# \*\* PUBLIC DISCLOSURE COPY \*\*

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

Inspection

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public

OMB No. 1545-0047

| Α                           | or the                               | e 2014 calendar year, or tax year beginning JUL I, ∠UI4 and e  | ending J     | UN 30, 2015                         |                               |  |  |  |  |  |  |
|-----------------------------|--------------------------------------|--|--------------|-------------------------------------|-------------------------------|--|--|--|--|--|--|
| В                           | Check if applicabl                   | C Name of organization   |              | D Employer identifi                 | cation number                 |  |  |  |  |  |  |
|                             | Addre<br>chang                       |  |              |                                     |                               |  |  |  |  |  |  |
|                             | Name<br>chang                        | e Doing business as  |              | 13-1                                | 624098                        |  |  |  |  |  |  |
|                             | Initial<br>return<br>Final<br>return |  | Room/suite   | E Telephone number 212-534-1672     |                               |  |  |  |  |  |  |
|                             | termin<br>ated                       | City or town, state or province, country, and ZIP or foreign postal code   |              | G Gross receipts \$ 30,496,376.     |                               |  |  |  |  |  |  |
|                             | Amen                                 |  |              | H(a) Is this a group return         |                               |  |  |  |  |  |  |
| F                           | Applic                               |  | ER           | for subordinates                    |                               |  |  |  |  |  |  |
|                             | pendi                                | SAME AS C ABOVE  |              | <b>H(b)</b> Are all subordinates in |                               |  |  |  |  |  |  |
| $\overline{\Gamma}$         | Гах-ех                               | empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) 0  | r 527        | 1                                   | list. (see instructions)      |  |  |  |  |  |  |
|                             |                                      | te: WWW.MCNY.ORG   |              | H(c) Group exemptio                 |                               |  |  |  |  |  |  |
| K                           | orm of                               | organization: X Corporation Trust Association Other  | L Year       |                                     | N State of legal domicile: NY |  |  |  |  |  |  |
|                             | art I                                | Summary  |              | •                                   |                               |  |  |  |  |  |  |
| Φ                           | 1                                    | Briefly describe the organization's mission or most significant activities: SEE S  | SCHEDU       | LE O                                |                               |  |  |  |  |  |  |
| & Governance                |                                      |  |              |                                     |                               |  |  |  |  |  |  |
| ž.                          | 2                                    | Check this box  if the organization discontinued its operations or dispos  | ed of more   | than 25% of its net as              |                               |  |  |  |  |  |  |
| ŏ                           | 1                                    |  |              | 3                                   | 54                            |  |  |  |  |  |  |
| <u>م</u>                    |                                      | Number of independent voting members of the governing body (Part VI, line 1b)  |              |                                     | 54                            |  |  |  |  |  |  |
| ies                         |                                      | Total number of individuals employed in calendar year 2014 (Part V, line 2a)   |              |                                     | 234                           |  |  |  |  |  |  |
| Activities                  |                                      | Total number of volunteers (estimate if necessary)   |              |                                     | 258                           |  |  |  |  |  |  |
| Act                         |                                      | Total unrelated business revenue from Part VIII, column (C), line 12   |              |                                     | 0.                            |  |  |  |  |  |  |
|                             | b                                    | Net unrelated business taxable income from Form 990-T, line 34   | ·····        |                                     | 0.                            |  |  |  |  |  |  |
|                             |                                      |  |              | Prior Year                          | Current Year                  |  |  |  |  |  |  |
| ne                          |                                      | Contributions and grants (Part VIII, line 1h)  |              | 14,124,146.                         |                               |  |  |  |  |  |  |
| Revenue                     | 1                                    | Program service revenue (Part VIII, line 2g)   |              | 1,761,520.<br>1,028,137.            | 1,796,692.<br>1,437,012.      |  |  |  |  |  |  |
| Be                          |                                      | Investment income (Part VIII, column (A), lines 3, 4, and 7d)  |              | 520,239.                            | 367,879.                      |  |  |  |  |  |  |
|                             |                                      | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)   |              | 17,434,042.                         | 24,501,420.                   |  |  |  |  |  |  |
| _                           | _                                    | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)  Grants and similar amounts paid (Part IX, column (A), lines 1-3) |              | 0.                                  | 0.                            |  |  |  |  |  |  |
|                             |                                      | Benefits paid to or for members (Part IX, column (A), lines 1-3)   |              |                                     |                               |  |  |  |  |  |  |
| "                           | I                                    | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  |              | 0.<br>7,094,636.                    | 0.<br>8,492,059.              |  |  |  |  |  |  |
| Expenses                    | 16a                                  | Professional fundraising fees (Part IX, column (A), line 11e)  |              | 48,000.                             | 65,000.                       |  |  |  |  |  |  |
| per                         | b                                    | Total fundraising expenses (Part IX, column (D), line 25)   1,733,30   | 9.           |                                     | 33,7333                       |  |  |  |  |  |  |
| Ж                           | 17                                   | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)   |              | 5,581,116.                          | 6,950,851.                    |  |  |  |  |  |  |
|                             |                                      | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)  |              | 12,723,752.                         | 15,507,910.                   |  |  |  |  |  |  |
|                             | 1                                    | Revenue less expenses. Subtract line 18 from line 12   |              | 4,710,290.                          | 8,993,510.                    |  |  |  |  |  |  |
| JO.                         |                                      | ·  | Be           | ginning of Current Year             | End of Year                   |  |  |  |  |  |  |
| Net Assets or Find Balances | 20                                   | Total assets (Part X, line 16)   |              | 51,676,779.                         | 59,528,122.                   |  |  |  |  |  |  |
| t As                        | 21                                   | Total liabilities (Part X, line 26)  |              | 705,140.                            | 838,739.                      |  |  |  |  |  |  |
|                             |                                      | Net assets or fund balances. Subtract line 21 from line 20   |              | 50,971,639.                         | 58,689,383.                   |  |  |  |  |  |  |
|                             | art II                               | Signature Block  |              |                                     |                               |  |  |  |  |  |  |
|                             |                                      | lties of perjury, I declare that I have examined this return, including accompanying schedules   |              |                                     | y knowledge and belief, it is |  |  |  |  |  |  |
| true                        | , correc                             | t, and complete. Declaration of preparer (other than officer) is based on all information of whi   | ich preparer | has any knowledge.                  |                               |  |  |  |  |  |  |
|                             |                                      | Signature of officer   |              | <br>Date                            |                               |  |  |  |  |  |  |
| Sig                         |                                      | '  | TDECE        |                                     |                               |  |  |  |  |  |  |
| He                          | e                                    | WHITNEY W. DONHAUSER, RONAY MENSCHEL I  Type or print name and title   | TRECT        | OR                                  |                               |  |  |  |  |  |  |
|                             |                                      |  | IT           | Date Check                          | II PTIN                       |  |  |  |  |  |  |
| Pai                         | d                                    | Print/Type preparer's name  AARON SHAPIRO  Preparer's signature  |              | if                                  |                               |  |  |  |  |  |  |
|                             | u<br>parer                           | Firm's name LOEB & TROPER LLP  |              | self-employ                         | 13-1517563                    |  |  |  |  |  |  |
|                             | Only                                 | Firm's address 655 THIRD AVENUE, 12TH FLOOR  |              | Firm's EIN ▶ 13-1517563             |                               |  |  |  |  |  |  |
| 530                         | Unity                                | NEW YORK, NY 10017   |              | Phone no 21                         | 2-867-4000                    |  |  |  |  |  |  |
| Ma                          | the II                               | RS discuss this return with the preparer shown above? (see instructions)   |              | Phone no. 212 - 867 - 4000          |                               |  |  |  |  |  |  |

| Par    | t III   Statement of Program Service Accomplishments  |
|--------|---|
|        | Check if Schedule O contains a response or note to any line in this Part III  |
| 1      | Briefly describe the organization's mission:  |
|        | SEE SCHEDULE O  |
|        |   |
|        |   |
|        |   |
| 2      | Did the organization undertake any significant program services during the year which were not listed on  |
|        | the prior Form 990 or 990-EZ?   |
| _      | If "Yes," describe these new services on Schedule O.  |
| 3      | Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No  |
| 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. |
| 7      | 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 \$ 6,955,766 • including grants of \$) (Revenue \$  |
|        | EXHIBITIONS AND PUBLICATIONS:   |
|        |   |
|        | ONGOING/LONG-TERM EXHIBITIONS OPEN THROUGH FY2015   |
|        |   |
|        | GILDED NEW YORK (NOV 13, 2013 - CURRENT)  |
|        | INAUGURATING THE CITY MUSEUM'S TIFFANY & CO. FOUNDATION GALLERY, GILDED   |
|        | NEW YORK EXPLORES THE CITY'S VISUAL CULTURE AT THE END OF THE 19TH  |
|        | CENTURY, WHEN THE ELITE CLASS FLAUNTED ITS WEALTH MORE CONSPICUOUSLY  |
|        | THAN EVER BEFORE. INDUSTRIAL TITANS, SUCH AS CORNELIUS VANDERBILT AND   |
|        | JAY GOULD, EXPRESSED THEIR STATUS THROUGH EXTRAVAGANT FASHIONS,   |
|        | ARCHITECTURE, AND INTERIOR DESIGN.  |
|        | CONTINUED ON SCHEDULE O:           (Code:) (Expenses \$3,783,451.         including grants of \$) (Revenue \$   |
| 4b     | (Code:) (Expenses \$ 3,783,451. including grants of \$) (Revenue \$) (Revenue \$)   |
|        | CODDECTIONS CARE.   |
|        | THE MUSEUM HAS AN ONGOING COMMITMENT TO PRESERVE, DOCUMENT AND MAKE   |
|        | ACCESSIBLE ITS VAST COLLECTIONS OF OBJECTS RELATED TO THE HISTORY OF  |
|        | NEW YORK CITY. A MAJOR MULTI-YEAR DIGITIZATION PROJECT IS PROVIDING   |
|        | THE PUBLIC ACCESS TO MANY PREVIOUSLY HIDDEN TREASURES IN THE  |
|        | COLLECTIONS, WITH A LEVEL OF CONNOISSEURSHIP, SCHOLARSHIP AND ANALYSIS  |
|        | THAT HAS ANIMATED THE PUBLIC'S UNDERSTANDING OF THE CITY AND ITS  |
|        | PEOPLE.   |
|        |   |
|        |   |
|        | CONTINUED ON SCHEDULE O:  |
| 4c     | (Code:) (Expenses \$ 1,074,921. including grants of \$) (Revenue \$)  |
|        | EDUCATION:  |
|        | AMMENDANCE FOR ETELDMETEC OUR OF COULOU MINE PROCESSES PROFESSIONAL   |
|        | ATTENDANCE FOR FIELDTRIPS, OUT-OF-SCHOOL TIME PROGRAMS, PROFESSIONAL DEVELOPMENT, AND FAMILY PROGRAMS WAS 46,705 CHILDREN AND ADULTS.   |
|        | APPROXIMATELY 80% OF PARTICIPANTS WERE FROM UNDER-RESOURCED SCHOOLS.  |
|        | ADULT GROUP TOURS SERVED AN ADDITIONAL 3,847 PEOPLE.  |
|        | MDOLI GROOF TOORS BERVED MY ADDITIONAL 3,047 FEOTED:  |
|        |   |
|        |   |
|        |   |
|        |   |
|        | CONTINUED ON SCHEDULE O:  |
| 4d     | Other program services (Describe in Schedule O.)  |
|        | (Expenses \$ 472,590 • including grants of \$ ) (Revenue \$ 340,412 •)  |
| 4e     | Total program service expenses ► 12,286,728.  |
| 432003 | Form <b>990</b> (2014   |

# Part IV Checklist of Required Schedules

|          |  |     | Yes | No              |
|----------|--|-----|-----|-----------------|
| 1        | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  |     |     |                 |
|          | If "Yes," complete Schedule A  | 1   | X   |                 |
| 2        | Is the organization required to complete Schedule B, Schedule of Contributors?   | 2   | X   |                 |
| 3        | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for  |     |     | <b>₩</b>        |
|          | public office? If "Yes," complete Schedule C, Part I   | 3   |     | X               |
| 4        | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect   |     |     | х               |
| -        | during the tax year? If "Yes," complete Schedule C, Part II  | 4   |     |                 |
| 5        | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  | 5   |     | х               |
| 6        | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to  |     |     |                 |
|          | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I   | 6   |     | X               |
| 7        | Did the organization receive or hold a conservation easement, including easements to preserve open space,  |     |     |                 |
|          | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II   | 7   |     | X               |
| 8        | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  | 8   | х   |                 |
| 9        | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for  |     |     |                 |
|          | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?  If "Yes," complete Schedule D, Part IV  | 9   |     | x               |
| 10       | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent  |     |     |                 |
|          | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V   | 10  | Х   |                 |
| 11       | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X   |     |     |                 |
|          | as applicable.   |     |     |                 |
| а        | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,  |     |     |                 |
|          | Part VI  | 11a | Х   |                 |
| b        | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total  |     |     |                 |
|          | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  | 11b | X   |                 |
| С        | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total   |     |     |                 |
|          | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII   | 11c |     | X               |
| d        | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in   |     |     | ,               |
|          | Part X, line 16? If "Yes," complete Schedule D, Part IX  | 11d | Х   | X               |
|          | 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  |     | Х   |                 |
| 10-      | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i> | 11f | 21  |                 |
| ıza      |  | 12a | Х   |                 |
| h        | Was the organization included in consolidated, independent audited financial statements for the tax year?  | IZa |     |                 |
|          | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  | 12b |     | x               |
| 13       | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  | 13  |     | Х               |
| 14a      | Did the organization maintain an office, employees, or agents outside of the United States?  | 14a |     | Х               |
| b        |  |     |     |                 |
|          | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000   |     |     |                 |
|          | or more? If "Yes," complete Schedule F, Parts I and IV   | 14b | X   |                 |
| 15       | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any  |     |     |                 |
|          | foreign organization? If "Yes," complete Schedule F, Parts II and IV   | 15  |     | Х               |
| 16       | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to   |     |     |                 |
|          | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  | 16  |     | X               |
| 17       | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,  |     |     |                 |
|          | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I   | 17  | X   | <u> </u>        |
| 18       | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines   |     | 77  |                 |
|          | 1c and 8a? If "Yes," complete Schedule G, Part II  | 18  | X   |                 |
| 19       | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"   |     |     | ₩.              |
| 00       | complete Schedule G, Part III  | 19  |     | X               |
| 20a      |  | 20a |     |                 |
| <u> </u> | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?   | 20b | 000 | (201 <i>4</i> ) |

# Part IV 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                     |     |     |                  |
|            | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II                               | 21  |     | X                |
| 22         | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on                   |     |     | ا ۔۔             |
|            | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III   | 22  |     | X                |
| 23         | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current      |     |     |                  |
|            | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete                  |     |     |                  |
|            | Schedule J  | 23  | Х   |                  |
| 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              |     |     | \ <sub>3,7</sub> |
|            | Schedule K. If "No", go to line 25a   | 24a |     | Х                |
|            | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?                               | 24b |     |                  |
| С          | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease            |     |     |                  |
|            | any tax-exempt bonds?   | 24c |     |                  |
|            | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?                         | 24d |     |                  |
| 25a        | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit                    | 25a |     | x                |
| h          | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I                                   | 25a |     | 22               |
| b          | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete           |     |     |                  |
|            | Octobrilla I Dall   | 25b |     | X                |
| 26         | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or           | 230 |     |                  |
| 20         | former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"          |     |     |                  |
|            | complete Schedule L, Part II  | 26  |     | x                |
| 27         | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial            |     |     |                  |
|            | contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member             |     |     |                  |
|            | of any of these persons? If "Yes," complete Schedule L, Part III  | 27  |     | х                |
| 28         | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV               |     |     |                  |
|            | instructions for applicable filing thresholds, conditions, and exceptions):   |     |     |                  |
| а          | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV                         | 28a |     | Х                |
|            | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV      | 28b |     | Х                |
| 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 |     | Х                |
| 29         | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M                        | 29  | Х   |                  |
| 30         | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation     |     |     |                  |
|            | contributions? If "Yes," complete Schedule M  | 30  |     | Х                |
| 31         | Did the organization liquidate, terminate, or dissolve and cease operations?  |     |     |                  |
|            | If "Yes," complete Schedule N, Part I   | 31  |     | Х                |
| 32         | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete                |     |     |                  |
|            | Schedule N, Part II   | 32  |     | X                |
| 33         | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations                      |     |     |                  |
|            | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I   | 33  |     | X                |
| 34         | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and       |     |     |                  |
|            | Part V, line 1  | 34  |     | X                |
|            | Did the organization have a controlled entity within the meaning of section 512(b)(13)?   | 35a |     | X                |
| b          | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity       |     |     |                  |
|            | within the meaning of section 512(b)(13)? 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?      |     |     | _ v              |
| <b>0</b> - | If "Yes," complete Schedule R, Part V, line 2   | 36  |     | X                |
| 37         | Did the organization conduct more than 5% of its activities through an entity that is not a related organization                |     |     | x                |
| 00         | 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?                  |     | х   |                  |
|            | Note. All Form 990 filers are required to complete Schedule O   | 38  |     | <u> </u>         |

Form **990** (2014)

# Part V Statements Regarding Other IRS Filings and Tax Compliance

| The second content of the common of the co      |     | Check if Schedule O contains a response or note to any line in this Part V                                 |               |             |     |     |       |  |  |  |  |  |
|---|-----|--|---------------|-------------|-----|-----|-------|--|--|--|--|--|
| b Enter the number of Forms W-2G included in line 1s. Enter of India applicable   | 4.  | Establic growth as you and alic Paul O of Form 1000. Establic Different and list had                       | ـ تـ ا        | 1 266       |     | Yes | No    |  |  |  |  |  |
| Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming generalized from the calendar year ending with or within the year covered by this return.  2 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements. It is a provided from the calendar year ending with or within the year covered by this return.  3 If the calendar year ending with or within the year covered by this return.  3 If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3 If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3 If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3 If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3 If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3 If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3 If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3 If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  4 If Yes, 1 If the end than 2 If the sum of lines 1a and 1a      |     |  | <b>—</b>      |             |     |     |       |  |  |  |  |  |
| a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return   |     |  |               |             |     |     |       |  |  |  |  |  |
| 2a Earth the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendary year ending with or within the year covered by this return.  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unreaded business gross income of \$1,000 or more during the year?  3a X  b If Yes, "has it filed a Form 990-T for this year? If "No," to file 3b, provide an explanation in Schedule O  3b A At any time during the calendary year, did the organization have an interest it, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  4a At any time the haame of the foreign country.  5b If Yes," and the file and the foreign country (such as a bank account, securities account, or other financial Accounts (FBAF).  5c Was the organization a party to a prohibited tax shelter transaction at one of the properties of the organization file form 8868-T7  6a Does the organization aparty to a prohibited stax shelter transaction?  5c Did any exceptibility the organization file Form 8868-T7  6b Organization start were not tax deductible as charitable contributions?  6c Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7c Organization start many receive deductible contributions under section 170(c).  8d Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7b If Yes," did the organization notity the donor of the value of the goods or services provided?  7c If X  7d If If Yes, and the many receive deductible contributions under section 170(c).  8d Did the organization selle, expanyed organization the development of the value of the goods or services provided    | C   |  |               |             | 10  |     |       |  |  |  |  |  |
| tiled for the calendary year ending with or within the year covered by this return.    2a   | 22  |  | <br>          | <br>        | 10  |     |       |  |  |  |  |  |
| b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  3a Did the organization have unrelated business gross income of 750,000 m more during the year?  3a Ibid the organization and a foreign country (such as a bank account, so file (see instructions)  3b If "Yes," has it filed a Form 990 T for this year? If "No," to fine 3b, provide an explanation in Schedule O  3a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  4a At any time there the name of the foreign country   ▶  5b ein structions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b If "Yes," to line 5a or 5b, did the organization file Form 8886-17  6c If "Yes," to line 5a or 5b, did the organization file Form 8886-17  6d Does the organization shall are annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6c If "Yes," to line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 organizations that many receive deductible contributions under section 170(c).  8c If "Yes," did the organization necleve apprential moves sol \$75 made party is a contribution and party for goods and services provided to the payor?  7 organization receive apprential moves sol \$75 made party is a contribution of party for year to the form 8282?  8 organization receive apprential moves sold \$75 made party is a contribution of year apprential property for which it was required to line Form 8282?  9 organization receive any payment in excess to \$75 made party is a contribution of | Za  |  | 22            | 234         |     |     |       |  |  |  |  |  |
| Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Dit the organization have unrelated business gross income of \$1,1000 or more during the year?  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. ►  5b If Yes,* relate the name of the foreign country. ►  5c If Yes,* relate the name of the foreign country. ►  5a Was the organization party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5b If Yes,* on the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chariatate contributions?  6c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that the was or its a party to a prohibited tax shelter transaction?  5c Did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that the varies of the organization transaction of the development of the organization solicit any contributions that the vary receive deductible contributions under section 170(c).  6c Did the organization receive apayment in excess of \$75 made party as a contribution of organization for the organization or the value of the goods or services provided?  7c Did the organization that may receive deductible contributions under section 170(c).  8 If Yes, "indicate the number of Forms 8282 filed during the year  9 If Yes, "indicate the number of Forms 8282 filed during the year  10 If Yes, "indicate the number of Forms 8282 filed during the year  11 If Yes, "indicate the number of Forms 8282 filed during the year  12 If the organization received a contribution of caris, boats, an | b   |  |               |             | 2h  | Х   |       |  |  |  |  |  |
| 3a Dit the organization have unrelated business gross income of \$1,000 or more during the year?  4b If Yes,* has if filed a Form 900-17 for this year, "I "\0," to live a By, provide an explanation in Schedule 0  4c 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 all account)?  4c If Yes, "to live the foreign country   Provided in the financial Accounts (FBAR).  5c If Yes, "to line 5a or 5b, did the organization file Form 8886-17?  6c If Yes, "to line 5a or 5b, did the organization file Form 8886-17?  6d Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6d If Yes, "to line 5a or 5b, did the organization file Form 8886-17?  6d Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6d If Yes, "did the organization include with every solicitation and partly for goods and services provided to the payor?  7d If Yes, "did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7b If Yes, "did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c X  7d If Yes, "did the organization received a contribution of qualified intellectual property, did the organization file Form 899 as required?  7f Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 899 as required?  7f This organization file for the year, ap yearnism, directly or indirectly, on a personal benefit contract?  7r Sponsoring organization have excess business holdings at any time during the year?  9g Sponsoring organization in aminitaning donor advised fun  | -   |  |               |             |     |     |       |  |  |  |  |  |
| b if "Yes," has it flied a Form 990-T for this year" if "No," it ofine 3b, provide an explanation in Schedule 0  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 instructions for filing requirements for fineCFH Form 114, Report of Foreign Bank and Financial Accounts (FEAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5b If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  6c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax educutibles?  6c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions?  6c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7c Organizations that may receive deductible contributions under section 170(c).  8 If "Yes," indicate the number of Forms 8282 filed during the year or the property for which it was required to the Form 8282?  9 If "Yes," indicate the number of Forms 8282 filed during the year.  9 If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  77 If X  78 X  79 If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7a If the organization received an contribution of cars, boats, anispane, or other vehicles, did the organization flee or an interest of the sponsoring organization make a distribution and party the during the year?  9 Sponsori    | За  |  |               |             | За  |     | Х     |  |  |  |  |  |
| 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, erother financial account)?  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  So Was the organization party to a prohibited tax shelter transaction at any time during the tax year?  5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b X C If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5b LYS, and the organization include with every solicitation and party to a prohibited tax shelter transaction?  6c Des the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive apayment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  7 Tyes," did the organization notity the donor of the value of the goods or services provided?  7 Did the organization receive apayment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  8 If "Yes," indicate the number of Forms 8282 filed during the year  9 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  7 Tyes," indicate the number of Forms 8282 filed during the year  9 Did the organization, during the year, pay premiums, directly or indirectly, or a personal benefit contract?  7 Tyes," If the organization received a contribution of qualified intellectual property, did the organization file organization services and contribution of    |     |  |               |             |     |     |       |  |  |  |  |  |
| 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 instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization file Form 8886-17?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that twer not tax deductible as charitable contributions?  6a Z X  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions?  6b Z  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$575 made partly as a contribution and partly for goods and services provided to the payor?  7 If "Yes," did the organization notify the donor of the value of the goods or services provided?  7 If "Yes," indicate the number of Forms 8282 filed during the year  9 Did the organization receive any funds, directly or indirectly, no pay premiums on a personal benefit contract?  7 If X If Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-07  7 If Did the organization have excess business holdings at any time during the year?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Section 501(k/Z) organizations. Enter:  a initiation fees and capital contributions included on Part VIII, line 12  10 Section 501(k/Z) organizations. Enter:  a linitiation fees and capital contributions included on progralization more than one state?  Note. See the instructions for additional inform  |     |  |               |             |     |     |       |  |  |  |  |  |
| b If "Yes," enter the name of the foreign country: ► See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b MX  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5c   15   |     |  |               | •           | 4a  |     | X     |  |  |  |  |  |
| Sa X D Did any taxable party not a prohibited tax shelter transaction at any time during the tax year?  5a X D Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b X C If Yes,* 10 line 5a or 5b, did the organization file Form 888617?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6b If Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 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?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization receive any payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  8 Object of Did the organization receive any funds, directly, to pay premiums on a personal benefit contract?  9 Did the organization receive any funds, directly, to pay premiums on a personal benefit contract?  10 Did the organization receive any funds, directly, to pay premiums on a personal benefit contract?  11 Did the organization received a contribution of qualified intellectual property, did the organization file Form 1098-C?  12 Did the organization make any taxable distributions under section 4966?  13 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Gross | b   | · · · · · · · · · · · · · · · · · · ·  |               | ,           |     |     |       |  |  |  |  |  |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  6 If "Yes," to line 5 aor 5b, did the organization file Form 8886-17  6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization review a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7 If "Yes," did the organization notify the donor of the value of the goods or services provided?  8 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  9 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9 Did the organization receive any funds, directly or indirectly, on a personal benefit contract?  9 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  10 If the organization make any save as any times the organization file Form 8899 as required?  10 Sponsoring organization make any saxeble distributions under section 4966?  11 Sponsoring organization make any saxeble distributions under section 4966?  12 Sponsoring organization make any saxeble distributions under section 4966?  13 Section 501(c)(12) organizations. Enter:  14 Initiation fees and capital contributions funded on Part VIII, line 12  15 Gross income from members or shareholders  16 Gross income from members or shareholders  17 Initiation fees and capital contributions included on Part VIII, line 12  18 Gross income from there sources (Do not et amounts due or paid to other sources a  |     | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A       | ccou          | nts (FBAR). |     |     |       |  |  |  |  |  |
| c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$5° made partly as a contribution and partly for goods and services provided to the payor?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," inclinate the number of Forms 8282 filed during the year of the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  If "Yes," inclinate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  To X  If the organization receive any tunds, directly or indirectly, to pay premiums on a personal benefit contract?  To X  If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  Sponsoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make and stirbutions included on Part VIII, line 12  Did the sponsoring organization make and stirbutions under section 4966?  Did the sponsoring organization make and stirbutions under section 4966?  Did the sponsoring organization m  | 5a  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?      |               |             | 5a  |     |       |  |  |  |  |  |
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| b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly tor goods and services provided to the payor?  7b if "Yes," did the organization notify the donor of the value of the goods or services provided?  7 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  8 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9 Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  10 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  11 Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  12 Sponsoring organizations maintaining donor advised funds.  13 Did the sponsoring organizations maintaining donor advised funds.  14 Did the sponsoring organization make any taxable distributions under section 4966?  15 Did the sponsoring organization make any taxable distributions under section 4966?  16 Gross receipts, included on Form 990, Part VIII, line 12  17 Did the sponsoring organization make any taxable distributions under section 4966?  18 Section 501(c)(12) organizations. Enter:  19 Gross income from members or shareholders  10 Section 4947(a)(1) non-exempt characteristic funds and the property of the prop   | С   | If "Yes," to line 5a or 5b, did the organization file Form 8886-T?   |               |             | 5с  |     |       |  |  |  |  |  |
| b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  F Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 Te X  7 Tif X  Tif bid 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?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  8 Sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organizations maintaining donor advised funds.  10 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part Vill, line 12  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?  12b If "Yes," enter the amount of tax exempt interest received or accrued during the year  12b If yes, enter the amount of reserves on hand  13b If yes," has it filled a Form 720 to report these payments? If    |     |  |               |             |     |     |       |  |  |  |  |  |
| were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c). a Did the organization scelve a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 88282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Te X g If the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 Te X g 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? S Sponsoring organizations maintaining donor advised funds. Job If the sponsoring organization make any taxable distributions under section 4966? Job If the sponsoring organization make any taxable distribution sunder section 4966? Job If the sponsoring organization make any taxable distribution sunder section 4966? Job If the sponsoring organization make any taxable distribution sunder section 4966? Job Gross receipts, included on Form 990, Part VIII, line 12 Job Gross income from members or shareholders Job Gross income from members or shareholders Job Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Job Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Job Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Job Gross income from other sou   |     | any contributions that were not tax deductible as charitable contributions?                                |               |             | 6a  |     | X     |  |  |  |  |  |
| 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7   | b   | If "Yes," did the organization include with every solicitation an express statement that such contribute   | tions o       | or gifts    |     |     |       |  |  |  |  |  |
| 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?  b if "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d if "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c  |     | were not tax deductible?   |               |             | 6b  |     |       |  |  |  |  |  |
| b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  f If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-07  8 Sponsoring organization meceived a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-07  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  8 Sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  11a  b Gross income from members or shareholders  b If "Yes," in air the amount of tax exempt interest received or accrued during the year  12a  Section 501(c)(2) organizations. Enter:  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state?  Note. See the instructions for ad    | 7   | •  |               |             |     |     |       |  |  |  |  |  |
| to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year  If the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c  | а   |  |               |             |     |     |       |  |  |  |  |  |
| to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7th X  g If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7th X  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  7th If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any time during the year?  10 Section 501(c)(7) organizations. Enter:  11 Initiation fees and capital contributions included on Part VIII, line 12  12 Initiation fees and capital contributions included on Part VIII, line 12  13 Gross income from members or shareholders  11 Initiation fees and capital contributions included on Part VIII, line 12  14 Section 501(c)(12) organizations. Enter:  15 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  16 Gross income from members or shareholders  17 Initiation fees and capital contributions of the organization filing form 990 in lieu of Form 1041?  18 Section 501(c)(29) qualified nonprofit health plans in more than one state?  19 If "Yes," enter the amount of teavenery the fo    | b   |  |               |             |     |     |       |  |  |  |  |  |
| d if "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  f Did the organization function of qualified intellectual property, did the organization file Form 8899 as required?  f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.  D Did the sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 Did the sponsoring organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross income from members or shareholders  b Gross income from members or shareholders  a 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 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional informati    | С   |  |               |             | _   |     | v     |  |  |  |  |  |
| e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C7  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make excess business holdings at any time during the year?  8 Sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 Did the sponsoring organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  |     |  |               | <br>I       | 7c  |     | Λ     |  |  |  |  |  |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 Did the sponsoring organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10 Gross income from members or shareholders  b Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  1 In It is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  1 C Enter the amount of reserves on hand  1 C Enter the amount of reserves on hand  1 Did the organization receive any payments for indoor tanning services during the tax year?  14a Did the organization receive any payments for indoor tanning services during the tax year?                           |     |  |               | 10          | _   |     | v     |  |  |  |  |  |
| g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  8 Sponsoring organization make excess business holdings at any time during the year?  8 Sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 Did the sponsoring organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  10c  10c  10c  10c  10c  11d  11d  11d  |     |  |               |             |     |     |       |  |  |  |  |  |
| h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9 Did the sponsoring organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10 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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  1 Is Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand  13b  14a Did the organization receive any payments for indoor tanning services during the xyear? 14a X  14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b  |     |  |               |             |     |     |       |  |  |  |  |  |
| Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Tob  Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Tab  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  C Enter the amount of reserves on hand  Ida  Did the organization receive any payments for indoor tanning services during the tax year?  Ida  K  Ida  K  Ida  K  Ida  Ida  Ida   |     |  |               |             |     |     |       |  |  |  |  |  |
| sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b  10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a 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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14b 14c 15d 16 "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b  | _   |  |               |             | /11 |     |       |  |  |  |  |  |
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| a Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9b  10 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  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?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  14a X  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.   | a   |  |               |             | Ů   |     |       |  |  |  |  |  |
| b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  Section 501(c)(12) organizations. Enter:  a 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?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  c Enter the amount of reserves on hand  13c  14a X  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  14b   | a   |  |               |             | 9a  |     |       |  |  |  |  |  |
| 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12   | b   |  |               |             |     |     |       |  |  |  |  |  |
| a Initiation fees and capital contributions included on Part VIII, line 12  | 10  |  |               |             | -   |     |       |  |  |  |  |  |
| b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  11 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders 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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c  14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b  |     |  | 10a           |             |     |     |       |  |  |  |  |  |
| 11 Section 501(c)(12) organizations. Enter:  a 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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b  13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c  14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b   | _   |  | <b>—</b>      |             |     |     |       |  |  |  |  |  |
| a 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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b  13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b c Enter the amount of reserves on hand 13c  14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b   | 11  |  |               |             |     |     |       |  |  |  |  |  |
| 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?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13c  14a Did the organization receive any payments for indoor tanning services during the tax year?  14a X  15b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  15d  | а   | Gross income from members or shareholders  | 11a           |             |     |     |       |  |  |  |  |  |
| 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year   | b   | Gross income from other sources (Do not net amounts due or paid to other sources against                   |               |             |     |     |       |  |  |  |  |  |
| b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a 15 Note. See the instructions for additional information the organization must report on Schedule O. 15 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 15 If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b 15 If "No," provide an explanation in Schedule O 14b 15 If "No," provide an explanation in Schedule O 15 If The No," The No, " provide an explanation in Schedule O 15    |     | amounts due or received from them.)  | 11b           |             |     |     |       |  |  |  |  |  |
| Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  Enter the amount of reserves on hand  Tac  In the organization receive any payments for indoor tanning services during the tax year?  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  14b   | 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form       | 1041          | ?           | 12a |     |       |  |  |  |  |  |
| a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13c  14a Did the organization receive any payments for indoor tanning services during the tax year?  14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  14b  | b   | If "Yes," enter the amount of tax-exempt interest received or accrued during the year                      | 12b           |             |     |     |       |  |  |  |  |  |
| Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13c  14a Did the organization receive any payments for indoor tanning services during the tax year?  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.  14b  | 13  | Section 501(c)(29) qualified nonprofit health insurance issuers.   |               |             |     |     |       |  |  |  |  |  |
| b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?  14a X  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  14b  | а   | -  |               |             | 13a |     |       |  |  |  |  |  |
| organization is licensed to issue qualified health plans 13b 13c 13c 13c 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 15b 1f "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b   |     |  |               |             |     |     |       |  |  |  |  |  |
| c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b   | b   |  |               |             |     |     |       |  |  |  |  |  |
| 14aDid the organization receive any payments for indoor tanning services during the tax year?14aXbIf "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O14b  |     |  |               |             |     |     |       |  |  |  |  |  |
| b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b   |     |  | 13c           |             |     |     | 37    |  |  |  |  |  |
|   |     |  |               |             |     |     | X     |  |  |  |  |  |
| I ama I M M I / / / / A /   | b   | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul     | еО <u>.</u> . |             |     | 000 | (0011 |  |  |  |  |  |

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

|          | Check if Schedule O contains a response or note to any line in this Part VI  |           |                | X  |  |  |  |  |  |  |  |  |
|----------|--|-----------|----------------|----|--|--|--|--|--|--|--|--|
| Sec      | tion A. Governing Body and Management  |           |                |    |  |  |  |  |  |  |  |  |
|          |  |           | Yes            | No |  |  |  |  |  |  |  |  |
| 1a       | Enter the number of voting members of the governing body at the end of the tax year 1a 54  |           |                |    |  |  |  |  |  |  |  |  |
|          | If there are material differences in voting rights among members of the governing body, or if the governing  |           |                |    |  |  |  |  |  |  |  |  |
|          | body delegated broad authority to an executive committee or similar committee, explain in Schedule O.  |           |                |    |  |  |  |  |  |  |  |  |
| b        | Enter the number of voting members included in line 1a, above, who are independent 1b 54   |           |                |    |  |  |  |  |  |  |  |  |
| 2        | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other   |           |                |    |  |  |  |  |  |  |  |  |
|          | officer, director, trustee, or key employee?   | 2         | Х              |    |  |  |  |  |  |  |  |  |
| 3        | Did the organization delegate control over management duties customarily performed by or under the direct supervision  |           |                |    |  |  |  |  |  |  |  |  |
|          | of officers, directors, or trustees, or key employees to a management company or other person?   | 3         |                | Х  |  |  |  |  |  |  |  |  |
| 4        | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?   | 4         |                | Х  |  |  |  |  |  |  |  |  |
| 5        | Did the organization become aware during the year of a significant diversion of the organization's assets?   | 5         |                | X  |  |  |  |  |  |  |  |  |
| 6        |  |           |                |    |  |  |  |  |  |  |  |  |
| 7a       | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or   |           |                |    |  |  |  |  |  |  |  |  |
|          | more members of the governing body?  | 7a        |                | Х  |  |  |  |  |  |  |  |  |
| b        | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or   |           |                |    |  |  |  |  |  |  |  |  |
|          | persons other than the governing body?   | 7b        |                | Х  |  |  |  |  |  |  |  |  |
| 8        | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  |           |                |    |  |  |  |  |  |  |  |  |
| а        | The governing body?  | 8a        | X              |    |  |  |  |  |  |  |  |  |
| b        | Each committee with authority to act on behalf of the governing body?  | 8b        | Х              |    |  |  |  |  |  |  |  |  |
| 9        | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the   |           |                |    |  |  |  |  |  |  |  |  |
|          | organization's mailing address? If "Yes," provide the names and addresses in Schedule O  | 9         |                | X  |  |  |  |  |  |  |  |  |
| Sec      | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)   |           |                |    |  |  |  |  |  |  |  |  |
|          |  |           | Yes            | No |  |  |  |  |  |  |  |  |
| 10a      | Did the organization have local chapters, branches, or affiliates?   | 10a       |                | Х  |  |  |  |  |  |  |  |  |
| b        | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,   |           |                |    |  |  |  |  |  |  |  |  |
|          | and branches to ensure their operations are consistent with the organization's exempt purposes?  | 10b       |                |    |  |  |  |  |  |  |  |  |
| 11a      | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  | 11a       | Х              |    |  |  |  |  |  |  |  |  |
| b        | Describe in Schedule O the process, if any, used by the organization to review this Form 990.  |           |                |    |  |  |  |  |  |  |  |  |
| 12a      | Did the organization have a written conflict of interest policy? If "No," go to line 13  | 12a       | X              |    |  |  |  |  |  |  |  |  |
| b        | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  | 12b       | Х              |    |  |  |  |  |  |  |  |  |
| С        | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe   |           |                |    |  |  |  |  |  |  |  |  |
|          | in Schedule O how this was done  | 12c       | X              |    |  |  |  |  |  |  |  |  |
| 13       | Did the organization have a written whistleblower policy?  | 13        | X              |    |  |  |  |  |  |  |  |  |
| 14       | Did the organization have a written document retention and destruction policy?   | 14        | Х              |    |  |  |  |  |  |  |  |  |
| 15       | Did the process for determining compensation of the following persons include a review and approval by independent   |           |                |    |  |  |  |  |  |  |  |  |
|          | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  |           |                | 37 |  |  |  |  |  |  |  |  |
|          | The organization's CEO, Executive Director, or top management official   | 15a       |                | X  |  |  |  |  |  |  |  |  |
| b        | Other officers or key employees of the organization  | 15b       |                | X  |  |  |  |  |  |  |  |  |
| 10       | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  |           |                |    |  |  |  |  |  |  |  |  |
| ıva      | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a  | 40        |                | х  |  |  |  |  |  |  |  |  |
|          | taxable entity during the year?  | 16a       |                | Α. |  |  |  |  |  |  |  |  |
| р        | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation   |           |                |    |  |  |  |  |  |  |  |  |
|          | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's   | 401-      |                |    |  |  |  |  |  |  |  |  |
| 800      | exempt status with respect to such arrangements?   | 16b       |                |    |  |  |  |  |  |  |  |  |
|          | List the states with which a copy of this Form 900 is required to be filed NY  |           |                |    |  |  |  |  |  |  |  |  |
| 17<br>10 | List the states with which a copy of this Form 990 is required to be filed NY  Section 6104 requires an erganization to make its Forms 1023 (or 1024 if applicable), 990, and 990 T (Section 501(c)/3)s only).     | avoile!   | No.            |    |  |  |  |  |  |  |  |  |
| 18       | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) for public inspection. Indicate how you made these available. Check all that apply. | avallal   | л <del>С</del> |    |  |  |  |  |  |  |  |  |
|          | Own website Another's website X Upon request Other (explain in Schedule O)   |           |                |    |  |  |  |  |  |  |  |  |
| 19       | Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and  | d finan   | cial           |    |  |  |  |  |  |  |  |  |
| 13       | statements available to the public during the tax year.  | a illidíl | olai           |    |  |  |  |  |  |  |  |  |
| 20       | State the name, address, and telephone number of the person who possesses the organization's books and records:  |           |                |    |  |  |  |  |  |  |  |  |
|          | OSMAN KURTULUS, CFO - 212-534-1672   |           |                |    |  |  |  |  |  |  |  |  |
|          | 1220 FIFTH AVENUE, NEW YORK, NY 10029  |           |                |    |  |  |  |  |  |  |  |  |

Form **990** (2014)

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

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

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

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

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

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

| (A)                             | (B)  |                                |                       | ((          |              |                                 |             | (D)                             | (E)                        | (F)  |  |  |
|---------------------------------|--|--------------------------------|-----------------------|-------------|--------------|---------------------------------|-------------|---------------------------------|----------------------------|--|--|--|
| Name and Title                  | Average hours per                              | (do                            | not c                 | Pos<br>heck | more         | I<br>than<br>is bot             | one<br>h an | Reportable compensation         | Reportable compensation    | Estimated<br>amount of                                   |  |  |
|                                 | week<br>(list any                              | offic                          |                       |             |              | or/trus                         |             | from<br>the                     | from related organizations | other<br>compensation                                    |  |  |
|                                 | hours for<br>related<br>organizations<br>below | Individual trustee or director | Institutional trustee | Officer     | Key employee | Highest compensated<br>employee | Former      | organization<br>(W-2/1099-MISC) | (W-2/1099-MISC)            | from the<br>organization<br>and related<br>organizations |  |  |
| (1) JAMES G. DINAN              | line) 1.00                                     | 밀                              | lns                   | #0          | , Ke         | 훈늚                              | Por         |                                 |                            |  |  |  |
| CHAIR                           | 1.00   | X                              |                       | х           |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| (2) NEWTON P.S. MERRILL         | 1.00   | 123                            |                       |             |              |                                 |             | · ·                             | •                          |  |  |  |
| VICE CHAIR & CHAIRMAN EMERITUS  |  | x                              |                       | x           |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| (3) MARTIN J. MCLAUGHLIN        | 1.00   |                                |                       |             |              |                                 |             |                                 |                            |  |  |  |
| SECRETARY                       |  | X                              |                       | x           |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| (4) JANE B. OCONNELL            | 1.00   |                                |                       |             |              |                                 |             |                                 |                            |  |  |  |
| TREASURER                       |  | Х                              |                       | х           |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| (5) THOMAS M. FLEXNER           | 1.00   |                                |                       |             |              |                                 |             |                                 |                            |  |  |  |
| VICE CHAIR                      |  | X                              |                       | Х           |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| (6) RONAY MENSCHEL              | 1.00   |                                |                       |             |              |                                 |             |                                 |                            |  |  |  |
| VICE CHAIR                      |  | Х                              |                       | Х           |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| (7) JAMES E. QUINN              | 1.00   |                                |                       |             |              |                                 |             |                                 |                            |  |  |  |
| VICE CHAIR                      |  | Х                              |                       | Х           |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| (8) BRUNO A. QUINSON            | 1.00   |                                |                       |             |              |                                 |             |                                 | _                          | _  |  |  |
| VICE CHAIR                      |  | Х                              |                       | Х           |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| (9) LAWRENCE J. SIMON           | 1.00   | ļ                              |                       |             |              |                                 |             |                                 |                            |  |  |  |
| VICE CHAIR                      | 1 00   | Х                              |                       | Х           |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| (10) HILARY BALLON              | 1.00   | ١                              |                       |             |              |                                 |             |                                 |                            |  |  |  |
| BOARD MEMBER                    | 1 00   | Х                              |                       |             |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| (11) JEREMY BIGGS               | 1.00   | ļ ,,                           |                       |             |              |                                 |             |                                 |                            | _  |  |  |
| BOARD MEMBER                    | 1 00   | Х                              |                       |             |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| (12) CAROLYN BRODY              | 1.00   | X                              |                       |             |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| BOARD MEMBER (13) MICHAEL BRUNO | 1.00   | ^                              |                       |             |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| BOARD MEMBER                    | 1.00   | X                              |                       |             |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| (14) JAMES E. BUCKMAN           | 1.00   | ^                              |                       |             |              |                                 |             | 0.                              | 0.                         | •  |  |  |
| BOARD MEMBER                    | 1.00   | X                              |                       |             |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| (15) JAMES CACIOPPO             | 1.00   | <del>  ^``</del>               |                       |             | -            |                                 |             |                                 | •                          | <u></u>  |  |  |
| BOARD MEMBER                    | 1.00   | x                              |                       |             |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| (16) CYNTHIA FOSTER CURRY       | 1.00   | <del></del>                    |                       |             |              |                                 |             |                                 |                            |  |  |  |
| BOARD MEMBER                    |  | x                              |                       |             |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| (17) PAMELA CLOUD               | 1.00   |                                |                       |             |              |                                 |             |                                 |                            | , , ,  |  |  |
| BOARD MEMBER                    |  | Х                              |                       |             |              |                                 |             | 0.                              | 0.                         | 0.   |  |  |
| 432007 11-07-14                 | •  | •                              | •                     |             |              | •                               |             |                                 |                            | Form <b>990</b> (2014)                                   |  |  |

432007 11-07-14

Form **990** (2014

| Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) |   |  |                       |         |              |                              |             |   |   |  |  |  |
|---|---|--|-----------------------|---------|--------------|------------------------------|-------------|---|---|--|--|--|
| (A)   | (B)   |  |                       | (0      | <b>C</b> )   |                              |             | (D)                                       | (E)   | (F)  |  |  |
| Name and title  | Average<br>hours per<br>week<br>(list any               | (do not check<br>box, unless pe<br>officer and a c |                       |         | rson         | than<br>is bot               | h an        | Reportable<br>compensation<br>from<br>the | Reportable<br>compensation<br>from related<br>organizations | Estimated amount of other compensation                   |  |  |
|   | hours for<br>related<br>organizations<br>below<br>line) | Individual trustee or director                     | Institutional trustee | Officer | Key employee | Highest compensated employee | Former      | organization<br>(W-2/1099-MISC)           | (W-2/1099-MISC)   | from the<br>organization<br>and related<br>organizations |  |  |
| (18) TODD DEGARMO   | 1.00  |  |                       |         |              |                              |             |   |   |  |  |  |
| BOARD MEMBER  |   | Х  |                       |         |              |                              |             | 0.  | 0.  | 0.   |  |  |
| (19) JAMES P. DRUCKMAN  | 1.00  |  |                       |         |              |                              |             |   |   |  |  |  |
| BOARD MEMBER  |   | Х  |                       |         |              |                              |             | 0.  | 0.  | 0.   |  |  |
| (20) VERNON EVENSON   | 1.00  |  |                       |         |              |                              |             |   |   |  |  |  |
| BOARD MEMBER  |   | Х  |                       |         |              |                              |             | 0.  | 0.  | 0.   |  |  |
| (21) BARBARA J. FIFE  | 1.00  |  |                       |         |              |                              |             |   |   |  |  |  |
| BOARD MEMBER  |   | Х  |                       |         |              |                              |             | 0.  | 0.  | 0.   |  |  |
| (22) LAURA LOFARO FREEMAN   | 1.00  |  |                       |         |              |                              |             |   |   |  |  |  |
| BOARD MEMBER  |   | Х  |                       |         |              |                              |             | 0.  | 0.  | 0.   |  |  |
| (23) MARK F. GILBERTSON   | 1.00  |  |                       |         |              |                              |             |   |   |  |  |  |
| BOARD MEMBER  |   | Х  |                       |         |              |                              |             | 0.  | 0.  | 0.   |  |  |
| (24) LESLIE V. GODRIDGE   | 1.00  |  |                       |         |              |                              |             |   |   |  |  |  |
| BOARD MEMBER  |   | Х  |                       |         |              |                              |             | 0.  | 0.  | 0.   |  |  |
| (25) LORNA B. GOODMAN   | 1.00  |  |                       |         |              |                              |             |   |   |  |  |  |
| BOARD MEMBER  |   | Х  |                       |         |              |                              |             | 0.  | 0.  | 0.   |  |  |
| (26) ELIZABETH GRAZIOLO   | 1.00  |  |                       |         |              |                              |             |   |   |  |  |  |
| BOARD MEMBER  |   | Х  |                       |         |              |                              |             | 0.  | 0.  | 0.   |  |  |
| 1b Sub-total  |   |  |                       |         |              |                              | <b>&gt;</b> | 0.  | 0.  | 0.   |  |  |
| c Total from continuation sheets to Part \  | /II, Section A  |  |                       |         |              |                              | <b></b>     | 1,656,338.                                | 0.  | 207,544.   |  |  |
| d Total (add lines 1b and 1c)   |   |  |                       |         |              |                              | <b></b>     | 1,656,338.                                | 0.  | 207,544.   |  |  |
| 2 Total number of individuals (including but  | not limited to th                                       | nose   | liste                 | ed al   | bove         | e) wł                        | no re       | eceived more than \$100                   | 0,000 of reportable   |  |  |  |
| compensation from the organization  |   |  |                       |         |              |                              |             |   |   | 10   |  |  |
|   |   |  |                       |         |              |                              |             |   |   | Yes No   |  |  |

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Х 4 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services X rendered to the organization? If "Yes," complete Schedule J for such person .

#### **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A)   | (B)                     | (C)          |
|---|-------------------------|--------------|
| Name and business address   | Description of services | Compensation |
| ENNEAD ARCHITECTS   | ARCHITECTURAL           |              |
| 320 WEST 13TH STREET, NEW YORK, NY 10014  | SERVICES                | 621,124.     |
| PHIL & CO.  |                         |              |
| 833 BROADWAY, NEW YORK, NY 10013  | MARKETING SERVICES      | 291,060.     |
| COOPER JOSEPH STUDIO  |                         |              |
| 500 PARK AVE., NEW YORK, NY 10022   | EXHIBITION SET UP       | 287,297.     |
| GREAT PERFORMANCES  |                         |              |
| 304 HUDSON STREET, NEW YORK, NY 10013   | CATERING FOR EVENTS     | 281,746.     |
| RTI SHELVING SYSTEM   | CONSTRUCTION ON         |              |
| 40-19 80TH STREET, ELMHURST, NY 11373   | EXHIBITS                | 204,180.     |
| 2 Total number of independent contractors (including but not limited to those lis |                         |              |
| \$100,000 of compensation from the organization                                   |                         |              |

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2014)

|   | F THE C.  |                                |                       |            |              |                              |        |  | 13-162   | 1000  |
|---|---|--------------------------------|-----------------------|------------|--------------|------------------------------|--------|--|--|---|
| Part VII Section A. Officers, Directors, Tr | ustees, Key Eı  | mple                           | oyee                  |            |              | ligh                         | est    |  | rees (continued)                                 |   |
| (A) Name and title                          | (B)<br>Average  |                                |                       | (C<br>Posi |              |                              |        | (D)<br>Reportable                              | <b>(E)</b><br>Reportable                         | <b>(F)</b><br>Estimated   |
| warie and title                             | hours   | (с                             |                       | allt       |              |                              | ly)    | compensation                                   | compensation                                     | amount of   |
|   | per<br>week<br>(list any<br>hours for<br>related<br>organizations<br>below<br>line) | Individual trustee or director | Institutional trustee | Officer    | Key employee | Highest compensated employee | Former | from<br>the<br>organization<br>(W-2/1099-MISC) | from related<br>organizations<br>(W-2/1099-MISC) | other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| (27) DAVID GUIN                             | 1.00  |                                |                       |            |              |                              |        |  |  |   |
| BOARD MEMBER                                |   | Х                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| (28) JAMES E. HANLEY<br>BOARD MEMBER        | 1.00  | X                              |                       |            |              |                              |        | 0.   | 0.   | 0 .   |
| (29) SYLVIA HEMINGWAY                       | 1.00  |                                |                       |            |              |                              |        |  | •  |   |
| BOARD MEMBER                                |   | Х                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| (30) STEPHANIE HESSLER                      | 1.00  |                                |                       |            |              |                              |        |  |  |   |
| BOARD MEMBER                                |   | Х                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| (31) JANE HOFFMAN                           | 1.00  |                                |                       |            |              |                              |        | _  | _  | _   |
| BOARD MEMBER                                | 1 00  | Х                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| (32) ROBERT JAIN                            | 1.00  | ,,                             |                       |            |              |                              |        |  | 0  | 0   |
| BOARD MEMBER                                | 1 00  | Х                              |                       |            |              |                              |        | 0.   | 0.   | 0 .   |
| (33) ROBERT A. JEFFE                        | 1.00  | ,,                             |                       |            |              |                              |        |  | 0  | 0   |
| BOARD MEMBER                                | 1 00  | Х                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| (34) WILLIAM KAHANE                         | 1.00  | x                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| BOARD MEMBER (35) STEPHEN J. KETCHUM        | 1.00  | ^                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| BOARD MEMBER                                | 1.00  | X                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| (36) JOAN KHOURY                            | 1.00  | 25                             |                       |            |              |                              |        |  | 0.   | 0 (   |
| BOARD MEMBER                                | 1100  | X                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| (37) STANFORD G. LADNER                     | 1.00  |                                |                       |            |              |                              |        |  |  |   |
| BOARD MEMBER                                |   | Х                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| (38) STEPHEN S. LASH                        | 1.00  |                                |                       |            |              |                              |        |  |  |   |
| BOARD MEMBER                                |   | Х                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| (39) JAMES LEBENTHAL                        | 1.00  |                                |                       |            |              |                              |        |  |  |   |
| BOARD MEMBER                                |   | Х                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| (40) KENNETH E. LEE                         | 1.00  |                                |                       |            |              |                              |        | _  | _  | _   |
| BOARD MEMBER                                |   | Х                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| (41) GURUDATTA NADKARNI                     | 1.00  | ١                              |                       |            |              |                              |        |  |  |   |
| BOARD MEMBER                                | 1 00  | Х                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| (42) GOV. DAVID A. PATERSON                 | 1.00  | ,,                             |                       |            |              |                              |        |  | 0  | 0   |
| BOARD MEMBER                                | 1 00  | Х                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| (43) TRACEY PONTARELLI                      | 1.00  | x                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| BOARD MEMBER (44) KATHRYN PROUNIS           | 1.00  | ^                              |                       |            |              |                              |        | 0.   | 0.   | 0 .   |
| BOARD MEMBER                                | 1.00  | X                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| (45) ARTHUR J. ROSNER                       | 1.00  | <del>  ^</del> `               | $\vdash$              | $\vdash$   |              | $\vdash$                     |        |  | 0.   | 0.  |
| BOARD MEMBER                                |   | X                              |                       |            |              |                              |        | 0.   | 0.   | 0.  |
| (46) VALERIE ROWE                           | 1.00  | <u> </u>                       |                       | $\vdash$   |              | $\vdash$                     |        |  |  |   |
| BOARD MEMBER                                | H   | x                              |                       |            |              | l                            |        | 0.   | 0.   | 0.  |

| Form 990 MUSEUM O                           | F THE C               | $\Gamma T \Sigma$    | 7 (                  | )F       | NE           | ±W                           | Y      | ORK                | 13-162          | 4098                         |  |  |
|---|-----------------------|----------------------|----------------------|----------|--------------|------------------------------|--------|--------------------|-----------------|------------------------------|--|--|
| Part VII Section A. Officers, Directors, Tr | ustees, Key Eı        | mplo                 | yee                  | s, a     | nd F         | ligh                         | est    | Compensated Employ | ees (continued) |                              |  |  |
| (A)   | (B)                   |                      |                      | ((       |              |                              |        | (D) (E) (F)        |                 |                              |  |  |
| Name and title                              | Average               |                      |                      | Pos      | •            | ı                            |        | Reportable         | Reportable      | Estimated                    |  |  |
|   | hours                 | (cl                  |                      |          |              | t apply)                     |        | compensation       | compensation    | amount of                    |  |  |
|   | per                   | Ť                    |                      |          |              | Ė                            | ,      | from               | from related    | other                        |  |  |
|   | week                  |                      |                      |          |              | yee                          |        | the                | organizations   | compensation                 |  |  |
|   | (list any             | director             |                      |          |              | emplo                        |        | organization       | (W-2/1099-MISC) | from the                     |  |  |
|   | hours for             | or di                | 98                   |          |              | sated                        |        | (W-2/1099-MISC)    |                 | organization                 |  |  |
|   | related organizations | ustee                | trust                |          | ee           | npen                         |        |                    |                 | and related<br>organizations |  |  |
|   | below                 | ndividual trustee or | nstitutional trustee |          | nploy        | stcon                        | _      |                    |                 | Organizations                |  |  |
|   | line)                 | Individ              | Institu              | Officer  | Key employee | Highest compensated employee | Former |                    |                 |                              |  |  |
| (47) MARY BURWELL SCHORR                    | 1.00                  |                      |                      |          |              |                              |        |                    |                 |                              |  |  |
| BOARD MEMBER                                |                       | Х                    |                      |          |              |                              |        | 0.                 | 0.              | 0.                           |  |  |
| (48) ANN SPENCE                             | 1.00                  |                      |                      |          |              |                              |        |                    |                 |                              |  |  |
| BOARD MEMBER                                |                       | Х                    |                      |          |              |                              |        | 0.                 | 0.              | 0 .                          |  |  |
| (49) MITCHELL S. STEIR                      | 1.00                  |                      |                      |          |              |                              |        |                    |                 |                              |  |  |
| BOARD MEMBER                                |                       | Х                    |                      |          |              |                              |        | 0.                 | 0.              | 0.                           |  |  |
| (50) JEFFREY S. TABAK                       | 1.00                  |                      |                      |          |              |                              |        |                    |                 |                              |  |  |
| BOARD MEMBER                                |                       | Х                    |                      |          |              |                              |        | 0.                 | 0.              | 0                            |  |  |
| (51) ELIZABETH FARRAN TOZER                 | 1.00                  |                      |                      |          |              |                              |        |                    |                 |                              |  |  |
| BOARD MEMBER                                |                       | Х                    |                      |          |              |                              |        | 0.                 | 0.              | 0                            |  |  |
| (52) REMY W. TRAFELET                       | 1.00                  |                      |                      |          |              |                              |        |                    |                 |                              |  |  |
| BOARD MEMBER                                |                       | Х                    |                      |          |              |                              |        | 0.                 | 0.              | 0                            |  |  |
| (53) DARYL BROWN UBER                       | 1.00                  |                      |                      |          |              |                              |        |                    |                 |                              |  |  |
| BOARD MEMBER                                |                       | Х                    |                      |          |              |                              |        | 0.                 | 0.              | 0                            |  |  |
| (54) WILLIAM C. VRATTOS                     | 1.00                  |                      |                      |          |              |                              |        | _                  | _               | _                            |  |  |
| BOARD MEMBER                                |                       | Х                    |                      |          |              |                              |        | 0.                 | 0.              | 0                            |  |  |
| (55) SUSAN HENSHAW JONES                    | 40.00                 |                      |                      |          |              |                              |        |                    | _               |                              |  |  |
| PRESIDENT & DIRECTOR                        |                       |                      |                      | Х        |              |                              |        | 391,988.           | 0.              | 35,279                       |  |  |
| (56) BRIAN HERRIN (RESIGNED 2/15)           | 40.00                 |                      |                      |          |              |                              |        |                    | _               |                              |  |  |
| CHIEF FINANCIAL OFFICER                     |                       |                      |                      | Х        |              |                              |        | 158,246.           | 0.              | 23,398                       |  |  |
| (57) OSMAN KURTULUS (BEGAN 3/15)            | 40.00                 |                      |                      |          |              |                              |        |                    | _               |                              |  |  |
| CHIEF FINANCIAL OFFICER                     |                       |                      |                      | Х        |              |                              |        | 0.                 | 0.              | 0                            |  |  |
| (58) JERRY GALLAGHER                        | 40.00                 |                      |                      |          |              |                              |        |                    | _               |                              |  |  |
| CHIEF OPERATING OFFICER                     |                       |                      |                      | Х        |              |                              |        | 125,434.           | 0.              | 15,470                       |  |  |
| (59) SARAH HENRY                            | 40.00                 |                      |                      |          |              |                              |        | 007 004            |                 | 04 400                       |  |  |
| DEPUTY DIRECTOR AND CHIEF                   | 1.0.00                |                      |                      |          | Х            |                              |        | 207,204.           | 0.              | 21,437                       |  |  |
| (60) SUSAN MADDEN                           | 40.00                 |                      |                      |          | l            |                              |        | 016 500            | •               | 20 046                       |  |  |
| SVP OF EXTERNAL AFFAIRS                     | 1000                  |                      |                      |          | Х            |                              |        | 216,580.           | 0.              | 32,846                       |  |  |
| (61) LACY SCHUTZ                            | 40.00                 |                      |                      |          |              | l <u></u>                    |        | 105 050            | •               | 0 605                        |  |  |
| CAO OF COLLECTIONS AND EXHIBITIONS          | 1000                  |                      |                      |          |              | Х                            |        | 107,058.           | 0.              | 9,635                        |  |  |
| (62) DONALD ALBRECHT                        | 40.00                 | -                    |                      |          |              | l <u></u>                    |        | 110 500            | •               | 16 000                       |  |  |
| CURATOR OF ARCHITECTURE AND DESIGN          | 1 40 00               |                      |                      |          |              | Х                            |        | 110,598.           | 0.              | 16,038                       |  |  |
| (63) PATRICIA ZEDALIS                       | 40.00                 | 1                    |                      |          |              | _ ,                          |        | 124 526            | _               | 04 500                       |  |  |
| PROJECT MANAGER                             | 1000                  | _                    | _                    |          |              | Х                            |        | 134,536.           | 0.              | 24,702                       |  |  |
| (64) PREL GJELAJ                            | 40.00                 | 1                    |                      |          |              | <del>, ,</del>               |        | 104 416            | _               | 12 404                       |  |  |
| BUILDING ENGINEER                           | 1 40 00               |                      | _                    | $\vdash$ | _            | Х                            |        | 104,416.           | 0.              | 13,484                       |  |  |
| (65) STEPHEN DIEFENDERFER                   | 40.00                 | 1                    |                      |          |              | ,,                           |        | 100 070            | _               | 15 055                       |  |  |
| DIRECTOR SPECIAL EVENTS                     |                       |                      |                      |          |              | Х                            |        | 100,278.           | 0.              | 15,255                       |  |  |
|   |                       | -                    |                      |          |              |                              |        |                    |                 |                              |  |  |
|   | I                     |                      | <u> </u>             |          | l            | I                            |        |                    |                 |                              |  |  |
| Total to Part VII, Section A, line 1c       |                       | <u></u>              | <u></u>              | <u></u>  | <u></u>      | <u></u>                      |        | 1,656,338.         |                 | 207,544                      |  |  |
| Total to Fait VII, Dection A, III e TC      |                       |                      |                      |          |              |                              |        |                    |                 |                              |  |  |

# Form 990 (2014) MUSEUM Part VIII Statement of Revenue

|  |          |   | Check if Schedule O conta               | ains a resp   | onse   | or note to any lin   | e in this Part VIII |  |   |  |
|--|----------|---|---|---------------|--------|----------------------|---------------------|--|---|--|
|  |          |   | Shook ii Ganadala G Gana                | an o a 100p   | Orido  | or note to any in    | (A) Total revenue   | (B) Related or exempt function revenue | (C)<br>Unrelated<br>business<br>revenue | Revenue excluded from tax under sections 512 - 514 |
| Contributions, Gifts, Grants and Other Similar Amounts | 1 :      | а   | Federated campaigns                     | 1             | а      |                      |                     |  |   |  |
| S'a  | 1        | b   | Membership dues                         | 1             | ь      | 278,185.             |                     |  |   |  |
| s, (<br>Am   | (        | С   | Fundraising events                      | 10            | С      | 2,722,482.           |                     |  |   |  |
| Gift<br>lar  |          |   | Related organizations                   |               | d      |                      |                     |  |   |  |
| ıs, (<br>imi   |          | е   | Government grants (contributi           | ions) 1       | е      | 1,676,456.           |                     |  |   |  |
| tior<br>S  | 1        | f   | All other contributions, gifts, grant   | ts, and       |        |                      |                     |  |   |  |
| ibu  |          |   | similar amounts not included above      | /e <b>1</b> 1 | f      | 16,222,714.          |                     |  |   |  |
| nt<br>d O  | ,        | g   | Noncash contributions included in lines | 1a-1f: \$     |        | 2,647,976.           |                     |  |   |  |
| a Co   |          | h   | Total. Add lines 1a-1f                  |               |        | <b>&gt;</b>          | 20,899,837.         |  |   |  |
|  |          |   |   |               |        | Business Code        |                     |  |   |  |
| e<br>S   | 2 :      | а   | ADMISSIONS                              |               |        | 900099               | 826,502.            | 826,502.                               |   |  |
| e vi   | 1        | b   | LICENSING AND OTHER FEI                 | ES            |        | 900099               | 591,832.            | 591,832.                               |   |  |
| Se   |          | С   | EDUCATIONAL PROGRAMS                    |               |        | 611710               | 354,534.            | 354,534.                               |   |  |
| ar   |          | d   | MEMBERSHIP DUES                         |               |        | 900099               | 23,824.             | 23,824.                                |   |  |
| Program Service<br>Revenue                             | (        | е   |   |               |        |                      |                     |  |   |  |
| ď  | 1        | f   | All other program service reve          | nue           |        |                      |                     |  |   |  |
|  | (        | g   | Total. Add lines 2a-2f                  |               |        |                      | 1,796,692.          |  |   |  |
|  | 3        |   | Investment income (including            | dividends,    | intere | est, and             |                     |  |   |  |
|  |          |   | other similar amounts)                  |               |        | ▶ [                  | 222,555.            |  |   | 222,555.   |
|  | 4        |   | Income from investment of tax           | k-exempt b    | ond p  | oroceeds <b>&gt;</b> |                     |  |   |  |
|  | 5        |   | Royalties                               |               |        | ▶                    |                     |  |   |  |
|  |          |   |   | (i) Rea       |        | (ii) Personal        |                     |  |   |  |
|  | 6        | а   | Gross rents                             | 476,          | 503.   |                      |                     |  |   |  |
|  | ١        | b   | Less: rental expenses                   | 212,          |        |                      |                     |  |   |  |
|  |          |   | Rental income or (loss)                 | 264,          | 106.   |                      |                     |  |   |  |
|  |          |   |   |               |        | ·····                | 264,106.            |  |   | 264,106.   |
|  | 7 8      | а   | Gross amount from sales of              | (i) Secur     |        | (ii) Other           |                     |  |   |  |
|  |          |   | assets other than inventory             | 6,017,        | 191.   | 59,417.              |                     |  |   |  |
|  | ı        | b   | Less: cost or other basis               |               |        |                      |                     |  |   |  |
|  |          |   | and sales expenses                      | 4,862,        |        |                      |                     |  |   |  |
|  |          |   | Gain or (loss)                          | 1,155,        |        |                      |                     |  |   |  |
|  |          |   | Net gain or (loss)                      |               |        | ·····                | 1,214,457.          |  |   | 1,214,457.   |
| ne   | 8 8      | a Gross income from fundraising events (not |   |               |        |                      |                     |  |   |  |
| ven  |          | including \$ 2,722,482. of                  |   |               |        |                      |                     |  |   |  |
| Re   |          |   | contributions reported on line          | · ·           |        | 301 300              |                     |  |   |  |
| Other Revenu   |          |   | Part IV, line 18                        |               |        | 391,200.<br>627,839. |                     |  |   |  |
| ğ  |          |   | Less: direct expenses                   |               |        |                      | -236,639.           |  |   | -236,639.  |
|  |          |   | Gross income from gaming ac             | •             |        | <b>&gt;</b>          | 230,039.            |  |   | 230,039.   |
|  | 9 (      | a   | Part IV, line 19                        |               |        |                      |                     |  |   |  |
|  |          | h   | Less: direct expenses                   |               |        |                      |                     |  |   |  |
|  |          |   | Net income or (loss) from gam           |               |        |                      |                     |  |   |  |
|  |          |   | Gross sales of inventory, less          | · ·           |        |                      |                     |  |   |  |
|  | 10 (     | a   | and allowances                          |               | а      | 632,981.             |                     |  |   |  |
|  |          | h   | Less: cost of goods sold                |               |        |                      |                     |  |   |  |
|  |          |   | Net income or (loss) from sales         |               |        |                      | 340,412.            | 340,412.                               |   |  |
|  |          | Ŭ   | Miscellaneous Revenue                   |               | Ji y   | Business Code        | ,,                  |  |   |  |
|  | 11 :     | a   | THIS COMMITTED TO VOTICE                | _             |        |                      |                     |  |   |  |
|  |          | b   |   |               | _      |                      |                     |  |   |  |
|  |          | c   |   |               | _      |                      |                     |  |   |  |
|  |          |   | All other revenue                       |               | _      |                      |                     |  |   |  |
|  |          |   | Total. Add lines 11a-11d                |               |        |                      |                     |  |   |  |
|  | 12       |   | Total revenue. See instructions.        |               |        |                      | 24,501,420.         | 2,137,104.                             | 0.                                      | 1,464,479.   |
| 43200<br>11-07   | 9<br>-14 |   |   |               |        |                      |                     |  |   | Form <b>990</b> (2014)                             |

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 respon  |                       |   | (C) I                                       | (D)                                    |
|-----------|--|-----------------------|---|---|--|
|           | not include amounts reported on lines 6b,<br>8b, 9b, and 10b of Part VIII.   | (A)<br>Total expenses | <b>(B)</b><br>Program service<br>expenses | ( <b>C)</b> Management and general expenses | ( <b>D)</b><br>Fundraising<br>expenses |
| 1         | Grants and other assistance to domestic organizations  |                       |   |   |  |
|           | and domestic governments. See Part IV, line 21   |                       |   |   |  |
| 2         | Grants and other assistance to domestic  |                       |   |   |  |
|           | individuals. See Part IV, line 22  |                       |   |   |  |
| 3         | Grants and other assistance to foreign   |                       |   |   |  |
|           | organizations, foreign governments, and foreign  |                       |   |   |  |
|           | individuals. See Part IV, lines 15 and 16  |                       |   |   |  |
| 4         | Benefits paid to or for members  |                       |   |   |  |
| 5         | Compensation of current officers, directors,   | 1 211 264             | 520 050                                   | 215 600                                     | 462 650                                |
|           | trustees, and key employees  | 1,311,364.            | 532,058.                                  | 315,628.                                    | 463,678                                |
| 6         | Compensation not included above, to disqualified   |                       |   |   |  |
|           | persons (as defined under section 4958(f)(1)) and  |                       |   |   |  |
|           | persons described in section 4958(c)(3)(B)   | F F00 04F             | 4 400 046                                 | 200 450                                     | 505 544                                |
| 7         | Other salaries and wages   | 5,580,047.            | 4,499,846.                                | 372,457.                                    | 707,744                                |
| 8         | Pension plan accruals and contributions (include   | 222 222               | 205 262                                   |   | 22 22-                                 |
|           | section 401(k) and 403(b) employer contributions)  | 339,093.              | 305,868.                                  | 455 555                                     | 33,225                                 |
| 9         | Other employee benefits  | 685,305.              | 502,236.                                  | 157,686.                                    | 25,383                                 |
| 10        | Payroll taxes  | 576,250.              | 435,800.                                  | 82,201.                                     | 58,249                                 |
| 11        | Fees for services (non-employees):   |                       |   |   |  |
| а         | Management   |                       |   |   |  |
| b         | Legal  | 13,831.               | 2,000.                                    | 11,831.                                     |  |
| С         | Accounting   | 33,521.               |   | 33,521.                                     |  |
| d         | Lobbying   |                       |   |   |  |
| е         | Professional fundraising services. See Part IV, line 17  | 65,000.               |   |   | 65,000                                 |
| f         | Investment management fees   | 123,079.              |   | 123,079.                                    |  |
| g         | Other. (If line 11g amount exceeds 10% of line 25,   |                       |   |   |  |
|           | column (A) amount, list line 11g expenses on Sch O.)   | 1,271,786.            | 1,086,668.                                | 128,247.                                    | 56,871                                 |
| 12        | Advertising and promotion  | 310,402.              | 295,719.                                  | 12,077.                                     | 2,606                                  |
| 13        | Office expenses  | 970,747.              | 833,669.                                  | 49,163.                                     | 87,915                                 |
| 14        | Information technology   | 245,926.              | 224,667.                                  | 10,893.                                     | 10,366                                 |
| 15        | Royalties  |                       |   |   |  |
| 16        | Occupancy  | 910,870.              | 825,812.                                  | 40,728.                                     | 44,330                                 |
| 17        | Travel   |                       |   |   |  |
| 18        | Payments of travel or entertainment expenses   |                       |   |   |  |
|           | for any federal, state, or local public officials  |                       |   |   |  |
| 19        | Conferences, conventions, and meetings   |                       |   |   |  |
| 20        | Interest   | 18.                   |   | 18.   |  |
| 21        | Payments to affiliates   |                       |   |   |  |
| 22        | Depreciation, depletion, and amortization  | 840,083.              | 701,237.                                  | 67,771.                                     | 71,075                                 |
| 23        | Insurance  | 81,929.               | 71,259.                                   | 5,068.                                      | 5,602                                  |
| 24        | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) |                       |   |   |  |
| а         | EXHIBITION DESIGN  | 1,690,669.            | 1,633,746.                                | 8,285.                                      | 48,638                                 |
| b         |  | -                     | -   | -   |  |
| c         |  |                       |   |   |  |
| d         |  |                       |   |   |  |
| e         | All other expenses   | 457,990.              | 336,143.                                  | 69,220.                                     | 52,627                                 |
| 25        | Total functional expenses. Add lines 1 through 24e   | 15,507,910.           | 12,286,728.                               | 1,487,873.                                  | 1,733,309                              |
| <u>26</u> | Joint costs. Complete this line only if the organization   | . ,                   | . ,                                       | . ,   | . ,                                    |
|           | reported in column (B) joint costs from a combined   |                       |   |   |  |
|           | educational campaign and fundraising solicitation.   |                       |   |   |  |
|           |  |                       |   |   |  |

Form **990** (2014)

# Form 990 (2014) Part X | Balance Sheet

| Pai           | rt X     | Balance Sheet  |                                 |     |                           |
|---------------|----------|--|---------------------------------|-----|---------------------------|
|               |          | Check if Schedule O contains a response or note to any line in this Part X   |                                 |     |                           |
|               |          |  | <b>(A)</b><br>Beginning of year |     | <b>(B)</b><br>End of year |
|               | 1        | Cash - non-interest-bearing  | 3,449,295.                      | 1   | 8,678,667.                |
|               | 2        | Savings and temporary cash investments   | 2,831,379.                      | 2   | 3,682,577.                |
|               | 3        | Pledges and grants receivable, net   | 2,961,363.                      | 3   | 3,410,801.                |
|               | 4        | Accounts receivable, net   |                                 | 4   |                           |
|               | 5        | Loans and other receivables from current and former officers, directors,   |                                 |     |                           |
|               |          | trustees, key employees, and highest compensated employees. Complete   |                                 |     |                           |
|               |          | Part II of Schedule L  |                                 | 5   |                           |
|               | 6        | Loans and other receivables from other disqualified persons (as defined under  |                                 |     |                           |
|               |          | section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing  |                                 |     |                           |
|               |          | employers and sponsoring organizations of section 501(c)(9) voluntary  |                                 |     |                           |
| ţ             |          | employees' beneficiary organizations (see instr). Complete Part II of Sch L  |                                 | 6   |                           |
| Assets        | 7        | Notes and loans receivable, net  |                                 | 7   |                           |
| ⋖             | 8        | Inventories for sale or use  | 82,302.                         | 8   | 87,478                    |
|               | 9        | Prepaid expenses and deferred charges  | 90,009.                         | 9   | 445,948                   |
|               | 10a      | Land, buildings, and equipment: cost or other  |                                 |     |                           |
|               |          | basis. Complete Part VI of Schedule D 10a 30,930,344.  |                                 |     |                           |
|               | b        | Less: accumulated depreciation 10b 7,879,388.  |                                 | 10c |                           |
|               | 11       | Investments - publicly traded securities   | 13,320,716.                     | 11  | 14,423,384.               |
|               | 12       | Investments - other securities. See Part IV, line 11   | 7,085,506.                      | 12  | 5,748,311.                |
|               | 13       | Investments - program-related. See Part IV, line 11  |                                 | 13  |                           |
|               | 14       | Intangible assets  |                                 | 14  |                           |
|               | 15       | Other assets. See Part IV, line 11   | E4 CEC EE0                      | 15  | 50 500 100                |
|               | 16       | Total assets. Add lines 1 through 15 (must equal line 34)  | 51,676,779.                     | 16  | 59,528,122.               |
|               | 17       | Accounts payable and accrued expenses  | 591,083.                        | 17  | 789,494.                  |
|               | 18       | Grants payable   |                                 | 18  |                           |
|               | 19       | Deferred revenue   |                                 | 19  |                           |
|               | 20       | Tax-exempt bond liabilities  |                                 | 20  |                           |
|               | 21       | Escrow or custodial account liability. Complete Part IV of Schedule D  |                                 | 21  |                           |
| Liabilities   | 22       | Loans and other payables to current and former officers, directors, trustees,  |                                 |     |                           |
| ρijΙ          |          | key employees, highest compensated employees, and disqualified persons.  |                                 |     |                           |
| Lia           |          | Complete Part II of Schedule L   |                                 | 22  |                           |
|               | 23       | Secured mortgages and notes payable to unrelated third parties   |                                 | 23  |                           |
|               | 24<br>25 | Unsecured notes and loans payable to unrelated third parties   |                                 | 24  |                           |
|               | 25       | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of |                                 |     |                           |
|               |          |  | 114,057.                        | 25  | 49,245.                   |
|               | 26       | Total liabilities. Add lines 17 through 25   | 705,140.                        | 26  | 838,739                   |
|               | 20       | Organizations that follow SFAS 117 (ASC 958), check here ▶ X and   |                                 | 20  | 0007700                   |
| S             |          | complete lines 27 through 29, and lines 33 and 34.   |                                 |     |                           |
| JCe           | 27       | Unrestricted net assets  | 24,957,676.                     | 27  | 31,528,630.               |
| alaı          | 28       | Temporarily restricted net assets  | 15,491,987.                     | 28  | 16,922,040.               |
| g<br>B        | 29       | Permanently restricted net assets  | 10,521,976.                     | 29  | 10,238,713.               |
| Fund Balances |          | Organizations that do not follow SFAS 117 (ASC 958), check here ▶  |                                 |     | ,                         |
|               |          | and complete lines 30 through 34.  |                                 |     |                           |
| ) ts          | 30       | Capital stock or trust principal, or current funds   |                                 | 30  |                           |
| SSE           | 31       | Paid-in or capital surplus, or land, building, or equipment fund   |                                 | 31  |                           |
| Net Assets or | 32       | Retained earnings, endowment, accumulated income, or other funds   |                                 | 32  |                           |
| ž             | 33       | Total net assets or fund balances  | 50,971,639.                     | 33  | 58,689,383.               |
|               | 34       | Total liabilities and net assets/fund balances   | 51,676,779.                     | 34  | 59,528,122.               |

Form **990** (2014)

| Pa | Tt XI Reconciliation of Net Assets  |            |           |             |            |        |
|----|---|------------|-----------|-------------|------------|--------|
|    | Check if Schedule O contains a response or note to any line in this Part XI   |            | <u></u>   |             |            |        |
|    |   |            |           |             |            |        |
| 1  | Total revenue (must equal Part VIII, column (A), line 12)   |            |           |             |            | 20.    |
| 2  | Total expenses (must equal Part IX, column (A), line 25)  | 2          |           |             |            | 10.    |
| 3  | Revenue less expenses. Subtract line 2 from line 1  | 3          |           |             |            | 10.    |
| 4  | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))                             |            |           |             |            |        |
| 5  | Net unrealized gains (losses) on investments  | 5          | <u>-1</u> | <u>, 27</u> | <u>5,7</u> | 66.    |
| 6  | Donated services and use of facilities  | 6          |           |             |            |        |
| 7  | Investment expenses   | 7          |           |             |            |        |
| 8  | Prior period adjustments  | 8          |           |             |            |        |
| 9  | Other changes in net assets or fund balances (explain in Schedule O)  | 9          |           |             |            | 0.     |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,                    |            |           |             |            |        |
|    | column (B))   | 10         | 58        | <u>,68</u>  | <u>9,3</u> | 83.    |
| Pa | rt XIII Financial Statements and Reporting  |            |           |             |            |        |
|    | Check if Schedule O contains a response or note to any line in this Part XII  |            | <u></u>   |             |            | X      |
|    |   |            |           |             | Yes        | No     |
| 1  | Accounting method used to prepare the Form 990: Cash X Accrual Other  |            |           |             |            |        |
|    | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule        | Ο.         |           |             |            |        |
| 2a | 2a Were the organization's financial statements compiled or reviewed by an independent accountant?                    |            |           |             |            |        |
|    | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed       | d on a     |           |             |            |        |
|    | separate basis, consolidated basis, or both:  |            |           |             |            |        |
|    | Separate basis Consolidated basis Both consolidated and separate basis  |            |           |             |            |        |
| b  | Were the organization's financial statements audited by an independent accountant?                                    |            |           | 2b          | Х          |        |
|    | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat       | e basis,   |           |             |            |        |
|    | consolidated basis, or both:  |            |           |             |            |        |
|    | Separate basis Consolidated basis Both consolidated and separate basis  |            |           |             |            |        |
| С  | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the    | e audit,   |           |             |            |        |
|    | review, or compilation of its financial statements and selection of an independent accountant?                        |            |           | 2c          | X          |        |
|    | If the organization changed either its oversight process or selection process during the tax year, explain in Sch     | edule O.   |           |             |            |        |
| 3а | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si    | -          |           |             |            |        |
|    | Act and OMB Circular A-133?   |            |           | За          |            | X      |
| b  | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required | ired audit |           |             |            |        |
|    | or audits, explain why in Schedule O and describe any steps taken to undergo such audits                              |            |           | 3b          |            |        |
|    |   |            |           | Form        | 990        | (2014) |

#### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(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.

► 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.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

MUSEUM OF THE CITY OF NEW YORK

**Employer identification number** 13-1624098

| Pa   | rt I  | Reason for Public   | Charity Status (                      | All organizations must co                | omplete th    | is part.) Se | ee instructions.                      |                     |  |  |
|------|-------|---|---------------------------------------|--|---------------|--------------|---------------------------------------|---------------------|--|--|
| The  | organ | ization is not a private found  | lation because it is: (               | (For lines 1 through 11, o               | check only    | one box.)    |                                       |                     |  |  |
| 1    |       | A church, convention of ch  |                                       |  |               |              | )(A)(i).                              |                     |  |  |
| 2    |       | A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)  |                                       |  |               |              |                                       |                     |  |  |
| 3    |       | A hospital or a cooperative hospital service organization described in <b>section 170(b)(1)(A)(iii).</b>  |                                       |  |               |              |                                       |                     |  |  |
| 4    |       |   |                                       |  |               |              | -                                     | the hospital's name |  |  |
|      |       | A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: |                                       |  |               |              |                                       |                     |  |  |
| 5    |       | An organization operated for  | or the benefit of a co                | allege or university owne                | d or opera    | ted by a gr  | overnmental unit describ              | ned in              |  |  |
| 5    |       | section 170(b)(1)(A)(iv). (C  |                                       | mege of difficulty owne                  | a or opera    | ica by a go  | overnmental unit descrit              | JCG II1             |  |  |
| 6    |       |   | · · · · · ·                           | nantal unit described in                 | cootion 17    | 70/6\/4\/4\/ | (v)                                   |                     |  |  |
|      | X     | A federal, state, or local go   | -                                     |  |               |              | •                                     | nublic described in |  |  |
| 7    | 21    | An organization that norma  | •                                     | intial part of its support               | iroin a gov   | emmentai     | unit or from the general              | public described in |  |  |
|      |       | section 170(b)(1)(A)(vi). (C  | •                                     | (d)(A)(ni) (Commisto Don                 | <b>.</b>      |              |                                       |                     |  |  |
| 8    | H     | A community trust describe  |                                       |  |               |              |                                       |                     |  |  |
| 9    |       | An organization that norma  | *                                     | -  | -             |              |                                       | •                   |  |  |
|      |       | activities related to its exen  | •                                     | •  |               |              | · · · · · · · · · · · · · · · · · · · | •                   |  |  |
|      |       | income and unrelated busin  |                                       | (less section 511 tax) fr                | om busine     | sses acqu    | ired by the organization              | aπer June 30, 1975. |  |  |
| 40   |       | See section 509(a)(2). (Con   |                                       | :  | datu Caa      | ti FC        | 00(a)(4)                              |                     |  |  |
| 10   | H     | An organization organized   | ·                                     |  | •             |              |                                       |                     |  |  |
| 11   | ш     | An organization organized   | ·                                     | •  | -             |              | · · · · · · · · · · · · · · · · · · · |                     |  |  |
|      |       | more publicly supported or  | ~                                     |  |               |              |                                       | neck the box in     |  |  |
| _    |       | lines 11a through 11d that  | * *                                   |  |               | •            |                                       | . mission m         |  |  |
| а    |       | <b>Type I.</b> A supporting orga  | · · · · · · · · · · · · · · · · · · · | · ·                                      | •             |              |                                       |                     |  |  |
|      |       | the supported organization  |                                       | • • • •                                  | a majority    | or the alrec | ctors or trustees of the s            | supporting          |  |  |
|      |       | organization. You must o  | - ·                                   |  |               |              | - d                                   |                     |  |  |
| b    |       | ☐ Type II. A supporting org   | <del>-</del>                          |  |               |              |                                       | -                   |  |  |
|      |       | control or management o   |                                       |  | same perso    | ons that co  | ontroi or manage the sup              | pported             |  |  |
| _    |       | organization(s). You mus  |                                       |  | in connoc     | tion with a  | and functionally integrat             | ad with             |  |  |
| C    |       | ☐ Type III functionally inte  | - :                                   |  |               |              | · ·                                   | ea with,            |  |  |
| -1   |       | its supported organizatio   |                                       | •  |               |              |                                       | :ti(-)              |  |  |
| d    |       |   |                                       |  |               |              |                                       | • •                 |  |  |
|      |       | that is not functionally int  | -                                     |  | •             |              |                                       | iveriess            |  |  |
| _    |       | requirement (see instruct   | •                                     | -  |               |              |                                       |                     |  |  |
| е    |       | <ul> <li>Check this box if the orga<br/>functionally integrated, or</li> </ul>  |                                       |  |               |              | гтурет, турет, туретт                 |                     |  |  |
|      | Ento  | er the number of supported of   | * *                                   |  |               |              |                                       |                     |  |  |
| ,    |       | ride the following information  |                                       |  |               |              |                                       |                     |  |  |
| 9    |       | i) Name of supported  | (ii) EIN                              |  | (iv) Is the o | rganization  | (v) Amount of monetary                | (vi) Amount of      |  |  |
|      | •     | organization  |                                       | (described on lines 1-9                  | listed i      | n your       | support (see                          | other support (see  |  |  |
|      |       |   |                                       | above or IRC section (see instructions)) | Yes           | No           | Instructions)                         | Instructions)       |  |  |
|      |       |   |                                       | (see instructions))                      |               |              |                                       |                     |  |  |
|      |       |   |                                       |  |               |              |                                       |                     |  |  |
|      |       |   |                                       |  |               |              |                                       |                     |  |  |
|      |       |   |                                       |  |               |              |                                       |                     |  |  |
|      |       |   |                                       |  |               |              |                                       |                     |  |  |
|      |       |   |                                       |  |               |              |                                       |                     |  |  |
|      |       |   |                                       |  |               |              |                                       |                     |  |  |
|      |       |   |                                       |  |               |              |                                       |                     |  |  |
|      |       |   |                                       |  |               |              |                                       |                     |  |  |
|      |       |   |                                       |  |               |              |                                       |                     |  |  |
|      |       |   |                                       |  |               |              |                                       |                     |  |  |
| Гotа | ıl    |   |                                       |  |               |              |                                       | I                   |  |  |

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

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

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

| Sec  | ction A. Public Support                      |                         |                     |                      |                        |                     |                    |
|------|--|-------------------------|---------------------|----------------------|------------------------|---------------------|--------------------|
| Cale | ndar year (or fiscal year beginning in) 🕨    | (a) 2010                | <b>(b)</b> 2011     | (c) 2012             | (d) 2013               | (e) 2014            | (f) Total          |
| 1    | Gifts, grants, contributions, and            |                         |                     |                      |                        |                     |                    |
|      | membership fees received. (Do not            |                         |                     |                      |                        |                     |                    |
|      | include any "unusual grants.")               | 11,869,257.             | 9,097,458.          | 8,991,870.           | 14,124,146.            | 20,899,837.         | 64,982,568.        |
| 2    | Tax revenues levied for the organ-           |                         |                     |                      |                        |                     | _                  |
|      | ization's benefit and either paid to         |                         |                     |                      |                        |                     |                    |
|      | or expended on its behalf                    |                         |                     |                      |                        |                     |                    |
| 3    | The value of services or facilities          |                         |                     |                      |                        |                     | _                  |
|      | furnished by a governmental unit to          |                         |                     |                      |                        |                     |                    |
|      | the organization without charge              |                         |                     |                      |                        |                     |                    |
| 4    | Total. Add lines 1 through 3                 | 11,869,257.             | 9,097,458.          | 8,991,870.           | 14,124,146.            | 20,899,837.         | 64,982,568.        |
| 5    | The portion of total contributions           |                         |                     |                      |                        |                     |                    |
|      | by each person (other than a                 |                         |                     |                      |                        |                     |                    |
|      | governmental unit or publicly                |                         |                     |                      |                        |                     |                    |
|      | supported organization) included             |                         |                     |                      |                        |                     |                    |
|      | on line 1 that exceeds 2% of the             |                         |                     |                      |                        |                     |                    |
|      | amount shown on line 11,                     |                         |                     |                      |                        |                     |                    |
|      | column (f)                                   |                         |                     |                      |                        |                     | 10,655,097.        |
| 6    | Public support. Subtract line 5 from line 4. |                         |                     |                      |                        |                     | 54,327,471.        |
|      | ction B. Total Support                       |                         |                     |                      |                        |                     | , , , ,            |
|      | ndar year (or fiscal year beginning in)      | (a) 2010                | <b>(b)</b> 2011     | (c) 2012             | (d) 2013               | (e) 2014            | (f) Total          |
|      | Amounts from line 4                          | 11,869,257.             | 9,097,458.          | 8,991,870.           | 14,124,146.            | 20,899,837.         | 64,982,568.        |
|      | Gross income from interest,                  | , ,                     | , ,                 | , ,                  | , ,                    | , ,                 |                    |
| •    | dividends, payments received on              |                         |                     |                      |                        |                     |                    |
|      | securities loans, rents, royalties           |                         |                     |                      |                        |                     |                    |
|      | and income from similar sources              | 546,995.                | 554,977.            | 628,335.             | 636,219.               | 699,058.            | 3,065,584.         |
| 9    | Net income from unrelated business           |                         |                     | ,                    | , , , , , ,            | , , , , ,           | 7 1 1 1 1 1 1      |
| Ū    | activities, whether or not the               |                         |                     |                      |                        |                     |                    |
|      | business is regularly carried on             |                         |                     |                      |                        |                     |                    |
| 10   | Other income. Do not include gain            |                         |                     |                      |                        |                     |                    |
| 10   | or loss from the sale of capital             |                         |                     |                      |                        |                     |                    |
|      | assets (Explain in Part VI.)                 |                         |                     |                      |                        | 59 417.             | 59,417.            |
| 11   | Total support. Add lines 7 through 10        |                         |                     |                      |                        | 33 / 11 / 1         | 68,107,569.        |
| 12   | Gross receipts from related activities,      | etc (see instruction    | one)                |                      |                        | 12 9                | ,824,321.          |
| 13   | First five years. If the Form 990 is for     |                         |                     | d fourth or fifth to | av vear as a sectio    |                     | ,,                 |
| .0   | organization, check this box and <b>stor</b> |                         |                     |                      | _                      |                     |                    |
| Sec  | ction C. Computation of Publ                 |                         |                     |                      |                        |                     |                    |
| 14   | Public support percentage for 2014 (         | line 6. column (f) di   | vided by line 11. c | olumn (f))           |                        | 14                  | 79.77 %            |
| 15   | Public support percentage from 2013          |                         |                     |                      |                        | 15                  | 89.82 %            |
| 16a  | 33 1/3% support test - 2014. If the          |                         |                     |                      |                        | nore, check this bo | x and              |
|      | stop here. The organization qualifies        | •                       |                     | •                    |                        | •                   | $\triangleright$ X |
| b    | 33 1/3% support test - 2013. If the          |                         |                     |                      |                        |                     | is box             |
|      | and <b>stop here.</b> The organization qual  |                         |                     |                      |                        |                     | ightharpoonup      |
| 17a  | 10% -facts-and-circumstances tes             |                         |                     |                      |                        |                     | or more.           |
|      | and if the organization meets the "fac       | -                       |                     |                      |                        |                     |                    |
|      | meets the "facts-and-circumstances"          |                         |                     |                      |                        | _                   |                    |
| h    | 10% -facts-and-circumstances tes             |                         |                     |                      |                        |                     |                    |
|      | more, and if the organization meets the      | -                       |                     |                      |                        |                     |                    |
|      | organization meets the "facts-and-cire       |                         | •                   |                      |                        |                     |                    |
| 12   | Private foundation. If the organization      |                         |                     |                      |                        |                     |                    |
| -10  | Tivate louridation. If the organization      | an alla flot official a | 557 OH III G 10, 10 | a, 100, 17a, 01 17k  | , or look trills box a | ina see manucioni   | , <u> </u>         |

Schedule A (Form 990 or 990-EZ) 2014

# 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.)

| Se   | ction A. Public Support  | now, piedee com   | proto r ure m.,      |                        |                    |                         |                  |
|------|--|-------------------|----------------------|------------------------|--------------------|-------------------------|------------------|
|      | endar year (or fiscal year beginning in)   | (a) 2010          | <b>(b)</b> 2011      | (c) 2012               | (d) 2013           | (e) 2014                | (f) Total        |
|      | Gifts, grants, contributions, and  |                   | , ,                  | , ,                    |                    |                         | ,,               |
|      | membership fees received. (Do not  |                   |                      |                        |                    |                         |                  |
|      | include any "unusual grants.")   |                   |                      |                        |                    |                         |                  |
| 2    | Gross receipts from admissions,  |                   |                      |                        |                    |                         |                  |
|      | merchandise sold or services per-  |                   |                      |                        |                    |                         |                  |
|      | formed, or facilities furnished in any activity that is related to the               |                   |                      |                        |                    |                         |                  |
|      | organization's tax-exempt purpose  |                   |                      |                        |                    |                         |                  |
| 3    | Gross receipts from activities that  |                   |                      |                        |                    |                         |                  |
|      | are not an unrelated trade or bus-   |                   |                      |                        |                    |                         |                  |
|      | iness under section 513  |                   |                      |                        |                    |                         |                  |
| 4    | Tax revenues levied for the organ-   |                   |                      |                        |                    |                         |                  |
|      | ization's benefit and either paid to   |                   |                      |                        |                    |                         |                  |
|      | or expended on its behalf  |                   |                      |                        |                    |                         |                  |
| 5    | The value of services or facilities  |                   |                      |                        |                    |                         |                  |
|      | furnished by a governmental unit to  |                   |                      |                        |                    |                         |                  |
|      | the organization without charge  |                   |                      |                        |                    |                         |                  |
| 6    | Total. Add lines 1 through 5   |                   |                      |                        |                    |                         |                  |
|      | Amounts included on lines 1, 2, and  |                   |                      |                        |                    |                         |                  |
|      | 3 received from disqualified persons   |                   |                      |                        |                    |                         |                  |
| k    | 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 line 6.)                                       |                   |                      |                        |                    |                         |                  |
| Se   | ction B. Total Support   |                   |                      |                        |                    |                         |                  |
| Cale | endar year (or fiscal year beginning in) 🖊   | <b>(a)</b> 2010   | <b>(b)</b> 2011      | (c) 2012               | (d) 2013           | (e) 2014                | (f) Total        |
| 9    | Amounts from line 6  |                   |                      |                        |                    |                         |                  |
| 10a  | Gross income from interest,  |                   |                      |                        |                    |                         |                  |
|      | dividends, payments received on securities loans, rents, royalties                   |                   |                      |                        |                    |                         |                  |
|      | and income from similar sources  |                   |                      |                        |                    |                         |                  |
| k    | Unrelated business taxable income  |                   |                      |                        |                    |                         |                  |
|      | (less section 511 taxes) from businesses   |                   |                      |                        |                    |                         |                  |
|      | acquired after June 30, 1975   |                   |                      |                        |                    |                         |                  |
|      | Add lines 10a and 10b  |                   |                      |                        |                    |                         |                  |
| 11   | Net income from unrelated business   |                   |                      |                        |                    |                         |                  |
|      | activities not included in line 10b, whether or not the business is                  |                   |                      |                        |                    |                         |                  |
|      | regularly carried on   |                   |                      |                        |                    |                         |                  |
| 12   | Other income. Do not include gain  |                   |                      |                        |                    |                         |                  |
|      | or loss from the sale of capital assets (Explain in Part VI.)                        |                   |                      |                        |                    |                         |                  |
| 13   | Total support. (Add lines 9, 10c, 11, and 12.)                                       |                   |                      |                        |                    |                         |                  |
| 14   | First five years. If the Form 990 is for   | the organization' | s first, second, thi | rd, fourth, or fifth t | ax year as a secti | on 501(c)(3) organi:    | zation,          |
|      | check this box and stop here   |                   |                      |                        |                    |                         | <b>_</b>         |
|      | ction C. Computation of Publi  |                   |                      |                        |                    | 1 1                     |                  |
|      | Public support percentage for 2014 (li   |                   |                      |                        |                    | 15                      | <u>%</u>         |
|      | Public support percentage from 2013  |                   |                      |                        |                    | 16                      | <u>%</u>         |
|      | ction D. Computation of Inves  |                   |                      |                        |                    | 14-1                    |                  |
|      | Investment income percentage for 20  |                   |                      |                        |                    | 17                      | <u>%</u>         |
|      | Investment income percentage from 2  |                   |                      |                        |                    | 18   22.1/20/ and line: | %<br>17 is not   |
| 198  | a 33 1/3% support tests - 2014. If the   |                   |                      |                        |                    |                         |                  |
|      | more than 33 1/3%, check this box ar   |                   |                      |                        |                    |                         |                  |
| k    | 33 1/3% support tests - 2013. If the   | •                 |                      |                        | •                  | •                       |                  |
| 20   | line 18 is not more than 33 1/3%, che <b>Private foundation.</b> If the organization |                   |                      |                        |                    |                         | ······· <b>[</b> |

## Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in *part VI* how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
  (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

|   |      | V     | NI.  |
|---|------|-------|------|
|   |      | Yes   | No   |
|   |      |       |      |
|   | 1    |       |      |
|   |      |       |      |
|   |      |       |      |
|   | 2    |       |      |
|   |      |       |      |
|   | За   |       |      |
|   |      |       |      |
|   | 3b   |       |      |
|   | - CL |       |      |
|   | 3с   |       |      |
|   |      |       |      |
|   | 4a   |       |      |
|   |      |       |      |
|   | 41-  |       |      |
|   | 4b   |       |      |
|   |      |       |      |
|   |      |       |      |
|   | 4c   |       |      |
|   |      |       |      |
|   |      |       |      |
|   |      |       |      |
|   | F    |       |      |
|   | 5a   |       |      |
|   | 5b   |       |      |
|   | 5c   |       |      |
|   |      |       |      |
|   |      |       |      |
|   |      |       |      |
|   |      |       |      |
|   | 6    |       |      |
|   |      |       |      |
|   | 7    |       |      |
|   |      |       |      |
|   | 8    |       |      |
|   |      |       |      |
|   |      |       |      |
|   | 9a   |       |      |
|   | 9b   |       |      |
|   |      |       |      |
|   | 9с   |       |      |
|   |      |       |      |
|   |      |       |      |
|   | 10a  |       |      |
|   | 40.  |       |      |
| _ | 10b  | 0 EZ\ | 2014 |

| Par  | ↑ IV   Supporting Organizations <sub>(continued)</sub>   |         |     |    |
|------|--|---------|-----|----|
|      |  |         | Yes | No |
| 11   | Has the organization accepted a gift or contribution from any of the following persons?  |         |     |    |
| а    | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)                     |         |     |    |
|      | below, the governing body of a supported organization?   | 11a     |     |    |
| b    | A family member of a person described in (a) above?  | 11b     |     |    |
| С    | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.            | 11c     |     |    |
|      | tion B. Type I Supporting Organizations  |         |     |    |
|      | <u> </u>   |         | Yes | No |
| 1    | Did the directors, trustees, or membership of one or more supported organizations have the power to                              |         |     |    |
|      | regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the               |         |     |    |
|      | tax year? If "No," describe in <i>Part VI</i> how the supported organization(s) effectively operated, supervised, or             |         |     |    |
|      | controlled the organization's activities. If the organization had more than one supported organization,                          |         |     |    |
|      | describe how the powers to appoint and/or remove directors or trustees were allocated among the supported                        |         |     |    |
|      | organizations and what conditions or restrictions, if any, applied to such powers during the tax year.                           | 1       |     |    |
| 2    | Did the organization operate for the benefit of any supported organization other than the supported                              |         |     |    |
|      | organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in                       |         |     |    |
|      | Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,                      |         |     |    |
|      | supervised, or controlled the supporting organization.   | 2       |     |    |
| Sect | tion C. Type II Supporting Organizations   |         |     |    |
|      | 71 11 3 3  |         | Yes | No |
| 1    | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors                 |         |     |    |
|      | or trustees of each of the organization's supported organization(s)? If "No," describe in part VI how control                    |         |     |    |
|      | or management of the supporting organization was vested in the same persons that controlled or managed                           |         |     |    |
|      | the supported organization(s).   | 1       |     |    |
| Sect | tion D. Type III Supporting Organizations  | -       |     |    |
|      | 71 11 5 5  |         | Yes | No |
| 1    | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the                   |         |     |    |
|      | organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax            |         |     |    |
|      | year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the              |         |     |    |
|      | organization's governing documents in effect on the date of notification, to the extent not previously provided?                 | 1       |     |    |
| 2    | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported                 |         |     |    |
|      | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how               |         |     |    |
|      | the organization maintained a close and continuous working relationship with the supported organization(s).                      | 2       |     |    |
| 3    | By reason of the relationship described in (2), did the organization's supported organizations have a                            |         |     |    |
|      | significant voice in the organization's investment policies and in directing the use of the organization's                       |         |     |    |
|      | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's                     |         |     |    |
|      | supported organizations played in this regard.   | 3       |     |    |
| Sect | tion E. Type III Functionally-Integrated Supporting Organizations  |         |     |    |
| 1    | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions): |         |     |    |
| а    | The organization satisfied the Activities Test. Complete line 2 below.   |         |     |    |
| b    | The organization is the parent of each of its supported organizations. Complete line 3 below.                                    |         |     |    |
| С    | The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instru          | uctions | ).  |    |
| 2    | Activities Test. Answer (a) and (b) below.   |         | Yes | No |
| а    | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of               |         |     |    |
|      | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify                       |         |     |    |
|      | those supported organizations and explain how these activities directly furthered their exempt purposes,                         |         |     |    |
|      | how the organization was responsive to those supported organizations, and how the organization determined                        |         |     |    |
|      | that these activities constituted substantially all of its activities.   | 2a      |     |    |
| b    | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more              |         |     |    |
|      | of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the                     |         |     |    |
|      | reasons for the organization's position that its supported organization(s) would have engaged in these                           |         |     |    |
|      | activities but for the organization's involvement.   | 2b      |     |    |
| 3    | Parent of Supported Organizations. Answer (a) and (b) below.   |         |     |    |
| а    | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or                      |         |     |    |
|      | trustees of each of the supported organizations? Provide details in Part VI.   | 3a      |     |    |
| b    | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each              |         |     |    |
|      | of its supported organizations? If "Yes," describe in part VI the role played by the organization in this regard.                | 3b      |     |    |

| Pa   | rt V Type III Non-Functionally Integrated 509(a)(3) Supporting   | g Orga    | anizations                   | Ÿ                              |  |  |  |  |  |
|------|--|-----------|------------------------------|--------------------------------|--|--|--|--|--|
| 1    | Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. <b>See instructions.</b> All |           |                              |                                |  |  |  |  |  |
|      | other Type III non-functionally integrated supporting organizations must complete Sections A through E.                              |           |                              |                                |  |  |  |  |  |
| Sect | ion A - Adjusted Net Income  |           | (A) Prior Year               | (B) Current Year<br>(optional) |  |  |  |  |  |
| _1   | Net short-term capital gain  | 1         |                              |                                |  |  |  |  |  |
| 2    | Recoveries of prior-year distributions   | 2         |                              |                                |  |  |  |  |  |
| _3_  | Other gross income (see instructions)  | 3         |                              |                                |  |  |  |  |  |
| 4    | Add lines 1 through 3  | 4         |                              |                                |  |  |  |  |  |
| 5    | Depreciation and depletion   | 5         |                              |                                |  |  |  |  |  |
| 6    | Portion of operating expenses paid or incurred for production or   |           |                              |                                |  |  |  |  |  |
|      | collection of gross income or for management, conservation, or   |           |                              |                                |  |  |  |  |  |
|      | maintenance of property held for production of income (see instructions)   | 6         |                              |                                |  |  |  |  |  |
| 7    | Other expenses (see instructions)  | 7         |                              |                                |  |  |  |  |  |
| 8    | Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)  | 8         |                              |                                |  |  |  |  |  |
| Sect | ion B - Minimum Asset Amount   |           | (A) Prior Year               | (B) Current Year<br>(optional) |  |  |  |  |  |
| 1    | Aggregate fair market value of all non-exempt-use assets (see  |           |                              |                                |  |  |  |  |  |
|      | instructions for short tax year or assets held for part of year):  |           |                              |                                |  |  |  |  |  |
| а    | Average monthly value of securities  | 1a        |                              |                                |  |  |  |  |  |
| b    | Average monthly cash balances  | 1b        |                              |                                |  |  |  |  |  |
| С    | Fair market value of other non-exempt-use assets   | 1c        |                              |                                |  |  |  |  |  |
| d    | Total (add lines 1a, 1b, and 1c)   | 1d        |                              |                                |  |  |  |  |  |
| е    | Discount claimed for blockage or other   |           |                              |                                |  |  |  |  |  |
|      | factors (explain in detail in <b>Part VI</b> ):  |           |                              |                                |  |  |  |  |  |
| 2    | Acquisition indebtedness applicable to non-exempt-use assets   | 2         |                              |                                |  |  |  |  |  |
| 3    | Subtract line 2 from line 1d   | 3         |                              |                                |  |  |  |  |  |
| 4    | Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,   |           |                              |                                |  |  |  |  |  |
|      | see instructions).   | 4         |                              |                                |  |  |  |  |  |
| 5    | Net value of non-exempt-use assets (subtract line 4 from line 3)   | 5         |                              |                                |  |  |  |  |  |
| 6    | Multiply line 5 by .035  | 6         |                              |                                |  |  |  |  |  |
| 7    | Recoveries of prior-year distributions   | 7         |                              |                                |  |  |  |  |  |
| 8    | Minimum Asset Amount (add line 7 to line 6)  | 8         |                              |                                |  |  |  |  |  |
| Sect | ion C - Distributable Amount   |           |                              | Current Year                   |  |  |  |  |  |
| 1    | Adjusted net income for prior year (from Section A, line 8, Column A)  | 1         |                              |                                |  |  |  |  |  |
| 2    | Enter 85% of line 1  | 2         |                              |                                |  |  |  |  |  |
| 3    | Minimum asset amount for prior year (from Section B, line 8, Column A)   | 3         |                              |                                |  |  |  |  |  |
| 4    | Enter greater of line 2 or line 3  | 4         |                              |                                |  |  |  |  |  |
| 5    | Income tax imposed in prior year   | 5         |                              |                                |  |  |  |  |  |
| 6    | Distributable Amount. Subtract line 5 from line 4, unless subject to   |           |                              |                                |  |  |  |  |  |
|      | emergency temporary reduction (see instructions)   | 6         |                              |                                |  |  |  |  |  |
| 7    | Check here if the current year is the organization's first as a non-functionally   | y-integra | ated Type III supporting ora | anization (see                 |  |  |  |  |  |
|      | instructions)  |           |                              | •                              |  |  |  |  |  |

Schedule A (Form 990 or 990-EZ) 2014

| Par   | rt V   Type III Non-Functionally Integrat              | ed 509   | (a)(3) Supporting Organic     | anizations <sub>(continued)</sub>      |                                     |
|-------|--|----------|-------------------------------|--|-------------------------------------|
| Secti | tion D - Distributions                                 |          |                               | ,                                      | Current Year                        |
| 1     | Amounts paid to supported organizations to accom       |          |                               |  |                                     |
| 2     | Amounts paid to perform activity that directly furthe  |          |                               |  |                                     |
|       | organizations, in excess of income from activity       |          |                               |  |                                     |
| 3     | Administrative expenses paid to accomplish exemp       | t purpos | es of supported organizatior  | ns                                     |                                     |
| 4     | Amounts paid to acquire exempt-use assets              |          |                               |  |                                     |
| 5     | Qualified set-aside amounts (prior IRS approval requ   | uired)   |                               |  |                                     |
| 6     | Other distributions (describe in Part VI). See instruc | tions.   |                               |  |                                     |
| 7     | Total annual distributions. Add lines 1 through 6.     |          |                               |  |                                     |
| 8     | Distributions to attentive supported organizations to  | which t  | he organization is responsive | 9                                      |                                     |
|       | (provide details in Part VI). See instructions.        |          |                               |  |                                     |
| 9     | Distributable amount for 2014 from Section C, line 6   | 6        |                               |  |                                     |
| 10    | Line 8 amount divided by Line 9 amount                 |          |                               |  |                                     |
| Secti | tion E - Distribution Allocations (see instructions)   |          | (i)<br>Excess Distributions   | (ii)<br>Underdistributions<br>Pre-2014 | (iii) Distributable Amount for 2014 |
| 1     | Distributable amount for 2014 from Section C, line 6   | <br>S    |                               |  |                                     |
| 2     | Underdistributions, if any, for years prior to 2014    |          |                               |  |                                     |
|       | (reasonable cause required-see instructions)           |          |                               |  |                                     |
| 3     | Excess distributions carryover, if any, to 2014:       |          |                               |  |                                     |
| а     |  |          |                               |  |                                     |
| b     |  |          |                               |  |                                     |
| С     |  |          |                               |  |                                     |
| d     |  |          |                               |  |                                     |
| е     | From 2013  |          |                               |  |                                     |
| f     | Total of lines 3a through e                            |          |                               |  |                                     |
| g     | Applied to underdistributions of prior years           |          |                               |  |                                     |
| h     | Applied to 2014 distributable amount                   |          |                               |  |                                     |
| i     | Carryover from 2009 not applied (see instructions)     |          |                               |  |                                     |
| j     | Remainder. Subtract lines 3g, 3h, and 3i from 3f.      |          |                               |  |                                     |
| 4     | Distributions for 2014 from Section D,                 |          |                               |  |                                     |
|       | line 7: \$   |          |                               |  |                                     |
| а     | Applied to underdistributions of prior years           |          |                               |  |                                     |
| b     | Applied to 2014 distributable amount                   |          |                               |  |                                     |
| С     | Remainder. Subtract lines 4a and 4b from 4.            |          |                               |  |                                     |
| 5     | Remaining underdistributions for years prior to 2014   | 1, if    |                               |  |                                     |
|       | any. Subtract lines 3g and 4a from line 2 (if amount   |          |                               |  |                                     |
|       | greater than zero, see instructions).                  |          |                               |  |                                     |
| 6     | Remaining underdistributions for 2014. Subtract line   | es 3h    |                               |  |                                     |
|       | and 4b from line 1 (if amount greater than zero, see   |          |                               |  |                                     |
|       | instructions).   |          |                               |  |                                     |
| 7     | Excess distributions carryover to 2015. Add lines      | 3j       |                               |  |                                     |
|       | and 4c.  |          |                               |  |                                     |
| 8     | Breakdown of line 7:                                   |          |                               |  |                                     |
| a     |  |          |                               |  |                                     |
| b     |  |          |                               |  |                                     |
| C     |  |          |                               |  |                                     |
|       | Excess from 2013                                       |          |                               |  |                                     |
| е     | Excess from 2014                                       |          |                               |  |                                     |

Schedule A (Form 990 or 990-EZ) 2014

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

Department of the Treasury Internal Revenue Service **Schedule of Contributors** 

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 ·

OMB No. 1545-0047

Name of the organization

Employer identification number

MUSEUM OF THE CITY OF NEW YORK

13-1624098

Organization type (check one):

| _   |   |   |  |  |  |  |  |  |
|---|---|---|--|--|--|--|--|--|
| Filers of:  |   | Section:  |  |  |  |  |  |  |
| Form 990  | or 990-EZ   | X 501(c)( 3 ) (enter number) organization   |  |  |  |  |  |  |
|   |   | 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation  |  |  |  |  |  |  |
|   |   | 527 political organization  |  |  |  |  |  |  |
| Form 990-   | PF  | 501(c)(3) exempt private foundation   |  |  |  |  |  |  |
|   |   | 4947(a)(1) nonexempt charitable trust treated as a private foundation   |  |  |  |  |  |  |
|   |   | 501(c)(3) taxable private foundation  |  |  |  |  |  |  |
|   |   |   |  |  |  |  |  |  |
|   |   | covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.  |  |  |  |  |  |  |
| General R   | lule  |   |  |  |  |  |  |  |
|   |   | filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.  |  |  |  |  |  |  |
| Special R   | ules  |   |  |  |  |  |  |  |
| s<br>a  | For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. |   |  |  |  |  |  |  |
| у   | For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.  |   |  |  |  |  |  |  |
| y<br>is<br>p  | ear, contributions<br>s checked, enter he<br>surpose. Do not co   | described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., mplete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively, etc., contributions totaling \$5,000 or more during the year |  |  |  |  |  |  |
| Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). |   |   |  |  |  |  |  |  |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization Employer identification number

| MUSEU      | M OF THE CITY OF NEW YORK   | 13                         | -1624098  |
|------------|---|----------------------------|---|
| Part I     | Contributors (see instructions). Use duplicate copies of Part I if additional | al space is needed.        |   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d) Type of contribution  |
| 1          |   | \$5,000,000.               | Person X Payroll  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions    | (d) Type of contribution  |
| 2          |   | \$\$\$                     | Person X Payroll Noncash X  (Complete Part II for noncash contributions.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions    | (d)<br>Type of contribution   |
| 3          |   | \$ <u>1,628,556</u> .      | Person X Payroll  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d) Type of contribution  |
| 4          |   | \$1,000,000.               | Person X Payroll  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d)<br>Type of contribution   |
| 5          |   | \$1,000,000.               | Person X Payroll  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d)<br>Type of contribution   |
| 6          |   | \$500,000.                 | Person X Payroll Noncash (Complete Part II for noncash contributions.)    |

## MUSEUM OF THE CITY OF NEW YORK

13-1624098

| Part II                      | Noncash Property (see instructions). Use duplicate copies of P | art II if additional space is needed.    |                           |
|------------------------------|--|--|---------------------------|
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                     | (c) FMV (or estimate) (see instructions) | (d)<br>Date received      |
|                              | STOCK GIFT   |  |                           |
| 2                            |  |  |                           |
|                              |  | \$\$\$\$                                 | 12/18/14                  |
| (a)<br>No.                   | (b)  | (c)                                      | (d)                       |
| from<br>Part I               | Description of noncash property given                          | FMV (or estimate)<br>(see instructions)  | Date received             |
|                              |  |  |                           |
|                              |  | \$                                       |                           |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                     | (c) FMV (or estimate) (see instructions) | (d)<br>Date received      |
|                              |  |  |                           |
|                              |  | \$                                       |                           |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                     | (c) FMV (or estimate) (see instructions) | (d)<br>Date received      |
|                              |  |  |                           |
|                              |  | \$                                       |                           |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                     | (c) FMV (or estimate) (see instructions) | (d)<br>Date received      |
|                              |  | _  |                           |
|                              |  | <b>\$</b>                                |                           |
| (a)                          |  | (c)                                      |                           |
| No.<br>from<br>Part I        | (b)  Description of noncash property given                     | FMV (or estimate)<br>(see instructions)  | (d)<br>Date received      |
|                              |  |  |                           |
| -                            |  |  |                           |
| 453 11-05                    | . <del> </del>   | Sobodulo B (Form 0                       | 90, 990-EZ, or 990-PF) (2 |

Name of organization Employer identification number MUSEUM OF THE CITY OF NEW YORK 13-1624098 religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Exclusively religious, charitable, etc., contributions to organizations according to the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations of \$1,000 or less for the year. (Finter this info. once.) Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. `fŕom Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

MUSEUM OF THE CITY OF NEW YORK

**Employer identification number** 13-1624098

| Pai | rt I Organizations Maintaining Donor Advise                        | d Funds or Other Similar Funds               | or Accounts.Complete if the                   |
|-----|--|--|---|
|     | organization answered "Yes" to Form 990, Part IV, line             | e 6.   |   |
|     |  | (a) Donor advised funds                      | (b) Funds and other accounts                  |
| 1   | Total number at end of year  |  |   |
| 2   | Aggregate value of contributions to (during year)                  |  |   |
| 3   | Aggregate value of grants from (during year)                       |  |   |
| 4   | Aggregate value at end of year                                     |  |   |
| 5   | Did the organization inform all donors and donor advisors in v     | writing that the assets held in donor advis  | ed funds                                      |
|     | are the organization's property, subject to the organization's     | _  |   |
| 6   | Did the organization inform all grantees, donors, and donor a      |  |   |
|     | for charitable purposes and not for the benefit of the donor o     |  |   |
|     | • •  |  |   |
| Pai |  |  |   |
| 1   | Purpose(s) of conservation easements held by the organization      |  |   |
|     | Preservation of land for public use (e.g., recreation or e         | `  | orically important land area                  |
|     | Protection of natural habitat                                      | Preservation of a certi                      |   |
|     | Preservation of open space   |  |   |
| 2   | Complete lines 2a through 2d if the organization held a qualif     | ied 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                             |  | 2a  |
| b   |  |  |   |
| С   | Number of conservation easements on a certified historic stru      |  | ·····   |
|     | Number of conservation easements included in (c) acquired a        |  |   |
|     | listed in the National Register                                    |  |   |
| 3   | Number of conservation easements modified, transferred, rel        |  |   |
|     | year >   |  |   |
| 4   | Number of states where property subject to conservation eas        | sement is located                            |   |
| 5   | Does the organization have a written policy regarding the per      |  |   |
|     | violations, and enforcement of the conservation easements it       |  | Yes No  |
| 6   | Staff and volunteer hours devoted to monitoring, inspecting,       |  |   |
| 7   | Amount of expenses incurred in monitoring, inspecting, and e       |  |   |
| 8   | Does each conservation easement reported on line 2(d) above        |  |   |
|     | and section 170(h)(4)(B)(ii)?                                      |  |   |
| 9   | In Part XIII, describe how the organization reports conservation   |  |   |
|     | include, if applicable, the text of the footnote to the organizat  |  |   |
|     | conservation easements.  |  | -   |
| Pai | rt III Organizations Maintaining Collections of                    | f Art, Historical Treasures, or O            | ther 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 (AS       | C 958), not to report in its revenue staten  | nent and balance sheet works of art,          |
|     | historical treasures, or other similar assets held for public exh  | nibition, education, or research in furthera | nce of public service, provide, in Part XIII, |
|     | the text of the footnote to its financial statements that descril  | bes these items.                             |   |
| b   | If the organization elected, as permitted under SFAS 116 (AS       | C 958), to report in its revenue statement   | and balance sheet works of art, historical    |
|     | treasures, or other similar assets held for public exhibition, ec  | ducation, or research in furtherance of pul  | olic service, provide the following amounts   |
|     | relating to these items:   |  |   |
|     | (i) Revenue included in Form 990, Part VIII, line 1                |  | <b>&gt;</b> \$                                |
|     |  |  |   |
| 2   | If the organization received or held works of art, historical trea |  |   |
|     | the following amounts required to be reported under SFAS 1         | 16 (ASC 958) relating to these items:        |   |
| а   | Revenue included in Form 990, Part VIII, line 1                    |  | <b>&gt;</b> \$                                |
| b   | Assets included in Form 990, Part X                                |  | · · · · · · · · · · · · · · · · · · ·         |

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

|            | t III Organizations Maintaining C   | ollections of Ar      |                       |                  | or Othe                                 | er Simil   |            | sets/contin      |          | age Z |  |  |
|------------|---|-----------------------|-----------------------|------------------|---|------------|------------|------------------|----------|-------|--|--|
|            |   |                       | •                     |                  |   |            |            |                  |          |       |  |  |
| 3          | Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): |                       |                       |                  |   |            |            |                  |          |       |  |  |
| а          | X Public exhibition   | d                     | X Loan or ov          | chango progra    | me                                      |            |            |                  |          |       |  |  |
| b          | 77  |                       |                       |                  |   |            |            |                  |          |       |  |  |
| C          | X Preservation for future generations   | •                     |                       |                  |   |            |            |                  |          |       |  |  |
| 4          | Provide a description of the organization's co  | Mostions and synlain  | how thoy further      | the organization | on'o ovoi                               | mnt nurn   | oco in D   | ort VIII         |          |       |  |  |
|            |   |                       |                       |                  |   |            | ose III F  | art Alli.        |          |       |  |  |
| 5          | During the year, did the organization solicit of<br>to be sold to raise funds rather than to be ma  |                       |                       |                  |   |            | Г          | Yes              | X        | No    |  |  |
| Pai        | t IV Escrow and Custodial Arrange   |                       |                       |                  |   |            |            |                  |          | _ INO |  |  |
| ı u        | reported an amount on Form 990, Par   |                       | ie ii trie organizati | on answered      | res to                                  | FOIIII 990 | J, Fait iv | v, iii le 9, 0i  |          |       |  |  |
| 12         | Is the organization an agent, trustee, custodi  |                       | any for contribution  | one or other as  | eate not                                | included   | 1          |                  |          |       |  |  |
| ıa         |   |                       |                       |                  |   |            |            | Yes              |          | No    |  |  |
| h          | on Form 990, Part X?  If "Yes," explain the arrangement in Part XIII a  |                       |                       |                  |   |            | ∟          | 162              |          | _ INO |  |  |
| D          | ir res, explain the arrangement in Part Allia   | and complete the foil | owing table.          |                  |   |            |            | Amoun            |          |       |  |  |
| _          | Deginning belongs   |                       |                       |                  |   | 1c         |            | Amoun            |          |       |  |  |
|            | Beginning balance   |                       |                       |                  |   |            |            |                  |          |       |  |  |
|            | Additions during the year   |                       |                       |                  |   |            |            |                  |          |       |  |  |
| f          | Distributions during the year   |                       |                       |                  |   |            |            |                  |          |       |  |  |
|            | Ending balance  Did the organization include an amount on Fo  |                       |                       |                  |   |            |            | Yes              |          | No    |  |  |
|            | If "Yes," explain the arrangement in Part XIII.   |                       |                       |                  |   |            |            | 163              |          |       |  |  |
| Pai        |   |                       |                       |                  |   | 0.         |            |                  |          |       |  |  |
|            |   | (a) Current year      | (b) Prior year        | (c) Two year     |   | (d) Three  | vears bac  | ck (e) Four      | vears    | back  |  |  |
| <b>1</b> a | Beginning of year balance   | 10,521,976.           | 9,063,084             | , ,              | 5,795.                                  |            | 548,44     |                  |          | 697.  |  |  |
|            | Contributions   |                       | 479,899               | _                | ,403.                                   |            | ,          |                  | 746,409. |       |  |  |
| c          | Net investment earnings, gains, and losses  | -23,583.              | 1,279,274             |                  | ,931.                                   |            | 158,72     | 3.               |          |       |  |  |
| d          |   |                       | _,,                   | 1                | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |            | ,          |                  |          |       |  |  |
|            | Other expenditures for facilities   |                       |                       | +                |   |            |            |                  |          |       |  |  |
| ·          | and programs  | 259,680.              | 300,281               | 226              | 5,045.                                  |            | 750,37     | 0.               | 50       | 000.  |  |  |
| f          | Administrative expenses   |                       | ,                     | 1                | ,                                       |            | , ,        | 250,664.         |          |       |  |  |
| g          | End of year balance   | 10,238,713.           | 10,521,976            | 9 063            | 3,084.                                  | 7 9        | 956,79     | 5. 8             |          | 442.  |  |  |
| 2          | Provide the estimated percentage of the curr  |                       |                       |                  | , •                                     | .,.        | ,          | - •   -          | , ,      | •     |  |  |
| a          | Board designated or quasi-endowment   | ent year end balance  | %                     | (a)) Held as.    |   |            |            |                  |          |       |  |  |
| b          | Permanent endowment > 100.00  | %                     |                       |                  |   |            |            |                  |          |       |  |  |
|            | Temporarily restricted endowment  |                       |                       |                  |   |            |            |                  |          |       |  |  |
| ·          | The percentages in lines 2a, 2b, and 2c shou  |                       |                       |                  |   |            |            |                  |          |       |  |  |
| 3a         | Are there endowment funds not in the posse  | •                     | tion that are held    | and administe    | red for th                              | he organi  | ization    |                  |          |       |  |  |
| -          | by:   | oolon or the organiza | norr triat are riora  | arra aarriinioto | 100 101 11                              | no organi  | Zatioii    | Ī                | Yes      | No    |  |  |
|            | (i) unrelated organizations   |                       |                       |                  |   |            |            | 3a(i)            |          | X     |  |  |
|            | (ii) related organizations  |                       |                       |                  |   |            |            | ····             |          | Х     |  |  |
| b          | If "Yes" to 3a(ii), are the related organizations   |                       |                       |                  |   |            |            |                  |          |       |  |  |
| 4          | Describe in Part XIII the intended uses of the  |                       |                       |                  |   |            |            | 52               |          |       |  |  |
| Pai        | t VI Land, Buildings, and Equipm  |                       | William Lando.        |                  |   |            |            |                  |          |       |  |  |
|            | Complete if the organization answered   |                       | Part IV. line 11a.    | See Form 990.    | Part X.                                 | line 10.   |            |                  |          |       |  |  |
|            | Description of property   | (a) Cost or ot        | <u> </u>              | st or other      |   | ccumulat   | ed         | (d) Boo          | k valu   | e     |  |  |
|            | becompared property   | basis (investm        |                       | s (other)        |   | oreciation |            | ( <b>u</b> ) 200 | it valu  | •     |  |  |
|            | Land  |                       | ,                     | ` '              |   |            |            |                  |          |       |  |  |
|            | Buildings   |                       | 21.9                  | 20,275.          | 4.8                                     | 348,1      | 60.        | 17,07            | 2,1      | 15.   |  |  |
|            | Leasehold improvements  |                       |                       | 64,506.          |   | 39,3       |            |                  | 5,1      |       |  |  |
|            | Equipment   |                       |                       | 71,226.          | Ē                                       | 532,6      |            |                  |          | 99.   |  |  |
|            | Other   |                       |                       | 74,337.          |   | 459,2      |            | 5,91             |          |       |  |  |
|            | Add lines 1a through 1a (Column (d) must ex   |                       |                       |                  |   |            | -          |                  |          | 56.   |  |  |

| Part VII | Investments - | Other Securities. |
|----------|---------------|-------------------|

| Part VIII investments - Other Securities.                            |                              |   |
|--|------------------------------|---|
| Complete if the organization answered "Yes"                          | to Form 990, Part IV, line 1 | 11b. See Form 990, Part X, line 12.                       |
| (a) Description of security or category (including name of security) | (b) Book value               | (c) Method of valuation: Cost or end-of-year market value |
| (1) Financial derivatives  |                              |   |
| (2) Closely-held equity interests                                    |                              |   |
| (3) Other  |                              |   |
| (A) KING STREET LIMITED  |                              |   |
| (B) PARTNERSHIP  | 2,820,632.                   | END-OF-YEAR MARKET VALUE                                  |
| (C) ALTERNATIVE INVESTMENTS  | 2,927,679.                   | END-OF-YEAR MARKET VALUE                                  |
| (D)  |                              |   |
| (E)  |                              |   |
| (F)  |                              |   |
| (G)  |                              |   |
| (H)  |                              |   |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)     | 5,748,311.                   |   |
| Part VIII Investments - Program Related.                             |                              |   |
| Complete if the organization answered "Yes"                          | to Form 990, Part IV, line 1 | 11c. See Form 990, Part X, line 13.                       |
| (a) Description of investment  | (b) Book value               | (c) Method of valuation: Cost or end-of-year market value |
| (1)  |                              |   |
| (2)  |                              |   |
| (3)  |                              |   |
| (4)  |                              |   |
| (5)  |                              |   |
| (6)  |                              |   |
| (7)  |                              |   |

### Part IX Other Assets.

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

(8) (9)

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

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

### Part X Other Liabilities.

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

| 1.     | (a) Description of liability                                | (b) Book value |
|--------|---|----------------|
| (1)    | Federal income taxes  |                |
| (2)    | DEFERED RENT EXPENSE  | 49,245.        |
| (3)    |   |                |
| (4)    |   |                |
| (5)    |   |                |
| (6)    |   |                |
| (7)    |   |                |
| (8)    |   |                |
| (9)    |   |                |
| Total. | (Column (b) must equal Form 990, Part X, col. (B) line 25.) | 49,245.        |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

| Scriedule D | (i oiiii əəo | 12014       | 110000    | <u> </u> |         | O = 1 = 1 | <u> </u> |          | 10111     |               |       |     |
|-------------|--------------|-------------|-----------|----------|---------|-----------|----------|----------|-----------|---------------|-------|-----|
| Part XI     | Recond       | ciliation o | f Revenue | per /    | Audited | d Financ  | cial (   | Statem   | ents With | Revenue per I | Retur | 'n. |
|             | 0            | :4 41       |           |          |         | OOO D     | 1\ /     | 1 1: 10- |           |               |       |     |

|   | Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.                   |    |             |    |             |
|---|---|----|-------------|----|-------------|
| 1 | Total revenue, gains, and other support per audited financial statements                      |    |             | 1  | 23,432,580. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12:                           |    |             |    |             |
| а | Net unrealized gains (losses) on investments  | 2a | -1,275,766. |    |             |
| b | Donated services and use of facilities  | 2b | 177,025.    |    |             |
| С | Recoveries of prior year grants   | 2c |             |    |             |
| d | Other (Describe in Part XIII.)  | 2d | 212,397.    |    |             |
| е | Add lines 2a through 2d   |    |             | 2e | -886,344.   |
| 3 | Subtract line 2e from line 1  |    |             | 3  | 24,318,924. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1:                          |    |             |    |             |
| а | Investment expenses not included on Form 990, Part VIII, line 7b                              | 4a | 123,079.    |    |             |
| b | Other (Describe in Part XIII.)  | 4b | 59,417.     |    |             |
| С | Add lines <b>4a</b> and <b>4b</b>   |    |             | 4c | 182,496.    |
|   | Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12.) |    |             | 5  | 24,501,420. |
|   |   |    | · · · · · · |    |             |

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

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

|   | complete in the organization and the total control of the control |    |          |    |             |
|---|---|----|----------|----|-------------|
| 1 | Total expenses and losses per audited financial statements  |    |          | 1  | 15,774,253. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25:   | _  |          |    |             |
| а | Donated services and use of facilities  | 2a | 177,025. |    |             |
|   | Prior year adjustments  | 2b |          |    |             |
|   | Other losses  | 2c |          |    |             |
| d | Other (Describe in Part XIII.)  | 2d | 212,397. |    |             |
| е | Add lines 2a through 2d   |    |          | 2e | 389,422.    |
| 3 | Subtract line 2e from line 1  |    |          | 3  | 15,384,831. |
| 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 | 123,079. |    |             |
| b | Other (Describe in Part XIII.)  | 4b |          |    |             |
| С | Add lines 4a and 4b   |    |          | 4c | 123,079.    |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  |    |          | 5  | 15,507,910. |

#### Part XIII Supplemental Information.

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

#### PART III, LINE 1A:

THE MUSEUM'S COLLECTION, WHICH WAS ACQUIRED THROUGH PURCHASES AND

CONTRIBUTIONS SINCE ITS INCEPTION, IS NOT RECOGNIZED AS AN ASSET ON THE

ACCOMPANYING BALANCE SHEET. COLLECTION ITEMS ARE EXPENSED WHEN ACQUIRED.

CONTRIBUTED COLLECTION ITEMS ARE NOT REFLECTED IN THE ACCOMPANYING

FINANCIAL STATEMENTS. DETAILED INVENTORY RECORDS, HOWEVER, ARE MAINTAINED

FOR COLLECTIONS. THE VALUE OF THE COLLECTION IS NOT READILY DETERMINABLE

AND THE MUSEUM DOES NOT INSURE THE COLLECTION FOR THE COST OF ITS

REPLACEMENT.

#### PART III, LINE 4:

THE MUSEUM HAS VARIOUS COLLECTIONS WHICH IT USES FOR ITS DIFFERENT

10-01-1

Part XIII | Supplemental Information (continued)

VARIOUS PROJECTS AT THE MUSEUM

EXHIBITIONS AND PROGRAMS THROUGHOUT THE YEAR.

PART V, LINE 4:

THE MUSEUM HAS DONOR-RESTRICTED ENDOWMENT FUNDS ESTABLISHED TO HELP FUND

PART X, LINE 2:

UNCERTAINTY IN INCOME TAXES - THE MUSEUM HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. PERIODS ENDING JUNE 30, 2012 AND SUBSEQUENT REMAIN SUBJECT TO EXAMINATION BY APPLICABLE TAXING AUTHORITIES.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES INCLUDED ON FORM 990, PART VII, LINE 6B 212,397.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

SALE OF COLLECTION MATERIAL 59,417.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES INCLUDED ON FORM 990, PART VII, LINE 6B 212,397.

### SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

### Statement of Activities Outside the United States

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

➤ Attach to Form 990.

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

2014
Open to Public Inspection

Name of the organization

**Employer identification number** 

|      | SEUM OF THE C  |                                     |   |  | 13-162409  |  |  |  |  |  |  |  |
|------|--|-------------------------------------|---|--|--|--|--|--|--|--|--|--|
| Pa   |  |                                     | ctivities Ou  | tside the United States. Comple  | ete if the organization answered "   | Yes" on  |  |  |  |  |  |  |
|      | Form 990, Part IV, line 14b.  1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, |                                     |   |  |  |  |  |  |  |  |  |  |
| 1    |  |                                     |   |  |  |  |  |  |  |  |  |  |
|      | the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?                             |                                     |   |  |  |  |  |  |  |  |  |  |
| 2    |  |                                     |   |  |  |  |  |  |  |  |  |  |
|      | United States.   |                                     |   |  |  |  |  |  |  |  |  |  |
| _3_  |  | 1                                   |   | an be duplicated if additional space is r  |  |  |  |  |  |  |  |  |
|      | (a) Region   | (b) Number of offices in the region | (c) Number of<br>employees,<br>agents, and<br>independent<br>contractors<br>in region | (d) Activities conducted in region<br>(by type) (e.g., fundraising, program<br>services, investments, grants to<br>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<br>expenditures<br>for and<br>investments<br>in region |  |  |  |  |  |  |
|      |  |                                     |   |  |  |  |  |  |  |  |  |  |
| CENT | TRAL AMERICA AND   |                                     |   |  |  |  |  |  |  |  |  |  |
| THE  | CARIBBEAN -  | 0                                   | 0   | INVESTMENTS  |  | 5,748,311.   |  |  |  |  |  |  |
|      |  |                                     |   |  |  |  |  |  |  |  |  |  |
|      |  |                                     |   |  |  |  |  |  |  |  |  |  |
|      |  |                                     |   |  |  |  |  |  |  |  |  |  |
|      |  |                                     |   |  |  |  |  |  |  |  |  |  |
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| 3 a  | Sub-total  | 0                                   | 0   |  |  | 5,748,311.   |  |  |  |  |  |  |
|      | Total from continuation sheets to Part I   | 0                                   |   |  |  | 0.   |  |  |  |  |  |  |
| С    | Totals (add lines 3a   | 0                                   |   |  |  |  |  |  |  |  |  |  |
|      | and 3b) For Paperwork Reduct   |                                     | l   | tions for Form 900   | Cahadula F   | 5,748,311.<br>(Form 990) 2014                                    |  |  |  |  |  |  |
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3 Enter total number of other organizations or entities

| Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. |  |            |  |                          |                                 |   |  |   |  |  |  |  |  |
|---|--|------------|--|--------------------------|---------------------------------|---|--|---|--|--|--|--|--|
| recipient wno rec   |  |            |  |                          |                                 |   |  |   |  |  |  |  |  |
| 1 (a) Name of organization  | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant   | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of<br>non-cash<br>assistance | (h) Description<br>of non-cash<br>assistance | (i) Method of valuation (book, FMV, appraisal, other) |  |  |  |  |  |
|   |  |            |  |                          |                                 |   |  |   |  |  |  |  |  |
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|   |  |            | recognized as charities by the<br>n 501(c)(3) equivalency letter |                          | , recognized as tax-e           |   |  | 1   |  |  |  |  |  |

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

| Part III can be duplicated if a | dditional space is neede | d.                       |                          |                                 |   |  |  |
|---------------------------------|--------------------------|--------------------------|--------------------------|---------------------------------|---|--|--|
| (a) Type of grant or assistance | (b) Region               | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of<br>non-cash<br>assistance | (g) Description of non-cash assistance | (h) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) |
|                                 |                          |                          |                          |                                 |   |  |  |
|                                 |                          |                          |                          |                                 |   |  |  |
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Page 4

# Schedule F (Form 990) 2014 Part IV Foreign Forms

| 1 | Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)  | X Yes | □ No |
|---|---|-------|------|
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990) | Yes   | X No |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)  | X Yes | ☐ No |
| 4 | Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)   | X Yes | □ No |
| 5 | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)  | Yes   | X No |
| 6 | Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)  | Yes   | X 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. |
|        | (estimated number of recipients), as applicable. Also complete this part to provide any additional information.   |
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#### **SCHEDULE G**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

**Supplemental Information Regarding Fundraising 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.

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not

► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

MUSEUM OF THE CITY OF NEW YORK

Employer identification number

13-1624098

| required to complete this par                    | t.                                      |  |         |                          |                               |                                      |
|--|---|--|---------|--------------------------|-------------------------------|--------------------------------------|
| 1 Indicate whether the organization rais         | sed funds through any of the following  | ng acti  | /ities. | Check all that apply     |                               |                                      |
| a X Mail solicitations                           |   |  |         | overnment grants         |                               |                                      |
| <b>b</b> X Internet and email solicitations      |   |  |         |                          |                               |                                      |
|  |   |  | -       | -                        |                               |                                      |
| c X Phone solicitations                          | g X Special                             | tunara   | ising   | events                   |                               |                                      |
| <b>d</b> In-person solicitations                 |   |  |         |                          |                               |                                      |
| 2 a Did the organization have a written of       | or oral agreement with any individual   | (includ  | ling o  | fficers, directors, trus |                               |                                      |
| key employees listed in Form 990, P              | art VII) or entity in connection with p | rofess   | onal f  | undraising services?     | X Yes                         | L No                                 |
| <b>b</b> If "Yes," list the ten highest paid ind | ividuals or entities (fundraisers) purs | uant to  | agre    | ements under which       | the fundraiser is to I        | be                                   |
| compensated at least \$5,000 by the              |   |  | -       |                          |                               |                                      |
|  |   |  |         | •                        |                               |                                      |
| (2.1)  |   | (iii)  | Did     | <i>"</i> > 0             | (v) Amount paid               | (vi) Amount naid                     |
| (i) Name and address of individual               | (ii) Activity                           | (iii) Did<br>fundraiser<br>have custody<br>or control of<br>contributions? |         | (iv) Gross receipts      | to (or retained by)           | (vi) Amount paid to (or retained by) |
| or entity (fundraiser)                           |   |  |         | from activity            | fundraiser listed in col. (i) | organization                         |
|  |   | L  |         |                          |                               |                                      |
| MARK GILBERTSON - 22 EAST                        |   | Yes  | No      |                          |                               |                                      |
| 81ST ST, NEW YORK, NY 10028                      | DIRECTOR'S COUNCIL EVENTS               |  | Х       | 1,102,484.               | 65,000.                       | 1,037,484.                           |
|  |   |  |         |                          |                               |                                      |
|  |   |  |         |                          |                               |                                      |
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|  |   |  |         |                          |                               |                                      |
| Total  |   |  |         | 1,102,484.               | 65,000.                       | 1,037,484.                           |
|  | an in registered or licensed to collect |  | ution   |                          | ,                             |                                      |
| 3 List all states in which the organization      | on is registered or licensed to solicit | CONTIND  | utions  | or has been nouned       | ı it is exempt irom re        | egistration                          |
| or licensing.                                    |   |  |         |                          |                               |                                      |
| NY   |   |  |         |                          |                               |                                      |
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432081 08-28-14 Schedule G (Form 990 or 990-EZ) 2014

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

Schedule G (Form 990 or 990-EZ) 2014 MUSEUM OF THE CITY OF NEW YORK 13-1624098 Page 2 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events CHAIRMAN'S (add col. (a) through LEADERSHIP AWINTER BALL 4 col. (c)) (event type) (event type) (total number) 1,324,930 618,645. 1,170,107. 3,113,682. 1 Gross receipts 1,174,680 526,845. 1,020,957. 2,722,482. 2 Less: Contributions 150,250 91,800. 149,150. 391,200. Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expense 87,700. 84,821. 14,340. 186,861. 6 Rent/facility costs 63,289. 94,726. 106,139. 264,154. **7** Food and beverages 17,350. 51,143. 81,712 150,205. 8 Entertainment 6,995. 26,619. 8,455. 11,169. 9 Other direct expenses ..... 627,839. 10 Direct expense summary. Add lines 4 through 9 in column (d) -236,639. 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue .. 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes % Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? No **b** If "No," explain:

Schedule G (Form 990 or 990-EZ) 2014

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

**b** If "Yes," explain:

| Sch | edule G (Form 990 or 990-EZ) 2014 MUSEUM OF THE CITY OF NEW YORK 13-   | 1624098         | Page 3      |
|-----|--|-----------------|-------------|
| 11  | Does the organization conduct gaming activities with nonmembers?   | Yes             | ☐ No        |
| 12  | Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed       |                 |             |
|     | to administer charitable gaming?   | Yes             | ☐ No        |
| 13  | Indicate the percentage of gaming activity conducted in:   |                 |             |
|     | The organization's facility  | 13a             | %           |
|     |  |                 | <del></del> |
|     | An outside facility  | 130             | 90          |
| 14  | Enter the name and address of the person who prepares the organization's gaming/special events books and records:          |                 |             |
|     | Name   |                 |             |
|     | Address  |                 |             |
| 15a | Does the organization have a contract with a third party from whom the organization receives gaming revenue?               | Yes             | ☐ No        |
| b   | If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount                              |                 |             |
|     | of gaming revenue retained by the third party >\$  |                 |             |
| c   | If "Yes," enter name and address of the third party:   |                 |             |
| _   | The root, of the final address of the time party.  |                 |             |
|     | Name   |                 |             |
|     | Address ▶  |                 |             |
| 16  | Gaming manager information:  |                 |             |
| 10  | Garning manager information.   |                 |             |
|     | Name   |                 |             |
|     | Gaming manager compensation ▶ \$   |                 |             |
|     |  |                 |             |
|     | Description of services provided   |                 |             |
|     |  |                 |             |
|     |  |                 |             |
|     |  |                 |             |
|     | ☐ Director/officer ☐ Employee ☐ Independent contractor   |                 |             |
|     |  |                 |             |
| 17  | Mandatory distributions:   |                 |             |
| а   | Is the organization required under state law to make charitable distributions from the gaming proceeds to                  |                 |             |
|     | retain the state gaming license?   | … └── Yes       | └── No      |
| 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 ▶ \$  |                 |             |
| Pa  | rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, | lines 9, 9b, 10 | b. 15b.     |
|     | 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).                               | , ,             | , ,         |
|     | 100, 10, and 110, as applicable. The provide any additional information (coo include to 10).                               |                 |             |
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| Schedule G | (Form 990 or 990-EZ)                       | MUSEUM O          | F THE | CITY | OF | NEW | YORK | 13-1624098 | Page 4 |
|------------|--|-------------------|-------|------|----|-----|------|------------|--------|
| Part IV    | G (Form 990 or 990-EZ)  Supplemental Infor | rmation (continue | ed)   |      |    |     |      |            |        |
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## **SCHEDULE J** (Form 990)

# **Compensation Information**

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

Compensated Employees

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

MUSEUM OF THE CITY OF NEW YORK

Employer identification number 13-1624098

| Pa         | art I Questions Regarding Compensation   |          |     |          |
|------------|--|----------|-----|----------|
|            |  |          | Yes | No       |
| <b>1</b> a | 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  |          |     |          |
|            | Travel for companions Payments for business use of personal residence  |          |     |          |
|            | Tax indemnification and gross-up payments  Health or social club dues or initiation fees   |          |     |          |
|            | Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)  |          |     |          |
|            |  |          |     |          |
| b          | If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or  |          |     |          |
|            | reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain   | 1b       |     |          |
| 2          | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,   |          |     |          |
|            | trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?  | 2        |     |          |
| _          |  |          |     |          |
| 3          | Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's  |          |     |          |
|            | CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to   |          |     |          |
|            | establish compensation of the CEO/Executive Director, but explain in Part III.   |          |     |          |
|            | Compensation committee Written employment contract   |          |     |          |
|            | Independent compensation consultant  Compensation survey or study  |          |     |          |
|            | Form 990 of other organizations  X Approval by the board or compensation committee   |          |     |          |
|            | Device the control of |          |     |          |
| 4          | 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:  | 40       |     | х        |
| a          | Receive a severance payment or change-of-control payment?  Participate in, or receive payment from, a supplemental nonqualified retirement plan?   | 4a<br>4b |     | X        |
| D          | Participate in, or receive payment from, an equity-based compensation arrangement?   | 4c       |     | X        |
| ·          | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.  | 70       |     |          |
|            | The story of lines 4a o, list the persons and provide the applicable amounts for each term in a cini.  |          |     |          |
|            | Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.   |          |     |          |
| 5          | 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:   |          |     |          |
| а          | The organization?  | 5a       |     | Х        |
|            | Any related organization?  | 5b       |     | Х        |
|            | If "Yes" to line 5a or 5b, describe in Part III.   |          |     |          |
| 6          | 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:   |          |     |          |
| а          | The organization?  | 6a       |     | X        |
| b          | Any related organization?  | 6b       |     | Х        |
|            | If "Yes" to line 6a or 6b, describe in Part III.   |          |     |          |
| 7          | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments  |          |     |          |
|            | not described in lines 5 and 6? If "Yes," describe in Part III   | 7        |     | X        |
| 8          | 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 in Part III  | 8        |     | X        |
| 9          | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in   |          |     |          |
|            | Regulations section 53.4958-6(c)?  | 9        |     | <u> </u> |

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

Schedule J (Form 990) 2014

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

For each individual whose compensation must be reported 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.

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

|                                  |      | (B) Breakdown of      | W-2 and/or 1099-MI     | SC compensation        | (C) Retirement and          | (D) Nontaxable | (E) Total of columns | (F) Compensation                      |
|----------------------------------|------|-----------------------|------------------------|------------------------|-----------------------------|----------------|----------------------|---------------------------------------|
| (A) Name and Title               |      | (i) Base compensation | (ii) Bonus & incentive | (iii) Other reportable | other deferred compensation | benefits       | (B)(i)-(D)           | in column (B)<br>reported as deferred |
|                                  |      | compensation          | compensation           | compensation           |                             |                |                      | in prior Form 990                     |
| (1) SUSAN HENSHAW JONES          | (i)  | 391,988.              | 0.                     | 0.                     | 35,279.                     | 0.             | 427,267.             | 0.                                    |
| PRESIDENT & DIRECTOR             | (ii) | 0.                    | 0.                     | 0.                     | 0.                          | 0.             | 0.                   | 0.                                    |
| (2) BRIAN HERRIN (RESIGNED 2/15) | (i)  | 158,246.              | 0.                     | 0.                     | 14,242.                     | 9,156.         | 181,644.             | 0.                                    |
| CHIEF FINANCIAL OFFICER          | (ii) | 0.                    | 0.                     | 0.                     | 0.                          | 0.             | 0.                   | 0.                                    |
| (3) SARAH HENRY                  | (i)  | 207,204.              | 0.                     | 0.                     | 18,648.                     | 2,789.         | 228,641.             | 0.                                    |
| DEPUTY DIRECTOR AND CHIEF        | (ii) | 0.                    | 0.                     | 0.                     | 0.                          | 0.             | 0.                   | 0.                                    |
| (4) SUSAN MADDEN                 | (i)  | 216,580.              | 0.                     | 0.                     | 19,492.                     | 13,354.        |                      | 0.                                    |
| SVP OF EXTERNAL AFFAIRS          | (ii) | 0.                    | 0.                     | 0.                     | 0.                          | 0.             | 0.                   | 0.                                    |
| (5) PATRICIA ZEDALIS             | (i)  | 134,536.              | 0.                     | 0.                     | 12,108.                     | 12,594.        |                      | 0.                                    |
| PROJECT MANAGER                  | (ii) | 0.                    | 0.                     | 0.                     | 0.                          | 0.             | 0.                   | 0.                                    |
|                                  | (i)  |                       |                        |                        |                             |                |                      |                                       |
|                                  | (ii) |                       |                        |                        |                             |                |                      |                                       |
|                                  | (i)  |                       |                        |                        |                             |                |                      |                                       |
|                                  | (ii) |                       |                        |                        |                             |                |                      |                                       |
|                                  | (i)  |                       |                        |                        |                             |                |                      |                                       |
|                                  | (ii) |                       |                        |                        |                             |                |                      |                                       |
|                                  | (i)  |                       |                        |                        |                             |                |                      |                                       |
|                                  | (ii) |                       |                        |                        |                             |                |                      |                                       |
|                                  | (i)  |                       |                        |                        |                             |                |                      |                                       |
|                                  | (ii) |                       |                        |                        |                             |                |                      |                                       |
|                                  | (i)  |                       |                        |                        |                             |                |                      |                                       |
|                                  | (ii) |                       |                        |                        |                             |                |                      |                                       |
|                                  | (i)  |                       |                        |                        |                             |                |                      |                                       |
|                                  | (ii) |                       |                        |                        |                             |                |                      |                                       |
|                                  | (i)  |                       |                        |                        |                             |                |                      |                                       |
|                                  | (ii) |                       |                        |                        |                             |                |                      |                                       |
|                                  | (i)  |                       |                        |                        |                             |                |                      |                                       |
|                                  | (ii) |                       |                        |                        |                             |                |                      |                                       |
|                                  | (i)  |                       |                        |                        |                             |                |                      |                                       |
|                                  | (ii) |                       |                        |                        |                             |                |                      | _                                     |
|                                  | (i)  |                       |                        |                        |                             |                |                      | _                                     |
|                                  | (ii) |                       |                        |                        |                             |                |                      |                                       |

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

Name of the organization

► 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.

MUSEUM OF THE CITY OF NEW YORK

**Employer identification number** 13-1624098

| (a) (b) Number of Contributions or Interest of Art - Works of art  Art - Works of art  Art - Fractional interests  Books and publications  Clothing and household goods  Cars and other vehicles  Boats and planes  Intellectual property  Securities - Publicly traded  Securities - Partnership, LLC, or trust interests  (a) (b) Number of Noncash contribution amounts on trust interest on the position of the position o |    |
|--|----|
| 2 Art - Historical treasures 3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded 10 Securities - Closely held stock 11 Securities - Partnership, LLC, or  | ;  |
| 3 Art · Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded X 11 2,566,396 • FMV 10 Securities - Closely held stock 11 Securities - Partnership, LLC, or  |    |
| 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded X 11 2,566,396 FMV 10 Securities - Closely held stock 11 Securities - Partnership, LLC, or   |    |
| 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded X 11 2,566,396. FMV 10 Securities - Closely held stock 11 Securities - Partnership, LLC, or   |    |
| 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded X 11 2,566,396. FMV  10 Securities - Closely held stock 11 Securities - Partnership, LLC, or   |    |
| 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded X 11 2,566,396. FMV  10 Securities - Closely held stock 11 Securities - Partnership, LLC, or   |    |
| 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded X 11 2,566,396. FMV  10 Securities - Closely held stock 11 Securities - Partnership, LLC, or   |    |
| 8 Intellectual property 9 Securities - Publicly traded X 11 2,566,396. FMV  10 Securities - Closely held stock 11 Securities - Partnership, LLC, or  |    |
| 9 Securities - Publicly traded X 11 2,566,396. FMV  10 Securities - Closely held stock  11 Securities - Partnership, LLC, or   |    |
| 11 Securities - Partnership, LLC, or   |    |
|  |    |
| ti dot intologio   |    |
| 12 Securities - Miscellaneous  |    |
| 13 Qualified conservation contribution - Historic structures   |    |
| 14 Qualified conservation contribution - Other   |    |
| 15 Real estate - Residential   |    |
| 16 Real estate - Commercial  |    |
| 17 Real estate - Other   |    |
| 18 Collectibles  |    |
| 19 Food inventory  |    |
| 20 Drugs and medical supplies  |    |
| 21 Taxidermy   |    |
| 22 Historical artifacts  |    |
| 23 Scientific specimens  |    |
| 24 Archeological artifacts   |    |
| 25 Other ► (ITEMS FOR SPE) X 17 81,580. COST OF THE ITEMS  |    |
| 26 Other ▶ ()  |    |
| 27 Other ()  |    |
| 28 Other ▶ ( )   |    |
| 29 Number of Forms 8283 received by the organization during the tax year for contributions   |    |
| for which the organization completed Form 8283, Part IV, Donee Acknowledgement   |    |
| Yes  | No |
| 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it   |    |
| must hold for at least three years from the date of the initial contribution, and which is not required to be used for   | Х  |
| exempt purposes for the entire holding period?  30a  |    |
| b If "Yes," describe the arrangement in Part II.   | Х  |
| Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?  |    |
| 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?  32a 32a 32a 32a  | Х  |
| b If "Yes," describe in Part II.   |    |
| 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,  |    |
| describe in Part II.   |    |

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

Schedule M (Form 990) (2014)

432142 08-12-14

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

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

2014
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

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

MUSEUM OF THE CITY OF NEW YORK

Employer identification number 13-1624098

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE MUSEUM OF THE CITY OF NEW YORK CELEBRATES AND INTERPRETS THE CITY,

EDUCATING THE PUBLIC ABOUT ITS DISTINCTIVE CHARACTER, ESPECIALLY ITS

HERITAGE OF DIVERSITY, OPPORTUNITY, AND PERPETUAL TRANSFORMATION.

FOUNDED IN 1923 AS A PRIVATE, NONPROFIT CORPORATION, THE MUSEUM

CONNECTS THE PAST, PRESENT, AND FUTURE OF NEW YORK CITY. IT SERVES THE

PEOPLE OF NEW YORK AND VISITORS FROM AROUND THE WORLD THROUGH

EXHIBITIONS, SCHOOL AND PUBLIC PROGRAMS, PUBLICATIONS, AND COLLECTIONS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE MUSEUM OF THE CITY OF NEW YORK CELEBRATES AND INTERPRETS THE CITY,

EDUCATING THE PUBLIC ABOUT ITS DISTINCTIVE CHARACTER, ESPECIALLY ITS

HERITAGE OF DIVERSITY, OPPORTUNITY, AND PERPETUAL TRANSFORMATION.

FOUNDED IN 1923 AS A PRIVATE, NONPROFIT CORPORATION, THE MUSEUM

CONNECTS THE PAST, PRESENT, AND FUTURE OF NEW YORK CITY. IT SERVES THE

PEOPLE OF NEW YORK AND VISITORS FROM AROUND THE WORLD THROUGH

EXHIBITIONS, SCHOOL AND PUBLIC PROGRAMS, PUBLICATIONS, AND COLLECTIONS.

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

THE EXHIBITION'S LAVISH DISPLAY INCLUDES COSTUMES, JEWELRY, PORTRAITS,

SILVER OBJECTS, WOMEN'S AND MEN'S ACCESSORIES, AND DECORATIVE

FURNISHINGS, ALL CREATED BETWEEN THE MID-1870S AND EARLY 20TH CENTURY.

GILDED NEW YORK DEPICTS AN ERA WHEN THE NEW AMERICAN ARISTOCRACY

DISPLAYED ITS WEALTH IN STORIED BALLS IN FIFTH AVENUE MANSIONS AND

HOTELS, SHOWN IN DIGITIZED VINTAGE PHOTOGRAPHS PRESENTED ON MONITORS

OUTSIDE THE GALLERY. DURING THESE YEARS, THE UNITED STATES-AND ITS

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2014)

432211 08-27-14 Name of the organization MUSEUM OF THE CITY OF NEW YORK **Employer identification number** 13-1624098

CULTURAL CAPITAL, NEW YORK CITY-ACHIEVED A NEW LEVEL OF SOPHISTICATION IN PAINTING, SCULPTURE, ARCHITECTURE, AND THE DECORATIVE ARTS, ENABLING THE NATION TO COMPETE FOR THE FIRST TIME ON A WORLD STAGE.

THE TIFFANY & CO. FOUNDATION GALLERY AND THE INSTALLATION OF GILDED NEW YORK WERE DESIGNED BY NEW YORK-BASED WILLIAM T. GEORGIS ARCHITECTS. THE GALLERY'S DESIGN AND CONSTRUCTION WERE MADE POSSIBLE THROUGH A GRANT FROM THE TIFFANY & CO. FOUNDATION. GILDED NEW YORK WAS ORGANIZED BY DONALD ALBRECHT, CURATOR OF ARCHITECTURE AND DESIGN; INDEPENDENT CURATOR JEANNINE FALINO; AND PHYLLIS MAGIDSON, CURATOR OF COSTUMES AND TEXTILES.

ACTIVIST NEW YORK (MAY 4, 2012 - ONGOING)

ACTIVIST NEW YORK IS THE INAUGURAL EXHIBITION IN THE PUFFIN FOUNDATION GALLERY. THIS ONGOING INSTALLATION EXPLORES THE DRAMA OF SOCIAL ACTIVISM IN NEW YORK CITY FROM THE 17TH CENTURY TO THE PRESENT IN A CONTINUALLY CHANGING SERIES OF CASE STUDIES AND OBJECTS. DURING THE BIENNIAL PERIOD, A NEW MODULE WAS ADDED ON ACTIVIST LITERATURE OF THE 1930S. VISITORS ARE ENCOURAGED TO HELP KEEP THE EXHIBITION UP TO DATE BY SUBMITTING THEIR OWN ACCOUNTS AND IMAGES OF ACTIVISM IN THE CITY TODAY. GENEROUS SUPPORT FROM THE PUFFIN FOUNDATION HAS PROVIDED FOR A DEDICATED PUFFIN CURATOR OF SOCIAL ACTIVISM AT THE CITY MUSEUM.

EXHIBTIONS OPENED IN FY2015:

MAC CONNER: A NEW YORK LIFE (SEPT 10, 2014 - FEB 1, 2015)

MCCAULEY ("MAC") CONNER (BORN 1913) GREW UP ADMIRING THE NORMAN ROCKWELL MAGAZINE COVERS IN HIS FATHER'S GENERAL STORE. HE ARRIVED IN NEW YORK AS A YOUNG MAN TO WORK ON WARTIME NAVY PUBLICATIONS AND STAYED

ON TO MAKE A CAREER IN THE CITY'S VIBRANT PUBLISHING INDUSTRY. MAC

Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization **Employer identification number** MUSEUM OF THE CITY OF NEW YORK 13-1624098 CONNER: A NEW YORK LIFE PRESENTED NEARLY 100 OF CONNER'S HAND-PAINTED ILLUSTRATIONS FOR ADVERTISING CAMPAIGNS AND WOMEN'S MAGAZINES LIKE REDBOOK AND MCCALL'S, MADE DURING THE YEARS AFTER WORLD WAR II WHEN COMMERCIAL ARTISTS HELPED TO REDEFINE AMERICAN STYLE AND CULTURE. THE EXHIBITION WAS CURATED BY SARAH HENRY, DEPUTY DIRECTOR AND CHIEF CURATOR, WITH DOUGLAS P. DOWD AND TERRY BROWN AND DESIGNED BY STUDIO JOSEPH, AND WAS CO-SPONSORED BY THE MODERN GRAPHIC HISTORY LIBRARY AT WASHINGTON UNIVERSITY IN ST. LOUIS AND THE ROCKWELL CENTER FOR AMERICAN VISUAL STUDIES. FOLLOWING ITS RUN AT THE MUSEUM OF THE CITY OF NEW YORK, THE EXHIBITION TRAVELED TO THE HOUSE OF ILLUSTRATION IN LONDON, ENGLAND, AND IT WILL BE PRESENTED AT THE DELAWARE ART MUSEUM IN 2017. JEFF CHIEN-HSING LIAO'S NEW YORK: ASSEMBLED REALITIES (OCT 15, 2014 -MARCH 15, 2015) ASSEMBLED REALTITES FEATURED MORE THAN 40 WORKS, SOME UP TO 6 FEET IN LENGTH, BY TAIWANESE ARTIST JEFF CHIEN-HSING LIAO, WHO CAME TO NEW YORK CITY AT THE AGE OF 18 TO STUDY PHOTOGRAPHY. PUSHING THE BOUNDARIES OF TRADITIONAL DOCUMENTARY PHOTOGRAPHY, LIAO (B. 1977) CREATES HIS PANORAMAS BY COMBINING MULTIPLE EXPOSURES OF THE SAME LOCATION TAKEN OVER THE COURSE OF SEVERAL HOURS. THE RESULTING COMPOSITE PHOTOGRAPHS ARE OFTEN FANTASTICAL; COMPLEX, HYPER-REAL VIEWS THAT NO SINGLE SHOT-OR THE EYE-COULD CAPTURE. LIAO HAS SPENT THE PAST DECADE HONING HIS DISTINCTIVE STYLE, MAKING IMAGES OF HIS ADOPTED CITY FROM THE GRAND CONCOURSE TO CONEY ISLAND, THE OLD SHEA STADIUM TO THE 72ND STREET SUBWAY. THE EXHIBITION WAS DEVELOPED BY SEAN CORORAN, CURATOR OF PRINTS

THE JEFFERSON LETTERS (OCT 30, 2014 - JAN 6, 2015)

AND PHOTOGRAPHS, AND DESIGNED BY PURE+APPLIED.

08-27-14

Name of the organization

**Employer identification number** 

MUSEUM OF THE CITY OF NEW YORK 13-1624098 IN CONJUNCTION WITH THE 25TH ANNIVERSARY OF NEW YORK CITY HISTORY DAY IN OCTOBER 2014, THE MUSEUM OF THE CITY OF NEW YORK PRESENTED AN INSTALLATION OF EIGHT RARELY SEEN LETTERS WRITTEN BY PRESIDENT THOMAS JEFFERSON TO ROBERT R. LIVINGSTON, A NEW YORK LAWYER AND JEFFERSON'S CHOICE AS "MINISTER PLENIPOTENTIARY" TO FRANCE. IN THIS REMARKABLE CORRESPONDENCE, JEFFERSON AND LIVINGSTON LAID OUT A FOREIGN POLICY THAT DEFINED THE DIRECTION-EVEN THE VERY SHAPE-OF THE EMERGING UNITED STATES. JEFFERSON WROTE ABOUT A NUMBER OF REMARKABLE AND HISTORICALLY IMPORTANT TOPICS, INCLUDING: THE LOUISIANA PURCHASE, THE NAPOLEONIC WARS, EARLY DEBATES OVER THE CONSTITUTION, THE UNEARTHING OF A BURIED MAMMOTH SKELETON IN UPSTATE NEW YORK, THE TECHNICAL DETAILS OF THE FIRST STEAM ENGINE, THE DEVELOPMENT OF NEW CODES FOR DELIVERING SECRET MESSAGES TO AMERICAN DIPLOMATS LIVING OVERSEAS, AND MUCH MORE. CITYSCAPES: HIGHLIGHTS FROM THE PERMANENT COLLECTION (JAN 21 - OCT 6, 2015) CITYSCAPES PRESENTED PAINTINGS DOCUMENTING NEW YORK'S TRANSFORMATION INTO A MODERN METROPOLIS, A PERIOD SPANNING THE 1830S TO THE EVE OF WORLD WAR I. THE EXHIBITION FEATURED RECENTLY CONSERVED WORKS ON CANVAS DONATED BY REAL ESTATE DEVELOPER J. CLARENCE DAVIES AS A FOUNDING GIFT TO THE MUSEUM OF THE CITY OF NEW YORK. EVERYTHING IS DESIGN: THE WORK OF PAUL RAND (FEB 25 -OCT 13, 2015) EVERYTHING IS DESIGN: THE WORK OF PAUL RAND FEATURED MORE THAN 150 ADVERTISEMENTS, POSTERS, CORPORATE BROCHURES, AND BOOKS BY THIS MASTER OF AMERICAN DESIGN. IT WAS RAND WHO MOST CREATIVELY BROUGHT EUROPEAN AVANT-GARDE ART MOVEMENTS SUCH AS CUBISM AND CONSTRUCTIVISM TO GRAPHIC DESIGN IN THE UNITED STATES. HIS PHILOSOPHY, AS EXPRESSED IN HIS WORK AND WRITINGS, INCLUDING THE RECENTLY REPUBLISHED 1947 THOUGHTS ON Schedule O (Form 990 or 990-EZ) (2014) Name of the organization **Employer identification number** MUSEUM OF THE CITY OF NEW YORK 13-1624098 DESIGN, ARGUED THAT VISUAL LANGUAGE SHOULD INTEGRATE FORM AND FUNCTION. BORN IN BROOKLYN IN HUMBLE CIRCUMSTANCES, RAND (1914-1996) LAUNCHED HIS CAREER IN THE 1930S WITH MAGAZINE COVER DESIGN AND, STARTING IN THE EARLY 1940S, HE WORKED AS AN ART DIRECTOR ON MADISON AVENUE, WHERE HE HELPED REVOLUTIONIZE THE ADVERTISING PROFESSION. HE LATER SERVED AS DESIGN CONSULTANT TO LEADING CORPORATIONS LIKE IBM, ABC, UPS, AND STEVE JOBS'S NEXT, FOR WHOM HE CONCEIVED COMPREHENSIVE VISUAL COMMUNICATIONS SYSTEMS, RANGING FROM PACKAGING TO BUILDING SIGNAGE, ALL GROUNDED IN RECOGNIZABLE LOGOS, MANY OF WHICH ARE STILL IN USE TODAY. RAND'S INFLUENCE WAS EXTENDED BY STUDENTS HE TAUGHT AT YALE UNIVERSITY. HIS VISUALLY STIMULATING, YET PROBLEM-SOLVING, APPROACH TO GRAPHIC DESIGN ATTRACTED DEVOTED ADMIRERS DURING HIS OWN LIFETIME AND HE REMAINS INFLUENTIAL TODAY. THE EXHIBITION WAS ORGANIZED BY DONALD ALBRECHT, CURATOR OF ARCHITECTURE AND DESIGN, AND DESIGNED BY MARTIN PERRIN. SOUNDSCAPE NEW YORK (MARCH 10 - JULY 26, 2015) A COLLABORATION BETWEEN KAREN VAN LENGEN, FAIA, WILLIAM KENAN PROFESSOR OF ARCHITECTURE AT THE UNIVERSITY OF VIRGINIA AND FORMER DEAN OF THE UNIVERSITY'S SCHOOL OF ARCHITECTURE, AND ARTIST JAMES WELTY, THIS IMMERSIVE AUDIOVISUAL INSTALLATION COMBINED THE ACTUAL SOUNDS OF ICONIC NEW YORK INTERIORS, SUCH AS GRAND CENTRAL TERMINAL AND THE SEAGRAM BUILDING LOBBY, WITH VISUAL ANIMATIONS PROJECTED ON A PANORAMIC SCREEN. GRAND CENTRAL TERMINAL'S SOUNDSCAPE, FOR EXAMPLE, FEATURED AN OCEANIC-STYLE ANIMATION WITH CLANGS, ECHOES, AND QUICK CRESCENDOS OF INTENSITY, TRANSPORTING THE LISTENER TO THE MIDST OF THE STATION'S DAILY BUSTLE, AND AMPLIFYING ITS STATUS AS A PRIMARY TRANSPORTATION PORTAL TO AND FROM NEW YORK CITY. VISITORS ALSO EXPERIENCED THE SOUNDSCAPES OF ROCKEFELLER CENTER, THE NEW YORK PUBLIC LIBRARY READING ROOM, AND THE GUGGENHEIM MUSEUM.

432212 08-27-14

Schedule O (Form 990 or 990-EZ) (2014) Page 2 Name of the organization **Employer identification number** MUSEUM OF THE CITY OF NEW YORK 13-1624098 HIP-HOP REVOLUTION: PHOTOGRAPHS BY JANETTE BECKMAN, JOE CONZO, AND MARTHA COOPER (APRIL 1- SEPT 27, 2015) HIP-HOP REVOLUTION PRESENTED MORE THAN 80 PHOTOGRAPHS TAKEN BETWEEN 1977 AND 1990 BY THREE PREEMINENT NEW YORK-BASED PHOTOGRAPHERS-JANETTE BECKMAN, JOE CONZO, AND MARTHA COOPER-WHO DOCUMENTED HIP HOP FROM ITS PIONEERING DAYS THROUGH ITS EMERGENCE INTO MAINSTREAM POPULAR CULTURE. HIP-HOP CULTURE, INCORPORATING SUCH ELEMENTS AS DJING, RAPPING, AND BREAKING (DANCING), WAS BORN ON THE STREETS OF NEW YORK CITY IN THE 1970S AND GREW TO HAVE A GLOBAL IMPACT ON MUSIC, DANCE, AND FASHION. THE EXHIBITION SHOWCASED THE EXPERIENCES OF EACH PHOTOGRAPHER DURING THESE SEMINAL YEARS, AS DJS, MCS, AND B-BOYS (BREAKDANCERS) WERE CONTINUALLY INNOVATING, DEVELOPING NEW FORMS OF SELF-EXPRESSION. THE WORK OF THESE PHOTOGRAPHERS-FEATURING EARLY FIGURES AFRIKA BAMBAATA, KOOL HERC, AND COLD CRUSH BROTHERS, BREAKERS (OR B-BOYS) LIKE ROCK STEADY CREW, AND BREAKOUT ACTS SUCH AS RUN DMC AND THE BEASTIE BOYS-FORMED A BROAD SURVEY OF A MOVEMENT THAT IS INDELIBLY LINKED TO NEW YORK CITY AND STILL HAS A RESOUNDING INFLUENCE TODAY. THE EXHIBITION WAS CONCEIVED BY CURATOR SEAN CORCORAN. SAVING PLACE: 50 YEARS OF NEW YORK CITY LANDMARKS (APR 21, 2015 - JAN 3, 2016) MANY BELIEVE NEW YORK'S PIONEERING LANDMARKS LAW, ENACTED IN APRIL 1965, WAS THE KEY FACTOR IN THE REBIRTH OF NEW YORK IN THE FINAL QUARTER OF THE 20TH CENTURY. IT FOSTERED PRIDE IN NEIGHBORHOODS AND RESULTED IN NEIGHBORHOOD PRESERVATION IN EVERY BOROUGH, CONNECTING AND MOTIVATING RESIDENTS AND BRINGING NEW ECONOMIC LIFE TO OLDER COMMUNITIES. IT ALSO ENSURED THE CREATIVE RE-USE OF COUNTLESS

432212 08-27-14

Name of the organization **Employer identification number** MUSEUM OF THE CITY OF NEW YORK 13-1624098 BUILDINGS. THROUGH ORIGINAL DOCUMENTS, DRAWINGS, PHOTOGRAPHS, ARCHITECTURAL ELEMENTS, AND MODELS, SAVING PLACE EXAMINED HOW THE LANDMARKS MOVEMENT DEVELOPED IN NEW YORK, GOING BACK TO EARLY PRESERVATION EFFORTS IN THE BEGINNING OF THE 20TH CENTURY, AND EXPLORED CONTEMPORARY DESIGN IN THE CITY IN THE CONTEXT OF ADDITIONS TO LANDMARKS, NOT ONLY OF BUILDING ELEMENTS ON INDIVIDUAL LANDMARKS BUT ALSO NEW BUILDINGS IN HISTORIC DISTRICTS. THE EXHIBITION ALSO FEATURED NEWLY COMMISSIONED PHOTOGRAPHS BY RENOWNED ARCHITECTURAL PHOTOGRAPHER IWAN BAAN. SAVING PLACE WAS CO-CURATED BY DONALD ALBRECHT AND ANDREW DOLKART, AND WAS DESIGNED BY STUDIO JOSEPH. FOLK CITY: NEW YORK AND THE FOLK MUSIC REVIVAL (JUNE 7, 2015 - JAN 10, 2016) IN THE 1950S AND 1960S, FOLK MUSIC BLOSSOMED IN NEW YORK CITY, ESPECIALLY IN GREENWICH VILLAGE, WHERE CLUBS AND COFFEE HOUSES SHOWCASED SINGERS LIKE PETE SEEGER AND ODETTA AND NURTURED A GENERATION OF NEWCOMERS, INCLUDING BOB DYLAN, JUDY COLLINS, DAVE VAN RONK, RAMBLIN' JACK ELLIOTT, AND PETER, PAUL AND MARY. THE MULTI-MEDIA EXHIBITION FOLK CITY: NEW YORK AND THE FOLK MUSIC REVIVAL, FEATURED ORIGINAL INSTRUMENTS, HANDWRITTEN LYRICS, AND VIDEO AND FILM FOOTAGE, TRACING THE ROOTS OF THE REVIVAL, ITS GROWTH IN NEW YORK, ITS MAJOR PLAYERS, AND ITS IMPACT ON AMERICAN POLITICS AND CULTURE DURING THE TUMULTUOUS 1960S. THE EXHIBITION WAS CURATED BY ANDREW W. MELLON FOUNDATION POSTDOCTORAL FELLOW STEPHEN PETRUS AND DESIGNED BY PURE+APPLIED. EXHIBITIONS THAT CLOSED IN FY2015: IN A WORLD OF THEIR OWN: CONEY ISLAND PHOTOGRAPHS BY AARON ROSE,

432212

1961-1963 (MAY 9 - AUG 3, 2014)

Name of the organization **Employer identification number** MUSEUM OF THE CITY OF NEW YORK 13-1624098 IN A WORLD OF THEIR OWN CAPTURED NEW YORKERS AT THEIR MOST UNGUARDED IN A DISPLAY OF SOME 70 COLOR PHOTOGRAPHS. PHOTOGRAPHER AARON ROSE BYPASSED THE THEME PARKS AND SIDESHOWS OF CONEY ISLAND FOR THE MORE INTIMATE INTERACTIONS OF BEACH DWELLERS. WIELDING HIS CAMERA SURREPTITIOUSLY, OBSERVING AS IF FROM A NEIGHBORING BLANKET, ROSE DOCUMENTED A "SUN-BAKED MELTING POT" OF BEACHGOERS OF ALL AGES, ETHNICITIES, AND WALKS OF LIFE, EACH ONE UTTERLY UNSELFCONSCIOUS, ABSORBED IN A WORLD OF HIS OR HER OWN. THE PHOTOGRAPHS ALSO EXPRESSED THE MANNERS AND MORES OF 1960S NEW YORKERS; AS CRITIC VINCE ALETTI NOTED, "THE WORK'S EASY RAPPORT AND ITS CASUAL EROTIC CHARGE ARE THRILLING AND TOUCHINGLY SWEET." THE EXHIBITION WAS ORGANIZED BY SEAN CORCORAN, CURATOR OF PRINTS AND PHOTOGRAPHS, AND DESIGNED BY PAMELA CARTER. PALACES FOR THE PEOPLE: GUASTAVINO AND THE ART OF STRUCTURAL TILE (MAR 26 - SEPT 7, 2014) PALACES FOR THE PEOPLE CELEBRATED AN OVERLOOKED MARVEL OF ENGINEERING AND ARCHITECTURAL BEAUTY-THE INTERLOCKING TILE VAULTS AND DOMES DEVELOPED BY SPANISH IMMIGRANTS RAFAEL GUASTAVINO AND HIS SON, RAFAEL JR., UTILIZED IN MORE THAN 250 ARCHITECTURAL LANDMARKS THROUGHOUT THE FIVE BOROUGHS. LIGHTWEIGHT, FIREPROOF, AND ABLE TO SUPPORT SIGNIFICANT LOADS, THIS ELEGANT CONSTRUCTION METHOD WAS EMBRACED BY LEADING ARCHITECTS OF THE LATE 19TH AND EARLY 20TH CENTURY, INCLUDING MCKIM, FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: DURING FY2015, THE CITY MUSEUM SAW VIGOROUS ACTIVITY IN COLLECTIONS MANAGEMENT, AND RECEIVED GENEROUS SUPPORT TO ACCOMPLISH PROJECTS WITH LONG-TERM IMPACT FOR OUR AUDIENCES. ONE OF THE MOST SIGNIFICANT ACCOMPLISHMENTS OF THE PAST YEAR INVOLVED THE PREPARATION OF A NEW Schedule O (Form 990 or 990-EZ) (2014) Name of the organization **Employer identification number** MUSEUM OF THE CITY OF NEW YORK 13-1624098 OFFSITE STORAGE FACILITY TO PROPERLY HOUSE OUR LARGER COLLECTIONS OBJECTS - FURNITURE AND DECORATIVE ARTS, ARCHITECTURAL ELEMENTS, PAINTINGS, SCULPTURE, SHIP MODELS, AND VEHICLES - AND THE RELOCATION OF APPROXIMATELY 30,000 COLLECTIONS OBJECTS TO THAT NEW 25,000 SQUARE FOOT PACKING AND PREPARATION FOR THIS PROJECT BEGAN IN SUMMER 2014, THE TRANSPORT TO THE NEW SPACE BEGAN IN THE FALL, AND WAS COMPLETED IN DECEMBER 2014. THE MAJORITY OF THE UNPACKING WAS COMPLETED BY THE SPRING. PREPARING AND TRANSPORTING THESE HISTORICAL OBJECTS TO THE NEW BROOKLYN COLLECTIONS STORAGE WAS A TREMENDOUS EFFORT, AND SUCCESSFULLY COMPLETED. COLLECTION ASSESSMENTS ARE ONGOING IN SEVERAL DEPARTMENTS, INCLUDING COSTUMES AND TEXTILES, MANUSCRIPTS AND EPHEMERA, AND THEATER MATERIALS. WE ARE CONTINUING TO INVENTORY AND CATALOG OBJECTS FROM ALL COLLECTIONS, INCLUDING PAINTINGS AND SCULPTURE, FURNITURE AND DECORATIVE ARTS, PHOTOGRAPHY, AND TOYS, IN ADDITION TO THE DEPARTMENTS PREVIOUSLY MENTIONED WITH ACTIVE ASSESSMENTS UNDERWAY-ENSURING THAT EVERY OBJECT HAD AN ACCURATE RECORD IN THE MUSEUM DATABASE. WITH AN ESTIMATED THREE-QUARTER MILLION COLLECTION OBJECTS IN TOTAL-FROM DANCE CARDS AND MENUS TO A POLICE WAGON AND MODEL OF THE EMPIRE STATE BUILDING-THE MUSEUM NOW HAS RECORDS FOR OVER HALF A MILLION, AND DURING THIS PERIOD, 31,042 OBJECTS WERE CATALOGUED. AS PART OF THIS ONGOING WORK, WE CREATED NEARLY 26,000 DIGITAL IMAGES EXPANDING PUBLIC AND SCHOLARLY ACCESS TO OUR HOLDINGS. THE MUSEUM CONTINUED TO CARRY OUT WORK FUNDED A \$150,000 GRANT FROM THE INSTITUTE OF MUSEUM AND LIBRARY SERVICES (IMLS) TO DIGITIZE OUR THEATER PRODUCTION PHOTOGRAPHS, AND SUPPLEMENTED WITH SUPPORT FROM THE FREDERICK LOEWE FOUNDATION, JEROME ROBBINS FOUNDATION, AND CHARINA ENDOWMENT FUND. A \$150,000 GRANT FROM THE LUCE FOUNDATION, A \$148,000 Schedule O (Form 990 or 990-EZ) (2014) Name of the organization **Employer identification number** MUSEUM OF THE CITY OF NEW YORK 13-1624098 GRANT FROM THE IMLS, AND SUPPORT FROM THE LOUISE AND VIRGINIA CLEMENTE FOUNDATION PROVIDED FOR A RANGE OF WORK ON OUR RENOWNED SILVER COLLECTION-INCLUDING DIGITIZATION, CATALOGING, CONSERVATION, AND IMPROVED STORAGE FOR MORE THAN 2,000 PIECES MADE BY NEW YORK SILVERSMITHS OVER THREE CENTURIES. ADDITIONAL GRANT SUPPORT FROM THE GLADYS KRIEBLE DELMAS FOUNDATION PROVIDED FOR A COLLECTION OF PAPERS RELATED TO AMERICAN PRINT SCHOLAR HARRY T. PETERS. THE MUSEUM COMPLETED THE FIRST PHASE OF A PROJECT TO CATALOGUE, DIGITIZE, AND CREATE A PUBLICLY ACCESSIBLE DATABASE FOR NEW YORK CITY'S ARCHEOLOGICAL COLLECTIONS WITH SUPPORT FROM THE LANDMARKS PRESERVATION COMMISSION (LPC)-ITEMS OF WHICH WILL APPEAR IN OUR FORTHCOMING CORE EXHIBITION - AND EMBARKED ON THE SECOND PHASE, AGAIN WITH A \$288,000 GRANT FROM THE LPC. THE CITY MUSEUM ALSO CONTINUED TO PROCESS, DIGITIZE, CATALOG, AND REHOUSE OUR EPHEMERA COLLECTIONS CONTAINING PAMPHLETS, INVITATIONS, MEDALS, SASHES, AND MORE, SUPPORTED BY A \$125,000 GRANT FROM THE NATIONAL ENDOWMENT FOR THE HUMANITIES (NEH). WE CONTINUED OUR ONLINE ACCESS WITH A WEEKLY BLOG FOR COLLECTIONS STAFF TO WRITE ABOUT OBJECTS AND PROJECTS OF PARTICULAR INTEREST, WHICH ATTRACTED 143,095 VISITS DURING THE PERIOD. IN ADDITION, WE LAUNCHED THE "CATABLOG"-ONLINE FINDING AIDS FOR RESEARCH AND SCHOLARLY ACCESS TO PREVIOUSLY INACCESSIBLE ARCHIVAL COLLECTIONS, WHICH DREW 10,980 VISITS. THE CITY MUSEUM'S COLLECTIONS PORTAL TRACKED NEARLY 3 MILLION PAGE VIEWS DURING THE PERIOD. CONTINUING ON THE PREVIOUS YEAR'S IMPLEMENTATION OF A COLLECTING PLAN FOR PHOTOGRAPHY, APPROVED BY THE BOARD OF TRUSTEES, THE BOARD ALSO APPROVED INTERIM COLLECTING GUIDELINES FOR BOOKS, MANUSCRIPTS, AND EPHEMERA, FOR USE WHILE THE FORMAL PLAN IS SOLIDIFIED. AS A NATURAL OUTCOME OF OUR COLLECTIONS ASSESSMENT, SUCH PLANS ESTABLISH CRITERIA Schedule O (Form 990 or 990-EZ) (2014) Name of the organization

**Employer identification number** 

MUSEUM OF THE CITY OF NEW YORK 13-1624098 APPROPRIATE TO OUR MANDATE, AND PROVIDE A FRAMEWORK FOR CONSIDERING NEW ACQUISITIONS IN RELATION TO OBJECTS ALREADY ACCESSIONED. CONSERVATION PROJECTS INCLUDED RESTORING A NUMBER OF SILVER OBJECTS IN CONJUNCTION WITH THE IMLS AND LUCE FOUNDATION GRANTS; AS WELL AS FOR LOANS TO OTHER INSTITUTIONS, INCLUDING THE FLORENCE GRISWALD MUSEUM AND THE METROPOLITAN MUSEUM OF ART. DURING THIS PERIOD, THE MUSEUM RECEIVED A NUMBER OF SIGNIFICANT GIFTS FOR THE COLLECTION, INCLUDING A BOOK OF 33 CHROMOGENIC DEVELOPMENT PRINTS BY PHOTOGRAPHER JAN STALLER DEPICTING THE LOWER WEST SIDE OF MANHATTAN; A SELECTION OF STREET PHOTOGRAPHS OF SOUTH WILLIAMSBURG, BROOKLYN, BY WILLIAM CASTELLANA; EPHEMERA AND PERSONAL PHOTOGRAPHS RELATED TO THE FAMILY OF JACOB RIIS, AND INCLUDED IN JACOB A. RIIS: REVEALING NEW YORK'S OTHER HALF (OCTOBER 2015-MARCH 2016); AND A NUMBER OF PHOTOGRAPHS FROM THE MUSEUM'S EXHIBITION RISING WATERS (OCTOBER 2013-APRIL 2014), TO MARK THE ONE-YEAR ANNIVERSARY OF SUPERSTORM SANDY.

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

FIELDTRIPS MAKE UP THE BULK OF OUR CENTER'S ATTENDANCE. WE OFFERED

PROGRAMS IN THE MUSEUM'S GALLERIES INCLUDING THE LONG-TERM EXHIBITION

ACTIVIST NEW YORK AND THE TEMPORARY EXHIBITIONS JEFF CHIEN-HSING LIAO'S

NEW YORK, MAC CONNER: A NEW YORK LIFE, LETTERS TO AFAR, EVERYTHING IS

DESIGN, CITYSCAPES, HIP-HOP REVOLUTION, AND SAVING PLACE. ADDITIONALLY,

WE OFFERED HISTORY LAB PROGRAMS THAT TOOK PLACE IN OUR CLASSROOMS, SUCH

AS THE GRID: URBAN PLANNING IN NEW YORK CITY, NEW YORK CITY BRIDGES,

LIFE IN NEW AMSTERDAM, MANNAHATTA: THE LENAPE AND THE LAND, BRONX

TALES, WHO IS NEW YORK?, AND GETTING AROUND: HOW TRANSPORTATION SHAPED

THE CITY. DURING THE SCHOOL YEAR, FULL-TIME AND PER DIEM MUSEUM

EDUCATORS LED THE FIELDTRIPS. IN THE SUMMER MONTHS, INTERNS LED THE

\*\*\*GRID: URBON THE SCHOOL YEAR, FULL-TIME AND PER DIEM MUSEUM

EDUCATORS LED THE FIELDTRIPS. IN THE SUMMER MONTHS, INTERNS LED THE

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EDUCATORS LED THE FIELDTRIPS. IN THE SUMMER MONTHS, INTERNS LED THE

\*\*\*GRID: URBON THE SCHOOL YEAR, FULL-TIME AND PER DIEM MUSEUM

\*\*\*Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization **Employer identification number** MUSEUM OF THE CITY OF NEW YORK 13-1624098 PROGRAMS. THE INTERNSHIP PROGRAM WAS FUNDED BY THE PINKERTON FOUNDATION. THESE YOUNG ADULTS (18-23 YEARS OLD) WERE CONSIDERED DISCONNECTED YOUTH-THEY'D FALLEN OFF TRACK IN CONTINUING THEIR EDUCATION (IN MANY CASES FINISHING HIGH SCHOOL) OR IN FINDING EMPLOYMENT. 13 INTERNS COMPLETED THE SPRING TRAINING PROGRAM AND WENT ON TO SERVE ABOUT 4,000 CHILDREN AND ADULTS THROUGH FIELDTRIPS, SPECIAL PROGRAMS, AND FAMILY PROGRAMS IN JULY AND AUGUST 2014. FAMILY PROGRAMS SERVED 5,594 CHILDREN AND ADULTS. 124 PROGRAMS WERE OFFERED INCLUDING COLOR ME HARING, CDS FOR ME, AND CHALK THE WALK IN CONJUNCTION WITH THE CITY AS CANVAS EXHIBITION, GILDED ORNAMENT MAKING IN CONJUNCTION WITH OUR GILDED NEW YORK EXHIBITION, WINTER WONDERLAND COLLAGE MAKING, AND SPECIAL CELEBRATIONS SUCH AS A NEW YORK TREAT FOR HALLOWEEN AND CARIBBEAN HERITAGE CELEBRATION. PROGRAMS INCLUDED SCAVENGER HUNTS, GALLERY EXPLORATION, AND ART ACTIVITIES THAT HELPED ADULTS AND CHILDREN LEARN HISTORY CONTENT AS A TEAM. PROGRAMS WERE HELD ON WEEKENDS, HOLIDAYS AND DURING THE WEEK IN JULY AND AUGUST. PROGRAMS TAKING PLACE WHILE SCHOOL WAS IN SESSION WERE LED BY THE MUSEUM EDUCATION FELLOW, FUNDED BY THE CENTER'S CO-CHAIR COMMITTEE FIRESIDE CHATS FUNDRAISING CAMPAIGN. DURING THE SUMMER MONTHS, THE INTERNS CO-LED THE ACTIVITIES. IN ADDITION TO TRADITIONAL FAMILIES VISITING FOR THESE PROGRAMS, GROUPS FROM THE DEPARTMENT OF HOMELESS SERVICES ALSO TOOK PART IN THE ACTIVITIES-A LONG-STANDING RELATIONSHIP THE MUSEUM'S HAD SINCE 2004. 847 PARTICIPANTS OF OUR TOTAL SERVED CAME TO US FROM SHELTERS LOCATED THROUGHOUT THE CITY. WE ALSO PILOTED A FAMILY BOOK CLUB THAT SERVED 30 CHILDREN AND ADULTS EACH SEMESTER. THE FALL BOOK CLUB FOCUSED ON THESE EXHIBITED IN THE ACTIVIST NEW YORK EXHIBITION, SUCH AS CIVIL RIGHTS AND WOMAN SUFFRAGE. THE SPRING SESSIONS REVOLVED AROUND BOOKS WITH MUSLIM PROTAGONISTS TO PROMOTE CULTURE SENSITIVITY Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization **Employer identification number** MUSEUM OF THE CITY OF NEW YORK 13-1624098 AND LEARN ABOUT MUSLIM CULTURES AND TRADITIONS. SATURDAY ACADEMY, IN PARTNERSHIP WITH THE GILDER LEHRMAN INSTITUTE OF AMERICAN HISTORY, HAPPENED DURING FALL 2014 AND SPRING 2015. THIS 6 SESSION, FREE ELECTIVE PROGRAM IN AMERICAN HISTORY AND SAT PREPARATION SERVED ALMOST 500 MIDDLE AND HIGH SCHOOL STUDENTS IN TOTAL. STUDENTS CAME MAINLY FROM EAST AND CENTRAL HARLEM AND THE SOUTH BRONX AND PARTICIPATED IN PROGRAMS LIKE PHOTOGRAPHY IN AMERICA: HISTORY THROUGH THE LENS, FOLK MUSIC DURING TIMES OF CRISIS IN 20TH CENTURY AMERICA, AFFORDABLE HOUSING IN NEW YORK CITY FROM 1930 TO TODAY, IN THEIR OWN WORDS: THE HISTORY OF SOCIAL ACTIVISM IN NEW YORK CITY, AND MIGRATIONS TO NEW YORK: THE MAKING OF A MULTICULTURAL CITY. THE SAT SKILLS PREPARATION COURSE WAS ADMINISTERED BY BELL CURVES. 63% OF PARTICIPANTS WHO HAD TAKEN THE TEST BEFORE INCREASED THEIR SCORES BY AN AVERAGE OF 140.7 POINTS; 45% OF THESE STUDENTS IMPROVED BY 120 POINTS OR MORE. NEW YORK CITY HISTORY DAY, A MULTI-MONTH HISTORICAL RESEARCH PROGRAM FOR MIDDLE AND HIGH SCHOOL STUDENTS CITYWIDE CULMINATED IN A CONTEST TO EVALUATE STUDENT PROJECTS BASED ON THE THEME "LEADERSHIP AND LEGACY IN HISTORY" IN FY15. 390 STUDENTS ATTENDED THE CONTEST DAY HELD ON SUNDAY, MARCH 8, 2015, WITH AN ADDITIONAL 800 PARENTS, TEACHERS AND VOLUNTEER JUDGES SUPPORTED THEM FOR A TOTAL OF ALMOST 1,200 PARTICIPANTS CELEBRATING THE DAY. 37 PUBLIC, PRIVATE, PAROCHIAL AND HOMESCHOOLS PARTICIPATED. 66 STUDENTS FROM NEW YORK CITY HISTORY DAY ADVANCED TO THE STATE AND 5 ENTRIES ADVANCED TO THE NATIONAL HISTORY DAY COMPETITION. IN 2015, THE MUSEUM CELEBRATED THE 25TH ANNIVERSARY OF NEW YORK CITY HISTORY DAY BY INTRODUCING NEW PARTNERSHIPS AND AWARDS RECOGNIZING EDUCATOR AND STUDENT PARTICIPANTS. THE FREDERICK A.O. SCHWARZ CHILDREN'S CENTER PARTNERED WITH THE NEW YORK CITY DEPARTMENT OF EDUCATION AND THE EXECUTIVE DIRECTOR OF SOCIAL STUDIES AND THE Schedule O (Form 990 or 990-EZ) (2014) Name of the organization **Employer identification number** MUSEUM OF THE CITY OF NEW YORK 13-1624098 CURRICULUM, INSTRUCTION AND PROFESSIONAL DEVELOPMENT OFFICE. WITH THEIR SUPPORT (VIA OUTREACH AND FUNDING), EDUCATORS NEW TO THE NATIONAL HISTORY DAY PROGRAM WERE RECRUITED TO PARTICIPATE IN A WORKSHOP SERIES THAT INTRODUCED THE METHODOLOGY AND BEST PRACTICES OF HISTORICAL RESEARCH THROUGH THE LENS OF THE NHD JUDGE. THANKS TO THEIR TRAINING, THESE EDUCATORS WERE BETTER PREPARED TO PARTICIPATE WITH THEIR STUDENTS. ADDITIONALLY, TO CELEBRATE THIS LANDMARK YEAR, THE SCHWARZ CHILDREN'S CENTER AWARDED TWO EDUCATORS WITH THE FREDERICK A.O. SCHWARZ CHILDREN'S CENTER EDUCATORS OF THE YEAR AWARD AND CASH PRIZE. THIS AWARD RECOGNIZED THEIR PASSION FOR HISTORY AND COMMITMENT TO PROJECT-BASED LEARNING THROUGH THE HISTORY DAY MODEL. CITY-WIDE STUDENT WINNERS WERE RECOGNIZED AT YANKEE STADIUM ON AUGUST 18, 2015. STUDENTS RECEIVED TICKETS TO THE GAME AND PARTICIPATED IN AN ON-FIELD PREGAME CEREMONY. IN FALL 2014 AND SPRING 2015, THE MUSEUM OF THE CITY OF NEW YORK'S FREDERICK A.O. SCHWARZ CHILDREN'S CENTER OFFERED STUDENTS AN OPPORTUNITY TO LEARN THE ART AND CRAFT OF PHOTOGRAPHY. STUDENTS IN GRADES 2 AND 3 JOINED US FROM SCHOOLS THROUGHOUT MANHATTAN INCLUDING THE NIGHTINGALE-BAMFORD SCHOOL, THE BUCKLEY SCHOOL, AND LITTLE RED SCHOOL HOUSE. THE 7TH AND 8TH GRADERS JOINED US THROUGH THE INAUGURAL PROGRAM, TEEN THURSDAYS, A NEW YORK CITY DEPARTMENT OF EDUCATION AFTERSCHOOL INITIATIVE TO PAIR CULTURAL INSTITUTIONS WITH MIDDLE SCHOOLS ACROSS THE FIVE BOROUGHS. THE CITY MUSEUM PARTNERED WITH MS 343 ACADEMY OF APPLIED MATHEMATICS AND TECHNOLOGY IN THE SOUTH BRONX TO OFFER STUDENTS LESSONS IN PHOTOGRAPHY WHILE DEEPENING THEIR UNDERSTANDING OF AMERICAN HISTORY. PARTICIPANTS LEARNED ABOUT A VARIETY OF TECHNIQUES AND PROCESSES, INCLUDING POINT-OF-VIEW, CYANOTYPE PRINTS, PORTRAITURE, AND STREET PHOTOGRAPHY. THROUGHOUT THE COURSE, STUDENTS Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization **Employer identification number** MUSEUM OF THE CITY OF NEW YORK 13-1624098 VIEWED AND DISCUSSED PHOTOGRAPHS BOTH FROM THE MUSEUM'S COLLECTION AND THOSE TAKEN BY EACH OTHER. STUDENTS HONED THEIR SKILLS THROUGH OBSERVATION AND DISCUSSION, ENRICHING AND IMPROVING THEIR OWN WORK EACH WEEK. AT THE END OF THE COURSE, THESE BUDDING PHOTOGRAPHERS CURATED THEIR BEST PHOTOGRAPHS, WHICH ARE ON DISPLAY IN THIS EXHIBITION. THE ELEMENTARY STUDENTS' WORK IS ON VIEW ON THE OPPOSITE WALL AND THE MIDDLE SCHOOL STUDENTS' WORK IS DISPLAYED IN THE HALLWAY AROUND THE CORNER. ALMOST 2,000 TEACHERS PARTICIPATED IN PROFESSIONAL DEVELOPMENT AT THE MUSEUM IN FY16. EDUCATORS HAD THE OPPORTUNITY TO JOIN US FOR 3 FREE HISTORIAN-LED LECTURES, 4 FREE CURATOR-LED EXHIBITION OPEN HOUSES, 7 WORKSHOPS AND 8 P-CREDIT COURSES TEACHING CONTENT AND PRIMARY SOURCE ANALYSIS FOR TEACHERS TO TURNKEY IN THEIR CLASSROOMS. ADDITIONALLY, THE CENTER HELD THE 4TH ANNUAL TEACHING SOCIAL ACTIVISM CONFERENCE WHICH WELCOMED OVER 200 EDUCATORS AND ACTIVISTS FROM ALL OVER THE GLOBE TO LEARN ABOUT CONTENT AND PEDAGOGY BEING USED IN THE SOCIAL STUDIES CLASSROOM THAT FOCUSES ON SOCIAL ACTIVISM. AN ADDITIONAL 2,300 VISITORS USED OUR SPACES TO HOST EDUCATIONAL EVENTS, SUCH AS DANCING DREAMS. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: MUSEUM SHOP RENOVATION AND EXPANSION EXPENSES \$ 472,590. INCLUDING GRANTS OF \$ 0. REVENUE \$ 340,412. FORM 990, PART VI, SECTION A, LINE 2: MR. QUINSON AND MS. GOODMAN HAVE A FAMILY RELATIONSHIP. MR. DINAN, MR. JAIN AND MR. VRATTOS HAVE A BUSINESS RELATIONSHIP

Name of the organization **Employer identification number** MUSEUM OF THE CITY OF NEW YORK 13-1624098

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

THE FORM 990 WAS EMAILED TO THE AUDIT AND FINANCE COMMITTEES FOR REVIEW AND APPROVAL. ONCE APPROVED BY THE AUDIT AND FINANCE COMMITTEES, THE 990 WAS EMAILED TO THE REAMINED OF THE BOARD FOR REVIEW PRIOR TO BEING FILED.

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

EACH MEMBER, TRUSTEE, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE WITH GOVERNING BOARD-DELEGATED POWERS SHALL ANNUALLY SIGN A CONFLICT OF INTEREST FORM. IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE TRUSTEES AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE GOVERNING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS. AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE GOVERNING BOARD OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST. THE CHAIRMAN OR THE GOVERNING BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE WHETHER MCNY CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. IF

MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE

| Name of the organization  MUSEUM OF THE CITY OF NEW YORK  | Employer identification number 13-1624098 |
|---|---|
| UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, | THE GOVERNING                             |
| BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF  | THE DISINTERESTED                         |
| TRUSTEES WHETHER THE TRANSACTION OR ARRANGEMENT IS IN MCN | Y'S BEST INTEREST,                        |
| FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABL | E. IN CONFORMITY                          |
| WITH THE ABOVE DETERMINATION IT SHALL MAKE ITS DECISION A | S TO WHETHER TO                           |
| ENTER INTO THE TRANSACTION OR ARRANGEMENT. ANY DECISION   | BY A COMMITTEE                            |
| SHALL BE SUBJECT TO REVIEW AND DETERMINATION BY THE GOVER | NING BOARD SHOULD                         |
| IT ELECT TO DO SO.  |   |
|   |   |
| FORM 990, PART VI, SECTION C, LINE 19:                    |   |
| THE MUSEUM OF THE CITY OF NEW YORK MAKES ITS GOVERNING DO | CUMENTS, CONFLICT                         |
| OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO | THE GENERAL                               |
| PUBLIC UPON REQUEST                                       |   |
|   |   |
| FORM 990, PART XII LINE 2C                                |   |
| THE PROCESS HAS NOT CHANGED                               |   |
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| Asset<br>No. | Description  | Dat<br>Acqu | te<br>ired | Method | Life | Line<br>No. | Unadjusted<br>Cost Or Basis | Bus %<br>Excl | Reduction In<br>Basis | Basis For<br>Depreciation  | Accumulated<br>Depreciation | Current<br>Sec 179 | Current Year<br>Deduction |
|--------------|--|-------------|------------|--------|------|-------------|-----------------------------|---------------|-----------------------|----------------------------|-----------------------------|--------------------|---------------------------|
|              | BUILDINGS<br>BUILDING AND<br>IMPROVEMENTS                | VAR:        | T IP C     | CT     | .000 | 1 6         | 01 000 000                  |               |                       | 01 000 000                 | 4 404 350                   |                    | 423,781.                  |
|              | * 990 PAGE 10 TOTAL<br>BUILDINGS                         | VAR.        | IES        | ΣП     | .000 | πο          | 21,920,275.<br>21,920,275.  |               | 0.                    | 21,920,275.<br>21,920,275. |                             | 0.                 |                           |
|              | FURNITURE & FIXTURES FURNITURE AND EQUIPMENT             | VAR:        | IES        | SL     | .000 | 16          | 3,305,095.                  |               |                       | 3,305,095.                 | 2,073,520.                  |                    | 385,736.                  |
|              | * 990 PAGE 10 TOTAL<br>FURNITURE & FIXTUR<br>MACHINERY & |             |            |        |      |             | 3,305,095.                  |               | 0.                    | 3,305,095.                 |                             | 0.                 |                           |
| 3            | EQUIPMENT COMPUTER EQUIPMENT                             |             | IES        | SL     | .000 | 16          | 571,226.                    |               |                       | 571,226.                   | 508,512.                    |                    | 24,115.                   |
|              | * 990 PAGE 10 TOTAL<br>MACHINERY & EQUIPM                |             |            |        |      |             | 571,226.                    |               | 0.                    | 571,226.                   | 508,512.                    | 0.                 | 24,115.                   |
|              | OTHER<br>CONSTRUCTION IN<br>PROGRESS                     | VAR:        | IES        | SL     | .000 | 16          | 5,069,242.                  |               |                       | 5,069,242.                 |                             |                    | 0.                        |
| 65           | LEASEHOLD<br>IMPROVEMENTS<br>* 990 PAGE 10 TOTAL         | VAR:        | IES        | SL     | .000 | 16          | 64,506.                     |               |                       | 64,506.                    | 32,894.                     |                    | 6,451.                    |
|              | OTHER<br>* GRAND TOTAL 990<br>PAGE 10 DEPR               |             |            |        |      |             | 5,133,748.<br>30,930,344.   |               | 0.                    | 5,133,748.<br>30,930,344.  | 32,894.<br>7,039,305.       | 0.                 | 6,451.<br>840,083.        |
|              | 1102 1V 221K   | Ι           |            |        |      |             | 30,550,511.                 |               |                       | 30,550,511.                | ,,005,000.                  |                    | 010,000                   |
|              |  |             |            |        |      |             |                             |               |                       |                            |                             |                    |                           |
|              |  |             |            |        |      |             |                             |               |                       |                            |                             |                    |                           |