	0
Alice M Tisch	11									
Trustee	0	✓						0	0	0
Gary Winnick	11				İ					
Trustee	0	✓						0	0	0
Eli Broad	11									
Life Trustee	0	✓						0	0	0
Douglas S Cramer	1									
Life Trustee	0	✓						0	0	0
Joel S Ehrenkranz	1									
Life Trustee	0	✓						0	0	0
Gianluigi Gabetti	0.5									,
Life Trustee	0	✓						0	0	0
Barbara Jakobson	1									
Life Trustee	0	✓						0	0	0
Werner H Kramarsky	1									
Life Trustee	0	\						0	o	0
June Noble Larkin	1									
Life Trustee	0	✓						0	ol	0
Peter G Peterson	0.5									
Life Trustee	0	✓						l 0	ol	0
Emily Rauh Pulitzer	1									
Life Trustee	0	✓						l 0	ol	0
Anna Marie Shapiro	1									
Life Trustee	0	✓						l 0	o	0
								•	······································	Form 990 (2013)

(A) Name and Title	(B) Average hours per week (list any	officer and a director/trustee)		(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other				
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Jeanne C Thayer	0.5									
Life Trustee	0	1						0	o	0
Joan Tisch	1				┢			-	0	
Life Trustee	0	1						l 0	o	0
Edgar Wachenheim III	1									<u> </u>
Life Trustee	0	1						0	٥	0
Glenn D Lowry	40									<u> </u>
Director/Ex-Officio Trustee	0			1				2,386,719	o	995,238
James Gara	40									,
Chief Operating Officer/Assistant Treasurer	0	1		✓				699,261	0	705,739
Patty Lipshutz	40									
General Counsel/Secretary	0			✓				382,657	o	87,464
Frank Ahimaz	40									
Chief Investment Officer	0				✓			572,051	0	345,775
Kathy Halbreich	40									
Associate Director	0				✓			438,154	o	93,535
Todd Bishop	40									
Senior Deputy Director of External Affairs	0				1			394,182	o	159,991
Peter Reed	40									
Senior Deputy Director for Curatorial Affairs	0				✓			348,980	o	85,830
Ramona Bannayan	40									
Senior Deputy Director for Exhibitions	0				✓			274,139	0	144,235
Jan Postma	40									
Chief Financial Officer	0				✓			299,805	0	41,695
Ann Temkin	40									
Chief Curator - Painting and Sculpture	0				1	,		270,759	0	82,220
Klaus Biesenbach	0									
Chief Curator at Large	40				✓			0	307,871	6,914 Form 990 (2013)

				((C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average		do not check more than one box, unless person is both an					Reportable	Reportable	Estimated
	hours per					or/trus		compensation	compensation from	amount of
	week (list any hours for	Ind or a	Ins	2	T A	em Hig	₽.	from the	related organizations	other compensation
	related	Individual trustee or director	₹	Officer	Key employee	ploy	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	ual t	lona		븅	ee t co	,	(W-2/1099-MISC)		organization and related
	line)	rust	a		yee	mpe				organizations
		ee	Institutional trustee			Highest compensated employee				
						ä				
Tunji Adeniji	40							<u> </u>		
Director of Facilities and Security	0			<u> </u>	✓			243,126	0	47,814
Rajendra Roy	40									
Chief Curator - Film	0				✓			243,530	0	54,746
Christophe Cherix	40									
Chief Curator - Prints & Illustrated Books	0		L		1			260,165	0	58,642
Quentin Bajac	40									
Chief Curator - Photography as of 1/3/2013	0				✓			315,393	0	34,959
Barry Bergdoll	40									
Chief Curator-Architecture & Design thru 8/31/13	0				✓			210,206	0	56,963
Stuart Comer	40						ŀ			
Chief Curator-Media & Performance Art as of 9/23/	0				1			91,552	0	11,677
Cornelia Butler	40									
Chief Curator- Drawings thru 7/1/2013	0				✓		ļ	132,640	0	18,464
Sabine Breitwieser	40				;					
Chief Curator-Media & Performance Art thru 1/31/2	1				✓			100,054	0	3,050
Anthony Wai	40									
Director of Investments	0					✓		324,418	0	181,126
Kathy Thornton-Bias	40									
General Mgr -Retail thru 2/20/2013	0					✓		469,936	0	5,020
Christopher Hudson	40									
Publisher	0					✓		316,080	0	92,166
Patricia Jeffers	40									
Director of Human Resources	0					✓		268,564	0	72,488
Juan Montes	40									
Chief Technology Officer	0					✓		275,801	0	38,424

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	yees	s, ar	nd F	lighe	st C	ompensated E	mployees ((contin	ued)	
					(0	C)							
	(A)	(B)	4.0.			ition			(D)	(E)		· (F)	
	Name and title	Average					than o		Reportable	Reportat	ole	Estimated	
		hours per					or/trust		compensation	compensatio		amount of	
		week (list any	95	5	Q	₹ ey	먹표	77	from the	related organizati		other compensation	
		hours for related	흑울	stit.	Officer	92	npk	Form	organization	(W-2/1099-1		from the	
		organizations	ecta	ĕ	*	흉	st c	호	(W-2/1099-MISC)	,	´	organization	
		below dotted	Individual trustee or director	Institutional trustee		employee	, g					and related	
		line)	rste	l inus		ď	pen					organizations	
			Ф	tee			Highest compensated employee						
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					İ								
1b	Sub-total				<u>!</u>			>	9,318,172	30	7,871	3,424,175	
C	Total from continuation sheets to Part		nΔ	•	•	•	•		3,310,172	30	7,071	9,727,170	
ď		-		•	•		•		9,318,172	20	7 074	2 424 175	
2	Total (add lines 1b and 1c)							· · · ·			7,871	3,424,175	
~	Total number of individuals (including but reportable compensation from the organic			iose	IISI	ea.	above	e) W	no receivea m	ore than \$1	00,00	IU OT	
	reportable compensation from the organi	ization > 1	24									132 131	
_	Did the constant of the Patrice Party of the Constant	. P										Yes No	
3	Did the organization list any former of							emp	ployee, or high	est compe	ensate	sg	
	employee on line 1a? If "Yes," complete											3 ✓	
4	For any individual listed on line 1a, is the	sum of re	portal	ble (con	npei	nsatio	n a	and other comp	ensation fi	rom th	ne	
	organization and related organizations	greater that	an \$1	150,	000	? /:	f "Ye	s, "	complete Sch	edule J fo	or suc	h	
	individual											4 🗸	
5	Did any person listed on line 1a receive of	or accrue co	ompe	nsat	tion	froi	m anv	/ un	related organiz	ation or inc	dividu		
•	for services rendered to the organization											5 1	
Sactio	on B. Independent Contractors												
1	Complete this table for your five highest		ad in	400			0001	t	ara that ranalis	ed mara the	¢10	0000 of	
ı	compensation from the organization. Rep												
		on compe	nsauc) K	or u	ie c	aleno	iai y	year ending wit	n or willin	tii e oi	rganization's tax	
	year.							т			_		
	(A)	l							(B)			(C)	
	Name and business add	iress						L	Description of s	ervices		Compensation	
Bluewater Communication Group LLC, 110 Parkway Drive South, Hauppauge, N						NY 11	Inf	ormation Techn	ology		1,150,212		
Diller Scofidio and Renfro, 601 West 26 Street, New York, NY 10001									chitect		1,002,969		
Proskaur Rose LLP, Eleven Time Square, New York, NY 10036								Legal Services			447,863		
	vaterhouseCoopers LLP, 300 Madison Avenu			100	17			1	dit Fees		348,760		
	te Giguere, 303 7th Street, Brooklyn, NY 112		., ., .	.00	• •			1	aphics			152,445	
2 Paulet	Total number of independent contractors		ים אי	ıt n	ot :	limit	ed to			ove) who		152,445	
4	Total Harrison of macpondent contract	via functional	9 5		J			- 11	notou ab	3.0, 11110	laza da		

received more than \$100,000 of compensation from the organization ▶

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII. (D) Revenue excluded from tax (C) Unrelated business (A) Total revenue (B) Related or exempt function under sections 512-514 revenue Contributions, Gifts, Grants and Other Similar Amounts Federated campaigns . . . Membership dues 1b 3,729,791 1c Fundraising events 7,943,959 Related organizations . . . 1d Government grants (contributions) 1e 2,490,100 All other contributions, gifts, grants, and similar amounts not included above 1f 109,776,752 Noncash contributions included in lines 1a-1f: \$ 15,854,176 Total. Add lines 1a-1f . . . 123,940,602 Program Service Revenue **Business Code** 30,450,967 30,450,967 0 2a 712100 Admissions Exhibition Tour Income 712100 2,679,053 2,679,053 All other program service revenue. 2,111,001 2,111,001 Total. Add lines 2a-2f 35,241,021 Investment income (including dividends, interest, and other similar amounts) 14,897,348 924,065 13,973,283 Income from investment of tax-exempt bond proceeds 4 0 0 0 0 5 Royalties . . . 0 0 O (i) Real (ii) Personal 6a Gross rents . . 1,522,583 b Less: rental expenses 234,967 0 c Rental income or (loss) 1,287,616 0 d Net rental income or (loss) 1,287,616 1,287,616 (i) Securities (ii) Other 7a Gross amount from sales of assets other than inventory 304,035,000 29,801,089 Less: cost or other basis and sales expenses . 217,651,870 Gain or (loss) . . 86,383,130 29,801,089 Net gain or (loss) 116,184,219 29,801,089 86,383,130 Other Revenue 8a Gross income from fundraising events (not including \$ 7,943,959 of contributions reported on line 1c). See Part IV, line 18 461,680 b Less: direct expenses 1,456,334 c Net income or (loss) from fundraising events -994,654 -994,654 9a Gross income from gaming activities. See Part IV, line 19 Less: direct expenses 0 c Net income or (loss) from gaming activities . . . O 0 Đ O 10a Gross sales of inventory, less returns and allowances . . . 52,691,563 b Less; cost of goods sold . . . 25,902,246 Net income or (loss) from sales of inventory . . . > 26,789,317 22,400,716 4,388,601 Miscellaneous Revenue **Business Code** 11a Museum Restaurants 722100 1,182,968 n 1,182,968 900099 2,754,789 1,894,110 860,679 b Corporate Events 0 All other revenue Total. Add lines 11a-11d. 3,937,757 Total revenue. See instructions. 101,832,343 321,283,226 89,336,936 6,173,345

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising Do not include amounts reported on lines 6b, 7b, (A) Total expenses (B) Program service (C) Management and general expenses 8b. 9b. and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 599,390 599,390 Grants and other assistance to individuals in 2 the United States, See Part IV, line 22 . . . 0 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 . . . n 0 4 Benefits paid to or for members 0 0 Compensation of current officers, directors, trustees, and key employees 2,170,478 4,948,572 7,619,812 500,762 Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 0 7 Other salaries and wages 56,436,721 44,355,076 7,907,358 4,174,287 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 8,711,998 6,327,700 1,748,469 635,829 9 Other employee benefits 9,845,561 7,151,030 1,975,971 718,560 10 Payroll taxes 4,398,413 3,506,262 606,486 285,665 Fees for services (non-employees): 11 Management , , , а O 0 Legal , . . . 624,046 0 624,046 0 Accounting C 422,175 0 422,175 0 d 60,000 0 60,000 0 Professional fundraising services. See Part IV, line 17 e 300,000 300,000 Investment management fees 7,005,364 0 7,005,364 0 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 15,522,091 11,060,214 2,189,313 2,272,564 12 Advertising and promotion . . . 5,826,611 3,791,585 0 2,035,026 13 Office expenses 14,594,802 13,026,811 1,114,525 453,466 Information technology 14 1,162,059 93,499 1,068,560 0 15 189,168 189,168 0 0 16 14,279,484 5,771,470 6,469,297 2,038,717 17 3,576,106 3,256,505 238,099 81,502 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 0 Conferences, conventions, and meetings . 19 0 0 0 0 20 9,744,082 7,862,017 1,428,821 453,244 Payments to affiliates 21 0 Depreciation, depletion, and amortization . 22 26,460,286 17.515.043 8,763,432 181,811 23 2,537,325 2,464,516 48,539 24,270 24 Other expenses, Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Acquisition of works of art а 33,265,287 33,265,287 0 0 h Membership Dues and Subscriptions 440,209 188,862 245,765 5,582 Administrative & Other Expenses C 499,266 176,507 0 322,759 d All other expenses e Total functional expenses. Add lines 1 through 24e 224,120,256 162,771,420 46,864,792 14,484,044 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

	art X				
		Check if Schedule O contains a response or note to any line in this Pa	art X	<u> </u>	
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	13,425,669	1	5,325,218
	2	Savings and temporary cash investments	19,886,660	2	47,850,742
	3	Pledges and grants receivable, net	170,063,190	3	175,394,056
	4	Accounts receivable, net	4,867,160	4	7,001,116
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	0	5	0
Ş	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	
Assets	7	Notes and loans receivable, net	0	7	0
As	8	Inventories for sale or use	11,777,030	8	11,209,897
	9	Prepaid expenses and deferred charges	10,249,446	9	11,204,529
	10a	Land, buildings, and equipment: cost or	10,210,110		11,204,023
		other basis. Complete Part VI of Schedule D 10a 785,090,131			
	b	Less: accumulated depreciation 10b 294,280,014	503,909,023	10c	490,810,117
	11	Investments—publicly traded securities	380,168,166		533,283,330
	12	Investments—other securities. See Part IV, line 11	330,438,488		305,622,974
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	66,644,791	15	42,343,555
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,511,429,623	16	1,630,045,534
	17	Accounts payable and accrued expenses	43,274,576	17	40,462,963
	18	Grants payable	0	18	0
	19	Deferred revenue	51,599,763	19	58,227,286
	20	Tax-exempt bond liabilities	253,684,988		250,725,423
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
es	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	4,314,247	22	5,062,909
Lia	23	Secured mortgages and notes payable to unrelated third parties	4,314,247	23	5,062,909
	24	Unsecured notes and loans payable to unrelated third parties	21,000,000	24	17,800,000
	25	Other liabilities (including federal income tax, payables to related third	21,000,000		17,000,000
		parties, and other liabilities not included on lines 17-24). Complete Part X	50,749,711		49,854,086
		of Schedule D	00,7-10,711	25	40,004,000
	26	Total liabilities. Add lines 17 through 25	424,623,285	26	422,132,667
es		Organizations that follow SFAS 117 (ASC 958), check here ▶			
uc	27	Unrestricted net assets	659,774,226	27	000 200 000
sais	28	Temporarily restricted net assets	181,752,059	28	696,358,956
9	29	Permanently restricted net assets	245,280,053	29	264,772,919 246,780,992
Net Assets or Fund Balances	-	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			246,760,392 (1975)
ţ	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Se	33	Total net assets or fund balances	1,086,806,338	33	1,207,912,867
	34	Total liabilities and net assets/fund balances	1,511,429,623		1,630,045,534
					Form 990 (2012)

			ı agı	
Pari	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			$\overline{\mathbf{V}}$
1	Total revenue (must equal Part VIII, column (A), line 12)	1	321,283,	226
2	Total expenses (must equal Part IX, column (A), line 25)	2	224,120,	256
3	Revenue less expenses. Subtract line 2 from line 1	3	97,162,	970
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,086,806,	338
5	Net unrealized gains (losses) on investments	5	25,753,	246
6	Donated services and use of facilities	6		0
7	Investment expenses	7		0
8	Prior period adjustments	8		0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1,809,	687
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	10	1,207,912,	867
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," expected to the control of	olain i		No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both:			<u>/</u>
b	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	d on	. 2b 🗸	
С	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov of the audit, review, or compilation of its financial statements and selection of an independent account	ntant?	2c ✓	
	If the organization changed either its oversight process or selection process during the tax year, expectation changed either its oversight process or selection process during the tax year, expectation process during the tax year.			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set fithe Single Audit Act and OMB Circular A-133?		. 3a ,	✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	go the	e 3b	
		***********	Form 990 (2	2013)

SCHEDULE A

(Form 990 or 990-EZ)

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.

OMB No. 1545-0047 2013

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public

Inspection

Name	of the organization						[1	Employer id	dentificatio	n number	
1	UM OF MODERN									24100	
Par			rity Status (All orga						nstruction	ons.	
1 2 3	A church, con A school desc A hospital or a	vention of churc cribed in section a cooperative ho	ation because it is: (Fo hes, or association of 170(b)(1)(A)(ii). (Attac spital service organiza	churche ch Sched ation des	s describ lule E.) cribed in	ed in sec	tion 170 170(b)(1)	(b)(1)(A)(i (A)(iii).			
	hospital's nan	ne, city, and stat	on operated in conjun e:		-					•	
5		on operated for o)(1)(A)(iv). (Com	the benefit of a colle plete Part II.)	ge or un	iversity o	wned or	operated	by a go	vernmen	tal unit described in	
7	7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)										
9											
	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.										
е	other than fou or section 509	ındation manage 1(a)(2).	that the organization ers and other than on	is not co e or more	ntrolled o	directly or support	indirectled organi	y by one izations o	or more described	I in section 509(a)(1)	
f			a written determination				a Type	i, Type i	ll, or Typ	e III supporting	
g	Since August following pers		he organization accep	pted any	gift or c	ontributio	n from a	ny of the	•	_	
	(i) A person (iii) below,	who directly or i	ndirectly controls, eithody of the supported of	her alone organizat	or toget	her with	persons	describe	d in (ii) a	nd Yes No	
			on described in (i) abo							11g(ii)	
	(iii) A 35% cor	ntrolled entity of	a person described in	ı (i) or (ii) :	above? .					11g(iii)	
<u>h</u>			on about the support	T	. , ,	T				T	
(6)	lame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col. (i) lis	organization sted in your document?	the organ	ou notify nization in of your port?	organizat (i) organi	s the tion in col. zed in the S.?	(vii) Amount of monetary support	
				Yes	No	Yes	No	Yes	No		
(A)											
(B)											
(C)											
(D)											
(E)											

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total grants, contributions, membership fees received. (Do not include any "unusual grants.") . . . 67,986,812 91,348,611 99,837,516 88,978,253 123,940,602 472,091,794 levied for the revenues organization's benefit and either paid to or expended on its behalf . . . O n 0 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge 0 0 Total. Add lines 1 through 3 67,986,812 91,348,611 99,837,516 88,978,253 123,940,602 472,091,794 The portion of total contributions by each person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. 472,091,794 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (c) 2011 (a) 2009 (b) 2010 (d) 2012 (e) 2013 (f) Total 7 Amounts from line 4 , , , , , , 67,986,812 91,348,611 99,837,516 88,978,253 123,940,602 472,091,794 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 13,664,078 17,076,148 15,783,171 15,630,866 16,484,359 78,638,622 Net income from unrelated business activities, whether or not the business is regularly carried on 0 132,868 1,159,754 0 1,735,350 3,027,972 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 4,654,878 4,839,958 4,744,645 4,259,230 22,898,149 4,399,438 11 Total support. Add lines 7 through 10 576,656,537 Gross receipts from related activities, etc. (see instructions) 12 161,975,660 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) Section C. Computation of Public Support Percentage Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 14 81.87 % Public support percentage from 2012 Schedule A, Part II, line 14 15 % 331/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this $\overline{\mathbf{Y}}$ 331/3% support test-2012. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test -- 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported П b 10%-facts-and-circumstances test-2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Part III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	- A B-1-P-C		·· ** ** · ·	. , , ,			
	on A. Public Support	(-) C000	(1-) 0010	(-) CO44	(-1) 0040	(-) 0040	(D. T - + - !
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
٠.	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513	:					
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3						
-	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
O 1.	line 6.)						
	on B. Total Support	(-) 0000	#1.0040	() 0044	(0 0040	() 0040	40 T 1 1
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6		<u> </u>				
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						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or						
• ***	loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)		l first	al Abinal E	au Chil-		- ED4/-3/03
14	First five years. If the Form 990 is for the organization, check this box and stop he	re			· -	ear as a sectio	
	on C. Computation of Public Suppor						
15	Public support percentage for 2013 (line						%
16	Public support percentage from 2012 Sci					16	%
	on D. Computation of Investment In				(0)		0.
17	Investment income percentage for 2013 (• • •	•			<u>%</u>
18	Investment income percentage from 2012						% and line
19a	331/a% support tests—2013. If the organ 17 is not more than 331/a%, check this box						
I.	33 ¹ / ₃ % support tests—2012. If the organization		_			-	
b	line 18 is not more than 331,8%, check this						
20	Private foundation. If the organization di						
	9						

Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
Schedule A	A, Part II, Line 10 - General Explanation - Other income includes gross income from fundraising and corporate events and
	venue from the restaurant licensing operations.

••••	
••••	

••••	

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below.
 ► Attach to Form 990 or Form 990-EZ.
 ► See separate instructions.
 ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

If the organization answered "Yes," to 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," to 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.

	-	s," to Form 990, Part IV, line 5 (Proxy	Tax) or Form 990-E	Z, Part V, line 35c (Proxy T	ax), then
	ection 501(c)(4), (5), or (6) orga of organization	anizations: Complete Part III.		Employer idea	ntification number
	UM OF MODERN ART				13-1624100
Part		e organization is exempt und	er section 501(c	c) or is a section 527	
1		the organization's direct and indire			organization.
2		· · · · · · · · · · · · · · · · · · · ·			3
3					***************************************
-			• • • • •		
Part	I-B Complete if the	e organization is exempt und	er section 501(c	c)(3).	
1		excise tax incurred by the organiza			<u> </u>
2		excise tax incurred by organization			·
3	If the organization incurre	ed a section 4955 tax, did it file Fo	m 4720 for this ye	ear?	Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part	IV.			
Part		e organization is exempt und			(c)(3).
1		ly expended by the filing organiz		•	
2		filing organization's funds contrib			
	527 exempt function acti	vities		· · · · · · · > \$	
3		expenditures. Add lines 1 and 2.			
4		n file Form 1120-POL for this year			
5	Enter the names, address	ses and employer identification nur	nber (EIN) of all se	ection 527 political organi	zations to which the filing
	organization made paymo	ents. For each organization listed,	enter the amount	paid from the filing organi	ization's funds. Also enter
	the amount of political co	ontributions received that were pro-	mptly and directly	delivered to a separate p	olitical organization, such
	as a separate segregated	fund or a political action committee	e (PAC). Il additio	nai space is needed, prov	ide information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
					delivered to a separate
					political organization. If none, enter -0
(1)					
141					
(2)					
(0)					
(3)					
745					
(4)					
/E\					
(5)					
<i>(6</i>)			0.0.00000000000000000000000000000000000		
(6)				Į.	I

Sched	lule C (Form 990 or 990-EZ) 2013					Page 2				
Par	II-A Complete if the organization section 501(h)).	ı is exempt u	nder section 50	01(c)(3) and filed	l Form 5768 (ele	ction under				
A (Check 🕨 🗌 if the filing organization belo					up member's				
	name, address, EIN, expens	•			•					
в	Check 🕨 🗌 if the filing organization che	cked box A a	nd "limited cont	rol" provisions a	pply.					
	Limits on Lobby				(a) Filing	(b) Affiliated				
	(The term "expenditures" me	ans amounts	paid or incurred.)	1	organization's totals	group totals				
1a	Total lobbying expenditures to influence	public opinion	(grass roots lobby	ing)	0					
t	Total lobbying expenditures to influence	a legislative bo	dy (direct lobbying	3)	60,000					
c	Total lobbying expenditures (add lines 1a		60,000							
c	Other exempt purpose expenditures				224,060,256					
e	Total exempt purpose expenditures (add	lines 1c and 1c	d)		224,120,256					
f	Lobbying nontaxable amount. Enter to columns.	table in both	1,000,000							
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amount	is:						
	Not over \$500,000		ount on line 1e.							
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000.						
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess of	over \$1,000,000.						
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess ov	ver \$1,500,000.						
	Over \$17,000,000	\$1,000,000.								
	Grassroots nontaxable amount (enter 259	% of line 1f)			250,000					
h	Subtract line 1g from line 1a. If zero or les	ss, enter -0-			0					
i	Subtract line 1f from line 1c. If zero or les	s, enter -0-	,		0					
j	If there is an amount other than zero	on either line	1h or line 1i, did	the organization	file Form 4720					
	reporting section 4911 tax for this year?					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 instructions for lines 2a through 2f on page 4.)									
	Lobbying	Expenditures	During 4-Year Av	eraging Period						
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total				
28	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000				

	Lobby	ing Expenditures	During 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
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	78,500	134,000	90,000	60,000	362,500
d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
е	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f	Grassroots lobbying expenditures	О	0	0	0	0

Schedule C (Form 990 or 990-EZ) 2013

Part	(election under section 501(h)).	nea	Form	15/68		
For a	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)	
	iption of the lobbying activity.	Yes	No	A	mount	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?		ļ			
е	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?					
j :	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)? If "Yes," enter the amount of any tax incurred under section 4912					
b	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
ď	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))(5),	or se	ction	200000000000000000000000000000000000000	
	501(c)(6).	,				
					Yes	No
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 expenditures from the prior year?			3		<u> </u>
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."				line :	3, is
1 2	Dues, assessments and similar amounts from members	of	1			
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb and political expenditure next year?	the ying	4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Par						·····
	e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	up lis	t); Par	t II-A, I	ine 2;	and
Part II	B, line 1. Also, complete this part for any additional information.					
	······································					

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection Employer identification number

OMB No. 1545-0047

MUSE	JM OF MODERN ART
Par	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 6.
	(a) Donor advised funds (b) Funds and other accounts
1	Total number at end of year
2	Aggregate contributions to (during year) .
3	Aggregate grants from (during year)
4	Aggregate value at end of year
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?
Par	Conservation Easements.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).
	☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area
	☐ Protection of natural habitat ☐ Preservation of a certified historic structure
	☐ Preservation of open space
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation
	easement on the last day of the tax year. Held at the End of the Tax Year
а	Total number of conservation easements
b	Total acreage restricted by conservation easements
С	Number of conservation easements on a certified historic structure included in (a) 2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a
	historic structure listed in the National Register
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►
4	Number of states where property subject to conservation easement is located ▶
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year
7	► Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)?
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.
Pari	Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
	(i) Revenues included in Form 990, Part VIII, line 1
	(ii) Assets included in Form 990, Part X
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
а	Revenues included in Form 990, Part VIII, line 1
h	Assets included in Form 990 Part X

Part	Organizations Maintaining	Collections of	Art, Historical T	reasures,	or Oth	ner Similar As	ssets (c	ontinued)
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and oti	her records, chec	k any of the	follow	ing that are a s	significar	nt use of its
а	✓ Public exhibition		d ✓ Loan	or exchange	e progra	ams		
	✓ Scholarly research							
	✓ Preservation for future generations	ì						
4	Provide a description of the organizat XIII.		and explain how th	hey further t	he orga	anization's exer	mpt purp	oose in Part
5	During the year, did the organization	solicit or receive	donations of art.	historical tre	asures	, or other simil	ar	
•	assets to be sold to raise funds rather							es ☑ No
Part	V Escrow and Custodial Arra	ingements.						
	Complete if the organization 990, Part X, line 21.		' to Form 990, P	art IV, line	9, or re	eported an an	nount o	n Form
1a	Is the organization an agent, trustee, included on Form 990, Part X?							/es □ No
b	If "Yes," explain the arrangement in Pa						<u> </u>	
-	, , , , , , , , , , , , , , , , , , , 					A	mount	
С	Beginning balance				1c			
d					1d			
e	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amour				. 🗔		□ \	∕es □ No
b	If "Yes," explain the arrangement in Pa				orovide	d in Part XIII .		. 🔲
_	V Endowment Funds.			· · · ·				
	Complete if the organization	answered "Yes'	' to Form 990, P	art IV, line	10.			
		(a) Current year	(b) Prior year	(c) Two years	back	(d) Three years bac	k (e) Fo	ur years back
1a	Beginning of year balance	459,691,000	438,939,000	429,99	2,000	356,715,00	00	324,195,000
b	Contributions	70,582,000	37,247,000	41,25	54,000	48,006,00	00	34,778,000
С	Net investment earnings, gains, and							
	losses	37,563,000	30,123,000	-2,94	17,000	23,497,00	00	16,174,000
d	Grants or scholarships	O	0		0		0	0
e	Other expenditures for facilities and							
	programs	25,372,000	46,618,000	29,36	50,000	-1,774,00	00	18,432,000
f	Administrative expenses	0	0		0		0	0
g	End of year balance	542,464,000	459,691,000	438,93	39,000	429,992,00	00	356,715,000
2	Provide the estimated percentage of t	he current year en	d balance (line 1g	ı, column (a)) held a	ıs:		
а	Board designated or quasi-endowmer		<u>3</u> %					
b	Permanent endowment ▶	45 %						
С	Temporarily restricted endowment ▶	49 %						
	The percentages in lines 2a, 2b, and 2	c should equal 10						
3a	Are there endowment funds not in the	e possession of th	e organization the	at are held a	and adr	ministered for t	he	
	organization by:							Yes No
	(i) unrelated organizations						3a(i) 🗸
	1,						3a(ii) 🗸
b	If "Yes" to 3a(ii), are the related organi						3b	
4	Describe in Part XIII the intended uses		on's endowment f	unds.				
Part	VI Land, Buildings, and Equip Complete if the organization		" to Form 990, F	Part IV, line	11a. S	See Form 990,	Part X,	line 10.
	Description of property	(a) Cost or ot (investm	1	or other basis other)		Accumulated preciation	(d) Bo	ook value
1a	Land		0	91,352,129				91,352,129
b	Buildings		0 :	537,038,899		215,404,589		321,634,310
С	Leasehold improvements	•	0	4,427,316		4,325,615		101,701
d	Equipment	•	0	81,667,001		74,549,810		7,117,191
е	Other		0	70,604,786		0		70,604,786
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part X, columi		(c).) .	>		490,810,117

Part VII	Investments—Other Securities. Complete if the organization answ		m 990. Part IV. line	e 11b. See Form	990. Part X. line 12.
	(a) Description of security or category (including name of security)		(b) Book value	(c) Met	nod of valuation: -of-year market value
(1) Financial	derivatives				
• •	eld equity interests				
(3) Other Cre	· ·		81,161,586	End-of-Year Marke	t Value
	Equity		·····	End-of-Year Marke	
(B) Multi-S	trategy & Other			End-of-Year Marke	
(C) Event I	Oriven			End-of-Year Marke	
	Long/Short			End-of-Year Marke	
(E) Real A	ssets		8.944.010	End-of-Year Marke	t Value
(F) Fixed I	ncome			End-of-Year Marke	
(G)					
(H)					
) must equal Form 990, Part X, col. (B) line 12.)		305,622,974		
Part VIII	Investments-Program Related	1.		- SALES CONTROL OF THE ACT OF THE SALES OF T	
	Complete if the organization answer	 wered "Yes" to For	m 990. Part IV. line	e 11c. See Form	990. Part X. line 13.
	(a) Description of investment		(b) Book value	(c) Met	hod of valuation: -of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
<u>(8)</u> (9)					
) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.				
r are ix	Complete if the organization ans	wered "Yes" to For	m 990 Part IV line	a 11d. See Form	990 Part X line 15
		a) Description	m ooo, r are re, mic	3 1 1 41 000 1 01111	(b) Book value
(2)					
(3)				WHITE IN THE TOTAL	
(4)					
(5)					
(6)					
(7)					
(8)					
(9) Total. (Colur Part X	nn (b) must equal Form 990, Part X, co Other Liabilities. Complete if the organization ans		m 990, Part IV, line	▶ e 11e or 11f. See	Form 990, Part X,
	line 25.	I			
1.	(a) Description of liability	(b) Book value			
(1) Federal in	come taxes		0		
(2) Pension		49,8	54,086		
(3)	***************************************				
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	o) must equal Form 990, Part X, col. (B) line 25.)	49,8	54,086		
2. Liability for	uncertain tax positions. In Part XIII, prov	ide the text of the footr	note to the organization	n's financial stateme	ents that reports the
organization's	s liability for uncertain tax positions under	r FIN 48 (ASC 740). Ch	eck here if the text of t	the footnote has bee	en provided in Part XIII

Part	Reconciliation of Revenue per Audited Financial Stateme Complete if the organization answered "Yes" to Form 990, F			Retu	rn.
			v, iiile iza.		272 220 000
1	Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12:			-	372,229,000
2	Net unrealized gains on investments	2a	25,753,246		
a b	Donated services and use of facilities	2b	23,733,240		
C	Recoveries of prior year grants	2c	0	-	
d	Other (Describe in Part XIII.)	2d	-2,168,273	1	
e	Add lines 2a through 2d		-2,100,210	2e	23,584,973
3	Subtract line 2e from line 1			3	348,644,027
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	ĺ			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	8,830,824		
b	Other (Describe in Part XIII.)	4b	-36,191,625	1	
C	Add lines 4a and 4b			4c	-27,360,801
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	321,283,226
Part	XII Reconciliation of Expenses per Audited Financial Staten	nents	With Expenses p	er Re	turn.
	Complete if the organization answered "Yes" to Form 990, F	Part I	V, line 12a.		
1	Total expenses and losses per audited financial statements			1	248,382,000
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	<u> </u>		
b	Prior year adjustments	2b	O		
C	Other losses	2c	C		
d	Other (Describe in Part XIII.)	2d	11,554,193		
е	Add lines 2a through 2d			2e	11,554,193
3	Subtract line 2e from line 1			3	236,827,807
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	8,830,824		
b	Other (Describe in Part XIII.)	4b	-21,538,375		
_C	Add lines 4a and 4b			4c	-12,707,551
5 13 44	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 18.)		5	224,120,256
Part	XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	-1 4. D	out IV lines the and Ot	. Daut	M. See A. Dest V. See
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part				
	ule D, Part III, Line 1 - The Museum's collections, acquired through purchase a				
	lidated statements of financial position. Purchases of collection items are reco				
	ases in unrestricted net assets. Contributed collection items are not reflected it essions, which are reflected as increases in temporarily restricted net assets,				
collec	***************************************	are us	eu exclusively to acqu	ne ou	er items for the
conec	11011.				
Schar	ule D, Part III, Line 4 - The Museum is chartered as an educational institution v	hose	collection of modern	nd co	ntemporary art is
	available to its members and the public to encourage an ever-deeper understa				
	al, and international audiences that it serves. In pursuit of this goal, the Muse				***************************************
	ure, drawing, printmaking, photography, film, performance, media, architectur				
	ship of its Board of Trustees and staff, the Museum strives to establish, reserv				
	that reflects the vitality, complexity and unfolding patterns of modern and con				
	ems of unparalleled significance; sustain a library, archives and conservation				
	earch; and support scholarship and publications of preeminent intellectual me				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Sched	lule D, Part V, Line 4 - The Museum's endowment funds consist of approximate	elγ 150) individual funds esta	olished	for a variety of
	ses, including art acquisitions, exhibitions, publications, educational and oper				
	ted endowment funds and funds designated by the Board to function as endo			*******	
	ples, net assets associated with endowments funds, including funds designat				
	fied and reported based on the existence or absence of donor-imposed restric				
	lio is to support the Museum's mission by providing a reliable source of funds				
Sched	ule D, Part XI, Line 2d - Primarily defined benefit plan changes other than net	period	ic benefit costs \$2,168	,273.	

Part XIII - Supplemental Information (Continued)

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization

Employer Identification number

MUS	EUM OF MODERN ART					3-1624100
Par	General Information Form 990, Part IV, line		ies Outside t	he United States. Comp	blete if the organization ans	wered "Yes" on
1	For grantmakers. Does the assistance, the grantees' eli	gibility for the	e grants or as	sistance, and the selection		
	grants or assistance?					□Yes □No
2	For grantmakers. Describe assistance outside the Unite		the organization	on's procedures for monit	toring the use of its grant	s and other
3	Activities per Region. (The fo	llowing Part	l, line 3 table o	an be duplicated if addition	nal space is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	Central America and the Caribb	0	0	Investments		120,522,098
(2)	Europe (including Iceland and C	0	0	investments		41,924,343
(3)	South Asia	0	0	Investments		520,982
(4)	Middle East and North Africa	0	0	Investments		309,679
(5)	East Asia and the Pacific	0	0	Investments		4,723,512
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a						
b	sheets to Part I					
c	Totals (add lines 3a and 3b)	0	0			168,000,614

Page 2

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) 2013

Part II Grants au

(i) Method of valuation (book, FMV, appraisal, other)													t the state of the	
(h) Description of non-cash assistance														ax-exempt
(g) Amount of non-cash assistance														ntry, recognized as t
(f) Manner of cash disbursement								:					and the state of t	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IDS or for which the creates or country has been provided a section 504(A) conjugatory latter.
(e) Amount of cash grant														ognized as charitie
(d) Purpose of grant				·						:				Enter total number of recipient organizations listed above that are recognized as charities by the fav. the IRS or for which the grantes or counsel has provided a section 504(A)3 equivalency latter
(c) Region	:													nt organizations liste
(b) IRS code section and EtN (if applicable)														mber of recipier
(a) Name of organization		(4)	(5)	(9)	Œ	8	(10)		(12)	(13)	(14)	(15)	(16)	2 Enter total nu

by the Iris, of 10f willon the grantee of course has a Enter total number of other organizations or entities က

Schedule F (Form 990) 2013

Page 3

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2013

Part III Grants at

(h) Method of valuation (book, FMV, appraisal, other)	A CALLEGE STATE OF THE STATE OF													en o					Schedule F (Form 990) 2013
(g) Description of non-cash assistance														and the second s					Schedi
(f) Amount of non-cash assistance					•														
(e) Manner of cash disbursement																			
(d) Amount of cash grant																	The state of the s		
(c) Number of recipients				•															
(b) Region																			
(a) Type of grant or assistance (b) Region (c) Number of recipients	(1)	(2)	(6)	(4)	(5)	1	(2)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	

_	
Page	-

Part	V	Foreign Forms		
1	the c	the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign coration (see Instructions for Form 926)	✓ Yes	□ No
2	may Rece	the organization have an interest in a foreign trust during the tax year? If "Yes," the organization be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and eipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a Owner (see Instructions for Forms 3520 and 3520-A)	☐ Yes	☑ No
3	the c	the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To ain Foreign Corporations. (see Instructions for Form 5471)	☑ Yes	□ No
4	qual Infor	the organization a direct or indirect shareholder of a passive foreign investment company or a fied electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, mation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing 6. (see Instructions for Form 8621)	☑ Yes	□ No
5	the e	the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain ign Partnerships. (see Instructions for Form 8865)	✓ Yes	□ No
6	"Yes	the organization have any operations in or related to any boycotting countries during the tax year? If," the organization may be required to file Form 5713, International Boycott Report (see Instructions form 5713)	☐ Yes	☑ No

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).

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundralsing or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number 13-1624100 MUSEUM OF MODERN ART Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e 🗹 Solicitation of non-government grants а Internet and email solicitations ✓ Solicitation of government grants g Special fundraising events ☐ Phone solicitations d ✓ In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ✓ Yes □ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (vi) Amount paid to (or retained by) organization (iii) Did fundraiser have custody or control of contributions? (iv) Gross receipts from activity (or retained by) fundraiser listed in (i) Name and address of individual (ii) Activity or entity (fundraiser) col. (i) Yes No 1 See Schedule G, Part IV, Statement 2 3 4 5 6 8 9 10 0 300,000 -300.000 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from 3 registration or licensing. AL, AR, AZ, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MS, MT, NC, ND, NE, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV, WY

		gross receipts greater that		a		
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		-	Party in the Garden (event type)	DR Luncheon (event type)	2 (total number)	(add col. (a) through col. (c))
Ф			(event type)	(oversitype)	(total nombol)	
Revenue	1	Gross receipts	3,952,630	3,150,000	1,303,009	8,405,639
L	2	Less: Contributions Gross income (line 1 minus	3,752,670	3,073,800	1,117,489	7,943,959
_		line 2)	199,960	76,200	185,520	461,680
	4	Cash prizes	0	0	0	0
	5	Noncash prizes	0	0	0	O
Sesus	6	Rent/facility costs	43,078	8,326	39,123	90,527
Jirect Expenses	7	Food and beverages	183,227	59,259	66,369	308,855
	8	Entertainment	126,274	0	80,512	206,786
	9	Other direct expenses .	690,628	77,144	82,394	850,166
	10 11	Direct expense summary. Ad Net income summary. Subtra				1,456,334
					▶). Part IV. line 19. or :	
		Gaming. Complete if the than \$15,000 on Form 99	organization answer			
2ari		Gaming. Complete if the	organization answer			
Pari		Gaming. Complete if the	organization answer 90-EZ, line 6a.	ed "Yes" to Form 990 (b) Pull tabs/instant	, Part IV, line 19, or	reported more (d) Total gaming (add
Part		Gaming. Complete if the than \$15,000 on Form 99	organization answer 90-EZ, line 6a.	ed "Yes" to Form 990 (b) Pull tabs/instant	, Part IV, line 19, or	reported more (d) Total gaming (add
Part	1	Gaming. Complete if the than \$15,000 on Form 99	organization answer 90-EZ, line 6a.	ed "Yes" to Form 990 (b) Pull tabs/instant	, Part IV, line 19, or	reported more (d) Total gaming (add
Part	1 2	Gaming. Complete if the than \$15,000 on Form 99 Gross revenue	organization answer 90-EZ, line 6a.	ed "Yes" to Form 990 (b) Pull tabs/instant	, Part IV, line 19, or	(d) Total gaming (add
Pari	1 2 3 4	Gaming. Complete if the than \$15,000 on Form 98 Gross revenue Cash prizes Noncash prizes Rent/facility costs	organization answer 90-EZ, line 6a.	ed "Yes" to Form 990 (b) Pull tabs/instant	, Part IV, line 19, or	reported more (d) Total gaming (add
Part	1 2 3	Gaming. Complete if the than \$15,000 on Form 99 Gross revenue Cash prizes Noncash prizes	organization answer 90-EZ, line 6a.	ed "Yes" to Form 990 (b) Pull tabs/instant	, Part IV, line 19, or	reported more (d) Total gaming (add
Part	1 2 3 4 5	Gaming. Complete if the than \$15,000 on Form 98 Gross revenue	e organization answer 30-EZ, line 6a. (a) Bingo Yes% No	ed "Yes" to Form 990 (b) Pull tabs/instant bingo/progressive bingo Yes% No	(c) Other gaming	reported more (d) Total gaming (add
Part	1 2 3 4 5	Gaming. Complete if the than \$15,000 on Form 99 Gross revenue	e organization answer 90-EZ, line 6a. (a) Bingo Yes% No	(b) Pull tabs/instant bingo/progressive bingo Yes% No	O, Part IV, line 19, or (c) Other gaming Yes% No	reported more (d) Total gaming (add
Part	1 2 3 4 5 6 7 8	Gaming. Complete if the than \$15,000 on Form 98 Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Ad Net gaming income summary	e organization answer 30-EZ, line 6a. (a) Bingo Yes% No d lines 2 through 5 in co	ed "Yes" to Form 990 (b) Pull tabs/instant bingo/progressive bingo Yes% No Dlumn (d)	Yes% No	(d) Total gaming (add col. (a) through col. (c))
d a b	1 2 3 4 5 6 7 8 En lst	Gaming. Complete if the than \$15,000 on Form 98 Gross revenue	e organization answer 30-EZ, line 6a. (a) Bingo Yes % No Id lines 2 through 5 in coop, Subtract line 7 from lines ganization operates gar perate gaming activities	ed "Yes" to Form 990 (b) Pull tabs/instant bingo/progressive bingo Yes% No Dlumn (d)	Yes% No	(d) Total gaming (add col. (a) through col. (c))

Schedu	le G (Form 990 or 990-EZ) 2013 Page 3
11 12	Does the organization operate gaming activities with nonmembers?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ►
	Address►
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
С	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 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).
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Schedule G, Part IV, Statement 1

Form: Schedule G

Page: 1

Line Number: Part I Line 2b

MUSEUM OF MODERN ART 13-1624100

### **Fundraiser Activity Information**

Name and Address	Activity	C1	Gross Receipts	C2	C3
John Brown Limited Inc PO Box 296 Peterborough, NH 03458	Develop, strategize and fund-raise for Museum expansion project.	No	0	300,000	-300,000
Total:			0	300,000	-300,000

C1 = Fundraiser control of funds?

C2 = Amount paid to (or retained by) fundraiser

C3 = Amount paid to (or retained by) organization

# SCHEDULE! (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

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2	► Attach to Form 990.
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Complete it the organization aliswered	
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Employer identification number

OMB No. 1545-0047

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

MUSEUM OF MODERN ART							13-1624100	
Part I General Information on Grants and Assistan	Grants and	Assistance					The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the calaction criteria used to award the grants or assistance?	cords to subst	antiate the amou	nt of the grants or	assistance, the g	rantees' eligibility f	or the grants or assista	nce, and	Ç Z
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	n's procedure	s for monitoring t	he use of grant fur	nds in the United	States.			?
Έ	ance to Gov	ernments and eceived more th	Organizations i an \$5,000. Part	n the United Sill can be duplic	its and Organizations in the United States. Complete if the organization more than \$5,000. Part II can be duplicated if additional space is needed.	f the organization anspace is needed.	swered "Yes" to Form	990,
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 non-cash assistance	(h) Purpose of grant or assistance	
(1) Sch I, Stmt 1								
(2)				1	and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s			
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2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	(c)(3) and gove	rnment organizat	ions listed in the li	ne 1 table			<b>A</b>	
3 Enter total number of other organizations listed in the line 1 table or Panerwork Reduction Act Notice, see the Instructions for Form 990.	izations listed i	in the line 1 table for Form 990.			Cat. No. 50055P		Schedule I (Form 990) (2013)	) (2013)

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 technology, insurance and legal affairs. the study, knowledge, enjoyment and appreciation of modern and contemporary art through a collaborative program of exhibitions, research, special projects and other educational and provides management assistance and service to MoMA PS1 in certain areas, including accounting and payroll, fundraising and development, coordination of MoMA PS1's information Schedule I, Part I, Line 2 - The Museum as sole Member of PS1 Contemporary Art Museum (DBA MoMA PS1). In 2000 MoMA PS1 and the Museum entered into an affiliation to promote 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 Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Schedule I (Form 990) (2013)

Schedule I, Part IV, Statement 1

Form: Schedule I

Page: 1

Line Number: Part II

MUSEUM OF MODERN ART 13-1624100

### Description of Grants and Other Assistance to Governments and Organizations in the United States

		Recipient EIN	Amt. of cash grant	
Name and address	PS1 Contemporary Art Center Inc	23-7379091	599,390	
	46-01 21st Street			
	Long Island City, NY 11101			
IRC code section	501c(3)			
Method of valuation				
Desc. of Non-Cash Ass	<b>t.</b>			
Purpose of grant	Operating Support			

### **SCHEDULE J** (Form 990)

**Compensation Information** 

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions. ► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

13-1624100 MUSEUM OF MODERN ART Part | Questions Regarding Compensation No Yes 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ✓ Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions ✓ Health or social club dues or initiation fees Tax indemnification and gross-up payments Personal services (e.g., maid, chauffeur, chef) Discretionary spending account b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director, Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☑ Compensation committee ☑ Written employment contract Compensation survey or study ✓ Independent compensation consultant ✓ Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: / 4a b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a 5b If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Regulations section 53.4958-6(c)?

9

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

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

(F) Compensation reported as deferred in prior Form 990 42,500 241,832 161,970 1,250,962 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 267,169 917,826 531,689 554,173 434,810 341,500 352,979 290,940 298,276 318,807 350,352 3,381,956 418,374 1,405,000 470,121 (E) Total of columns (B)(f)-(D) 34,523 34,959 348,979 30,735 33,359 34,675 33,353 22,167 33,046 28,901 31,671 29,657 28,477 6,914 31,285 (D) Nontaxable benefits 34,796 646,259 51,155 112,564 13,218 28,985 14,768 20,223 0 675,516 316,874 126,632 48,867 56,729 62,250 (C) Retirement and other deferred compensation 82,342 1,806 19,306 ,545 278 610 766 231 258 20,160 2,772 548 445 630 631 541 (iii) Other reportable compensation (B) Breakdown of W-2 and/or 1099-MISC compensation 161,970 0 0 241,892 20 1,645,292 (ii) Bonus & incentive 42 compensation 739,620 270,149 209,440 242,585 438,063 409,451 259,907 362,497 435,382 351,134 347,435 273,508 527 307,426 243,299 233,051 (i) Base compensation 299, EE ≘ ≘ EE **≘** ≘ E ≘ ≘ € €  $\equiv$ E ≘ ≘ ⊕ (≘ 8 ≘ ≘ Christophe Cherix, Chief Curator Klaus Biesenbach, Chief Curator Frank Ahimaz, Chief Investment Ramona Bannayan, Senior Deputy Director for Exhibitions Photography as of January 3, Peter Reed, Senior Deputy Director for Curatorial Affairs Barry Bergdoll, Chief Curator Quentin Bajac, Chief Curator James Gara, Chief Operating Rajendra Roy, Chief Curator **Fodd Bishop, Senior Deputy** Jan Postma, Chief Financial Prints & Illustrated Books Glenn D Lowry, Director/Ex-Director of External Affairs Officer/Assistant Treasurer Kathy Halbreich, Associate Ann Temkin, Chief Curator Architecture and Design Tunji Adeniji, Director of (A) Name and Title Painting and Sculpture Patty Lipshutz, Genera Facilities and Security Counsel/Secretary Officio Trustee 12 at Large Director Officer Officer

Schedule J (Form 990) 2013

Page Schedule J (Form 990) 2013

formation	
Supplemental Information	
Supple	
Part III	

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

compensation, Business class travel was in accordance with the Museum's Travel and Expenditure guidelines which allows business class to be the highest level of travel on flights Schedule J, Part I, Line 1a - As a condition of employment, the Museum requires the Director to reside in the Museum's apartment on the premises in Museum Tower in furtherance of the longer than nine hours. 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

Schedule J, Part I, Line 4 · Kathy Thornon-Bias \$400,000; Sabine Breitwieser \$100,000

Assistant Treasurer. Full-time employee and officer, but not a Trustee. Included in column B(ii), are amounts attributable to earned and paid portions of a multi-year performance bonus. bonus. A portion of the multi-year performance bonus plan was paid in 2013 and is included in compensation. The plan was subject to the achievement of service and performance requirements. Klaus Biesenbach is the Director of MoMA PS1 and receives compensation from that entity. He also serves as MoMA's Chief Curator at Large. Investment Officer. Full-time employee but not Trustee, Eligible for retention and annual bonus based on achievement of performance measures. A portion of the bonus plan was paid in 2013 and is included in compensation. Todd Bishop - Senior Deputy Director - External Affairs. Full-time employee but not Trustee. Included in column (B)(ii) is a multi-year performance budget control, facilities maintenance, attendance, net debt reduction and endowment growth) and programmatic (implementing a global strategy, expansion planning, relationship with of \$360,000 included in column B. These numbers compare to \$719,013 and \$358,813 in 2013. Also included in column B is a multi-year performance bonus which was earned over five Schedule J, Part I, Line 7 - Glenn Lowry - Full-time employee, officer and ex-officio Trustee. In 2014 Glenn Lowry earned \$739,620 in base compensation as well as (ii) an annual bonus years but paid in 2013. This amount earned over five years (2009 - 2013), \$1,285,292, was awarded on the basis of evaluated accomplishments in categories both financial (such as \$1,285,292 had already been reported on previous Form 990's from Fiscal Year 2009-2013. Commencing with Fiscal Year 2014, included in column C, is an accrual in the amount of subject to evaluation of the achievement by Mr. Gara of certain service and performance requirements in areas such as in operations, retail and investments. Frank Ahimaz - Chief MoMAPS1, expanding focus on contemporary art, leading Museum staff) and paid in 2013. Of the amount of multi-year performance bonus paid in 2013, 97% or \$1,250,962 of the \$560,261, for a multi-year supplemental employee retirement plan (superseding and replacing the prior multi-year performance bonus). James Gara - Chief Operating Officer and

SCHEDULE J (Form 990) Department of the Treasury Internal Revenue Service

# Continuation Sheet for Schedule J (Form 990)

2013

OMB No. 1545-0047

Open to Public Inspection

► Attach to Form 990 to list additional information for Schedule J (Form 990), Part II.

Employer identification number 1624100

75,000 (F) Compensation reported in prior Form 990 or Form 990-EZ 408,246 314,225 151,104 103,104 474,956 341,052 505,544 103,229 (E) Total of columns (B)(f)-(D) Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (Schedule J, Part II) 5,020 33,175 18,464 3,050 21,687 29,643 27,084 11,677 (D) Nontaxable benefits 11,340 ٥; 0 159,439 62,523 39,313 (C) Retirement and other deferred compensation 1,140 100,054 4,099 86 286 230 996 417,939 (iii) Other reportable compensation (B) Breakdown of W-2 and/or 1099-MISC compensation 0 0 0 0 (ii) Bonus & incentive compensation 0 0 0 0 0 0 0 0 010 75,000 274,835 51,997 267,424 91,454 132,354 0 311,981 249,188 (i) Base compensation  $\equiv$  $\Xi$ Œ Œ  $\in$  $\epsilon$  $\Xi$  $\in$  $\in$  $\mathbf{E}$  $\in$   $\equiv$  $\in$  $\in \Xi$ Stuart Comer, Chief Curator - Media & Performance Art as of 9/23/13 Patricia Jeffers, Director of Human Kathy Thornton-Bias, General Mgr Sabine Breitwieser, Chief Curator, (A) Name and Title Juan Montes, Chief Technology Christopher Hudson, Publisher Cornelia Butler, Chief Curator-Media & Performance Art thru Retail thru February 20, 2013 MUSEUM OF MODERN ART Anthony Wai, Director of Name of the organization Investments Resources Drawings Part I

SCHEDULE K (Form 990) MUSEUM OF MODERN ART

Name of the organization Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

OMB No. 1545-0047

Open to Public Inspection 2013

Employer identification number

13-1624100

► Attach to Form 990. ► See separate instructions. ► Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

(i) Pooled financing Yes No S ŝ (h) On behalf of Yes No Ω Yes Yes (g) Defeased ž Yes O 733,735 0 5,880,000 104,778,309 104,033,045 11,529 104,770,510 Refund Issuer's 1996A, 2001A, 2001-One -b, and pay costs of issuance ŝ £ Refund Issuer's 2008 One-A and pay costs of issuance O Refund various Bonds of Issuer (f) Description of purpose Yes Yes Ö C 64,593,399 O 433, 188 0 64,160,211 å ŝ œ  $\mathbf{\omega}$ Yes Yes 64,582,831 202,520,188 (e) Issue price 202,818,443 1,080,188 O 201,738,255 64,210,000 £ ŝ ⋖ Yes Yes (d) Date issued 07/29/2010 05/01/2012 07/23/2008 Does the organization maintain adequate books and records to support the ರ Are there any lease arrangements that may result in private business use 649717QL2 649717RM9 (c) CUSIP# 649717PC3 Was the organization a partner in a partnership, or a member of an LLC, Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? b) Issuer EIN 91-1882413 91-1882413 91-1882413 which owned property financed by tax-exempt bonds? Has the final allocation of proceeds been made? Working capital expenditures from proceeds The Trust for Cultural Resources of City of NY Series 2012 1D and Series 2012A The Trust for Cultural Resources of City of The Trust for Cultural Resources of City of Credit enhancement from proceeds Capital expenditures from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Year of substantial completion . Gross proceeds in reserve funds Proceeds in refunding escrows. ssuance costs from proceeds . Private Business Use Other spent proceeds . . . final allocation of proceeds? Amount of bonds retired Other unspent proceeds Total proceeds of issue (a) Issuer name New York Series 2008 1A New York Series 2010 1A Bond Issues Proceeds Part II Part I Part Ŋ 9 œ 5 16 4 O 2 건 5 O Ę 7 Ω Ω

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

bond-financed property? .

Cat. No. 50193E

Schedule K (Form 990) 2013

Part III Private Business Use (Continued)								
		A	1	В		c	Ω	•
3a Are there any management or service contracts that may result in private business use of bond-financed property?	Yes	No	Yes	No	Yes	No	Yes	No
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?								
c Are there any research agreements that may result in private business use of bond-financed property?								
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		%		%		%	:	%
<ul> <li>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 ▶</li> </ul>		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
et the priv								***************************************
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?								***************************************
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								<b>:</b>
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?								
Part IV Arbitrage								
	_	4		В		v	٥	
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?		>		<b>,</b>		<b>\</b>		
~		<b>&gt;</b>		,		,		
	>		>	•	^			
c No rebate due?		,		`^		>		
If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
le?		`>		>		<b>&gt;</b>		
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		<b>&gt;</b>		>		>		
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								1
e Was the hedge terminated?								
							Schedule K (Form 990) 2013	arm 990) 2013

Part IV Arbitrage (Continued)

	,	A	8		ပ		۵	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		4		<i>,</i>		<b>,</b>		
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? .		4		^		<b>,</b>		
7 Has the organization established written procedures to monitor the								
requirements of section 148?	`		^		1			
Part V Procedures To Undertake Corrective Action								
Landary Company  <i>*</i>	A	B		ပ			•	
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program it seir-remediation is not available								
under applicable regulations?		<b>*</b>		>		<b>,</b>		

Schedule K, Part I, Column c-07/23/2008 202,520,188 The Trust for Cultural Resources of - CUSIP listed matches the one listed on the Issuers form 8038. However, this is not the final Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions) CUSIP number for the Bonds. The final CUSIP number is 649717PD1 corresponding to the final maturity of April 1,2031. Schedule K, Part I, Column f-07/23/2008 202,520,188 The Trust for Cultural Resources of - Bonds refunded by 2008-One-A Bonds: Issuer's 2000-One-A (issued March 14, 2000). 2000-One-B (issued March 14, 2000), 2001-One-A (issued December 13, 2001), 2001-One-B (issued December 13, 2001), 2001-Once-C (issued December 13, 2001). Schedule K, Part I, Column f-07/29/2010 64,582,831 The Trust for Cultural Resources of - The 2010-One-A Bonds refunded a portion of the Issuer's 2008-One-A bonds (issued 7/23/08).

Schedule K, Part II, Line 1-07/23/2008 202,520,188 The Trust for Cultural Resources of - Part II, line 13: Since the proceeds of all the Bonds are used for refunding purposes, the year of substantial completion is not applicable.

Schedule K, Part II, Line 1-07/29/2010 64,582,831 The Trust for Cultural Resources of - Part II, line 13: Since the proceeds of all the Bonds are used for refunding purposes, the year of substantial completion is not applicable Schedule K, Part II, Line 1-05/01/2012 104,770,510 The Trust for Cultural Resources of - Part II, line 13: Since the proceeds of all the Bonds are used for refunding purposes, the year of substantial completion is not applicable.

investment earnings from refunding escrows.

Schedule K, Part II, Line 3-07/23/2008 202,520,188 The Trust for Cultural Resources of - Columns A, B and C: Amount listed differs from the issue price listed in Part 1(e), due to

Schedule K, Part II, Line 3-07/29/2010 64,582,831 The Trust for Cultural Resources of - Columns A, B and C: Amount listed differs from the issue price listed in Part 1(e), due to investment earnings from refunding escrows.

Schedule K, Part II, Line 3-05/01/2012 104,770,510 The Trust for Cultural Resources of - Columns A, B and C: Amount listed differs from the issue price listed in Part1(e), due to investment earnings from refunding escrows. Schedule K, Part IV, Line 2b-07/23/2008 202,520,188 The Trust for Cultural Resources of - The issue qualified for a spending exception to rebate. No rebate calculation has been or will

# Part VI - Supplemental Information (Continued)

ever be made, before or after the due date of an 8038T.
C. b. d. L. V. D. d. V. D. d. V. C. V. C. V. C. V. C.
Schedule K, Part IV, Line 7-07/23/2008 202,520,188 The Trust for Cultural Resources of - The Museum is currently following procedures that are written and under review.
diat are written and under review.
Schedule K, Part V-07/23/2008 202,520,188 The Trust for Cultural Resources of - Written procedures have been drafted and are currently
under review.
diddi torioni
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### SCHEDULE L

(Form 990 or 990-EZ)

**Transactions With Interested Persons** 

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

➤ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

MUSEUM OF MODERN ART	Γ								13-1	162410	00		
Part I Excess Bene Complete if the	fit Transaction ne organization	s (section 50 answered "Ye	1(c)(3) : es" on	and sect Form 99	ion 501(c)( 0, Part IV, I	4) org ine 29	anizations only) 5a or 25b, or Fo	rm 990	D-EZ,	Part '	V, line	40b.	
1 (a) Name of disqualified	person	(b) Relationship be			person and		(c) Descriptio	n of tran	seaction	3		(d) Cor	rected?
· · · · · · · · · · · · · · · · · · ·	person		organiza	ation			(c) Descriptio	II OI (I ai	13aCIIO			Yes	No
(1)													ļ
(2)										••••			
(3)													
(4) (5)													
(6)													
2 Enter the amount under section 4958							ied persons du				<u> </u>		
3 Enter the amount of	of tax, if any, on	line 2, above,	reimb	ursed by	the organ	izatio	n		1	<b>&gt;</b> \$			
Complete if th	I/or From Inter ne organization reported an amo	answered "Ye	s" on	Form 99 art X, line	0-EZ, Part e 5, 6, or 2	V, line 2.	e 38a or Form 9	90, Pa	rt IV,	line 2	6; or	f the	
(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	fro	oan to or om the nization?	(e) Origir principal an		(f) Balance due	(g) In default?		by bo	proved pard or nittee?		ritten ment?
			То	From				Yes	No	No	Yes	No	
(1)			1										
(2)													
(3)													
(4)											,		
(5)													
(6)			ļ						<u></u>				
(7)													
(8)													
(9)	1		-					<u> </u>	<u> </u>				
(10)			<u> </u>							468400000		national and	
Part III Grants or As	sistance Bene ne organization	fiting Interest	ed Pe	rsons.		. <b>▶</b>							
(a) Name of interested person	n (b) Relations	ship between inter	rested		of assistance	1	(d) Type of assistance	ce c	(e)	) Purpo	se of a	ssistan	ce
(1)	F												
(2)													
(3)		*******											
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)									-				

Schedule L (Form 990 or 990-EZ) 2013				Page 2
Part IV Business Transactions Involving Complete if the organization at		0, Part IV, line 28a, 2	28b, or 28c.	
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing o organization!: revenues?
				Yes No
(1) Top of the Rock LLC	Trustee	178,500	see comment	✓
(2) John Brown Limited Inc	former key employee	300,000	see comment	✓
(3) Sotheby's	Trustee	7,099,743	see comment	✓
(4) Och-Ziff Capital Mngmnt Group LLC	Trustee	296,574	see comment	<b>✓</b>
(5)				
(6)				
(8)				
(9)				
(10)				
Part V Supplemental Information Provide additional information	for responses to questions	on Schedule L (see	instructions).	
Schedule L, Part IV - The Museum has an agr	eement with Top of the Rock	, LLC which provides	s for each of the Museum and Top	of the
Rock to sell "combo packages" of admission				
Rock each remit funds to the other for admis				
and Paula Crown, have direct or indirect final				
interests together in entities that own real es				
retained a former key employee as a consulta				
the Museum also serves as a senior official a				
The Museum invests with Och-Ziff Capital Ma				
Trustee. The Museum's endowment invested				
redeemed its investment in this fund, and the				
management and incentive fees were paid to				
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	***		

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### SCHEDULE M (Form 990)

### **Noncash Contributions**

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

Name of the organization 13-1624100 MUSEUM OF MODERN ART Types of Property Part I (c) (d) (a) (b) Noncash contribution Number of contributions or Method of determining Check if amounts reported on noncash contribution amounts applicable items contributed Form 990, Part VIII, line 1g 619 0 not applicable Art—Works of art . . . . 2 Art—Historical treasures . . . Art-Fractional interests . . . 3 Books and publications . . . Clothing and household goods . . . . . . . . . 6 Cars and other vehicles . . . Boats and planes . . . . . 7 8 Intellectual property . . . . 15,854,176 settlement 9 Securities-Publicly traded . . . Securities-Closely held stock . 10 Securities—Partnership, LLC, 11 or trust interests . . . . . 12 Securities-Miscellaneous . . Qualified conservation contribution-Historic 14 Qualified conservation contribution-Other . . Real estate-Residential . . . 15 Real estate-Commercial . . 16 17 Real estate-Other . . . . 18 Collectibles . . . . . . . 19 Food inventory . . . . . . 20 Drugs and medical supplies . . Taxidermy . . . . . . 21 Historical artifacts . . . . . 22 23 Scientific specimens . . . Archeological artifacts . . . 24 25 Other ► ( Other► (____) 26 27 Other ► (_____) 28 Other ► ( Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . . 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be 30a b If "Yes." describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a b If "Yes," describe in Part II.

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

33

describe in Part II.

Part II	<b>Supplemental Information.</b> 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 N	A, Part I - Nonmonetary contributions are recorded at estimated fair value at date of receipt if the Museum received certain
	services that meet criteria under generally accepted accounting principles for recognition as contributions. In accordance with
Accounting	Standards Codification (formally FASB Statement of Financial Accounting Standards 116), the Museum does not treat
	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 deaccessions of artwork are used solely to acquire other items for the collection.
Schedule N	A, Part I, Line 1 - Loans of art work to the Museum - From time to time Trustees of the Museum may loan artworks to the
Museum fo	r a limited duration of time for specific exhibitions.
	***************************************
Schedule N	II, Part I, Line 3 - Gifts of art work are considered by individual Item.
Schedule N	II, Part I, Line 9 - Gifts of stock from the same person, on the same trade date, are considered in the aggregate as one gift.
	A, Part I, Line 32b - A third party bank is authorized to sell donated securities as soon as possible upon confirmation by the
Museum. T	he Museum also contracts periodically with various auction houses to facilitate approved deaccession of art work.
•••	
	***************************************
	***************************************

### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047
2013
Open to Public

Inspection

Name of the organization

MUSEUM OF MODERN ART

Employer identification number

Form 990, Part III, Line 1 - The Museum of Modern Art is a private, nonprofit institution chartered by the State of New York in 1929 to foster public awareness of modern and contemporary art. In pursuit of this goal, the Museum has collected over 150,000 works of art, including works of paintings, sculpture, drawing, printmaking, photography, film, media, performance, architecture, and industrial and graphic design. The Museum also operates a publishing program, conducts an extensive educational program, and maintains a major library and archives. Its exhibitions are circulated nationally and internationally. The Museum's primary sources of support are admissions fees and membership dues, grants from individuals, foundations, and corporations, endowment income and revenue from retail sales of Museum related products. The Museum is managed by a Board of Trustees, consisting of 40 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 permanent collection. Acknowledged worldwide for its collection of 20th and now 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 temporary 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 and a number of curatorial support departments. The curatorial support departments include collection care, collection exhibition technology, conservation, exhibition administration, exhibition design and production, film operations and preservation, imaging, 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 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. An estimated 100,000 individuals participate in targeted educational programs on and off site each year, and all Museum visitors have access to many forms of educational resources that complement the collection and exhibitions. These resources include information labels public tours and audio tours in seven languages as well as visual description tours for the blind and partially sighted and others with disabilities. 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. Educational programs take place throughout the week.

Form 990, Part VI, Section A, Line 2 - The Museum's Board of Trustees includes two members from the same family - David Rockefeller, who is not a voting trustee and David Rockefeller, Jr. Two Trustees of the Museum, Jerry Speyer and Paula Crown have direct or indirect financial interests in Top of the Rock, an observation deck in Rockefeller Center. The Museum has an agreement with Top of the Rock, LLC which provides for each of the Museum and Top of the Rock to sell "combo packages" of admission tickets at a discount, to each of the Museum and Top of the Rock. In addition, these Trustees also have direct and indirect interests together in entities that own real estate investment properties around the world. James Niven also serves as a senior official at an auction house where the Museum from time to time consigns art work for sale by auction. Daniel Och serves as the CEO and Executive Managing Director of a company which manages a variety of funds. The Museum's endowment invested in such a fund prior to this individual becoming a trustee. In late 2013, the Museum redeemed its investment in this fund and the remaining balance reflects an illiquid side-pocket in the process of being monetized.

Form 990, Part VI, Section A, Line 6 - The Museum's Bylaws provide that the Members of the Corporation shall consist of members of the Board of Trustees, all persons who on November 1, 1939 were Patrons, Contribution Members or Sustaining Members, and all other persons who, subsequent to November 1, 1939, have been or shall be designated by the Board of Trustees as members of the Corporation. Members have equal voting rights

Form 990, Part VI, Section A, Line 7a - The Museum's Bylaws provide that the Members of the Corporation shall consist of members of the Board of Trustees, all persons who on November 1, 1939 were Patrons, Contribution Members or Sustaining Members, and all other persons who, subsequent to November 1, 1939, have been or shall be designated by the Board of Trustees as members of the

Form 990, Part VI, Section B, Line 11b - The Museum's form 990 is drafted by the Museum's Controller's Office with input from many

Museum departments. It is then reviewed by Museum senior staff including the Director, the Chief Operating officer, the Chief Financial

Officer, and the General Counsel, as well as by external tax advisors. 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.

## Supplemental Information (Continued)

orm 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
esponder: confirm that he or she has read and understands the Code of Conduct, agrees to abide by it, identify whether he or she or a
amily 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
dentified, 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
ermination. 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 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 other key employees
ncludes 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 on a bi-annual basis 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 and documents these issues.
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 Financial Statements and prior years 990 are available to the public through the Museum's website
www.moma.org.
Form 990, Part XI, Line 9 - Primarily defined benefit plan changes other than net periodic benefit costs (\$2,168,273), change in swap
valuation \$358,587.

MUSEUM OF MODERN ART 13-1624100

### Schedule O, Statement 1

Form: 990 Page: 2

Line Number: Part III Line 4a

### First Program Service Accomplishments Description

### Description

Metamorphoses (3/8/2014-6/8/2014); Frank Lloyd Wright and the City: Density and Dispersal(2/1//2014-6/1/2014); The Aesthetics of Shadow (4/2014); The Berlin School (11/20/2013-12/6/2013): Films from the Berliner Robert Heinecken: Object Matter(3/15/2014-9/7/2014); Soundings: A Contemporary Score (8/10/2013-11/3/2013); Lygia Clark: The Abandonment of Art, 1948-1988 (5/10/2014-8/24/2014).

Page: 1

Schedule O, Statement 2 MUSEUM OF MODERN ART
Form: 990 13-1624100

Form: 990 Page: 5

Line Number: Part V Line 4b

Name Of Foreign Country

Name

United Kingdom (England, Northern Ireland, Scotland, and Wales)

Page: 2

### Schedule O, Statement 3

Form: 990 Page: 6

Line Number: Part VI Section C Line 17

States Where Copy Of Return Is Filed
States
AK
AL
AR
AZ
CA
со
СТ
FL
GA
н
<u>L</u> .
KS
KY
MA
MD
ME
MI
MN
MS
NC
ND
NH
NJ
NM .
NY
ОН
ОК
OR
PA
RI
SC
TN
UT
VA
WA
WI
W

# SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

MUSEUM OF MODERN ART

Partl

Related Organizations and Unrelated Partnerships

▶ See separate instructions. ■ Attach to Form 990.

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

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

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

Open to Public 2013

OMB No. 1545-0047

Employer identification number 13-1624100

Schedule R (Form 990) 2013 (g) Section 512(b)(13) controlled entity? (f)
Direct controlling
entity Yes No 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 organizations during the tax year. > (f)
Direct controlling
entity (e) End-of-year assets Z/A ξ ΑN (e)
Public charity status
(if section 501(c)(3)) (d) Total income 11 - Type 1 11 - Type 1 ~ (d) Exempt Code section (c) Legal domicile (state or foreign country) 501 (c) 3 501 (c) 3 501 (c) 3 Cat. No. 50135Y (c) Legal domicile (state or foreign country) (b) Primary activity ЭE OE È (b) Primary activity Receive, acquire & Contemporary Art Exhibitions hold title in ppty Manage Retail Operations For Paperwork Reduction Act Notice, see the Instructions for Form 990. (1) Modern and Contemporary Art Support Corp (13-3910972) (a) Name, address, and EIN (if applicable) of disregarded entity (9) (a) Name, address, and EIN of related organization (3) PS1 Contemporary Art Center Inc (23-7379091) 46-01 21st Street, Long Island City, NY 11101 11 West 53rd Street, New York, NY 10019 11 West 53rd Street, New York, NY 10019 (2) MoMA Auxiliaries (13-3975341) Part II (2) 9 티 ন্ত ପ € 9 € <u>(</u>

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. Part III

(k) Percentage ownership		100%							† IV,	(i) Section 512(b)(13) controlled entity?	s No	>		>						Schedule R (Form 990) 2013
(i) General or managing partner?	Š								0, Par		Yes	%								Rorn
Gene mana part	Yes	>							. m	(h) Percentage ownership		100%								edule F
(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)									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.	(g) Share of end-of-year assets		857,198								Sche
ntionate tions?	S _N	<i>/</i>							vered			0	_							
(h) Disproportiona allocations?	Yes								ansv ar.	(f) Share of total income										
nd-of- sets		4,389,037							ation IX yea	Share										
(g) (h) Share of end-of- year assets allocations?		4,38							Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization are line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	(e) Type of entity (C corp, S corp, or trust)										
f total ne		312,784							if the t duri	Type c										
(f) Share of total income		έs							plete r trus			၁		<del> -</del>						
									Com	(d) Direct controsing entity	:									
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)									rust porat	) Direct o		N/A		A/N						
(e) Predominar scome (relate unrelated, excluded fro tax under ctions 512-?		Related							i or 1			Z	+	z						
		Rel					-		ation	(c) Legal domicile e or foreign cour										
(d) Direct controlling entity									reate	(c) Legal domicile (state or foreign country)										
(d) irect contr entity		æ							s a C	(st		DE	+	Ż						
		N/A							ole as	ılty		SS								
(c) Legal domicile (state or foreign country)		_							axat orga	(b) Primary activity		General Business	5							
		λ							ated	Prim		eral B	Corporation	# #	-					
rity									izati re re			Ger	3	Trust	i		<u> </u>			
(b) Primary activity									rgan r mo	_										
Prima		Real Estate							ed 0	ıizatior		-	6		1			! ! !		
									Relat	d orga			7 1991							
<u>.</u>		(1) AFE LLC (20-2379359) 11 West 53rd Street, New York, N					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		n of l	(a) Name, address, and EIN of related organization		2)	11 West 53rd Street, New York, NY 10019							
d EIN o		3359) New Y	1 5 8						catic	nd EIN		11490	New Y	ts 19				1		
(a) ess, an organizi		0-237 treet,			1				entifi e 34	Iress, a		1 (13-4	treet,	Y 100						
(a) Name, address, and ElN of related organization		(1) AFE LLC (20-2379359) 11 West 53rd Street, New							<b> </b> ≅.≝	пе, adc		(1) Alta Cultura (13-4114902)	3rd S	(2) 5 Charitable Trusts N/A, Various, NY 10019	-					
Nam		AFE I	1					1	Part IV	Nar		Alta C	West £	5 Cha , Varic	t t					
		[되 [	(2)	୍ର	<b>3</b>	(2)	9	2	O.			Ξ	=	8 8 8	<u></u>	€	9	9	8	

Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Schedule R (Form 990) 2013

Part V Transacti

<u> </u>				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<b>&gt;</b>		_	>	<u> </u>	>		<b>&gt;</b>	>	>	<i>/</i>	<i>&gt;</i>	>		<b>&gt;</b>	\ \ \	>	•	<u>&gt;</u>	>	sholds.	involved									990) 2013
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•	1.	,	•							,		•				•									ships and transactio	(d) Method of determining amount involved	797,556 cost method	•	599,390   cost method	206,199 cost method					Schedule R (Form 990) 2013
			•			• • • • • • • • • • • • • • • • • • • •		•	•							•	•				•	· · · · ·	•		complete this line, including covered relationships and transaction thresholds	(c) Amount involved	797,556		599,390	206,199					
																						•			mplete this line, inclu	(b) Transaction type (a-s)			0	C					
a Receipt of (i) interest (ii) annuttes (iii) rovalties or (iv) rent from a controlled entity			City grant or control contribution from volated control(s)	diff, grafft, of capital collubration from February	d Loans or loan guarantees to or for related organization(s)	e Loans or loan guarantees by related organization(s)		f Dividends from related organization(s)	α Sale of assets to related organization(s)	h Purchase of assets from related organization(s)		Exchange of assets with related organization(s)	Lease of facilities, equipment, of offiel assets to related organization(s)	<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)	I Performance of services or membership or fundraising solicitations for related organization(s)	m Performance of services or membership or fundraising solicitations by related organization(s).			o Sharing of paid employees with related of gantzation (s)	<b>p</b> Reimbursement paid to related organization(s) for expenses	n Reimbursement paid by related organization(s) for expenses		r Other transfer of cash or property to related organization(s)		2 If the answer to any of the above is "Yes," see the instructions for information on who must cor	(a) Name of related organization	PS1 Contemporary Art Center Inc	A TABLE OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY 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Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI 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.

	(b)	(3)	(p)	(e) (c) (c)	S S S S S S S S S S S S S S S S S S S	(a)	(F)	8	5	8
Name, address, and EIN of entity	Primary activity	Legal domicile	Predominant	Are all partners	Share of	Share of	Disproportionate	e Code V-UBI		F
		(state or foreign country)	income (related, unrelated, excluded from toy under	section 501(c)(3)	total income	end-of-year assets	allocations?	of Schedule K-1	managing partner?	
			sections 512-514)	Yes No			Yes		Yes No	
(1)										
(2)										
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Schedule R (F	Form 990) 2013	Page <b>5</b>
Part VII	Supplemental Information	×
	Provide additional information for responses to questions on Schedule R (see instructions).	
Schedule F	R, Part V, Line 1d - There is a \$2 million line of credit for MoMA PS1 that is guaranteed by MoMA.	
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