Return of Org	anization	Exempt	From	Income	Тах
	gaineation				

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

Department of the Treasury

9

Form

▶ 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.

G 3 Open to Public Inspection

OMB No. 1545-0047

		enue Servi						0 and its i	nstructions	is at www	/.irs.gov/f	orm990)		In	spection	on
A F	or th	ne 2013	3 cale	ndar year, or	tax year l	beginning		07,	/01, 2013	B, and en	ding				6/30, 20		
D.			C Nam	e of organization								D Em	ployer id	lentifi	ication num	ber	
Вс	neck if ap	pplicable:	ME	TROPOLITAN	MUSEU	M OF AF	RТ					13	-162	408	36		
	Addre chang		Doin	g Business As													
	Name	e change	Num	ber and street (or	P.O. box if r	mail is not de	livered to s	treet addres	s)	Room/suit	te	E Tele	ephone r	numbe	ər		
	Initial	l return	10	00 FIFTH A	VENUE							(212	2) 87	'9 – <u>9</u>	5500		
	Term	inated	City	or town, state or	province, cou	untry, and ZIF	or foreign	n postal code	9								
	Amer returr		NE	W YORK, NY	10028	-0198						G Gro	ss receip	ots \$	1,451,	845	,308.
	Applie pendi	cation ing	F Nam	e and address of	principal offic	er: TH	HOMAS	CAMPBE	LL				this a gro bordinates		urn for	Yes	X N
			10	00 FIFTH A	VENUE	NEW YOF	RK, NY	10028	-0198				e all subor		included?	Yes	N
<u> </u>	Tax-ex	empt sta	tus:	X 501(c)(3)	501	(c) () 🗸	(inser	t no.)	4947(a)(1)	or	527	lf	"No," atta	ich a lis	ist. (see instruc	ctions)	
J	Websi	ite: 🕨 🛚	WWW.	METMUSEUM	ORG	1 1						H(c) Gr	oup exem	nption I	number 🕨		
_		of organi	zation:	X Corporation	Trust	Assoc	iation	Other 🕨	•	L Yea	ar of format	ion: 18	70 M	State	e of legal do	micile:	NY
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es &	4			idependent votir										4	<u> </u>		38.
vitie	5			r of individuals o										5	<u> </u>		547.
Activities & Governance	6	Total n	umbe	r of volunteers (e	estimate if r	necessary)								6			445.
٩				ed business rev										7a		402,	549.
	b	Net un	relate	d business taxa	ble income	from Form	990-T, lir	ne 34			<u></u>			7b			0
	-											Prior		7 -		rent Ye	
an	8			s and grants (Pa							•	10,2			-		131.
Revenue	9	Progra	m ser	vice revenue (Pa	rt VIII, line 2	2g)	• • • • •				•	18,2			-		,083.
Re	10			ncome (Part VII								35,4					800.
	11			ie (Part VIII, col								67,5 31,5					246.
	12			e - add lines 8 t									00,34				,800.
	13 14			imilar amounts I to or for memb								⊥,/	00,3-	<u>+</u> 3. 0		755,	, 000. (
	15			er compensatio								92,6	50 16			412	,767.
Expenses				fundraising fees									42,35				,918.
ben				sing expenses (I							•	5	12,5.			250,	
ш				ses (Part IX, col							- 2	67,8	74.06	50.	296.	363.	540.
	18	Total e	expens	es. Add lines 13	3-17 (must	equal Part I	X colum	n (A) line :	25)		• 4	62,5					025.
	19			s expenses. Sub							·	68,9					235.
ses	-											ning of (Current	Year	End	l of Yea	r
sets	20	Total a	ssets	(Part X, line 16)							3,4	71,89	93,74	16.	3,730,	862,	724.
Net Assets or Fund Balances	21			es (Part X, line 20							4	68,4	44,98	33.	452,	140,	032.
Puper	22			r fund balances							3,0	03,44	48,76	53.	3,278,	722,	692.
Pa	rt II	Sig	natur	e Block													
Une	der per	nalties of	f perjur	y, I declare that I te. Declaration of p	have examin	ned this retu	rn, includi	ng accomp	anying sched	ules and sta	atements, a	and to th	e best o	of my	knowledge	and be	ief, it is
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				nis return with th					5)			<u></u>				es	No
For	Pape	rwork F	Reduc	tion Act Notice	see the se	eparate inst	ructions.								Forr	n 990) (2013)

METROPOLITAN MUSEUM OF ART

Form 990 (2013)	Page
Part III Statement of Program Service Accomplishments	
Check if Schedule O contains a response or note to any line in this Part III	X
ATTACHMENT 1	
2 Did the organization undertake any significant program services during the year which were not listed of	on the
prior Form 990 or 990-EZ?	Yes X No
If "Yes," describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any pro-	ogram
services?	Yes X No
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 h
expenses. Section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the amount of grants	
the total expenses, and revenue, if any, for each program service reported.	
a (Code:) (Expenses \$ 121,192,565, including grants of \$) (Revenue \$	12,939,118.)
ACQUISITIONS OF ART - SEE SCHEDULE O FOR MORE INFORMATION	12,939,118/
b (Code:) (Expenses \$ 124,975,620. including grants of \$ 1,755,800.) (Revenue \$	17,171,051.)
CURATORIAL DEPARTMENTS, INCLUDING OPERATION OF THE CLOISTERS,	1/,1/1,051/
CONSERVATION, CATALOGUING AND SCHOLARLY PUBLICATIONS (INCLUDES	
FELLOWSHIP AWARDS AND TRAVEL STIPENDS IN THE AMOUNT OF \$1,755,800) - SEE SCHEDULE O FOR MORE INFORMATION	
c (Code:) (Expenses \$ 66,663,741, including grants of \$) (Revenue \$)
GUARDIANSHIP AND MAINTENANCE OF THE MUSEUM AND ITS ART COLLECTION	/
- SEE SCHEDULE O FOR MORE INFORMATION	
d Other program services (Describe in Schedule O.) ATTACHMENT 2 (Expenses \$ 123,946,670. including grants of \$) (Revenue \$ 39,710,824.)	
e Total program service expenses \blacktriangleright 436,778,596.	
SA) 2.000	Form 990 (201
06571Q 2536 1/23/2015 5:06:36 PM V 13-7.15	PAGE

METROPOLITAN MUSEUM OF ART

Form 9 Part	Checklist of Required Schedules		F	Page 3
r ar i			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .	4	x	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? 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		Х
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		Х
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	4.0	37	
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Χ
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
t	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445		v
40 -	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
~	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? 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		3.7	
4.5	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	10	v	
10	Part VIII, lines 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? <i>If "Yes," complete Schedule G, Part III</i>	19		Х
20 2	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	200		

Form **990** (2013)

JSA

METROPOLITAN MUSEUM OF ART

-	90 (2013)		F	Page 4
Part	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	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	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a.	24a	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		X
d		24d		Х
25 a				
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part L	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payable to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26		Х
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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	Х	
35 a	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? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

METROPOLITAN MUSEUM OF ART

Form 990 (2013)

13-1624086

Page 5

Par	t V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 873			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2,547			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	Х	
b	If "Yes," enter the name of the foreign country: ► EGYPT			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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.	4.0		-
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
	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		

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	PUBLIC DISCLOSURE COPY			
Form 9	90 (2013) METROPOLITAN MUSEUM OF ART 13-1624	1086		Page 6
Part	VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sect	ion 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 41	-		
	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 38	\$		
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
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	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	9 <i>.)</i> Yes	Na
		40-	165	No X
	Did the organization have local chapters, branches, or affiliates?	10a		A
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	106		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	- 21	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	х	
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	120		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicte?	12b	x	
~	rise to conflicts?	120		
С	describe in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 3	·		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public important indicate how you made these available. Check all that apply	501(0	c)(3)s	s only)
	available for public inspection. Indicate how you made these available. Check all that apply. X 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 int financial statements available to the public during the tax year.	erest	polic	y, anc

 20
 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► CONTROLLER'S OFFICE 1000 FIFTH AVENUE NEW YORK, NY 10028-0198
 (212)879-5500

 JSA

PUBLIC DISCLOSURE CO)PY
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Form	aan	(2013)	
FUIII	990	(2013)	

Part VII	Compensation of Office	ers, Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Contractors								
	Check if Schedule O con	ains a respons	e or note to	any li	ne in this Part	VII			X

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."

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• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

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

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

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

				_ (0						_
(A)	(B)	(do r	not ch		ition	e than c	ne	(D)	(E)	(F)
Name and Title	Average hours per					is both		Reportable compensation	Reportable compensation from	Estimated amount of
	week (list any					or/trust		from	related	other
	hours for	or In	Ing	Of	Ke	en Hig	Fo	the	organizations	compensation from the
	related organizations	Individual trustee or director	Institutional trustee	Officer	Key employee	ghes	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
	below dotted	ual t	iona		lploy	e or		(and related
	line)	ruste	l tru:		'ee	npei				organizations
		ě	stee			Highest compensated employee				
						ä				
(1)CANDACE K. BEINECKE	2.00									
ELECTIVE TRUSTEE		Х						0	0	0
(2)LEON D. BLACK	1.00									
ELECTIVE TRUSTEE		Х						0	0	0
(3) DANIEL BRODSKY	5.00									
ELECTIVE TRUSTEE & CHAIRMAN		Х		Х				0	0	0
(4)RUSSELL L. CARSON	2.00									
ELECTIVE TRUSTEE & VICE CHAIR		Х		Х				0	0	0
(5)WELLINGTON Z. CHEN	1.00	-								
ELECTIVE TRUSTEE		Х						0	0	0
_(6)RICHARD L. CHILTON, JR.	2.00	-								
ELECTIVE TRUSTEE & VICE CHAIR		Х		Х				0	0	0
_(7)MARK_FISCH	1.00	-								
ELECTIVE TRUSTEE		X						0	0	0
(8)MARINA KELLEN FRENCH	1.00									_
ELECTIVE TRUSTEE		X						0	0	0
_(9)JEFFREY_WGREENBERG	2.00									0
ELECTIVE TRUSTEE	1 0 0	X						0	0	0
(10)CHARLES N. ATKINS	1.00									0
ELECTIVE TRUSTEE FROM 11/2013	1 0 0	X						0	0	0
(11)J. TOMILSON HILL	1.00	37								0
ELECTIVE TRUSTEE	1 0 0	X						0	0	0
(12)BONNIE B. HIMMELMAN	1.00	v						0	0	0
ELECTIVE TRUSTEE	1.00	X						0	0	0
(13)PHILIP H. ISLES ELECTIVE TRUSTEE	+	v						0	0	0
(14)HAMILTON E. JAMES	2.00	X						0	0	0
ELECTIVE TRUSTEE	+	x						0	0	0
ETECITAE IKOSIEE		Λ						0	0	0

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Ρâ	rt VII Section A. Officers, Directors, Tru		y⊨m	ιριογ			Hig			ontinue		
	(A) Name and title	(B) Average hours per week (list any hours for related organizations	box, office	not che unless er and a	pers a dire	on lore than o on is both ector/trus	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	an com fr	(F) stimated nount o other pensati om the anizatio	of tion
		below dotted line)	Individual trustee or director	Institutional trustee	er projec	Highest compensated employee Kev employee	ler	(W-2/1099-MISC)		an	d relate anizatio	ed
5	DENIS P. KELLEHER ELECTIVE TRUSTEE	1.00	Х					0	0			
6	STEPHEN M. CUTLER ELECTIVE TRUSTEE FROM 05/2014	1.00	Х					0	0			
7	JOYCE FRANK MENSCHEL	1.00	Х					0	0			
3)	BIJAN MOSSAVAR-RAHMANI ELECTIVE TRUSTEE	1.00	Х					C	0			
)	JEFFREY M. PEEK ELECTIVE TRUSTEE	1.00	Х					C	0			
0)	BLAIR EFFRON ELECTIVE TRUSTEE FROM 11/2013	1.00	х					C	0			
_)	JOHN PAULSON ELECTIVE TRUSTEE FROM 11/2013	1.00	х					C	0			
2)	SAMANTHA BOARDMAN ROSEN ELECTIVE TRUSTEE FROM 11/2013	1.00	Х					C	0			
3)	SIR PAUL RUDDOCK ELECTIVE TRUSTEE	1.00	Х					C	0			
1	WILLIAM C. RUDIN ELECTIVE TRUSTEE	1.00	Х					C	0			
5)	BONNIE J. SACERDOTE	2.00	Х					C	0			
	Sub-total Total from continuation sheets to Part VII, S	ection A		•••	•••			0 8,985,355.	0	1,8	82,3	353
d	Total (add lines 1b and 1c)									1,8	82,3	353
	reportable compensation from the organization		219						φ100,000 01		Nor	
	Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu									2	Yes	
1	For any individual listed on line 1a, is the sorganization and related organizations gre	sum of rep	ortab	le co	mp	ensatio	n ai	nd other compens	sation from the	3		
5	<i>individual</i>									4	X	
Se	for services rendered to the organization? If "Ye ction B. Independent Contractors	es," complet	te Scł	nedule	ə J f	or such	per	son	<u></u>	5		Σ
1	Complete this table for your five highest com compensation from the organization. Report c year.											
	(A) Name and business add	Iress						(B) Description of se	rvices Cr	(C)		
							1	2 230 19101 01 30				

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 81

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		(B)			(C	C)			(D)	(E)		(F)	
	(A) Name and title	Average hours per week (list any hours for	box, office	not ch unles	Posi heck ss pei d a d	ition more rson	e than o is both or/trust	an	Reportable compensation from the	Reportable compensation fron related organizations		Estimated amount o other ompensat	of
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	0	from the organization and relate organization	on ed
6)	ALEJANDRO SANTO DOMINGO	2.00											
	ELECTIVE TRUSTEE		Х						C		0		
7)	ANDREW M. SAUL	1.00											
	ELECTIVE TRUSTEE		Х						C		0		
8)	JAMES E. SHIPP	2.00											
	ELECTIVE TRUSTEE		Х						C		0		
))	ANDREW SOLOMON	1.00											
	ELECTIVE TRUSTEE		Х						C		0		
))	ANN G. TENENBAUM	1.00											
	ELECTIVE TRUSTEE		Х						C		0		
_)	LULU C. WANG	2.00											
	ELECTIVE TRUSTEE & VICE CHAIR		Х		Х				C		0		
2)	SHELBY WHITE	2.00											
	ELECTIVE TRUSTEE		Х						C		0		
3)	BARRIE A. WIGMORE	1.00											
	ELECTIVE TRUSTEE		Х						C		0		
1)	ANNA WINTOUR	1.00											
	ELECTIVE TRUSTEE		Х						C		0		
5)	BILL DE BLASIO	1.00											
	EX-OFFICIO TRUSTEE FROM 1/2014		Х						C		0		
5)	TOM FINKELPEARL	1.00											
	EX-OFFICIO TRUSTEE FROM 4/2014		X						C		0		
b	Sub-total							►					
С	Total from continuation sheets to Part VII, Se	ection A						►					
d	Total (add lines 1b and 1c)												
2	Total number of individuals (including but not l				d at	oove	e) who	o re	ceived more than	\$100,000 of			
	reportable compensation from the organization	n 🕨	219)									_
												Yes	
;	Did the organization list any former office												
	employee on line 1a? If "Yes," complete Schedu	ile J for su	ch ind	lividu	ual	• •					3	6	+
	For any individual listed on line 1a, is the so organization and related organizations gre	eater than	\$15	50,00	00?	If	"Yes	;," (complete Schedu	le J for such		37	
	individual										4	X	÷
,	Did any person listed on line 1a receive or										_		f
	for services rendered to the organization? If "Ye	es," comple	te Sch	iedu	ile J	tor	such	per	son		5		
	ction B. Independent Contractors		- 1 -						hat was also a	then \$100.000	- 4		
	Complete this table for your five highest com compensation from the organization. Report co year.											ax	

	(A) Name and business address	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including but not limited to those more than \$100,000 in compensation from the organization ►	e listed above) who received	

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	Part VII Section A. Officers, Directors, Tru		y <u>– 11</u>	ipic				ng						
	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles	Pos heck ss pe	erson	e than o is both cor/trust employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportal compensatic relatec organizati (W-2/1099-	on from d ions	Est am comp fro orga and	(F) imated ount of other pensation m the inizatio related nizatior	f on on d
3	7) SCOTT STRINGER	1.00	37											
3	EX-OFFICIO TRUSTEE FROM 1/2014 3) MELISSA MARK-VIVERITO	1.00	X						0		0			
-	EX-OFFICIO TRUSTEE FROM 1/2014		х						0		0			
3	9) MITCHELL J. SILVER	1.00	-											
_	EX-OFFICIO TRUSTEE FROM 5/2014	1.00	X						0		0			
4	CONRAD K. HARPER ELECTIVE TRUSTEE TO 9/2013	1.00	x						0		0			
$\overline{4}$	1) DAVID H. KOCH	1.00												
_	ELECTIVE TRUSTEE TO 9/2013		x						0		0			
4	2) CYNTHIA HAZEN POLSKY	1.00	37											
4	ELECTIVE TRUSTEE TO 9/2013 3) ANNETTE DE LA RENTA	1.00	X						0		0			
-	ELECTIVE TRUSTEE TO 9/2013		x						0		0			
4	4) FRANK E. RICHARDSON ELECTIVE TRUSTEE TO 9/2013	1.00	x						0		0			-
$\overline{4}$	5) OSCAR L. TANG	1.00												
_	ELECTIVE TRUSTEE TO 9/2013		X						0		0			
4	5) MICHAEL R. BLOOMBERG EX-OFFICIO TRUSTEE TO 12/2013	1.00	x						0		0			
4	7) CHRISTINE QUINN EX-OFFICIO TRUSTEE TO 1/2014	1.00	x						0		0			
_	 b Sub-total c Total from continuation sheets to Part VII, Sid Total (add lines 1b and 1c) 2 Total number of individuals (including but not reportable compensation from the organization) 	limited to t			d al	bove	e) who	re	ceived more than	\$100,000 c	of			
	B Did the organization list any former offic												Yes	No
	 employee on line 1a? If "Yes," complete Schedul For any individual listed on line 1a, is the sorganization and related organizations grain individual. 	sum of rep eater than	ortab \$15	ole c 50,0	com 00?	per If	satior <i>"Ye</i> s	ח מו ג, "	nd other compens complete Schedu	ation from <i>le J for</i> s	the such	3	X	X
!	 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye 	accrue co	mpen	sati	on t	fron	n any	un	related organization	on or individ	dual	5	7	X
-	Section B. Independent Contractors Complete this table for your five highest com compensation from the organization. Report c year.													
-	(A)								(B)			(C)	ation	

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

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Part VII Section A. Officers, Directors, Tru		y =	ipicy.	,000	anai					nanaoa)
(A) Name and title	(B) Average hours per week (list any hours for	box, office	Po not chec unless p er and a	bersor direc	e than c is both tor/trust	an ee)	(D) Reportable compensation from the	(E) Reportable compensation f related organization:	s	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Utticer Institutional trustee	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MI	SC)	from the organization and related organizations
8) VERONICA M. WHITE EX-OFFICIO TRUSTEE TO 12/2013	1.00	Х					0		0	
9) KATE D. LEVIN EX-OFFICIO TRUSTEE TO 12/2013	1.00	X					0		0	
D) JOHN LIU EX-OFFICIO TRUSTEE TO 12/2013	1.00	x					0		0	
L) PAULA CUSSI ELECTIVE TRUSTEE TO 09/2013	1.00	x					0		0	
2) THOMAS P. CAMPBELL DIR & CEO, EX-OFFICIO TRUSTEE	35.00		X	:			950,762.		0	344,60
B) EMILY K. RAFFERTY PRESIDENT, EX-OFFICIO TRUSTEE	35.00		X	:			874,835.		0	55,91
) CARRIE R. BARRATT ASSOC DIR COLLECTIONS/ADMIN.	35.00		X	:			307,508.		0	55,37
ASSOC DIRECTOR OF EXHIBITIONS	35.00		x	:			339,091.		0	37,38
SHARON H. COTT SR VP, SEC & GEN COUNSEL	35.00		X	:			394,877.		0	55,62
7) HAROLD L. HOLZER SR VP, PUBLIC AFFAIRS	35.00		X	:			359,919.		0	56,02
3) OLENA M. PASLAWSKY SR VP, CFO & TREASURER	35.00		x				453,446.		0	44,94
 b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organizatio 	limited to th		listed a					\$100,000 of		
Did the organization list any former offic employee on line 1a? If "Yes," complete Sched										Yes N 3
For any individual listed on line 1a, is the organization and related organizations grain individual.	eater than	\$15	0,000	? 1	f "Yes	s," (complete Schedu	le J for suc	h	4 X
Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue con	mpen	sation	fror	n any	un	related organizatio	on or individua	al	5
ection B. Independent Contractors Complete this table for your five highest com compensation from the organization. Report of year.										s tax
(A)							(B)			(C)

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

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Part VII Section A. Officers, Directors, Tr	ustees, Ke	y Em	ploye	es,	and H	lig	nest Compensat	ed Employe	es (conti	nued)
(A) Name and title	(B) Average hours per week (list any	box,	Po ot chec unless p	erson	e than or i is both a	an	(D) Reportable compensation from	(E) Reportabl compensation related	from	(F) Estimated amount of other
	hours for related organizations below dotted line)		a Officer Institutional trustee		tor/truster Highest compensated	<u>»</u> Former	the organization (W-2/1099-MISC)	organizatio (W-2/1099-N	IISC)	compensation from the organization and related organizations
9) NINA MCN. DIEFENBACH	35.00									
VP DEVELOPMENT & MEMBERSHIP	25 00		X				329,298.		0	55,7
0) TOM JAVITS VP CONSTRUCTION & FACILITIES	35.00	-	x				325,368.		0	55,6
1) BRADLEY L. KAUFFMAN	35.00						5257500.			
VP&GEN MGR RETAIL TO 8/2013	+		X				355,409.		0	37,9
2) DEBRA A. MCDOWELL VP FOR HUMAN RESOURCES	35.00		X				284,050.		0	44,1
3) ELYSE TOPALIAN	35.00	-								
VP FOR COMMUNICATIONS	35.00		X				239,042.		0	53,0
L) SUZANNE E. BRENNER CHIEF INVESTMENT OFFICER	35.00		x				1,093,834.		0	339,8
5) JEFFREY BLAIR	35.00			·			1,000,004.			,0.
ASSIST.SEC & SR ASSOC.COUNSEL		-	X				211,940.		0	37,8
5) CYNTHIA ROUND	35.00			1			-			
SR VP.MAKETING FROM 6/2013	0		X				210,300.		0	24,8
7) JO PROSSER	35.00	-								
VP GEN MGR.RETAIL FROM 8/2013	0		X				177,262.		0	16,1
3) VANESSA MELENDEZ SENIOR INVESTMENT OFFICER	35.00				x		350,619.		0	130,6
9) GEORGE GOLDNER	35.00			+			330,017.		0	
CHAIRMAN DRAWINGS AND PRINTS	0				X		287,221.		0	55,0
 b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organization) 	limited to tl		isted a		e) who	► re	ceived more than	\$100,000 of		
										Yes
Did the organization list any former offic employee on line 1a? If "Yes," complete Sched										2
										3
For any individual listed on line 1a, is the organization and related organizations gr individual.	eater than	\$15	0,000	? li	f "Yes,	" (complete Schedu	le J for su	ich 📃	4 X
Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue con	mpen	sation	fror	n any	uni	elated organization	on or individ	Jal	5
Section B. Independent Contractors										
Complete this table for your five highest com compensation from the organization. Report of year.										ax
							(B)			(C)
(A)							(0)	1		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► JSA 3E1055 1.000

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Page

(A)	(B)			(0	C)			(D)	(E)			(F)	
Name and title	Average hours per week (list any hours for	box,	not ch unles:	s pe	more rson	e than c is both or/trust	an	Reportable compensation from	Reportab compensation related	n from	am	timated ount c other pensat	of
	related organizations below dotted line)	Individual trustee or director		Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio (W-2/1099-M		fro orga and	om the anizatio d relate inizatio	e on ed
0) JEFFREY SPAR	35.00	_						204 242				F 4	
CHIEF TECHNOLOGY OFFICER 1) LAUREN A. MESERVE	0 35.00					Х		324,343.		0		54,1	1/
DEPUTY CHIEF INVSTMT OFFICER						Х		895,444.		0	2	75,4	48
2) DAVID WARGO GEN, MERCHANDISE MANAGER	35.00	-				X		220,787.		0		51,8	85
		-											
		-											
		_											
		-											
		-											
	+	-											
1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	ection A												
2 Total number of individuals (including but not reportable compensation from the organizatio		hose 219		d al	oove	e) who	o re	ceived more than	\$100,000 o	f			
3 Did the organization list any former offic	or directo	or or	true	sto	<u>م</u> ا		mn	lovee or highes	t compansa	uted		Yes	I
employee on line 1a? If "Yes," complete Sched											3		
4 For any individual listed on line 1a, is the organization and related organizations groups of the organization of the organi	sum of rep	ortab		om	pen	satio	n ai	nd other compension	sation from	the			
individual											4	Х	
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y											5		
Section B. Independent Contractors 1 Complete this table for your five highest com	inensated i	ndene	ende	nt o	cont	racto	rs t	hat received more	than \$100	000 of	:		
compensation from the organization. Report of year.													
(A) Name and business add	dress							(B) Description of se	ervices	Co	(C) ompens	ation	
							1						

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		Check if Schedule O co	· · · · · · · · · · · · · · · · · · ·		(A)	(B)	(C)	(D)
					(A) Total revenue	(b) Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns	1a					
Gra nou	b	Membership dues	1b	28,683,658.				
rts,	с	Fundraising events	1c	17,520,752.				
, Gi nila	d	Related organizations						
ons	е	Government grants (contribu	itions) 1e	11,408,100.				
ther	f	All other contributions, gifts, gran						
Contributions, Gifts, Grants and Other Similar Amounts	-	and similar amounts not included		236,876,621.				
	g h	Noncash contributions included i Total. Add lines 1a-1f			294,489,131.			
anı				Business Code				
sver	2a	EDUCATION PROGRAMS, CONCE	RTS & LECTURES	532000	18,778,847.	18,578,327.	200,520.	
e Re	b	PHOTO RENTALS & FILM FEES	3	532000	17,236.		17,236.	
ric	с							
l Se	d							
ram	е							
Program Service Revenue	f	All other program service rev						
<u> </u>	<u> </u>	Total. Add lines 2a-2f			18,796,083.			
	3	Investment income (includin other similar amounts)	•		54,824,613.		5,335,448.	49,489,165
	4	Income from investment of t			0		5,555,446.	49,489,103
	5	Royalties			238,936.			238,936
	-		(i) Real	(ii) Personal				
	6a	Gross rents						
	b	Less: rental expenses						
	с	Rental income or (loss)						
	d	Net rental income or (loss	;) (i) Securities	(ii) Other	0			
	7a	Gross amount from sales of	.,					
		assets other than inventory	971,773,929.					
	b	Less: cost or other basis and sales expenses	756,696,742.					
	с	Gain or (loss)	215,077,187.					
		Net gain or (loss)			215,077,187.			215,077,187
e	8a	Gross income from fundra						
enu		events (not including \$,	,520,752.					
ev.		of contributions reported on	line 1c).					
Other Revenue		See Part IV, line 18						
the	b	Less: direct expenses			4 000 000			4
0	c	Net income or (loss) from fur	-		-4,023,328.			-4,023,328
	9a	Gross income from gaming a See Part IV, line 19						
	b	Less: direct expenses						
	c	Net income or (loss) from ga			0			
	10a	Gross sales of invento	ory, less					
		returns and allowances	a	70,081,013.				
	b	Less: cost of goods sold						
	С	Net income or (loss) from sal Miscellaneous Reven		Business Code	40,373,974.	37,280,087.	3,093,887.	
			iuc					
	11a	RESTAURANT		812930	23,045,456.			23,045,456
	b	PARKING GARAGE CORPORATE EVENTS		812930 561499	2,612,927. 2,561,163.	805,705.	1,755,458.	2,612,927
	c d	All other revenue		900099	12,939,118.	12,939,118.	1,100,400.	
	u e	Total. Add lines 11a-11d			41,158,664.	.,,		
	12	Total revenue. See instructio			660,935,260.	69,603,237.	10,402,549.	286,440,343

METROPOLITAN MUSEUM OF ART

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (C) Management and (B) Program service (A) Total expenses (D) Do not include amounts reported on lines 6b, 7b, Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses 1 Grants and other assistance to governments and Ω organizations in the United States. See Part IV, line 21 2 Grants and other assistance to individuals in 1,726,800. 1,726,800. the United States. See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 29,000 29,000 n 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 7,427,806. 5,590,495 1,448,561. 388,750. 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 133,555,135. 118,436,845. 9,389,835 5,728,455. 8 Pension plan accruals and contributions (include section 18,164,850. 15,651,744. 1,919,440 593,666. 401(k) and 403(b) employer contributions) 931,006. 31,576,110 25,569,013 5,076,091 9 Other employee benefits 10,688,866. 9,018,367. 1,286,598. 383,901. 10 11 Fees for services (non-employees): a Management 1,730,622. 74,496 1,656,126 b Legal 664,506. 664,506. c Accounting 259,178. 259,178 d Lobbying 256,918 256,918. e Professional fundraising services. See Part IV, line 17 16,584,670. 16,584,670 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column 13,642,274. 8,858,887. 4,588,054 195,333. (A) amount, list line 11g expenses on Schedule O.) 12 Advertising and promotion 2,998,298 2,936,116. 62,182. 33,023,623. 29,315,353. 3,102,712 605,558. 13 Office expenses 1,921,052. 97,118. 3,046,824. 1,028,654. 14 Information technology 243,374. 243,374. 15 Royalties 527. 12,763 5,681,849 5,668,559 Occupancy 16 3,573,601. 3,319,270. 179,834 74,497. 17 Travel Payments of travel or entertainment expenses 18 ٢ for any federal, state, or local public officials 292,870 4,779. 19 Conferences, conventions, and meetings 143,139 144,952 31,755 4,314,619. 4,282,864. 20 Interest 21 Payments to affiliates 47,411,183. 43,807,170. 3,416,332 187,681. 22 Depreciation, depletion, and amortization 2,314,984. 1,534,248. 780,736 Insurance 23 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 121,192,565. 121,192,565. aPURCHASES_OF_ART_ **b**RESTAURANT SERVICES & SUPPLI 20,118,119. 20,118,119. 9,720,860. cREPAIRS_&_MAINTENANCE_____ 9,522,834. 162,767 35,259. 263,442 3,133,698. 2,250,199. 620,057. dCATERING SERVICES 6,415,823. 6,201,307. 126,801 87,715. e All other expenses _____ 499,789,025 436,778,596. 52,757,027. 10,253,402. 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if

0

JSA 3E1052 1.000

following SOP 98-2 (ASC 958-720)

METROPOLITAN MUSEUM OF ART

Form 990 (2013)

Page **11**

	1 990 () 						Page 11
Pa	rt X	Balance Sheet	met-	to any line in this D	ant V		
		Check if Schedule O contains a response or	note	to any line in this Pa			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,993,623.	1	9,808,085.
	2	Savings and temporary cash investments			C	2	0
	3	Pledges and grants receivable, net			110,921,949.	3	132,673,899.
	4	Accounts receivable, net			26,901,586.	4	18,737,096.
	5	Loans and other receivables from current and the	forme	r officers, directors,			
		trustees, key employees, and highest co	mpei	nsated employees.			
		Complete Part II of Schedule L			C	5	C
	6	Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B), and sponsoring organizations of section 501(c)(9) volu	and ontary	contributing employers employees' beneficiary	С	6	
ts	-	organizations (see instructions). Complete Part II of Sche	aule L			0 7	
Assets	7	Notes and loans receivable, net	• • •		14,761,212.	<u> </u>	13,320,306.
Ä	8	Inventories for sale or use			8,073,645.	8	
	9	Prepaid expenses and deferred charges		• • • • • • • • • • • • • • • • • • •	0,075,045.	9	9,948,350.
	TUa	Land, buildings, and equipment: cost or	10-	1047620622			
		•	10a		446 0E1 421	40-	451 007 204
		Less: accumulated depreciation			446,951,431.		
	11	Investments - publicly traded securities			1,909,809,900.	11	2,116,543,637.
	12	Investments - other securities. See Part IV, line 11			880,724,145.	12	902,041,547.
	13	Investments - program-related. See Part IV, line 11			C		C C
	14	Intangible assets	• • •		71,756,255.	14	
	15	Other assets. See Part IV, line 11				15	75,962,420.
	16	Total assets. Add lines 1 through 15 (must equal			3,471,893,746.	16	3,730,862,724.
	17 4 0	Accounts payable and accrued expenses		227,806,738.	17	225,897,377.	
	18 10	Grants payable	• • •		5,820,212.		6,716,129.
	19 20	Deferred revenue	• • •		174,310,404.	19 20	172,075,520.
	20 21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Pa	vrt 1\/ /	of Sabadula D			112,013,520.
tie	22	Loans and other payables to current and for				21	
Liabilities	22	trustees, key employees, highest compen					
Lia		disqualified persons. Complete Part II of Schedule			0	22	(
	23	Secured mortgages and notes payable to unrelate			40,030,000.	22	27,620,000.
	23 24	Unsecured notes and loans payable to unrelated			10,030,000	-	27,020,000:
	2 . 25	Other liabilities (including federal income tax,				27	
	20	parties, and other liabilities not included on lines	-				
		of Schedule D		, ,	20,477,629.	25	19,831,006.
	26	Total liabilities. Add lines 17 through 25			468,444,983.	26	452,140,032.
es		Organizations that follow SFAS 117 (ASC 958), complete lines 27 through 29, and lines 33 and	checl				
anc	27	Unrestricted net assets	_		823,134,402.	27	910,449,617.
3alź	28	Temporarily restricted net assets			1,324,437,745.	28	1,473,750,677.
Η	29	Permanently restricted net assets			855,876,616.	29	894,522,398.
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958) complete lines 30 through 34.					
ts	30	Capital stock or trust principal, or current funds	_			30	
Assets	31	Paid-in or capital surplus, or land, building, or equ	ipmer	nt fund		31	
	32	Retained earnings, endowment, accumulated inco	ome,	or other funds		32	
Net	33	Total net assets or fund balances			3,003,448,763.	33	3,278,722,692.
	34	Total liabilities and net assets/fund balances			3,471,893,746.	34	3,730,862,724.
					•		Form 990 (2013)

METROPOLITAN MUSEUM OF ART

Form 99	90 (2013)				Pa	ge 12
Part						
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1			35,2	
2	Total expenses (must equal Part IX, column (A), line 25)	2	49	99,7	89,0)25.
3	Revenue less expenses. Subtract line 2 from line 1	3			46,2	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,00			
5	Net unrealized gains (losses) on investments	5	13	36,2	36,8	389.
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-2	22,1	09,1	195.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	3,27	78,7	22,6	592.
Part						
	Check if Schedule O contains a response or note to any line in this Part XII	• • •		• • •		
_			ſ		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," ex	plair	in			
-	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	••	•••	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed o	na			
	separate basis, consolidated basis, or both:					
	X 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 overs	-		-		
	of the audit, review, or compilation of its financial statements and selection of an independent account			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, ex	xplair	ו in			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	n in 🛛	-		
	the Single Audit Act and OMB Circular A-133?		•••	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under		the		v	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such aud	lits.		3b	Х	

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

	ient of the Treasury Revenue Service	► Information abou	► Attach to Form 99 It Schedule A (Form 990 or 990	0 or For 0-EZ) and	m 990- I its ins	EZ. tructions	is at wv	vw.irs.g	ov/form9	990.	Open to I Inspect	
Name o	of the organization	ן ו						Emplo	yer iden	tificati	on numb	er
METRO	OPOLITAN MU	SEUM OF ART							13	-162	4086	
Part	Reason fo	r Public Charity S	status (All organizations m	nust cor	nplete	e this pa	art.) Se	e instr	uctions	5.		
The or	ganization is not	a private foundation	on because it is: (For lines 1	through	11, che	eck only	one bo	x.)				
1	A church, co	nvention of churche	s, or association of churche	s descrik	bed in s	section	170(b)((1)(A)(i)).			
2	A school des	cribed in section 17	70(b)(1)(A)(ii). (Attach Sched	lule E.)								
3	A hospital or	a cooperative hosp	bital service organization des	cribed in	sectio	on 170(b	o)(1)(A)	(iii).				
4	A medical r	esearch organizatio	n operated in conjunction	with a h	nospita	al descr	ibed in	sectio	n 170(l	b)(1)(A)(iii). E	Enter the
	hospital's na	me, city, and state:										
5	An organizat	tion operated for th	e benefit of a college or un	iversity	owned	d or ope	erated b	by a go	vernme	ental u	unit des	cribed in
	section 170(b)(1)(A)(iv). (Comp	lete Part II.)									
6	A federal, st	ate, or local govern	ment or governmental unit de	escribed	in sec	tion 170)(b)(1)(A)(v).				
7 2	An organizat	tion that normally re	eceives a substantial part of	its supp	oort fro	om a go	vernme	ental ur	nit or fro	om th	e gener	al public
	described in	section 170(b)(1)(A	(Complete Part II.)									
8	A community	/ trust described in	section 170(b)(1)(A)(vi). (Co	omplete I	Part II.))						
9	An organizat	tion that normally re	eceives: (1) more than 331/3	% of its	suppo	ort from	contrib	outions,	memb	ership	o fees, a	nd gross
	receipts fron	n activities related	to its exempt functions - su	bject to	certai	in excep	otions, a	and (2)	no mo	ore that	an 331/3	3% of its
	support from	n gross investmen	t income and unrelated bu	siness t	axable	incom	e (less	sectio	n 511	tax)	from bu	isinesses
_	_ · ·	-	er June 30, 1975. See sectio	-		-		-				
10	-	-	operated exclusively to test for	-	-				-			
11		-	operated exclusively for the			-					-	
			cly supported organizations					-				section
			escribes the type of supportin							-		
_	a 🔄 Type			-	-						nally inte	•
e		-	at the organization is not co			-	-	-			-	-
		-	and other than one or more	e publici	y supp	ported o	rganiza	itions c	lescribe	ea in s	section 5	509(a)(1)
	or section 50		witten determination frame		111 :1	: T						
f	-		written determination from	ine iks	inal il	is a r	ype i, i	уре п,	огтур	ems	supporti	
~	-	check this box	organization accorded any a	lift or oo	ntribut	ion from		the	• • • •	• • •		•
g	-		organization accepted any g		minbui		i any oi	une				
	following per		directly controls either alon	o or tog	othory	with no	conc d	occribo	d in (ii)	and	Г	Yes No
			directly controls, either alon dy of the supported organization	-						anu	11g(i)	
			on described in (i) above?							•••	11g(ii)	
			person described in (i) or (ii)							• • •	11g(iii)	
h		-	n about the supported organ					• • • •	• • • •			
(i)	Name of supporte		(iii) Type of organization		ls the	(v) Did y	ou notify	(vi)	Is the	(vii)	Amount of	monetary
()	organization		(described on lines 1-9	organi	zation in listed in	the orga	anization	organi	zation in	(,	suppor	
			above or IRC section (see instructions))	your g	overning ment?) of your oort?		organized U.S.?			
				Yes	No	Yes	No	Yes	No			
(•)												
(A)												
(B)												
(C)												
(D)												
(E)												
Total												

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

Schedule A (Form 990 or 990-EZ) 2013

OMB No. 1545-0047

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METROPOLITAN MUSEUM OF ART

Page 2

Schedule A (Form 990 or 990-EZ) 2013

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	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	153,972,180.	192,790,476.	193,652,342.	310,234,475.	294,489,131.	1,145,138,604.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	13,738,289.	15,369,185.	16,151,301.	16,025,751.	15,278,239.	76,562,765.
4	Total. Add lines 1 through 3	167,710,469.	208,159,661.	209,803,643.	326,260,226.	309,767,370.	1,221,701,369.
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)						51,096,550.
6	Public support. Subtract line 5 from line 4.						1,170,604,819.
	tion B. Total Support	() 0000	(1) 00 10	() 0011	()) 00 (0	() 0040	(0 T + 1 + 1
_	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	167,710,469. 29,308,975.	208,159,661.	209,803,643.	326,260,226.	309,767,370. 49,728,101.	1,221,701,369.
9	Net income from unrelated business activities, whether or not the business is regularly carried on		36,730,304.	22,132,131.	3,983,699.	10,402,549.	14,386,248.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0
11	Total support. Add lines 7 through 10						1,430,877,194.
12	Gross receipts from related activities, etc. (s	see instructions) .				12	449,085,379.
13	First five years. If the Form 990 is f organization, check this box and stop here						
Sec	tion C. Computation of Public Sup	port Percenta	ge				
14	Public support percentage for 2013 (li	ne 6, column (f) divided by line	11, column (f))		14	81.81%
15	Public support percentage from 2012					15	82.01%
16a	331/3% support test - 2013. If the c	-					
	this box and stop here. The organizati						
b	331/3% support test - 2012. If the o						
	check this box and stop here. The org						
17a	10%-facts-and-circumstances test - 2						
	10% or more, and if the organization						
	Part IV how the organization meets t			•	•		supported
b	organization 10%-facts-and-circumstances test - 2 15 is 10% or more, and if the organization	2012. If the org	ganization did n	ot check a box	on line 13, 16	a, 16b, or 17a	
	Explain in Part IV how the organizati						
18	supported organization Private foundation. If the organization						▶∟
	instructions						

Schedule A (Form 990 or 990-EZ) 2013

METROPOLITAN MUSEUM OF ART

13-1624086

Schedule A	(Form 990 or 990-EZ) 2013					F
Part III	Support Schedule for Orga (Complete only if you check If the organization fails to qu	ked the box on	line 9 of Part	l or if the orgai		er Part II.
Section /	A. Public Support				 	

Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
h	received from disqualified persons Amounts included on lines 2 and 3						
D	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						
500	line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
-		(4) 2000	(8) 2010	(0) 2011	(4) 2012	(0) 2010	
9 10 a	Amounts from line 6 Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar sources						
b	Unrelated business taxable income (less						
-	section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for	the organization	n's first, second,	third, fourth, or	fifth tax year a	s a section 501	(c)(3)
	organization, check this box and $\ensuremath{\textit{stop}}\xspace$ here			<u></u>			<u></u> ▶
Sec	tion C. Computation of Public Sup					r - r	
15	Public support percentage for 2013 (line 8					15	%
16	Public support percentage from 2012 Sche			<u></u>		16	%
Sec	tion D. Computation of Investme						
17	Investment income percentage for 2013 (li					17	%
18	Investment income percentage from 2012					18	%
19a	331/3% support tests - 2013. If the or	-					
-	17 is not more than 331/3%, check th	-	-				
b	331/3% support tests - 2012. If the orga						
	line 18 is not more than 331/3%, check		•	•			
20 JSA	Private foundation. If the organization	ulu not check	a DUX ON IINE	14, 19a, or 190		ichedule A (Form 9	
	11.000 06571Q 2536 1/23/2015 5	:06:36 PM	V 13-7.15				PAGE 21
	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~						

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Schedule A (Form 990 or 990-EZ) 2013

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
 Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.
 See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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

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

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

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

		•				
Name	e of organization			Employer identi	fication number	
MET	ROPOLITAN MUSEUM OF	ART		13-162	24086	
Par	t I-A Complete if the c	organization is exempt under	section 501(c) or i	s a section 527 orgai	nization.	
1	Provide a description of the	organization's direct and indirect p	olitical campaign ac	tivities in Part IV.		
2	Political expenditures			▶\$		
3						
Par	•	organization is exempt under s				
1	Enter the amount of any exc	cise tax incurred by the organizatio	n under section 4958	5▶\$		
2	Enter the amount of any exc	cise tax incurred by organization ma	anagers under section	on 4955 🚬 🕨 \$		
3	If the organization incurred a	a section 4955 tax, did it file Form	4720 for this year?		Yes	No
4a	Was a correction made?				Yes	No
_	If "Yes," describe in Part IV.					
Par	t I-C Complete if the c	organization is exempt under	section 501(c), ex	cept section 501(c)(3).	
1	Enter the amount directly e	expended by the filing organization	for section 527 ex	empt function		
	activities			▶\$		
2		ng organization's funds contributed				
	527 exempt function activiti	es		▶\$		
3		enditures. Add lines 1 and 2. En				
4		e Form 1120-POL for this year?				No
5		and employer identification numb				
		s. For each organization listed, en tributions received that were prom				
		nd or a political action committee (F				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of po	
			(0) = " (filing organization's	contributions recei	
				funds. If none, enter -0	promptly and dir	
					delivered to a sep	parate

		delivered to a separate political organization. If none, enter -0
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		

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

Schedule C (Form 990 or 990-EZ) 2013



Sch	edule C (Form 990 or 990-EZ) 2013 METROP	OLITAN MUSEUM OF ART	13-10	524086 Page 2
Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). A Check ▶ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). B Check ▶ if the filing organization checked box A and "limited control" provisions apply. Limits on Lobbying Expenditures (a) Filing (The term "expenditures" means amounts paid or incurred.) (a) Filing (b) Affiliated organization's totals group totals 16,819. b Total lobbying expenditures to influence a legislative body (direct lobbying). 16,819. c Total lobbying expenditures (add lines 1a and 1b). 259,178. d Other exempt purpose expenditures (add lines 1c and 1d). 534,002,333. f Lobbying nontaxable amount. Enter the amount from the following table in both columns. 1,000,000. If the amount on line 1e, column (a) or (b) is: The lobbying of the excess over \$1,000,000. 20% of the amount on line 1e. Over \$1,000,000 \$17,000,000 \$100,000 plus 15% of the excess over \$1,000,000. 250,000. Over \$1,000,000 \$1,000,000 \$1,000,000. 0 1 Over \$1,000,000	tion under			
Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). A Check ▶ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). B Check ▶ if the filing organization checked box A and "limited control" provisions apply. Limits on Lobbying Expenditures (a) Filing (The term "expenditures" means amounts paid or incurred.) (a) Filing (b) Affiliated organization's totals group totals (b) Affiliated 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) 16, 819. b Total lobbying expenditures (add lines 1a and 1b) 242, 359. c Total exempt purpose expenditures 533, 743, 155. e Total exempt purpose expenditures (add lines 1c and 1d) 534, 002, 333. f Lobbying nontaxable amount. Enter the amount from the following table in both columns. 1, 000, 000. If the amount on line 1e, column (a) or (b) is: The lobbying of the excess over \$500,000. 250, 000. Over \$1,000,000 \$100,000 plus 15% of the excess over \$1,000,000. 250, 000. 250, 000. Over \$1,500,000 but not over \$1,000,000 \$	oup member's			
В	Check ► if the filing organization	checked box A and "limited control" provis	ions apply.	
	IA Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). eck ▶ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). eck ▶ if the filing organization checked box A and "limited control" provisions apply. Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) (a) Filing organization's totals group totals Total lobbying expenditures to influence public opinion (grass roots lobbying) 16, 819. Total lobbying expenditures (add lines 1a and 1b) 259, 178. Other exempt purpose expenditures (add lines 1c and 1d) 533, 743, 155. Total lobbying nontaxable amount. Enter the amount from the following table in both columns. 534, 002, 333. Lobbying nontaxable amount. Enter the amount from the following table in both columns. 1, 000, 000. there \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000. 1, 000, 000. ere \$10,000,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$1,500,000. 250, 000. Grassroots nontaxable amount (enter 25% of line 1f) 250, 000. 0 Subtract line 1f from line 1a. If zero or less, enter -0- 0 0 Subtract line 1f from line 1a. If	()		
1a	Total lobbying expenditures to influence	e public opinion (grass roots lobbying)	16,819.	
k	b Total lobbying expenditures to influence a legislative body (direct lobbying)		242,359.	
c		259,178.		
c	Other exempt purpose expenditures	533,743,155.		
e			534,002,333.	
f	Lobbying nontaxable amount. Enter	the amount from the following table in both		
	columns.		1,000,000.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
ç	Grassroots nontaxable amount (enter	25% of line 1f)	250,000.	
ŀ	 Subtract line 1g from line 1a. If zero or 	less, enter -0-	0	0
i	Subtract line 1f from line 1c. If zero or	less, enter -0-	0	0
j	If there is an amount other than zer	o on either line 1h or line 1i, did the organi	zation file Form 4720	
	reporting section 4911 tax for this yea	r?		Yes No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

		Lobbying Expen	ditures During 4-Ye	ear Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b	Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
с	Total lobbying expenditures	248,736.	254,258.	268,238.	259,178.	1,030,410.
d	Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f	Grassroots lobbying expenditures	15,615.	16,358.	17,001.	16,819.	65,793.

Schedule C (Form 990 or 990-EZ) 2013

METROPOLITAN MUSEUM OF ART

Schedule C (Form 990 or 990-EZ) 2013

Page 3

Pa	t II-B Complete if the organization is exempt under section 501(c)(3) and has NO ⁻ (election under section 501(h)).	Γ file	d For	m 576	68		
For	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a	a)			(b)	
	cription of the lobbying activity.	Yes	No		An	ount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:						
а	Volunteers?						
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
С	Media advertisements?						
d	Mailings to members, legislators, or the public?						
е	Publications, of published of broadcast statements?						
f	Grants to other organizations for lobbying purposes?						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?						
h :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i ;	Other activities?						
j 2a	Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
∠a b	If "Yes," enter the amount of any tax incurred under section 4912						
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	ection	n		
	501(c)(6).						
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?	(-)/F)			3		
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"	(0)(0)	, 01 5	ection	•	03 id	
	answered "Yes."		0) Fa	11 III-A	, III	e 5, 18	
1	Dues, assessments and similar amounts from members			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amou			•			
	political expenses for which the section 527(f) tax was paid).						
а	Current year			2a			
b	Carryover from last year			2b			
с	Total			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	es .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion						
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lo	bbyir	ıg				
-	and political expenditure next year?			4			
5	Taxable amount of lobbying and political expenditures (see instructions)			5			
	t IV Supplemental Information ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated g	Iroun	liet). E	 Part II_/	line	2. an	4
	II-B, line 1. Also, complete this part for any additional information.	Jioup	113t <i>)</i> , 1		λ , πι κ	5 2 , an	

Schedule C (Form 990 or 990-EZ) 2013

METROPOLITAN MUSEUM OF ART

Schedule C (Form 990 or 990-EZ) 2013

Part IV

Supplemental Information (continued)

(For	Department of the Treasury nternal Revenue Service Information			► Complete if t Part IV, line 6, 7,	Complete if the organization answered "Yes," to Form 990, IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. bout Schedule D (Form 990) and its instructions is at www.irs.gov/form990.					7
		-					Em	ployer identific		
Par			SEUM OF ART		ed Funds or Other	Similar Eunde		13-16240	86	—
Fai	LI				Yes" to Form 990, I		or Accol			
					(a) Donor ac			(b) Funds and	d other accounts	—
1	Tota	al number at e	end of year					()		-
2			outions to (during							_
3		-	from (during yea							_
4	Agg	regate value a	at end of year							
5		-			advisors in writing th					
		-			e organization's exclu	-			Yes No	
6		-	-		nd donor advisors in					
	-				it of the donor or don		•		Yes No	
Pa					he organization and					-
1					e organization (check a			0, 1 art 10, 1		—
		Preservation	n of land for publ	lic use (e.g., recr	eation or education)	Preservati	on of an h	nistorically in	nportant land area	
		Protection of	f natural habitat			Preservation	on of a ce	ertified histor	ric structure	
		Preservation	n of open space							
2					eld a qualified conse	rvation contributio	on in the f	orm of a cor	nservation	
	ease	ement on the	last day of the ta	x year.				Hold at the	End of the Tax Year	_
-	Tata	d number of a	anonyotion one	manta			20			—
a b					s					—
c					historic structure inclu					—
d) acquired after 8/17/	. ,	••			_
					, , , , , , , , , , , , , , , , , , ,		2d			_
3	Num	nber of conser	rvation easemen	nts modified, trar	nsferred, released, e>	dinguished, or ter	minated b	by the organiz	zation during the	
		year 🕨								
4				-	ervation easement is lo					
5		-			ling the periodic mon	• •	-	•		_
6					asements it holds?					2
0				r to monitoring, ii	ispecting, and enforce	ang conservation	easemen		year	
7				nonitoring, inspec	cting, and enforcing c	conservation ease	ments du	iring the year		
		·		0. 1	0. 0			0,		
8				-	e 2(d) above satisfy					
	(i) a	nd section 170	0(h)(4)(B)(ii)?						🗀 Yes 📖 No	2
9			-		conservation easem		•			
			counting for cons		of the footnote to the	organizations in	ancial sta	liements that	describes the	
Par	rt III				s of Art, Historical	Treasures, or O	ther Sim	ilar Assets		-
					"Yes" to Form 990					
1a	If th	e organizatior	n elected, as pe	rmitted under S	FAS 116 (ASC 958).	not to report in	its reven	ue statemer	nt and balance shee	et
	work	ks of art, hist lic service, pro	torical treasures	, or other similation the text of the fu	FAS 116 (ASC 958), ar assets held for p ootnote to its financia	ublic exhibition,	education	n, or resear	ch in furtherance c	Эf
b					SFAS 116 (ASC 958					
	work	ks of art, hist	torical treasures	, or other simila	ar assets held for p					
					ing to these items:			L -		
					1					
2					rt, historical treasure					
-					FAS 116 (ASC 958)					G
а								▶\$		_
b	Asse	ets included in	n Form 990, Part	Χ				<u></u> ▶\$;	_
For F	Paperv	work Reductior	n Act Notice, see	the Instructions fo	r Form 990.			Sci	nedule D (Form 990) 201	13

Sched	ME 1	ROPOLITAN MUS					13-162	24000	
	ule D (Form 990) 2013								Page 🖌
Part	Organizations Maintaini	ng Collections of	Art, Historical	reasure	es, o	r Other Simi	lar Asse	ts (cont	
		<u> </u>	.,						
3	Using the organization's acquisition	on accession and o	other records chec	k anv of	f the t	following that	are a siqu	nificant u	se of its
	collection items (check all that app			it uny of		ionowing that	are a orgi	iniounit u	
		.,,,							
a	X Public exhibition					rograms			
b	X Scholarly research		e Other						
С	X Preservation for future gene								
	Provide a description of the organ	nization's collections	and explain how	they fur	ther th	he organizatior	n's exemp	t purpose	e in Part
	XIII.								
5	During the year, did the organization	on solicit or receive o	lonations of art, his	orical tre	easure	es, or other sim	lar		
	assets to be sold to raise funds rath							Yes	X No
Par	t IV Escrow and Custodial Ar	rangements. Corr	plete if the orgar	nization	answ	ered "Yes" to	Form 99	0, Part IN	/, line 9
	or reported an amount of								
	•	,	,						
1a	Is the organization an agent, truste	e custodian or othe	r intermediary for c	ontributio	ons or	other assets n	ot		
								Yes	No
h	included on Form 990, Part X? If "Yes," explain the arrangement ir	Dort VIII and compl	oto the following to		• • • •		• • • • L	Tes	
b	in res, explain the arrangement in		ete the following tai	οie. Γ			N		
				-	_	<i>I</i>	Amount		
	Beginning balance								
	Additions during the year				1d				
	Distributions during the year			-	1e				
	Ending balance				1f				
	Did the organization include an am							Yes	No
b	If "Yes," explain the arrangement in	Part XIII. Check her	re if the explanation	has bee	en pro	vided in Part XII			
Par	t V Endowment Funds. Com	plete if the organi	zation answered '	'Yes" to	Form	n 990, Part IV,	line 10.		
		(a) Current year	(b) Prior year	(c) Two	o years	back (d) Three	years back	(e) Four y	ears back
1a	Beginning of year balance	2371491241.	2181790580.	2313	30676	514. 19942	56158.	1864	302530
	Contributions	38,131,683.	28,031,302.				1,823.	4.7	41,195
	Net investment earnings, gains,	00,101,0001	20,002,002				1,0101	- / /	
	and losses	384,102,896.	301,511,700.	_2 3	240 9	378. 437,14	3 658	266,0	31 480
	Grants or scholarships	2,940,410.	2,502,016.		575,8		3,828.		92,900
	Other expenditures for facilities	2,940,410.	2,502,010.	2,0	, כונ	2,31	3,020.	2,2	92,900
		124 402 006	100 040 000				0 1 0 5	100 -	06 1 5
	and programs	134,493,886.	137,340,325.	151,1	L/I,8	363. 130,84	0,197.	138,5	26,156
	Administrative expenses								
g	End of year balance	2656291524.	0001/010/1				67611		
-	-		2371491241.				0/014.	1994	256158
2	Provide the estimated percentage	of the current year e	nd balance (line 1g				0/014.	1994	256158
2 a	Provide the estimated percentage Board designated or quasi-endowr	of the current year e nent ► 31.0000	nd balance (line 1g				07014.	1994	256158
2 a	Provide the estimated percentage	of the current year e nent ► 31.0000	nd balance (line 1g				07014.	1994	256158
2 a b	Provide the estimated percentage Board designated or quasi-endowr	of the current year e nent ▶31.0000 0000 %	nd balance (line 1g				07014.	1994	256158
2 a b c	Provide the estimated percentage Board designated or quasi-endowr Permanent endowment b 69.0	of the current year e nent ▶31.0000 0000_% ▶ %	nd balance (line 1g _ % _				07014.	1994	256158
2 a b c	Provide the estimated percentage Board designated or quasi-endowr Permanent endowment <u>69</u> (Temporarily restricted endowment The percentages in lines 2a, 2b, and	of the current year e nent ▶ _31.0000 0000 % ▶ % nd 2c should equal 1	nd balance (line 1g ~~ 00%.	, column	(a)) h	eld as:		1994	256158
2 a b c 3a	Provide the estimated percentage Board designated or quasi-endowr Permanent endowment ▶ 69.0 Temporarily restricted endowment The percentages in lines 2a, 2b, and Are there endowment funds not in	of the current year e nent ▶ _31.0000 0000 % ▶ % nd 2c should equal 1	nd balance (line 1g ~~ 00%.	, column	(a)) h	eld as:			
2 a b c 3a	Provide the estimated percentage Board designated or quasi-endowr Permanent endowment ▶ _ 69 (Temporarily restricted endowment The percentages in lines 2a, 2b, and Are there endowment funds not in organization by:	of the current year e nent ▶ 31.0000 0000 % ▶ % nd 2c should equal 1 the possession of th	nd balance (line 1g % 00%. ne organization that	, column are held	(a)) he	eld as: administered fo	r the	Y	es No
2 a b c 3a	Provide the estimated percentage Board designated or quasi-endown Permanent endowment ▶69.0 Temporarily restricted endowment The percentages in lines 2a, 2b, and Are there endowment funds not in organization by: (i) unrelated organizations	of the current year e nent ▶ 31.0000 0000 % ▶ % nd 2c should equal 1 the possession of th	nd balance (line 1g % 00%. ne organization that	are held	(a)) h	eld as: administered fo	r the	3a(i)	Yes No
2 a b c 3a	Provide the estimated percentage Board designated or quasi-endown Permanent endowment ▶ 69.0 Temporarily restricted endowment The percentages in lines 2a, 2b, an Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations	of the current year e nent ▶ 31.0000 0000 % ▶ % nd 2c should equal 1 the possession of th	nd balance (line 1g 00%. ne organization that	are held	(a)) h	eld as: administered fo	r the	Y 3a(i) 3a(ii)	Yes No
2 a b c 3a b	Provide the estimated percentage Board designated or quasi-endown Permanent endowment ▶ 69 (Temporarily restricted endowment The percentages in lines 2a, 2b, an Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related org	of the current year e nent ▶ 31.0000 0000 % ▶	nd balance (line 1g %	are held	(a)) h	eld as: administered fo	r the	3a(i)	Yes No
2 a b c 3a b 4	Provide the estimated percentage Board designated or quasi-endown Permanent endowment ▶69. (Temporarily restricted endowment The percentages in lines 2a, 2b, and Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related org Describe in Part XIII the intended u	of the current year e nent ▶ 31.0000 0000 % ▶ % nd 2c should equal 1 the possession of th ganizations listed as uses of the organizati	nd balance (line 1g %	are held	(a)) h	eld as: administered fo	r the	Y 3a(i) 3a(ii)	Yes No
2 a b c 3a b 4	Provide the estimated percentage Board designated or quasi-endown Permanent endowment ▶ 69 (Temporarily restricted endowment The percentages in lines 2a, 2b, an Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related org Describe in Part XIII the intended u	of the current year e nent ▶ 31.0000 0000 % ▶ % nd 2c should equal 1 the possession of the ganizations listed as uses of the organizati	nd balance (line 1g %	are held e R? nds.	(a)) h	eld as: administered fo	r the	Y 3a(i) 3a(ii) 3b	Yes No X X
2 a b c 3a b 4	Provide the estimated percentage Board designated or quasi-endown Permanent endowment ▶ 69 (Temporarily restricted endowment The percentages in lines 2a, 2b, an Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related org Describe in Part XIII the intended u tVI Land, Buildings, and Equ Complete if the organization	of the current year e nent ▶ 31.0000 0000 % ▶	nd balance (line 1g % 00%. ne organization that required on Schedul ion's endowment fu es" to Form 990, P	are helo e R? nds.	(a)) ho	administered fo	r the 990, Par	Y 3a(i) 3a(ii) 3b t X, line	/es No X X 10.
2 a b c 3a b 4	Provide the estimated percentage Board designated or quasi-endown Permanent endowment ▶ 69 (Temporarily restricted endowment The percentages in lines 2a, 2b, an Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related org Describe in Part XIII the intended u	of the current year e nent ▶ 31.0000 0000 % ▶ % nd 2c should equal 1 the possession of the ganizations listed as uses of the organizati	nd balance (line 1g % 00%. ne organization that required on Schedul ion's endowment fu es" to Form 990, P other basis (b) Cost	are held e R? nds.	(a)) ho	eld as: administered fo	r the 990, Par	Y 3a(i) 3a(ii) 3b	7 <mark>es No</mark> X X 10.
2 a b c 3a b 4 Part	Provide the estimated percentage Board designated or quasi-endown Permanent endowment ▶ 69 (Temporarily restricted endowment The percentages in lines 2a, 2b, an Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related org Describe in Part XIII the intended u tVI Land, Buildings, and Equ Complete if the organization	of the current year e nent ▶ 31.0000 0000 % ▶ % nd 2c should equal 1 the possession of the ganizations listed as uses of the organizati ipment. tion answered "Ye (a) Cost or (investigned)	nd balance (line 1g % 00%. ne organization that required on Schedul ion's endowment fu es" to Form 990, P other basis (b) Cost tment) (b) Cost	are held are held e R? nds. eart IV, Ii or other bas	(a)) he	administered fo	r the 990, Par	Y 3a(i) 3a(ii) 3b t X, line 7 d) Book valu	7es No X X 10.
2 a b c 33a b 4 Part	Provide the estimated percentage Board designated or quasi-endown Permanent endowment ▶ 69 (Temporarily restricted endowment The percentages in lines 2a, 2b, an Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related org Describe in Part XIII the intended u Complete if the organization Description of property	of the current year e nent ▶ 31.0000 0000 % ▶ % nd 2c should equal 1 the possession of the ganizations listed as uses of the organization ipment. tion answered "Ye (a) Cost or (inves)	nd balance (line 1g % 00%. ne organization that required on Schedul ion's endowment fu es" to Form 990, P other basis (b) Cost tment) (t)	are held are held e R? nds. vart IV, li or other bas other)	(a)) ho d and ine 11	administered fo	r the 990, Par	Y 3a(i) 3a(ii) 3b t X, line d) Book valu 1,01	'es No X X 10. 10. 10 10.
2 a b c 3a b 4 Part 1a b	Provide the estimated percentage Board designated or quasi-endown Permanent endowment ▶ 69 (Temporarily restricted endowment The percentages in lines 2a, 2b, an Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related org Describe in Part XIII the intended u U Land, Buildings, and Equ Complete if the organizations Description of property Land Buildings	of the current year e nent ▶ 31.0000 0000 % ▶ % nd 2c should equal 1 the possession of th ganizations listed as uses of the organizati ipment. tion answered "Ye (a) Cost or (inves)	nd balance (line 1g % 	are held are held e R? nds. part IV, li or other bas other) 015,00 380,30	(a)) ho d and ine 11 sis 0. 9.	administered fo	r the 	Y 3a(i) 3a(ii) 3b t X, line d) Book value 1,01 12,43	Yes No X X 10. - 5,000. - 4,470. -
2 a b c 3a 3a Par	Provide the estimated percentage Board designated or quasi-endown Permanent endowment ▶ 69 (Temporarily restricted endowment The percentages in lines 2a, 2b, an Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organizations If "Yes" to 3a(ii), are the related organizations Describe in Part XIII the intended u Land, Buildings, and Equ Complete if the organizations Description of property Land Buildings Leasehold improvements	of the current year e nent ▶ 31.0000 0000 % ▶ % nd 2c should equal 1 the possession of th ganizations listed as ises of the organizati ipment. tion answered "Ye (a) Cost or (inves)	nd balance (line 1g % 	are held are held e R? nds. <u>Part IV, li</u> or other baso other) 015,00 380,30 404,60	(a)) ho d and ine 11 sis 0. 9. 2 9. 5	eld as: administered fo 	r the 	Y 3a(i) 3a(ii) 3b t X, line d) Book value 1,01 12,43 418,73	Yes No X X 10. - 5,000. - 4,470. - 5,310. -
2 a b c 3a 3a Part 1a b c d	Provide the estimated percentage Board designated or quasi-endown Permanent endowment ▶69.0 Temporarily restricted endowment The percentages in lines 2a, 2b, an Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related org Describe in Part XIII the intended u VI Land, Buildings, and Equ Complete if the organization Description of property Land Buildings Leasehold improvements Equipment	of the current year e nent ▶ 31.0000 0000 % ▶ 2.000 % nd 2c should equal 1 the possession of th ganizations listed as ises of the organizati ipment. tion answered "Ye (a) Cost or (inves)	nd balance (line 1g % 	are held are held e R? nds. part IV, li or other bas other) 015,00 380,30	(a)) ho d and ine 11 sis 0. 9. 2 9. 5	administered fo	r the 	Y 3a(i) 3a(ii) 3b t X, line d) Book value 1,01 12,43 418,73	Yes No X X 10. - 5,000. - 4,470. - 5,310. -
2 a b c 3a b 4 Part 1a b c d e	Provide the estimated percentage Board designated or quasi-endown Permanent endowment ▶ 69 (Temporarily restricted endowment The percentages in lines 2a, 2b, an Are there endowment funds not in organization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organizations If "Yes" to 3a(ii), are the related organizations Describe in Part XIII the intended u Land, Buildings, and Equ Complete if the organizations Description of property Land Buildings Leasehold improvements	of the current year e nent ▶ _31.0000 0000 % ▶ % nd 2c should equal 1 the possession of th ganizations listed as ises of the organizati ipment. tion answered "Ye (a) Cost or (inves)	nd balance (line 1g % 00%. ne organization that required on Schedul ion's endowment fu es" to Form 990, P other basis tment) (b) Cost (c) 36, 2 938, 4 71, 5	are held are held e R? nds. part IV, li or other bas other) 015,00 380,30 404,60 328,70	(a)) ho d and ine 11 sis 0. 9. 5 5. 9	eld as: administered fo 	r the 	3a(i) 3a(ii) 3b t X, line d) Book value 1,01 12,43 418,73	X X 10. e 5,000. 4,470. 5,310. 2,604.

METROPOLITAN MUSEUM OF ART

Schedule D (I	Form 990) 2013	USEOM OF ART	15	Page 3
Part VII	Investments - Other Securities.			. 490 •
	Complete if the organization answered	"Yes" to Form 990,	Part IV, line 11b. See Form 990,	Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1) Financi	al derivatives			
	-held equity interests			
(3) Other_				
	VATE EQUITY	498,757,687.	FMV	
	L ASSETS	403,283,860.	FMV	
<u>(C)</u>				
<u>(D)</u> (E)				
(F)				
(G)				
(H)				
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.) 🕨	902,041,547.		
Part VIII				
	Complete if the organization answered	"Yes" to Form 990,		
	(a) Description of investment	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1)				
(2)				
(3)				
(4)				
(5)				
(6) (7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 13.) 🕨			
Part IX	Other Assets.			
	Complete if the organization answered		Part IV, line 11d. See Form 990,	
(1)	(a)	Description		(b) Book value
(1) (2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	umn (b) must equal Form 990, Part X, col. (B) li	ne 15.)	· · · · · · · · · · · · · · · · · · ·	
Part X	Other Liabilities. Complete if the organization answered line 25.	"Yes" to Form 990,	Part IV, line 11e or 11f. See Forr	n 990, Part X,
1.	(a) Description of liability	(b) Book valu	e	
	ral income taxes			
	ITY & SPLIT-INT OBLIGS.	19,831,0	006.	
(3)				
(4)				
(5)				
(6)				
<u>(7)</u> (8)				
(9)				
	nn (b) must equal Form 990, Part X, col. (B) line 25.)	▶ 19,831,0	006.	

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

METROPOLITAN MUSEUM OF ART

Schedu	le D (Form 990) 2013		Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	า.	
1	Total revenue, gains, and other support per audited financial statements	1	542,614,972.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments 2a 136,236,889.		
b	Donated services and use of facilities 2b		
c	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.) 2d -205,842,745.		
е	Add lines 2a through 2d	2e	-69,605,856.
3	Subtract line 2e from line 1	3	612,220,828.
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		
b	Other (Describe in Part XIII.) 4b 48,714,432.		
С	Add lines 4a and 4b	4c	48,714,432.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	660,935,260.
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	irn.	
1	Total expenses and losses per audited financial statements	1	361,551,387.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
C	Other losses 2c		
d	Other (Describe in Part XIII.) 2d 50,074,502.		
е		2e	50,074,502.
3	Subtract line 2e from line 1	3	311,476,885.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.) 4b 188,312,140.		
_ C	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. <i>(This must equal Form 990, Part I, line 18.)</i>	4c	188,312,140.
5		5	499,789,025.
	XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa	art V/I	ine 4: Part X line
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	nation	
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Part XIII Supplemental Information (continued)

SCHEDULE D, PART III, LINE 1A

SFAS 116 FOOTNOTE

Schedule D (Form 990) 2013

IN CONFORMITY WITH ACCOUNTING POLICIES GENERALLY FOLLOWED BY ART MUSEUMS, THE VALUE OF THE MUSEUM'S COLLECTIONS HAS BEEN EXCLUDED FROM THE BALANCE SHEET, AND GIFTS OF ART OBJECTS ARE EXCLUDED FROM REVENUE IN THE STATEMENT OF ACTIVITIES. PURCHASES OF ART OBJECTS BY THE MUSEUM ARE RECORDED AS DECREASES IN NET ASSETS IN THE STATEMENT OF ACTIVITIES. PURSUANT TO STATE LAW AND MUSEUM POLICY, PROCEEDS FROM THE SALE OF ART AND RELATED INSURANCE SETTLEMENTS ARE RECORDED AS TEMPORARILY RESTRICTED NET ASSETS FOR THE ACQUISITION OF ART.

METROPOLITAN MUSEUM OF ART

SCHEDULE D, PART III, LINE 4

DESCRIPTION OF ORGANIZATION'S COLLECTIONS & FURTHERANCE OF EXEMPT PURPOSE

THE MUSEUM'S COLLECTIONS COMPRISE NEARLY ONE AND A HALF MILLION WORKS OF ART FROM ANCIENT, MEDIEVAL, AND MODERN TIMES AND FROM ALL AREAS OF THE WORLD. THEY OFFER A SURVEY OF CONSIDERABLE BREADTH OF ART FROM THE ANCIENT CIVILIZATIONS OF ASIA, AFRICA, SOUTH AMERICA, THE PACIFIC ISLANDS, EGYPT, THE NEAR EAST, AND GREECE AND ROME TO THE PRESENT TIME. THE MUSEUM'S COLLECTIONS INCLUDE EUROPEAN PAINTINGS, MEDIEVAL ART AND ARCHITECTURE, ARMS AND ARMOR, PRINTS, PHOTOGRAPHS, DRAWINGS, COSTUMES, MUSICAL INSTRUMENTS, SCULPTURE, TEXTILES, AND DECORATIVE ARTS FROM THE RENAISSANCE TO THE PRESENT TIME, AS WELL AS ONE OF THE FOREMOST COLLECTIONS OF AMERICAN ART IN THE WORLD. THE MUSEUM ALSO MAINTAINS SOME OF THE MOST COMPREHENSIVE ART AND ARCHITECTURE LIBRARIES IN THE UNITED STATES. THE COLLECTIONS ARE MAINTAINED FOR PUBLIC EXHIBITION, EDUCATION, AND RESEARCH IN FURTHERANCE OF PUBLIC SERVICE, RATHER THAN FOR FINANCIAL GAIN.

SCHEDULE D, PART V, LINE 4

INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUNDS THE MUSEUM'S ENDOWMENT FUNDS ARE INTENTED TO SUPPORT EDUCATIONAL PROGRAMS, SCHOLARLY RESEARCH AND PUBLICATIONS, ACQUISITIONS OF WORKS OF ART, CONSERVATION OF WORKS OF ART, SPECIAL EXHIBITIONS OF INTEREST TO THE PUBLIC, MAINTENANCE AND EXPANSION OF GALLERIES, AND GENERAL OPERATING SUPPORT FOR MUSEUM EXPENSES.

SCHEDULE D, PART XI, LINE 1

AUDITED FINANCIAL STATEMENTS INCLUDE \$344,344,910 FROM OPERATING ACTIVITIES AND \$198,270,063 FROM NON-OPERATING ACTIVITIES FOR REVENUE, GAINS AND OTHER SUPPORT. TOTAL PART XI, LINE 1 \$542,614,972

SCHEDULE D, PART XI, LINE 2D RECONCILING ITEMS FOR REVENUE INCLUDES THE FOLLOWING:

INVESTMENT RETURN IN EXCESS OF CURRENT SUPPORT FOR OPERATING
AND NON-OPERATING ACTIVITIES (\$255,917,247)
COST OF SALES \$29,707,039
FUNDRAISING SPECIAL EVENTS \$4,506,267
ADVERTISING GIFT-IN-KIND \$582,957
FEDERAL INDEMNIFICATION AWARD \$121,691
UTILITIES PROVIDED BY THE CITY OF NEW YORK \$15,156,548

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 METROPOLITAN MUSEUM OF	ART	13-1624086	Page
Part XIII Supplemental Information (continued) TOTAL	(\$205,842,745)		
SCHEDULE D, PART XI, LINE 4B			
RECONCILING ITEMS FOR REVENUE			
INCLUDES THE FOLLOWING:			
MANAGEMENT FEES AND OTHER INVESTMENT EXPENSES	\$16,584,671		
TRANSFER OF DESIGNATED NON-OPERATING FUNDS	\$12,951,175		
PROCEEDS FROM SALES OF ART	\$12,939,118		
SPECIAL EVENTS	\$904,020		
PARTNERSHIP UBI	\$5,335,448		
TOTAL	\$48,714,432		
SCHEDULE D, PART XII, LINE 2D			
RECONCILING ITEMS FOR EXPENSES			
INCLUDES THE FOLLOWING:			
COST OF SALES	\$29,707,039		
FUNDRAISING EVENTS	\$4,506,267		
ADVERTISING GIFT-IN-KIND	\$582,957		
FEDERAL INDEMNIFICATION	\$121,691		
UTILITIES PROVIDED BY THE CITY OF NEW YORK	\$15,156,548		
TOTAL	\$50,074,502		

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Schedule D (Form 99	0) 2013	METROPOLITAN	MUSEUM OF	' ART	
Part XIII Su	pplemental Info	ormation (continue	d)		
SCHEDULE D,	PART XII, L	INE 4B			
RECONCILING	ITEMS FOR E	XPENSES			
INCLUDES TH	E FOLLOWING:				
DEPRECIATIO	N AND MISCEL	LANEOUS			
NON-CAPITAL	IZED EXPENDI	TURES		\$45,616,528	
PURCHASES O	F ART			\$121,192,565	
MANAGEMENT	FEES AND OTH	ER INVESTMENT	EXPENSES	\$16,584,670	
CORPORATE S	PECIAL EVENT	S		\$904,020	
EFFECT OF I	NTEREST RATE	SWAP		\$4,014,357	
TOTAL				\$188,312,140	

	EDULE F	Staten	nent of A	ctivities	Outside the Unit	ted St	ates or	MB No. 1545-0047	
(Form 990) Complete			e if the organiza	5, or 16.	2013				
▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service						ln	Open to Public Inspection		
	of the organization		_				Employer identifica		
Part	ROPOLITAN MUS			Outsida tha l	Jnited States. Complete	if the oro	13-1624086		
I all		Part IV, line 14			Sinted States. Complete	ii the org	anization answe		
	assistance, the gra grants or assistanc	antees' eligibili e?	ty for the grant	s or assistance	ubstantiate the amount of e, and the selection criteri	a used to	award the	X Yes No	
	assistance outside			ganization's pr	ocedures for monitoring	the use	or its grants a	and other	
3	Activities per Regi	on. (The follow	ing Part I, line	3 table can be	e duplicated if additional sp	ace is nee	eded.)		
	(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	a pro describ	ivity listed in (d) is ogram service, e specific type of ce(s) in region	(f) Total expenditures for and investments in region	
(1)	EUROPE				GRANTMAKING	T. ROUSS	SEAU FELLOWSHIP	29,000.	
(2)	EAST ASIA AND THE	PACIFIC			PROGRAM SERVICES	RESEARCH	H & EXHIBITIONS	346,000.	
	MIDDLE EAST AND N				PROGRAM SERVICES	RESEARCH	H & EXHIBITIONS	122,000.	
(4)									
_(-)	CENTRAL AMERICA/C	ARIBBEAN			INVESTMENTS			530,165,000.	
(5)	EUROPE				INVESTMENTS			72,814,000.	
(6)	EUROPE				PROGRAM SERVICES	RESEARCH	H & EXHIBITIONS	1,427,000.	
(7)	SOUTH AMERICA				PROGRAM SERVICES	RESEARCH	H & EXHIBITIONS	10,000.	
(8)	NORTH AMERICA				PROGRAM SERVICES	RESEARCH	H & EXHIBITIONS	23,000.	
(9)	SOUTH ASIA				PROGRAM SERVICES	RESEARCH	H & EXHIBITIONS	135,000.	
(10)									
(11)									
<u>(12)</u>									
(13)									
(14)									
<u>(15)</u>									
<u>(16)</u>									
(17)									
3a b		continuation						605,071,000.	
	sheets to Part I Totals (add lines aperwork Reduction	3a and 3b)	the Instruction	s for Form 000			Sabadul	605,071,000. e F (Form 990) 2013	
	aper work Reduction	ALL NULICE, SEE		5 IUI FUIII 990.			Schedul	e i (Fuill 990) 2013	

METROPOLITAN MUSEUM OF ART

Page **2**

Part II	Grants and Other Assist	•			•	0		d "Yes" on F	orm 990,
	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.								
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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
(12)				
(13)				
(14)				
(15)				
(16)				

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
3 Enter total number of other organizations or entities.

Schedule F (Form 990) 2013

METROPOLITAN MUSEUM OF ART

Part III

Page 3 Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed. (h) Method of valuation (e) Manner of (f) Amount of (g) Description (a) Type of grant or assistance (c) Number of (b) Region (d) Amount of of non-cash cash non-cash disbursement recipients cash grant assistance assistance (book, FMV, appraisal, other) (1) THEODORE ROUSSEAU FELLOWSHIP EUROPE/ICELAND/GREENLAND 2. 29,000. CHECK N/A N/A (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

Schedule F (Form 990) 2013

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METROPOLITAN MUSEUM OF ART

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)	Page 4
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). Image: Transferor of Property to a Foreign Transferor of Property to a Foreign Transferor of Property to a Foreign Corporation (see Instructions for Form 926). 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). Image: Transaction Transaction Property to a Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A). 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). Image: Transaction Transactin Transactin Transaction Transactin Transaction Transet	
 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). 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). 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 Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) Yes 	0
 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) 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 	0
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)	0
\mathbf{r} Did the exception have an expression interact in a factor partnership during the tay used (6.1)/(\mathbf{r} .	0
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)	0
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) Yes X No	0

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013

Part V

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

SCHEDULE F, PART I, LINE 2

THE MUSEUM AWARDS VARIOUS GRANTS, EDUCATIONAL TRAVEL STIPENDS AND FELLOWSHIPS ON AN OBJECTIVE AND NONDISCRIMINATORY BASIS. A GRANTS COMMITTEE, COMPRISED OF MUSEUM CURATORS, CONSERVATORS, EDUCATORS, SCIENTISTS AND LIBRARIANS, MAKES SELECTIONS BASED UPON COMPETITIVE WRITTEN APPLICATIONS. THE PURPOSE OF THE GRANTS IS TO PROVIDE AN OPPORTUNITY FOR THE GRANTEES TO CONDUCT RESEARCH, EXTEND THEIR PROFESSIONAL KNOWLEDGE AND CONTRIBUTE TO THEIR RESPECTIVE FIELDS AT LARGE. TO THE BEST OF THE MUSEUM'S KNOWLEDGE, NONE OF THE RECIPIENTS OF THE GRANTS OR FELLOWSHIPS ARE RELATED TO ANY PERSON SUCH AS A TRUSTEE, AN OFFICER, OR A KEY EMPLOYEE OF THE MUSEUM.

EVERY GRANTEE IS ASSIGNED A SPECIFIC SUPERVISOR AT THE START OF THEIR FELLOWSHIP PERIOD. THE SUPERVISOR IS EITHER A CURATOR, CONSERVATOR, SCIENTIST OR EDUCATOR FROM THE DEPARTMENT HOSTING THE INDIVIDUAL SCHOLAR. THE SCHOLAR AND SUPERVISOR ARE IN CONTACT THROUGHOUT THE YEAR AND DISCUSS ALL OF THE DETAILS OF THE GRANTEE'S RESEARCH WORK. IN ADDITION, THE ACADEMIC PROGRAMS OFFICE WHICH IS RESPONSIBLE FOR ALL OF THE FELLOWS REQUIRES PERIODIC UPDATES ON THE INDIVIDUALS' RESEARCH.

Department of the Treasury Internal Revenue Service Name of the organization METROPOLITAN MUSE Fundraision	Complete if	organization entered r	red "Yes" to	Form 990, P	•	Γ	OMB No. 1545-0047					
(Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service Name of the organization METROPOLITAN MUSE		organization entered r	red "Yes" to nore than \$1	Form 990, P	art IV lines 17 19 or 1							
Internal Revenue Service Name of the organization METROPOLITAN MUSE Fundraisin	Information al	Attach t	(Form 990 or 990-EZ)									
METROPOLITAN MUSE		oout Schedule G (Form 9				s.gov/form990.	Open to Public Inspection					
Fundraisin						Employer identification	on number					
Fundraising	UM OF ART					13-1624086						
	g Activities. Con	nplete if the organ	ization a	nswered	"Yes" to Form 9	90, Part IV, line	17.					
Part I Form 990-	EZ filers are not	required to compl	lete this p	oart.								
1 Indicate whether th	ne organization rai	sed funds through a	any of the	following	activities. Check a	II that apply.						
a X Mail solicitatio	ns	е	X Solic	itation of I	non-government g	rants						
b X Internet and e	mail solicitations	f	X Solic	itation of g	government grants	5						
c X Phone solicita	tions	g	X Spec	ial fundra	ising events							
d X In-person solid	citations											
2a Did the organizatio												
		, Part VII) or entity				5	X Yes No					
b If "Yes," list the ter compensated at lease b If "Yes," list the ter compensated at lease b If "Yes," list the ter compensated at lease b If "Yes," list the ter compensated b If "Yes," list the ter compensated b If "Yes," list ter compensated b If "Yes," l			(fundraise	rs) pursua	int to agreements	under which the	fundraiser is to be					
compensated at lea	asi \$5,000 by the	organization.										
(i) Name and address or entity (fund		(ii) Activity	custody o	draiser have r control of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization					
			Yes	No								
1		TELE-										
DONOR SERVICES GR	OUP	MARKETING		X	370,128.	188,455.	181,673					
2		TELE-										
COMNET		MARKETING		Х	290,782.	68,463.	222,319					
3												
4												
5												
6												
7												
1												
8												
·												
9												
10												
Total			1		660,910.	256,918.	403,992					
		tion is registered o		to solicit								

AL,AK,AR,CA,CO,CT,FL,GA,HI,IL,

KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH,

OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI,

METROPOLITAN MUSEUM OF ART

			(a) Event #1 COSTUME INST	(b) Event #2 ACQ FND DINNER	(c) Other events 5.	(d) Total events (add col. (a) through
~			(event type)	(event type)	(total number)	col. (c))
Kevenue	1	Gross receipts	11,901,065.	1,679,732.	4,422,894.	18,003,691
-	2	Less: Contributions	11,782,065.	1,608,812.	4,129,875.	17,520,752
		Gross income (line 1 minus				
_		line 2)	119,000.	70,920.	293,019.	482,939
	4	Cash prizes				
~	5	Noncash prizes				
penses	6	Rent/facility costs				
Direct Expenses		Food and beverages				
ב						
		Other direct expenses	3,267,059.	260,269.	978,939.	4,506,267
	10 11	Direct expense summary. Add lines 4 Net income summary. Subtract line 1	through 9 in column (d 0 from line 3, column (c))		4,506,26
Pa	10	Direct expense summary. Add lines 4 Net income summary. Subtract line 1	through 9 in column (d 0 from line 3, column (d anization answered "۲ Z, line 6a.) /es" to Form 990, Par (b) Pull tabs/instant	t IV, line 19, or repo	4,506,267 -4,023,328 orted more (d) Total gaming (add
Pa	10 11 rt	Direct expense summary. Add lines 4 Net income summary. Subtract line 1 Gaming. Complete if the orgathan \$15,000 on Form 990-E	through 9 in column (d 0 from line 3, column (c anization answered "\))		4,506,267 -4,023,328 orted more (d) Total gaming (add
Pa	10 11 rt	Direct expense summary. Add lines 4 Net income summary. Subtract line 1 Gaming. Complete if the orga	through 9 in column (d 0 from line 3, column (d anization answered "۲ Z, line 6a.) /es" to Form 990, Par (b) Pull tabs/instant	t IV, line 19, or repo	4,506,267 -4,023,328 orted more (d) Total gaming (add
Pa	10 11 rt 1	Direct expense summary. Add lines 4 Net income summary. Subtract line 1 Gaming. Complete if the orgathan \$15,000 on Form 990-E	through 9 in column (d 0 from line 3, column (d anization answered "۲ Z, line 6a.) /es" to Form 990, Par (b) Pull tabs/instant	t IV, line 19, or repo	4,506,267 -4,023,328 orted more (d) Total gaming (add
Pa	10 11 rt 1 2	Direct expense summary. Add lines 4 Net income summary. Subtract line 1 Gaming. Complete if the orgathan \$15,000 on Form 990-E	through 9 in column (d 0 from line 3, column (d anization answered "۲ Z, line 6a.) /es" to Form 990, Par (b) Pull tabs/instant	t IV, line 19, or repo	4,506,267 -4,023,328 orted more (d) Total gaming (add
	10 11 rt I 2 3 4	Direct expense summary. Add lines 4 Net income summary. Subtract line 1 Gaming. Complete if the orgathan \$15,000 on Form 990-E Gross revenue Cash prizes Noncash prizes Rent/facility costs	through 9 in column (d 0 from line 3, column (d anization answered "۲ Z, line 6a.) /es" to Form 990, Par (b) Pull tabs/instant	t IV, line 19, or repo	4,506,267 -4,023,328 orted more (d) Total gaming (add
Pa	10 11 rt I 2 3 4	Direct expense summary. Add lines 4 Net income summary. Subtract line 1 Gaming. Complete if the orga than \$15,000 on Form 990-E Gross revenue Cash prizes Noncash prizes	• through 9 in column (d 0 from line 3, column (d anization answered "\ Z, line 6a. (a) Bingo) /es" to Form 990, Par (b) Pull tabs/instant bingo/progressive bingo	t IV, line 19, or repo	4,506,267 -4,023,328 orted more
Pa	10 11 rt 1 2 3 4 5	Direct expense summary. Add lines 4 Net income summary. Subtract line 1 Gaming. Complete if the orgathan \$15,000 on Form 990-E Gross revenue Cash prizes Noncash prizes Rent/facility costs	through 9 in column (d 0 from line 3, column (d anization answered "۲ Z, line 6a.) /es" to Form 990, Par (b) Pull tabs/instant bingo/progressive bingo	t IV, line 19, or repo	4,506,267 -4,023,328 orted more (d) Total gaming (add
Pa	10 11 rt I 2 3 4 5 6	Direct expense summary. Add lines 4 Net income summary. Subtract line 1 Gaming. Complete if the orgathan \$15,000 on Form 990-E Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses	through 9 in column (d 0 from line 3, column (d anization answered "\ Z, line 6a. (a) Bingo)^ /es" to Form 990, Par (b) Pull tabs/instant bingo/progressive bingo	t IV, line 19, or repo	4,506,267 -4,023,328 orted more (d) Total gaming (add
Revenue	10 11 rt 1 2 3 4 5 6 7	Direct expense summary. Add lines 4 Net income summary. Subtract line 1 Gaming. Complete if the orgathan \$15,000 on Form 990-E Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	through 9 in column (d <u>0 from line 3, column (c</u> anization answered "\ Z, line 6a. (a) Bingo Yes% No%)	t IV, line 19, or repo	4,506,267 -4,023,328 orted more (d) Total gaming (add

b If "Yes," explain:

1	2_	.16	524		6
_		т.	144	:00	0

	METROPOLITAN MUSEUM OF ART	13-16	24086
Sched	ule G (Form 990 or 990-EZ) 2013		Page 3
11	Does the organization operate 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 entit		
	formed to administer charitable gaming?		Yes No
13	Indicate the percentage of gaming activity operated in:		
а	The organization's facility	13a	%
b	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events book	s and	
	records:		
	Name		
	Address		
15 a	Does the organization have a contract with a third party from whom the organization receives		
	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 ► \$		
С	If "Yes," enter name and address of the third party:		
	Norma N		
	Name		
	Address		
16	Gaming manager information:		
10			
	Name		
	Gaming manager compensation ► \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
а			
	retain the state gaming license?		Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt orga	anizatior	าร
	or spent in the organization's own exempt activities during the tax year s		
Par			
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part	to provi	de any
aau	additional information (see instructions).		
SCH	EDULE G, PART I, LINE 2B		
ייים	AILS OF FUNDRAISING AGREEMENT		
1011.	AILS OF FUNDARISING AGALEMENT		
	OR SERVICES GROUP AND COMNET MARKETING GROUP CONDUCTED TELEMARKETING		
DOIN	OK SERVICES GROOF AND COMMENT MARKETING GROOF CONDUCTED TEDEMARKETING		
СУМ	PAIGNS TO CURRENT MEMBERS OF THE METROPOLITAN MUSEUM OF ART THROUGHOUT		
Crin.	THENE TO CONCERT PERSONO OF THE PETROPOLITAN MODEON OF ART THROUGHOUT		
тнт	YEAR. THE TELEMARKETING STAFF OF BOTH FIRMS REFERS TO A SCRIPT, WHICH		
IS	APPROVED BY THE MEMBERSHIP DEPARTMENT, WHEN SPEAKING WITH MEMBERS.		
DUR	ING FISCAL YEAR 2014, 4,154 CURRENT MEMBERS WERE CONTACTED BY DONOR		
		dule G (Fo	orm 990 or 990-EZ) 201

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	METROPOLITAN MUSEUM OF ART	13-1624086
Sched	ule G (Form 990 or 990-EZ) 2013	Page 3
11	Does the organization operate 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 ent	
	formed to administer charitable gaming?	
13	Indicate the percentage of gaming activity operated in:	
а	The organization's facility	13a %
b	An outside facility	
14	Enter the name and address of the person who prepares the organization's gaming/special events bool	
	records:	
	Name ►	
	Address ►	
15 a	Does the organization have a contract with a third party from whom the organization receives	gaming
	revenue?	
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$	and the
	amount of gaming revenue retained by the third party ► \$	
С	If "Yes," enter name and address of the third party:	
	Name ►	
	Address ►	
16	Gaming manager information:	
	Name ▶	
	Gaming manager compensation ▶ \$	
	Description of services provided	
	Director/officer Employee Independent contractor	
17	Mandatory distributions:	
а	Is the organization required under state law to make charitable distributions from the gaming pr	
	retain the state gaming license?	Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt org	anizations
	or spent in the organization's own exempt activities during the tax year 🕨 \$	
Part		
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part	to provide any
	additional information (see instructions).	
SER	VICES GROUP, AND 12,111 CURRENT MEMBERS WERE CONTACTED BY COMNET	
MAR	KETING GROUP REQUESTING A CONTRIBUTION TO THE MEMBERSHIP ANNUAL	
APP	EAL; 28,610 CURRENT MEMBERS WERE CONTACTED BY DONOR SERVICES GROUP,	
AND	315 CURRENT MEMBERS WERE CONTACTED BY COMNET MARKETING GROUP PRIOR TO	
EXP	IRATION WITH A REQUEST FOR THEM TO RENEW THEIR MEMBERSHIP.	

Schedule G (Form 990 or 990-EZ) 2013

SCHEDULE I (Form 990)	Go Comp	Vernme	nts, and II rganization ans ► At	Assistance t ndividuals in swered "Yes" to F tach to Form 990.	n the United orm 990, Part IV,	d States line 21 or 22.		20 13 Dipen to Public
Internal Revenue Service	Informat	ion about S	chedule I (Forn	n 990) and its insti	uctions is at www	v.irs.gov/form990.		Inspection
Name of the organization							Employer identificati	
METROPOLITAN MU	ISEUM OF ART	A : - : - : - : - : - : - : - : - :					13-1624086	
 Does the organiz the selection crite Describe in Part 	ation maintain records to sub eria used to award the grants IV the organization's procedu	ostantiate the or assistance res for moni	e amount of the e? itoring the use o	of grant funds in the	United States.			X Yes No
	d Other Assistance to Go e 21, for any recipient that							es" to Form 990,
1 (a) Name and or g	address of organization government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
_(1)								
_(2)								
_(3)								
_(4)								
_(5)								
_(6)								
_(9)								
(10)								
 Enter total number Enter total number 	er of section 501(c)(3) and go er of other organizations liste	overnment o d in the line	rganizations lis 1 table	ted in the line 1 tab	le			

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

Schedule I (Form 990) (2013)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
THE BOTHMER FELLOWSHIP	1.	16,000.			
2 SYLVAN C. AND PAMELA COLEMAN FELLOWSHIP	5.	33,167.			
CHESTER DALE FELLOWSHIP	4.	124,500.			
ANNETTE DE LA RENTA FELLOWSHIP	1.	29,667.			
THE DOUGLASS FOUNDATION FELLOWSHIP IN AMERICAN ART	2.	35,000.			
SHERMAN FAIRCHILD FOUNDATION FELLOWSHIP	1.	5,333.			
ANDREW W. MELLON ART HISTORY FELLOWSHIP	13.	253,667.			

Schedule I (Form 990) (2013)

Page **2**

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
ANDREW W. MELLON CONSERVATION FELLOWSHIP	10.	283,667.			
2 ANDREW W MELLON POSTDOCTORAL CURATORIAL FELLOWSHIP	2.	103,467.			
J. CLAWSON MILLS FELLOWSHIP	4.	112,667.			
4 HEGOP KEVORKIAN FELLOWSHIP	2.	53,334.			
5 HANNS AND BRIGITTE HORNEY SWARZENSKI FELLOWSHIP	1.	29,667.			
JANE AND MORGAN WHITNEY FELLOWSHIP	16.	302,000.			
7 SLIFKA FOUNDATION FELLOWSHIP	2.	35,000.			

Schedule I (Form 990) (2013)

Page **2**

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1		07 100			
1 SAMUEL H. KRESS FDN. INTERPRETIVE FELLOWSHIP	2.	27,190.			
2 ANNETTE KADE FELLOWSHIP	1.	4,500.			
3 RESEARCH SCHOLARSHIP IN PHOTOGRAPH CONSERVATION	1.	38,000.			
4 ANDREW W. MELLON SUPPORTED STIPEND INCREASES	67.	201,974.			
5 PAT O'CONNELL FELLOWSHIP	1.	38,000.			
6					
7					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SCHEDULE I, PART I, LINE 2

THE MUSEUM AWARDS VARIOUS GRANTS, EDUCATIONAL TRAVEL STIPENDS AND

FELLOWSHIPS ON AN OBJECTIVE AND NONDISCRIMINATORY BASIS. A GRANTS

COMMITTEE, COMPRISED OF MUSEUM CURATORS, CONSERVATORS, EDUCATORS,

SCIENTISTS AND LIBRARIANS, MAKES SELECTIONS BASED UPON COMPETITIVE

WRITTEN APPLICATIONS. THE PURPOSE OF THE GRANTS IS TO PROVIDE AN

OPPORTUNITY FOR THE GRANTEES TO CONDUCT RESEARCH, EXTEND THEIR

PROFESSIONAL KNOWLEDGE AND CONTRIBUTE TO THEIR RESPECTIVE FIELDS AT

LARGE. RECIPIENTS OF THE EDUCATIONAL TRAVEL STIPENDS ARE EMPLOYEES OF

THE MUSEUM. TO THE BEST OF THE MUSEUM'S KNOWLEDGE, NONE OF THE OTHER

METROPOLITAN MUSEUM OF ART

Schedule I (Form 990) (2013)

13-1624086

Page **2**

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
;					
art IV Supplemental Information. Complete thi information.	s part to pro	vide the informa	tion required in	Part I, line 2, Part III,	column (b), and any other additional
ECIPIENTS OF THE GRANTS OR FELLOWSHIPS	ARE RELA	TED TO ANY PI	ERSON SUCH A	AS	

IS ASSIGNED A SPECIFIC SUPERVISOR AT THE START OF THEIR FELLOWSHIP

PERIOD. THE SUPERVISOR IS EITHER A CURATOR, CONSERVATOR, SCIENTIST OR

EDUCATOR FROM THE DEPARTMENT HOSTING THE INDIVIDUAL SCHOLAR. THE SCHOLAR

AND SUPERVISOR ARE IN CONTACT THROUGHOUT THE YEAR AND DISCUSS ALL OF THE

DETAILS OF THE GRANTEE'S RESEARCH WORK. IN ADDITION, THE ACADEMIC

PROGRAMS OFFICE WHICH IS RESPONSIBLE FOR ALL OF THE FELLOWS REQUIRES

PERIODIC UPDATES ON THE INDIVIDUALS' RESEARCH.

Schedule I (Form 990) (2013)

SCH	CHEDULE J Compensation Information OMB Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest Image: Compensation Information Image: Compensation Information								
(For	m 990)		ectors, Trustees, Key Employees, and Highest mpensated Employees		୬ଲ	12			
			n answered "Yes" to Form 990, Part IV, line 23	3.	ß⊎	10			
	nent of the Treasury	Attach to Form	990. ► See separate instructions. orm 990) and its instructions is at www.irs.gov/		pen to				
	Revenue Service of the organization			Employer identificatio	Insp		n		
	5	MUSEUM OF ART		13-162408		ſ			
Part		is Regarding Compensation		13-102400	0				
I all	Question					Yes	No		
1a	Check the ap	propriate box(es) if the organization pr	ovided any of the following to or for a pers	on listed in Form		100			
			provide any relevant information regardin						
		ss or charter travel	X Housing allowance or residence for	-					
		or companions	Payments for business use of perso	•					
		mnification and gross-up payments	Health or social club dues or initiation						
		onary spending account	Personal services (e.g., maid, chauff						
_									
b	If any of the	boxes on line 1a are checked, did tr	ne organization follow a written policy re openses described above? If "No," com	egarding payment					
					1b	Х			
2	Did the orga	anization require substantiation prior	to reimbursing or allowing expenses	incurred by all					
	directors, trus	stees, and officers, including the CEO	D/Executive Director, regarding the item	s checked in line					
	1a?				2	X			
3			nization used to establish the compensation						
			at apply. Do not check any boxes for metho						
			e CEO/Executive Director, but explain in P	art III.					
	· · ·	sation committee	X Written employment contract						
		dent compensation consultant	X Compensation survey or study						
		0 of other organizations							
4	During the year	ar, did any person listed in Form 990,	Part VII, Section A, line 1a, with respect to	the filing					
2		or a related organization:	avment?		4a		х		
b	Participate in	or receive payment from a suppleme	ayment? ntal nonqualified retirement plan?		4b	X			
			ased compensation arrangement?		4c		X		
Ū			rovide the applicable amounts for each it						
		,							
	Only section	501(c)(3) and 501(c)(4) organizations	must complete lines 5-9.						
5	-		line 1a, did the organization pay or accrue a	any					
	compensation	n contingent on the revenues of:							
а	The organizat	ion?			5a		X		
b	Any related or	rganization?			5b		X		
	If "Yes" to line	e 5a or 5b, describe in Part III.							
6	-		line 1a, did the organization pay or accrue a	any					
		n contingent on the net earnings of:							
а	The organizat	ion?			6a		X		
b					6b		X		
-		e 6a or 6b, describe in Part III.	n A line to did the encodeding "	de environter for t					
7			n A, line 1a, did the organization provi		-	v			
0			escribe in Part III		7	X			
8	-	-	, paid or accrued pursuant to a contract	-					
		-	Regulations section 53.4958-4(a)(3)? I		8		х		
9			low the rebuttable presumption proced		o				
3					9				
	. logalation o o	the Act Nation and the Instructions for Γ			3		1		

Schedule J (Form 990) 2013

Schedule J (Form 990) 2013

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-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
THOMAS P. CAMPBELL	(i)	840,079.	C	110,683.	36,104.	308,500.	1,295,366.	(
1 DIR & CEO, EX-OFFICIO TRUSTEE	(ii)	0	С	0	0	0	С)(
EMILY K. RAFFERTY	(i)	740,444.	С	134,391.	36,104.	19,809.	930,748.	(
2 PRESIDENT, EX-OFFICIO TRUSTEE	(ii)	0	C	0	C	0	C) (
CARRIE R. BARRATT	(i)	306,266.	C	1,242.	36,104.	19,270.	362,882.	(
3 ASSOC DIR COLLECTIONS/ADMIN.	(ii)	0	С	0	0	0	С)(
JENNIFER RUSSELL	(i)	334,327.	C	4,764.	36,104.	1,281.	376,476.	(
4 ASSOC DIRECTOR OF EXHIBITIONS	(ii)	0	C	0	0	0	C)(
SHARON H. COTT	(i)	392,924.	C	1,953.	36,104.	19,524.	450,505.	(
5 SR VP, SEC & GEN COUNSEL	(ii)	0	С	0	d	0	С	(
HAROLD L. HOLZER	(i)	353,759.	C	6,160.	36,104.	19,921.	415,944.	(
6 SR VP, PUBLIC AFFAIRS	(ii)	0	С	0	d	0	С	(
OLENA M. PASLAWSKY	(i)	449,252.	C	4,194.	36,104.	8,843.	498,393.	(
7 SR VP, CFO & TREASURER	(ii)	0	C	0	0	0	C	(
NINA MCN. DIEFENBACH	(i)	326,247.	C	3,051.	36,104.	19,618.	385,020.	(
8 VP DEVELOPMENT & MEMBERSHIP	(ii)	0	C	0	0	0	С С	(
TOM JAVITS	(i)	320,846.	C	4,522.	36,104.	19,568.	381,040.	(
9 VP CONSTRUCTION & FACILITIES	(ii)	0	C	0	0	0	C	(
BRADLEY L. KAUFFMAN	(i)	300,433.	C	54,976.	36,104.	1,839.	393,352.	(
10 VP&GEN MGR RETAIL TO 8/2013	(ii)	0	C	0	D	0	C	(
DEBRA A. MCDOWELL	(i)	281,518.	C	2,532.	36,104.	8,050.	328,204.	(
11 VP FOR HUMAN RESOURCES	(ii)	0	C	0	D	0	C	(
ELYSE TOPALIAN	(i)	236,788.	C	2,254.	34,177.	18,860.	292,079.	(
12 VP FOR COMMUNICATIONS	(ii)	0	C	0	0	0	C	(
SUZANNE E. BRENNER	(i)	564,014.	524,918.	4,902.	319,354.	20,500.	1,433,688.	239,307.
13 CHIEF INVESTMENT OFFICER	(ii)	0	C	0	0	0	C	(
JEFFREY BLAIR	(i)	211,475.	C	465.	30,028.	7,796.	249,764.	(
14 ASSIST.SEC & SR ASSOC.COUNSEL	(ii)	،و 0	C	0	D0	0	C	
CYNTHIA ROUND	(i)	208,788.	C	1,512.	24,046.	790.	235,136.	(
15 SR VP.MAKETING FROM 6/2013	(ii)	۔۔۔۔۔ 0	C	0				
JO PROSSER	(i)	38,462.	138,800.	0	16,160.		193,422.	(
16 VP GEN MGR.RETAIL FROM 8/2013	(ii)	d	C	0				

Schedule J (Form 990) 2013

Schedule J (Form 990) 2013

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-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
VANESSA MELENDEZ	(i)	231,590.	118,575.	454.	122,808.	7,878.	481,305.	31,359.
1 SENIOR INVESTMENT OFFICER	(ii)	C	CC	0				
GEORGE GOLDNER	(i)	276,670.	C	10,551.	36,104.	18,974.	342,299.	(
2 CHAIRMAN DRAWINGS AND PRINTS	(ii)	C	C	0				
JEFFREY SPAR	(i)	323,533.	C	810.	35,902.	18,270.	378,515.	(
3 CHIEF TECHNOLOGY OFFICER	(ii)	C	C	0				
LAUREN A. MESERVE	(i)	467,990.	426,914.	540.	267,652.	7,831.	1,170,927.	193,257.
4 DEPUTY CHIEF INVSTMT OFFICER	(ii)	С	C	0	0	0	(
DAVID WARGO	(i)	220,033.	0	754.	32,662.	19,194.	272,643.	
5 GEN, MERCHANDISE MANAGER	(ii)	C	0	0	0	0	() (
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							L
_13	(ii)							
	(i)							
14	(ii)							
	(i)							
_15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2013

Page 3

Schedule J (Form 990) 2013

Part III Supplemental Information

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

SCHEDULE J, PART I, LINE 1A

PERSONAL HOUSING - FOR CALENDAR YEAR 2013, THE MUSEUM PROVIDED A HOUSING

ALLOWANCE TO THE PRESIDENT, EMILY K. RAFFERTY. THIS ALLOWANCE WAS TREATED

AS TAXABLE COMPENSATION. FOR CALENDAR YEAR 2013, THE MUSEUM PROVIDED THE

DIRECTOR, THOMAS P. CAMPBELL, WITH A RESIDENCE THAT HE WAS REQUIRED TO

LIVE IN AS A CONDITION OF EMPLOYMENT FOR THE CONVENIENCE OF THE MUSEUM.

SCHEDULE J, PART 1, LINE 4B

THE FOLLOWING PERSONS PARTICIPATED IN OR RECEIVED PAYMENTS FROM A

SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLAN:

THOMAS P. CAMPBELL - \$88,061

EMILY K. RAFFERTY - \$76,867

SCHEDULE J, PART I, LINE 7

PURSUANT TO THE MUSEUM'S INCENTIVE COMPENSATION PLAN FOR INVESTMENT STAFF, THE CHIEF INVESTMENT OFFICER, SUZANNE BRENNER RECEIVED A BONUS PAYMENT OF \$524,918. IN ADDITION, THE DEPUTY CHIEF INVESTMENT OFFICER,

LAUREN A. MESERVE, RECEIVED A BONUS PAYMENT OF \$426,914 AND THE SENIOR

JSA 3E1505 1.000

Page 3

Schedule J (Form 990) 2013

Part III Supplemental Information

Complete this part to 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.

INVESTMENT OFFICER, VANESSA MELENDEZ, RECEIVED A BONUS PAYMENT OF

\$118,575. ALL SUCH PAYMENTS ARE INCLUDED IN SCHEDULE J, PART II COLUMN B.

SCHEDULE J, PART I, LINE 7, COLUMN (C)

COLUMN (C) INCLUDES DEFERRED COMPENSATION AS FOLLOWS:

FOR SUZANNE BRENNER, \$283,250; FOR LAUREN MESERVE, \$231,750; AND FOR

VANESSA MELENDEZ, \$86,906. THIS DEFERRED COMPENSATION MAY BE FORFEITED IF

THE RECIPIENT LEAVES THE MUSEUM'S EMPLOYMENT BEFORE IT IS PAID, AND THE

EXACT AMOUNT IS SUBJECT TO THE PERFORMANCE OF THE ENDOWMENT FUND.

FORM 990, PART VII

THOMAS P. CAMPBELL AND EMILY K. RAFFERTY ARE EX-OFFICIO TRUSTEES.

PARTIAL FUNDING OF CAPITAL PROJECTS

SCHEDULE K (Form 990)

Supplemental Information on Tax-Exempt Bonds

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

Department of the Treasury Internal Revenue Service

Attach to Form 990.
 See separate instructions.
 Information about Schedule K (Form990) and its instructions is at www.irs.gov/form990.



Name of the organization

Employer identification number 13-1624086

METROPOLITAN MUSEUM OF ART Part Bond Issues

Bond Issues											
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) De	efeased	(h) (beha issu	lf of	(i) Poo financ	
						Yes	No	Yes	No	Yes	No
A TRUST FOR CULTURAL RESOURCES OF THE CITY OF NY	911882413	649717NP6	12/01/2006	65,000,000.	PARTIAL FUNDING OF CAPITAL PROJECT		x		х		x
B TRUST FOR CULTURAL RESOURCES OF THE CITY OF NY	911882413	649717NQ4	12/01/2006	65,000,000.	PARTIAL FUNDING OF CAPITAL PROJECT		x		х		x
C											
D											

Pa	t II Proceeds								
			Α		В	(;		כ
1	Amount of bonds retired								
2	Amount of bonds legally defeased								
3	Total proceeds of issue	65,0	00,000.	65,0	00,000.				
4	Gross proceeds in reserve funds	-							
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds	7	95,690.	7	95,690.				
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	64,2	04,310.	64,2	04,310.				
11									
12	Other unspent proceeds								
13	Year of substantial completion	200	8	200	8				
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X		X				
15	Were the bonds issued as part of an advance refunding issue?		х		Х				
16	Has the final allocation of proceeds been made?	Х		х					
	Does the organization maintain adequate books and records to support the								
••	final allocation of proceeds?	Х		Х					
Pa	t III Private Business Use								
r a			A		в	(2)
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
1	which owned property financed by tax-exempt bonds?	100	x	100	x	100		100	
2	Are there any lease arrangements that may result in private business use of								
-	bond-financed property?		х		х				

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METROPOLITAN MUSEUM OF ART

13-1624086

Sche	dule K (Form 990) 2013								Page 2
Ра	rt III Private Business Use (Continued) PAR	RTIAL F	UNDING C	F CAPIT	AL PROJE	CTS			
			Α		В		C	I	D
3a	Are there any management or service contracts that may result in private business	Yes	No	Yes	No	Yes	No	Yes	No
	use of bond-financed property?	Х		Х					
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	х		х					
c	Are there any research agreements that may result in private business use of bond- financed property?		x		x				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		%		%		%		%
6	Total of lines 4 and 5		%		%		%		%
7	Does the bond issue meet the private security or payment test?		Х		X				
8a	Has there been a sale or disposition of any of the bond-financed property to a non- governmental person other than a 501(c)(3) organization since the bonds were issued?		x		x				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	x		x					
Ра	rt IV Arbitrage				1				·
			Α		В		С		D
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?	Yes	No X	Yes	No X	Yes	No	Yes	No
2	If "No" to line 1, did the following apply?				1				
	Rebate not due yet?								
	Exception to rebate?	Х		Х					
	No rebate due?								
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate								
	computation was performed								
3	Is the bond issue a variable rate issue?	Х		Х					
4a	Has the organization or the governmental issuer entered into a qualified hedge with								
	respect to the bond issue?		Х		X				
b	Name of provider								
C	Term of hedge								
d	Was the hedge superintegrated?								
	Was the hedge terminated?								

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METROPOLITAN MUSEUM OF ART

13-1624086

Part IV Arbitrage (Continued)								
	A			3		C		כ
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Х				
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X				
7 Has the organization established written procedures to monitor the								
	x		x					
requirements of section 148? Part V Procedures To Undertake Corrective Action	Δ		Δ					
Part v Procedures to ondertake corrective Action		A		3		C		0
Has the erganization established written precedures to opeure that violations	Yes					-		
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	res	No	Yes	No	Yes	No	Yes	No
voluntary closing agreement program if self-remediation is not available								
	Х		X					
Part VI Supplemental Information. Provide additional information for responses to	o questior	ns on Sche	edule K (se	e instruct	ions).			
						S	chedule K (Fo	orm 990) 2013

13-1624086

Schedule K (Form 990) 2013

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions) (Continued)

SCHEDULE K, PART III, LINES 4-6

PRIVATE BUSINESS AND UNRELATED USE

THE MUSEUM PERFORMS A DETAILED PRIVATE BUSINESS AND UNRELATED USE

CALCULATION. THE MUSEUM CALCULATED ITS PRIVATE BUSINESS AND UNRELATED USE

FOR THE FISCAL YEAR ENDED JUNE 30, 2014 TO BE NEARLY 0% IN TAX EXEMPT

BOND FINANCED SPACE. THIS ANALYSIS EXCLUDES COST OF ISSUANCE.

	EDULE L n 990 or 990-EZ) ► Co	mplete if the o	rganization aı 28b, or 280	nswer c, or F	ed "Ye orm 99	s" on Form 9 0-EZ, Part V,	90, Par line 38	Ba or 40b.	26, 27, 2	28a,	Ĺ	20	⁵⁴⁵⁻⁰⁰⁴ 13	
	ment of the Treasury						•	rate instructions. s is at www.irs.gov/fo	orm990.			pen To specti	Public on	
Name	of the organization							E	Employer	identifi	cation	numbe	er	
	ROPOLITAN MUSEUM									-162	4086	5		
Part	Excess Benefit Complete if the o									EZ, Pa	ırt V, I	ine 40	b.	
1	(a) Name of disqualified	d person	(b) Relatio		betwee d orgar	en disqualified	person	(c) Desc	cription	of tran	sactior	n		Corrected?
(1)														
(2)														
(3)														
(4)														_
(5)														
<u>(6)</u> 2	Enter the amount of ta	av incurred by	the organize	ation	manac	ore or disqu	alifiad	porcons during th	o voor					
3 Part		ax, if any, on l or From Inte organization a	ine 2, above rested Pers	, reim sons. es" or	nburse n Form	d by the orga	nizatio				• \$ _		he	
(a) N	Name of interested person	(b) Relationship with organization	(c) Purpose of Ioan	(d) Lo: fror	an to or n the ization?	(e) Origin principal am	al	(f) Balance due	(g) In	default?	by bo	oproved bard or nittee?	(i) Wr agreen	
				То	From				Yes	No	Yes	No	Yes	No
(1)														
(2)														
(3)		-												
(4)														
(5)														
(6)														
(7) (8)														
(9)														
(10)														
Total					<u> </u>		▶\$			I		I		
Part	Grants or Ass Complete if the	organization a	answered "Ye	es" or	n Form	990, Part IV	, line 2							
	Name of interested person		p between intere the organization		c) Amou	nt of assistance	(0	d) Type of assistance	e	(e) I	Jurpos	se of as	ssistanc	e
(1)														
(2)														
(3)														
(4)														
(5) (6)														
(0)				-+										
(8)														
(9)														
(10)														
<u>` </u>	Paperwork Reduction	Act Notice, se	e the Instru	ction	s for F	orm 990 or 9	990-EZ		Sche	edule L	. (Form	990 or	990-EZ) 2013

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METROPOLITAN MUSEUM OF ART

13-1624086

Schedule L (Form 990 or 990-EZ) 2013				ſ	Page 2
Part IV Business Transactions Involving Complete if the organization answer		t IV, line 28a, 28b	, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	naring of ization's nues?
				Yes	No
(1) WHALE ROCK FLAGSHIP FUND LTD.	SEE PART V	370,920.	MANAGEMENT & PERFORMANCE FEE		x
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					

Part V **Supplemental Information**

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE L, PART IV

(9) (10)

BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

WHALE ROCK FLAGSHIP FUND LTD. (THE "FUND") IS AN ENTITY CONTROLLED BY THE

SON OF TRUSTEE BONNIE J. SACERDOTE. THE MUSEUM IS INVESTED WITH THE FUND

AND PAYS MANAGEMENT FEES TO THE FUND.

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SCHEDULE M (Form 990)

Noncash Contributions

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

Attach to Form 990.

(a)

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

(b)

Internal Revenue Service Name of the organization

Part I

Department of the Treasury

METROPOLITAN MUSEUM OF ART **Types of Property**

Employer identification number 13-1624086

(c) Noncash contribution

OMB No. 1545-0047

2013

Open To Public

Inspection

(d)

		Check if applicable	Number of contributions or items contributed	amounts reported on	Method of noncash cont			0
				Form 990, Part VIII, line 1g				
1	Art - Works of art	Х	184.	0				
2	Art - Historical treasures	37		0				
3	Art - Fractional interests	X	б.	0				
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	Х	139.	63,108,986.	MKT VALUE	- G1	[FT]	DATE
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
	contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ►()							
26	Other ►()							
27	Other ►()							
28	Other ►()							
29	Number of Forms 8283 received	by the orac	nization during the tax ve	ar for contributions for				
29	which the organization completed F				29			72.
	which the organization completed P	0111 0203,	Fait IV, Donee Acknowledg		20		Yes	No
30 a	During the year, did the organizat	ion receive	by contribution any prope	rty reported in Part I, line	s 1-28, that		100	
	it must hold for at least three year							
	used for exempt purposes for the er					30a		х
h	If "Yes," describe the arrangement in	n Part II			• • • • • • •	J 0a		
31	Does the organization have a		ance policy that require	s the review of any r	on-standard			
	-			-		24	x	
22 2	contributions? Does the organization hire or use	third parti	es or related organization	e to solicit process or c		31		
J∠ d	-	-	_			20-	v	
۲	contributions? If "Yes," describe in Part II.				• • • • • • •	32a	X	
		amount in	column (a) for a type of are	porty for which column (a)) is checked			
33	If the organization did not report an	annount in	column (c) for a type of pro	perty for which column (a) is checked,			
	describe in Part II.							

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

Schedule M (Form 990) (2013)

Page 2

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

PART I, COLUMN (B)

Schedule M (Form 990) (2013)

THE AMOUNTS SHOWN IN PART I, COLUMN (B) FOR "NUMBER OF CONTRIBUTIONS" REPRESENTS THE TOTAL NUMBER OF CONTRIBUTORS AND NOT NECESSARILY THE TOTAL NUMBER OF ITEMS CONTRIBUTED.

PART I, LINE 32B

THE MUSEUM MAY, FROM TIME TO TIME, SELL ART WORKS ACQUIRED AS NON-CASH CONTRIBUTIONS THROUGH THIRD PARTIES SUCH AS PUBLIC AUCTION HOUSES, PRIVATE DEALERS, OR INDIVIDUALS. IN EACH CASE, THE MUSEUM ENTERS INTO A CONTRACT OR AGREEMENT WITH THE THIRD PARTY CONDUCTING OR PARTICIPATING IN THE SALE AND ADHERES TO ITS OWN PUBLISHED POLICY REGARDING SUCH SALES AS WELL AS APPLICABLE IRS LAWS AND STANDARDS OF ACCOUNTING.

PART I, LINE 33

IN ACCORDANCE WITH FASB'S SFAS 116, THE MUSEUM DOES NOT TREAT DONATIONS OF PROPERTY OF THE TYPES DESCRIBED IN PART I OF SCHEDULE M AS REVENUE OR CAPITALIZE ITS COLLECTIONS BECAUSE THEY ARE USED TO SUPPORT ITS NON-PROFIT EDUCATIONAL MISSION, AND, SHOULD THE PROPERTY BE SOLD, PROCEEDS FROM SUCH SALE WOULD BE USED SOLELY TO ACQUIRE OTHER ITEMS FOR THE COLLECTION. THESE ACCOUNTING STANDARDS ARE ALSO ENDORSED BY THE AMERICAN ALLIANCE OF MUSEUMS AND THE ASSOCIATION OF ART MUSEUM DIRECTORS, OF WHICH ORGANIZATIONS THE MUSEUM IS A MEMBER. Supplemental Information to Form 990 or 990-EZ

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.



Name of the organization

METROPOLITAN MUSEUM OF ART

13-1624086

PART III

MISSION AND PROGRAM SERVICE ACCOMPLISHMENTS

THE MISSION OF THE METROPOLITAN MUSEUM OF ART IS TO COLLECT, PRESERVE, STUDY, EXHIBIT, AND STIMULATE APPRECIATION FOR AND ADVANCE KNOWLEDGE OF WORKS OF ART THAT COLLECTIVELY REPRESENT THE BROADEST SPECTRUM OF HUMAN ACHIEVEMENT AT THE HIGHEST LEVEL OF QUALITY, ALL IN THE SERVICE OF THE PUBLIC AND IN ACCORDANCE WITH THE HIGHEST PROFESSIONAL STANDARDS.

THE METROPOLITAN MUSEUM OF ART WAS FOUNDED ON APRIL 13, 1870 BY A GROUP OF CIVIC LEADERS, ART COLLECTORS, AND PHILANTHROPISTS. THE PREMISE ON WHICH THE MUSEUM WAS FOUNDED IS "FOR THE PURPOSE OF ESTABLISHING AND MAINTAINING IN NEW YORK CITY A MUSEUM AND LIBRARY OF ART, OF ENCOURAGING AND DEVELOPING THE STUDY OF THE FINE ARTS, AND THE APPLICATION OF ARTS TO MANUFACTURE AND PRACTICAL LIFE, OF ADVANCING THE GENERAL KNOWLEDGE OF KINDRED SUBJECTS, AND, TO THAT END, OF FURNISHING POPULAR INSTRUCTION."

THE MUSEUM HAS SINCE BECOME THE PREEMINENT CULTURAL INSTITUTION IN THE WESTERN HEMISPHERE, SERVING A PUBLIC THAT EXTENDS FAR BEYOND NEW YORK CITY TO ALL THE UNITED STATES AND, INDEED, THE WORLD. 6.2 MILLION PEOPLE VISITED THE MUSEUM DURING FISCAL YEAR 2014. FOR THE THIRD YEAR IN A ROW, ATTENDANCE HAS EXCEEDED SIX MILLION-THE HIGHEST LEVELS OF VISITORSHIP SINCE MORE THAN 40 YEARS AGO. THIS INCLUDES ATTENDANCE AT BOTH THE MAIN BUILDING AND THE CLOISTERS MUSEUM AND GARDENS. THE MUSEUM RANKS AS NEW YORK'S PREMIER TOURIST ATTRACTION, WITH 57% OF ITS 6.2 MILLION ANNUAL

Schedule O (Form 990 or 990-EZ) 2013	Pa
Name of the organization	Employer identification number
METROPOLITAN MUSEUM OF ART	13-1624086

VISITORS FROM OUTSIDE THE TRI-STATE AREA.

WITH THE START OF A SEVEN DAY SCHEDULE ON JULY 1, 2013, THIS WAS THE FIRST YEAR THE MUSEUM WAS OPEN TO THE PUBLIC SEVEN DAYS A WEEK, THROUGHOUT THE YEAR. THE OPENING TIME WAS MOVED TO 10:00 A.M., WHILE SCHOOL GROUPS WERE OFFERED EARLY ADMISSION BEGINNING AT 9:30 A.M. VISITORS IN FISCAL YEAR 2014 WERE DRAWN IN LARGE NUMBERS TO THE NEW EUROPEAN PAINTINGS GALLERIES, WHICH OPENED IN MAY 2013, AND THE RECENTLY RENOVATED ANNA WINTOUR COSTUME CENTER, WHICH OPENED IN MAY 2014. ANOTHER ATTENDANCE HIGH POINT WAS THE CLOISTERS UNPRECEDENTED ATTENDANCE OVER THE PAST FISCAL YEAR, WHICH COINCIDED WITH ITS 75TH ANNIVERSARY YEAR. AN ADDITIONAL 110,000 VISITORS VISITED THE CLOISTERS' EXHIBITIONS, COLLECTIONS DISPLAYS, AND GARDENS, COMPARED TO THE YEAR BEFORE. IN ADDITION TO THE NUMBER OF VISITORS, THE MUSEUM WELCOMED ITS 151,271 LOYAL MEMBERS TO VARIOUS MEMBERS-ONLY EVENTS INCLUDING EXHIBITION PREVIEW DAYS, RECEPTIONS, LECTURES, PRIVATE DINNERS, AND BENEFITS.

PART III (CONTINUED)

THE MUSEUM'S COLLECTIONS COMPRISE WORKS OF ART FROM ANCIENT, MEDIEVAL, AND MODERN TIMES AND FROM ALL AREAS OF THE WORLD. THEY OFFER A SURVEY OF ART FROM ANCIENT CIVILIZATIONS OF ASIA, AFRICA, SOUTH AMERICA, THE PACIFIC ISLANDS, EGYPT, THE NEAR EAST, AND GREECE AND ROME, TO THE PRESENT TIME. THE MUSEUM ALSO POSSESSES COLLECTIONS OF EUROPEAN PAINTINGS, MEDIEVAL ART AND ARCHITECTURE, ARMS AND ARMOR, DRAWINGS AND PRINTS, PHOTOGRAPHS, COSTUMES, MUSICAL INSTRUMENTS, ISLAMIC ART, EUROPEAN SCULPTURE AND DECORATIVE ARTS, AND AMERICAN ART. THE MUSEUM MAINTAINS

Schedule O (Form 990 or 990-EZ) 2013	Page
Name of the organization	Employer identification number
METROPOLITAN MUSEUM OF ART	13-1624086

ONE OF THE MOST COMPREHENSIVE ART AND ARCHITECTURE LIBRARIES IN THE UNITED STATES. THE COLLECTIONS ARE MAINTAINED FOR PUBLIC EXHIBITION, EDUCATION, AND RESEARCH.

THE MUSEUM CONTINUED TO ENHANCE THE COLLECTION IN FISCAL YEAR 2014 THROUGH KEY ACQUISITIONS INCLUDING A CUBIST PAINTING BY FERNAND LEGER WITH FUNDS PROVIDED BY LEONARD LAUDER IN ADDITION TO HIS MAJOR DONATION IN FISCAL YEAR 2013; THE ARTHUR AND CHARLOTTE VERSHBOW COLLECTION OF JAPANESE ILLUSTRATED BOOKS FROM THE SEVENTEENTH TO THE NINETEENTH CENTURY; A PAINTING BY CHARLES LE BRUN OF EVERHARD JABACH (1618-1695) AND HIS FAMILY; FOUR LATE BYZANTINE ICONS DEPICTING THE BAPTISM OF ANASTASIS FROM THE LIFE OF CHRIST, SAINT JOHN THE THEOLOGIAN WITH HIS SCRIBE PROCHOROS, AND SAINT NICHOLAS; THE THRONE OF NJOUTEU, A CEREMONIAL SEAT FROM THE KINGDOM OF BANSOA; FIVE DEVOTIONAL PAINTINGS ON COPPER BY NICOLAS ENRIQUEZ (1704-1790) AND A COVERLET; A RARE PORPHYRY VESSEL FROM ANTIQUITY; AND SIXETY-FOUR OCCUPATIONAL PORTRAITS BY IRVING PENN (1917 - 2009).

PART III (CONTINUED)

THE CURATORIAL PROGRAMS ARE SUPPORTED BY NUMEROUS SERVICES AND RESOURCES. THE DEPARTMENTS OF PAINTINGS, PAPER, OBJECTS AND TEXTILE CONSERVATION PREPARE AND REVIEW EVERY ARTWORK SELECTED FOR A NEW INSTALLATION, SPECIAL EXHIBITION OR LOAN. THIS CONSERVATION EFFORT RANKS WITH THE BEST OF THE WORLD'S MAJOR MUSEUMS. THE THOMAS J. WATSON LIBRARY HOUSES VALUABLE RESEARCH MATERIAL AVAILABLE TO THE STAFF AND PUBLIC FOR CURATORIAL, EDUCATION, AND PUBLICATION PROJECTS. IN FISCAL YEAR 2014, 11,005 VISITS WERE MADE BY OUTSIDE RESEARCHERS (A 23% INCREASE FROM FY13) AND 1,911 NEW

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OUTSIDE RESEARCHERS WERE REGISTERED. THE MUSEUM LIBRARIES CIRCULATED 52,851 ITEMS TO READERS. ELEVEN WEEKLY SESSIONS OF STORY TIME IN NOLEN LIBRARY REACHED OVER 15,815 CHILDREN AND THEIR CAREGIVERS, AN INCREASE OF 29% OVER FISCAL YEAR 2013. THE LIBRARY CONTINUED TO DIGITIZE RARE COLLECTION MATERIALS, BOTH PRINTED AND MANUSCRIPT, AND TO MAKE THEM AVAILABLE ONLINE, AVERAGING MORE THAN 100,000 PAGE HITS PER MONTH. THE MUSEUM CONTINUES TO BE A LEADING MUSEUM PUBLISHER IN THE WORLD AND AGAIN PRODUCED AN IMPRESSIVE NUMBER OF PUBLICATIONS, MANY TITLES RECEIVING EXCELLENT REVIEWS OR WINNING PRESTIGIOUS AWARDS. IN FISCAL YEAR 2014, THE EDITORIAL DEPARTMENT PUBLISHED TWENTY NINE PUBLICATIONS, INCLUDING FOURTEEN EXHIBITION CATALOGUES, SEVEN COLLECTION AND OTHER SCHOLARLY CATALOGUES, FOUR GUIDEBOOKS AND FOUR BULLETINS. THE METROPOLITAN MUSEUM OF ART GUIDE, NEWLY PUBLISHED IN 2012, IS NOW AVAILABLE IN TEN TRANSLATED LANGUAGES, AS WELL AS IN ELECTRONIC FORM. THE EDITORIAL DEPARTMENT ALSO PUBLISHED ITS FIRST DIGITAL COLLECTION CATALOGUE, THE CESNOLA COLLECTION OF CYPRIOT ART.

PART III (CONTINUED)

THE MUSEUM'S EXHIBITION PROGRAM IS EXCEPTIONALLY DIVERSE, PRESENTING ABOUT 40-45 TEMPORARY EXHIBITIONS, PERMANENT COLLECTION ROTATIONS, AND OUTGOING LOAN SHOWS PER YEAR FOCUSING ON A WIDE RANGE OF THEMES, PERIODS, CULTURES, AND INDIVIDUAL ARTISTS. THE FOLLOWING EXHIBITIONS WERE AMONG THE HIGHLIGHTS THIS YEAR: "INTERWOVEN GLOBE: THE WORLDWIDE TEXTILE TRADE, 1500-1800;" "JANET CARDIFF: THE FORTY PART MOTET;" "MEDIEVAL TREASURES FROM HILDESHEIM;" "BALTHUS: CATS AND GIRLS-PAINTINGS AND PROVOCATIONS;" "ARTISTS AND AMATEURS: ETCHING IN EIGHTEENTH-CENTURY FRANCE;" "THE NELSON

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A. ROCKEFELLER VISION: IN PURSUIT OF THE BEST IN THE ARTS OF AFRICA, OCEANIA, AND THE AMERICAS;" "WILLIAM KENTRIDGE: THE REFUSAL OF TIME;" "SILLA: KOREA'S GOLDEN KINGDOM;" "VENETIAN GLASS BY CARLO SCARPA: THE VENINI COMPANY, 1932-1947;" "JEWELS BY JAR;" "CLEOPATRA'S NEEDLE;" "INK ART: PAST AS PRESENT IN CONTEMPORARY CHINA;" "THE AMERICAN WEST IN BRONZE, 1850-1925;" "PIERO DELLA FRANCESCA: PERSONAL ENCOUNTERS;" "ANTONIO CANOVA: THE SEVEN LAST WORKS;" "CHARLES MARVILLE: PHOTOGRAPHER OF PARIS;" "RADIANT LIGHT: STAINED GLASS FROM CANTERBURY CATHEDRAL AT THE CLOISTERS;" "THE PASSIONS OF JEAN-BAPTISTE CARPEAUX;" "LOST KINGDOMS: HINDU-BUDDHIST SCULPTURE OF EARLY SOUTHEAST ASIA, 5TH TO 8TH CENTURY;" "GOYA AND THE ALTAMIRA FAMILY;" "THE ROOF GARDEN COMMISSION: DAN GRAHAM WITH GÜNTHER VOGT;" "CHARLES JAMES: BEYOND FASHION;" "THE PRE-RAPHAELITE LEGACY: BRITISH ART AND DESIGN;" "GARRY WINOGRAND."

THE PERMANENT COLLECTION AND SPECIAL EXHIBITIONS CONTINUE TO BE ENHANCED BY A VARIETY OF EDUCATIONAL AND CONCERTS & LECTURES PROGRAMS. THE MUSEUM SERVES ALL AGE GROUPS, FROM PRE-SCHOOL CHILDREN TO SENIOR CITIZENS, AND MAINTAINS A BROAD RANGE OF EDUCATIONAL AND OUTREACH PROGRAMS. BUILDING ON THE PRIOR YEAR, THE MUSEUM CONTINUED TO CREATE NEW EVENTS IN WHICH LIVING ARTISTS ACTIVELY PARTICIPATED, OFFERING UNIQUE PERSPECTIVES. NOTABLE WAS THE SECOND PERFORMING-ARTIST RESIDENCY WITH THE ARTIST COLLECTIVE ALARM WITH SOUND, WHO COLLABORATED ON NUMEROUS PROJECTS WITH CURATORS, EDUCATORS, AND STAFF THROUGHOUT THE MUSEUM. LAST YEAR THE MUSEUM ORGANIZED OVER 28,000 EDUCATIONAL EVENTS REACHING APPROXIMATELY 700,000 PEOPLE REPRESENTING AN INCREASINGLY NEW AND DIVERSE AUDIENCE. OF THE

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38,000 WHO ATTENDED A "MET MUSEUM PRESENTS" TICKETED PROGRAM, 51 PERCENT HAD NEVER BEFORE ATTENDED A CONCERT OR LECTURE AT THE MUSEUM. A HIGHLIGHT FOR THE CONCERTS AND LECTURES PROGRAM WAS THE TEDXMET EVENT, WHICH ENGAGED A RANGE OF VOICES FROM BOTH INSIDE AND OUTSIDE THE MET FOR A DAY LONG SERIES OF MINI LECTURES.

AT THE MAIN BUILDING AND THE CLOISTERS, THE MUSEUM WELCOMED 6,300 SCHOOL CLASSES, REPRESENTING 226,567 STUDENTS. TEACHER TRAINING, THROUGH ONSITE AND ONLINE WORKSHOPS, AS WELL AS PRINTED AND WEB-BASED TEACHER RESOURCES, WHICH ARE FREE UPON REQUEST FOR ALL NYC PUBLIC SCHOOLS AND AVAILABLE IN PDF FORM FOR SCHOOLS WORLDWIDE, ENABLE K-12 EDUCATORS TO MORE FULLY UTILIZE THE MUSEUM'S COLLECTIONS IN THEIR CURRICULA.

PART III (CONTINUED)

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DURING THE YEAR, 62,016 INDIVIDUALS PARTICIPATED IN FAMILY PROGRAMMING AND MANY MORE WERE ABLE TO ENRICH THEIR VISITS THROUGH PRINTED FAMILY GUIDES. FAMILIES WITH CHILDREN MAY ALSO DOWNLOAD AND PRINT THESE GUIDES AT HOME IN PREPARATION FOR THEIR VISIT. ADDITIONALLY, THE MUSEUM OFFERS SPECIALLY DESIGNED PROGRAMS FOR A DEDICATED TEEN AUDIENCE: 2,236 VISITORS (AGED 11 THROUGH 18) TOOK PART IN THESE PROGRAMS. FOR GENERAL VISITORS, THE MUSEUM OFFERS A COMPREHENSIVE SERIES OF LECTURES, GALLERY TALKS, AND GUIDED TOURS IN NUMEROUS LANGUAGES THROUGHOUT THE DAY, MOST OF WHICH ARE FREE WITH MUSEUM ADMISSION. IN FISCAL YEAR 2014, 107,428 PEOPLE PARTICIPATED IN GALLERY TALKS AND GUIDED TOURS, AND 22,829 ATTENDED LECTURES. THE MUSEUM IS COMMITTED TO REACHING OUT TO POPULATIONS THROUGHOUT THE NEW YORK CITY COMMUNITY WHO MAY NOT BE FAMILIAR WITH THE MUSEUM. THE MUSEUM ALSO OFFERS A FULL RANGE OF PROGRAMS FOR VISITORS

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WITH VISION, HEARING, LEARNING, AND MOBILITY IMPAIRMENTS, AS WELL AS FOR THOSE WITH DEMENTIA AND THEIR CAREGIVERS. IN FISCAL YEAR 2014, 6,460 SUCH VISITORS PARTICIPATED IN 354 PROGRAMS.

A SIGNIFICANT ACHIEVEMENT IN THE MUSEUM'S ONGOING EFFORTS TO ENGAGE WITH THE GLOBAL COMMUNITY WAS THE INAUGURAL GLOBAL MUSEUM LEADERS COLLOQUIUM (GMLC), HELD AT THE MUSEUM IN APRIL. THE TWO-WEEK CONFERENCE FOR MUSEUM LEADERS PRIMARILY FROM ASIA, AFRICA, AND LATIN AMERICA PROVIDED OPPORTUNITIES FOR SUSTAINED GROUP DISCUSSION ON VARIOUS FACETS OF MUSEUM MANAGEMENT-FROM CURATORIAL AND CONSERVATION WORK TO THE NEW CHALLENGES AND OPPORTUNITIES IN MARKETING, DEVELOPMENT, AND DIGITAL TECHNOLOGY.

DESPITE THE EVER-INCREASING CHALLENGE TO MEET OPERATING NEEDS, THE MUSEUM IS COMMITTED TO FINDING WAYS TO BE MORE RESPONSIVE TO THE INTERESTS OF ITS AUDIENCE. IN ORDER TO SERVE OUR MANY AUDIENCES MORE EFFECTIVELY, THE MUSEUM LAST YEAR CONDUCTED OVER NINETEEN VISITOR STUDIES SURVEYING OVER 9,000 VISITORS. QUARTERLY SURVEYS OF VISITORS AT BOTH THE MAIN BUILDING AND THE CLOISTERS POLL INDIVIDUALS AS THEY ENTER TO DETERMINE GEOGRAPHIC ORIGIN, AGE, LEVEL OF EDUCATION, ETHNICITY, INCOME AND PROFESSION. NUMEROUS OTHER SURVEYS AND STUDIES EVALUATE SPECIFIC PROGRAMS. IN FISCAL YEAR 2014, APPROXIMATELY 36% OF VISITORS TO THE MUSEUM WERE FROM OTHER COUNTRIES. THUS, AS THE NUMBER OF NON-ENGLISH SPEAKING VISITORS INCREASES, PROVIDING SERVICES TO MEET THEIR NEEDS BECOMES EVER MORE IMPORTANT. THE MUSEUM OFFERS A FOREIGN VISITORS INFORMATION DESK; A MUSEUM MAP AND INFORMATION BROCHURE IN ELEVEN LANGUAGES; AND

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MULTI-LINGUAL WALKING TOURS, GALLERY TALKS, AND VISITOR INFORMATION ON THE MUSEUM'S WEBSITE.

PART III (CONTINUED)

FISCAL YEAR 2014 SAW THE METROPOLITAN MUSEUM OF ART'S DIGITAL MEDIA DEPARTMENT AT THE FOREFRONT OF SEVERAL OF THE MUSEUM'S DEFINING ACHIEVEMENTS AND INITIATIVES. FORMED IN FISCAL YEAR 2011, THE DEPARTMENT IS CHARGED TO BOLSTER THE MUSEUM'S EFFORTS TO EXPAND ITS AUDIENCES THROUGH THE USE OF DIGITAL MEDIA, LEADING THE CREATION, PRODUCTION, PRESENTATION, AND DISSEMINATION OF MULTIMEDIA CONTENT BOTH WITHIN THE GALLERIES AND ONLINE.

THE MUSEUM'S WEBSITE, METMUSEUM.ORG, RECEIVED MORE THAN 40 MILLION VISITS IN FISCAL YEAR 2014, OF WHICH APPROXIMATELY 61% WERE FIRST TIME VISITS. THE COLLECTION ONLINE, WHICH PROVIDES ACCESS TO THE MUSEUM'S DATABASE OF 400,000 COLLECTION RECORDS, WAS NEWLY DESIGNED AND CONTINUED TO DRAW THE MAJORITY OF TRAFFIC TO THE SITE. OUR SOCIAL MEDIA CHANNELS CONTRIBUTED SIGNIFICANTLY TO SITE TRAFFIC AND OVERALL AWARENESS OF THE MUSEUM'S EXHIBITIONS AND PROGRAMS. THE MUSEUM'S FACEBOOK ACCOUNT INCREASED BY 29% TO REACH MORE THAN 1,100,000 LIKES; THE TWITTER ACCOUNT INCREASED 30% TO REACH MORE THAN 758,000 FOLLOWERS; THE INSTAGRAM INCREASED A REMARKABLE 280% TO REACH MORE THAN 178,000 FOLLOWERS AND WON A WEBBY AWARD IN THE SOCIAL: ARTS AND CULTURE CATEGORY; AND THE PINTEREST ACCOUNT CROSSED 557,000 FOLLOWERS. THE WEBSITE ALSO MADE AVAILABLE THE WIDE RANGE OF PUBLIC PROGRAMS OFFERED IN THE MUSEUM. DOZENS OF LECTURES, PANELS, AND OTHER EDUCATIONAL PROGRAMS WERE VIDEOTAPED AND PRESENTED IN THE MET MEDIA SECTION OF THE MUSEUM'S WEBSITE.

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FINDING NEW WAYS TO ENGAGE WITH OUR AUDIENCE IS AN ONGOING COMMITMENT, AND THIS YEAR WE AGAIN BUILT ON A SERIES OF AWARD-WINNING METROPOLITAN MUSEUM ONLINE INITIATIVES INSPIRED BY OUR VAST COLLECTION. 82ND & FIFTH, THE AWARD-WINNING YEAR-LONG SERIES WHICH STARTED IN JANUARY, INVITED 100 CURATORS TO TALK ABOUT 100 WORKS THAT CHANGED THE WAY THEY SEE THE WORLD. THE SERIES WAS COMPLETED IN FISCAL YEAR 2014 WITH ALL 100 VIDEOS AVAILABLE ONLINE. METPUBLICATIONS, OUR ONLINE PORTAL TO THE INSTITUTION'S RENOWNED COMPREHENSIVE PUBLISHING PROGRAM, REACHED 1,500 TITLES AND INCORPORATED THE MUSEUM'S FULL FIVE-DECADE PUBLISHING RECORD. NEW THIS YEAR WERE METCOLLECTS, AN ONGOING SERIES THAT HIGHLIGHTS THE MUSEUM'S MOST RECENT GIFTS AND ACQUISITIONS, AND ONE MET. MANY WORLDS., A WEB FEATURE THAT PRESENTS 500 COLLECTION HIGHLIGHTS THROUGH A NEW AND UNCONVENTIONAL INTERPRETIVE LENS IN ELEVEN LANGUAGES. THE EVER POPULAR ONLINE PUBLICATION, HEILBRUNN TIMELINE OF ART HISTORY, CONTINUES TO EVOLVE AND EXPAND, AND STEADILY RECEIVES MORE THAN ONE MILLION VISITS PER MONTH.

THE MUSEUM'S EMAIL MARKETING AND SOCIAL MEDIA PROGRAMS CONTINUED TO GROW, DELIVERING CONTENT AND INTERACTIVE EXPERIENCES VIA PLATFORMS THAT ARE PART OF OUR VISITORS' DAILY LIVES. THE EMAIL MARKETING PROGRAM, WHICH INCLUDES BOTH ENGAGEMENT AND FUNDRAISING CAMPAIGNS, GREW TO NEARLY 200,000 SUBSCRIBERS IN FISCAL YEAR 2014. THIS INCLUDES EMAIL ACQUIRED VIA THE SUCCESSFUL WIFI CAPTIVE PORTAL, WHICH AVERAGES 500 EMAIL SIGNUPS PER DAY.

IN FISCAL YEAR 2014 THE MUSEUM LAUNCHED AN ENTIRELY NEW ON-SITE AUDIO GUIDE, CULMINATING A YEAR OF WORK THAT TOUCHED ON EVERY ASPECT OF THE

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PROGRAM INCLUDING DEVELOPING A ROBUST BACK-END CONTENT MANAGEMENT SYSTEM, ORGANIZING THE EXTENSIVE BACK CATALOG OF AUDIO CONTENT (OVER 3,000 AUDIO MESSAGES), AND DESIGNING THE AUDIO GUIDE APP DISTRIBUTED TO VISITORS. THE RELAUNCHED AUDIO GUIDE AVAILABLE TO ONSITE VISITORS ATTRACTED OVER 200,000 USERS IN FISCAL YEAR 2014. THE GUIDE IS AN ESSENTIAL PART OF THE VISITOR EXPERIENCE AND PRESENTS AN EASY TO USE EXPERIENCE IN TEN LANGUAGES WITH HIGH-QUALITY INTERPRETIVE MEDIA ON THE ENCYCLOPEDIC PERMANENT COLLECTION AS WELL AS SPECIAL EXHIBITION TOURS. IN PARTICULAR, THE AUDIO GUIDE IS AN IMPORTANT RESOURCE FOR FIRST TIME AND FOREIGN VISITORS, WHO MADE UP 80% OF ITS USERS. IN AN EFFORT TO EXPAND OUR OFFERINGS, NEW TRANSLATIONS INCREASED THE BODY OF FOREIGN LANGUAGE CONTENT BY 30% AND EIGHT SPECIAL EXHIBITIONS TOURS WERE ADDED OVER THE YEAR.

PART III (CONTINUED)

THE MUSEUM AND ITS PERMANENT COLLECTIONS ARE CONTINUOUSLY ENHANCED THROUGH NEW INSTALLATIONS AND CAPITAL PROJECTS. IN FISCAL YEAR 2014, THE TWO-YEAR RENOVATION AND RECONFIGURATION OF THE COSTUME INSTITUTE WAS COMPLETED AND MARKED BY THE OPENING OF THE ANNA WINTOUR COSTUME CENTER. AS A SOURCE OF LEARNING AND INSPIRATION FOR RESEARCHES AND DESIGNERS, THIS NEW SPACE, WHICH WAS OFFICIALLY OPENED BY FIRST LADY MICHELLE OBAMA, WILL INCLUDE REDESIGNED EXHIBITION GALLERIES, A CONSERVATION LABORATORY, COLLECTION STORAGE SPACE, AND A LIBRARY. CONSTRUCTION ON A COMPREHENSIVE REDESIGN OF THE METROPOLITAN'S FOUR-BLOCK-LONG PLAZA CONTINUED THROUGH THIS FISCAL YEAR - INCLUDING THE CREATION OF NEW FOUNTAINS AS WELL AS SEASONAL LANDSCAPING, IMPROVED ACCESS TO THE MUSEUM, AND NEW LIGHTING.

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CONSTRUCTION WAS COMPLETED IN THE BEGINNING OF FISCAL YEAR 2015.

THE PROCESS OF THINKING ABOUT THE FULL SCOPE OF THE FACILITIES AND HOW BEST TO ALLOCATE PHYSICAL RESOURCES IN THE COMING DECADES CONTINUED TO BE A PRIORITY THIS YEAR. UNDER THE DIRECTION OF BEYER BLINDER BELLE ARCHITECTS AND PLANNERS LLP, THE MUSEUM COMPLETED ITS LONG TERM FEASIBILITY STUDY. THE IMPLEMENTATION OF PHASE ONE, A RENOVATION OF THE LILA ACHESON WALLACE WING, BEGAN WITH THE FORMATION OF AN AD HOC TRUSTEE ARCHITECT SELECTION AND DESIGN COMMITTEE. THE TWO AND HALF YEAR AUDIENCE ENGAGEMENT STUDY CONTINUED WITH THE ASSISTANCE OF WOLFF OLINS AGENCY. THE RESULTS OF THIS INITIATIVE WILL HELP EXPAND THE MUSEUM'S REACH AND RELEVANCE IN ANTICIPATION OF THE UPCOMING OCCUPANCY OF THE WHITNEY MUSEUM OF ART'S MARCEL BREUER BUILDING. FISCAL YEAR 2014 ALSO SAW THE START OF A FIVE-YEAR STRATEGIC PLAN. TOGETHER, THESE STUDIES WILL DIRECTLY INFLUENCE THE WORK THAT IS DONE IN THE NEXT FISCAL YEAR TO ENHANCE CURRENT PROGRAMMING, AUDIENCE ENGAGEMENT, AND CARE AND DISPLAY OF THE COLLECTION.

PART VI, LINE 1A

GOVERNING BODY DELEGATED AUTHORITY

IN ACCORDANCE WITH THE MUSEUM'S BY-LAWS, THE EXECUTIVE COMMITTEE HAS THE RIGHT TO EXERCISE ALL THE POWERS OF THE BOARD OF TRUSTEES DURING INTERVALS BETWEEN MEETINGS OF THE BOARD OF TRUSTEES OTHER THAN THE POWERS TO (A) PURCHASE, SELL, MORTGAGE OR LEASE REAL PROPERTY ON BEHALF OF THE MUSEUM; (B) FILL VACANCIES IN THE BOARD OF TRUSTEES OR IN ANY COMMITTEE; (C) AMEND OR REPEAL THE BY-LAWS OR ADOPT NEW BY-LAWS; AND (D) AMEND OR REPEAL ANY RESOLUTION OF THE BOARD OF TRUSTEES WHICH BY ITS TERMS SHALL

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NOT BE SO AMENDABLE OR REPEALABLE.

PART VI, LINE 2

TWO TRUSTEES OF THE MUSEUM, HAMILTON E. JAMES AND J. TOMILSON HILL, HAVE A BUSINESS RELATIONSHIP. BOTH ARE OFFICERS OF THE BLACKSTONE GROUP.

PART VI, LINE 6

GOVERNING BODY AND MANAGEMENT

THE MUSEUM DOES NOT HAVE "MEMBERS" AS SUCH TERM IS DEFINED IN THE INSTRUCTIONS TO FORM 990. HOWEVER, THE MUSEUM USES THE TERM "MEMBERS" IN CONNECTION WITH DUES, FEES, GOODS, BENEFITS, PRIVILEGES AND SERVICES AS ESTABLISHED BY THE MUSEUM FROM TIME TO TIME.

PART VI, LINE 11B

PROCESS THE ORGANIZATION USES TO REVIEW THE FORM 990 THE MUSEUM'S FORM 990, INCLUDING REQUIRED SCHEDULES AND SUPPORTING DOCUMENTATION, IS INITIALLY COMPILED BY THE MUSEUM'S CONTROLLER'S OFFICE PRIMARILY RELYING ON THE MUSEUM'S GENERAL LEDGER, AUDITED FINANCIAL STATEMENTS AND OTHER FINANCIAL SYSTEMS. THE MUSEUM'S CONTROLLER, CHIEF FINANCIAL OFFICER, GENERAL COUNSEL, AND EXTERNAL TAX ADVISORS PARTICIPATE IN A SERIES OF DETAILED REVIEWS OF THE FORM 990. THE FORM 990 IS ALSO REVIEWED BY THE MUSEUM'S SENIOR MANAGEMENT, INCLUDING THE MUSEUM'S DIRECTOR AND PRESIDENT, THE AUDIT COMMITTEE OF THE MUSEUM'S BOARD OF TRUSTEES, AND EXTERNAL LEGAL COUNSEL. A COMPLETE COPY IS PROVIDED TO EACH MEMBER OF THE BOARD OF TRUSTEES PRIOR TO FILING THE RETURN. THE MUSEUM'S EXTERNAL TAX ADVISORS FILE THE FORM 990 ELECTRONICALLY WITH THE INTERNAL REVENUE SERVICE.

PART VI, LINE 12C

CONFLICT OF INTEREST POLICY

THE MUSEUM REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH THE CONFLICTS OF INTEREST POLICY BY REOUIRING ONGOING DISCLOSURE OF POTENTIAL CONFLICTS, REVIEW OF SUCH DISCLOSURES BY MUSEUM OFFICERS, AND RECUSAL BY CONFLICTED INDIVIDUALS WHEN WARRANTED. SPECIFICALLY, ON AN ANNUAL BASIS, THE MUSEUM SEEKS TO ENSURE COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY BY SENDING RELEVANT WRITTEN POLICIES TO SENIOR STAFF, TRUSTEES AND ADVISORY MEMBERS OF COMMITTEES OF THE BOARD OF TRUSTEES. EACH POLICY IS SENT WITH A STATEMENT, WHICH MUST BE COMPLETED, SIGNED AND RETURNED TO THE MUSEUM'S SENIOR VICE PRESIDENT, SECRETARY AND GENERAL COUNSEL. THE STATEMENT REQUIRES EACH INDIVIDUAL TO CONFIRM THAT HE OR SHE HAS (I) RECEIVED A COPY OF THE POLICY, (II) READ AND UNDERSTOOD THE POLICY AND (III) AGREES TO COMPLY WITH THE POLICY. THE INDIVIDUAL IS ALSO ASKED TO DISCLOSE ANY SITUATION OR AREAS OF POTENTIAL CONFLICTS OF INTEREST THAT HE OR SHE OR A MEMBER OF HIS OR HER FAMILY, OR AN ENTITY IN WHICH ANY OF THEM HAVE A MATERIAL OWNERSHIP INTEREST, MAY HAVE. THE STATEMENTS ARE COMPLETED AND RETURNED TO THE GENERAL COUNSEL'S OFFICE. WHEN POTENTIAL CONFLICTS ARISE, THEY ARE INITIALLY EVALUATED BY THE GENERAL COUNSEL WITH THE ASSISTANCE OF OUTSIDE LEGAL COUNSEL IF NECESSARY. CONFLICTS ARE RESOLVED IN CONSULTATION WITH THE MUSEUM'S DIRECTOR AND PRESIDENT (FOR STAFF) AND THE CHAIRMAN OF THE BOARD OF TRUSTEES AND THE LEGAL COMMITTEE OF THE MUSEUM'S BOARD (FOR TRUSTEES, INCLUDING THE DIRECTOR AND THE PRESIDENT). IF A CONFLICT OF INTEREST IS

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DETERMINED TO EXIST, THE INDIVIDUAL IS PROHIBITED FROM PARTICIPATING IN THE BOARD'S DELIBERATIONS AND DECISIONS REGARDING THE TRANSACTION.

A SUMMARY OF THE CONFLICTS OF INTEREST STATEMENTS COMPLETED BY TRUSTEES AND A SUMMARY OF ALL ACTUAL OR POTENTIAL CONFLICTS OF INTEREST AND RELATED PARTY TRANSACTIONS ARE PRESENTED TO THE AUDIT COMMITTEE EACH YEAR. A SUMMARY OF THE CONFLICTS OF INTEREST DISCLOSED BY EXECUTIVE STAFF IS PRESENTED TO THE DIRECTOR AND PRESIDENT EACH YEAR.

PART VI, LINES 15A AND 15B

COMPENSATION REVIEW

THE COMPENSATION COMMITTEE ("THE COMMITTEE") OF THE BOARD OF TRUSTEES IS RESPONSIBLE FOR OVERSIGHT OF COMPENSATION AND BENEFITS PROGRAMS FOR THE MUSEUM'S OFFICERS, AND FOR ENSURING THAT THE COMPENSATION POLICIES OF THE MUSEUM ARE CONSISTENT WITH AND IN SUPPORT OF THE MUSEUM'S MISSION, VALUES AND LONG-TERM GOALS. THE INTENT OF THE COMMITTEE IS TO PROVIDE A TOTAL COMPENSATION PROGRAM FOR THE OFFICERS THAT PROMOTES THE MUSEUM'S LONG-TERM OBJECTIVES, AND IS REASONABLE, APPROPRIATE AND FAIR.

ANNUALLY, AN INDEPENDENT COMPENSATION CONSULTANT AND THE COMMITTEE REVIEWS THE TOTAL COMPENSATION OF EACH OFFICER OF THE MUSEUM. THE INDEPENDENT COMPENSATION CONSULTANT MAKES RECOMMENDATIONS WITH RESPECT TO THE TOTAL COMPENSATION OF EACH OFFICER, AND THE COMMITTEE APPROVES THE COMPENSATION. COMPENSATION DECISIONS ARE MADE WITH REFERENCE TO COMPARABILITY DATA FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE ROLES AT SIMILARLY SITUATED ORGANIZATIONS PRESENTED BY THE

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INDEPENDENT COMPENSATION CONSULTANT. THE INDEPENDENT COMPENSATION CONSULTANT AND THE COMMITTEE ALSO CONSIDER OTHER RELEVANT FACTORS IN DETERMINING COMPENSATION, INCLUDING THE MUSEUM'S MISSION AND GOALS, THE PERFORMANCE OF EACH OFFICER, AND THE MARKET FOR EXECUTIVE TALENT. THE COMMITTEE COMPLIES WITH THE "REBUTTABLE PRESUMPTION" PROCEDURES FOR DETERMINING THAT COMPENSATION IS REASONABLE UNDER INTERNAL REVENUE CODE SECTION 4958. DELIBERATIONS AND DECISIONS REGARDING COMPENSATION ARRANGEMENTS ARE CONTEMPORANEOUSLY DOCUMENTED IN THE MEETING MINUTES.

PART VI, LINE 19

PUBLIC AVAILABILITY OF OTHER DOCUMENTS

THE MUSEUM'S AUDITED FINANCIAL STATEMENTS ARE INCLUDED IN THE MUSEUM'S ANNUAL REPORT, WHICH IS MADE AVAILABLE TO THE PUBLIC ON THE MUSEUM'S WEBSITE. THE MUSEUM MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC UPON REQUEST.

PART VIII, LINE 8

FUNDRAISING EVENTS

NOTE THAT THE \$4,023,328 LOSS ON LINE 8(C) EXCLUDES THE \$17,520,752 OF CONTRIBUTIONS WHICH IF INCLUDED WOULD RESULT IN A NET SURPLUS OF \$13.5 MILLION.

PART VIII, LINE 10 GROSS SALES LESS RETURNS AND ALLOWANCES NOTE THAT THE GROSS PROFIT REPORTED ON LINE 10(C) DOES NOT INCLUDE EXPENSES REPORTED ON PART IX, LINE 25.

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PART XI, LINE 9

OTHER CHANGES IN NET ASSETS OR FUND BALANCES

INCLUDES THE FOLLOWING:

PARTNERSHIP UBI	(\$5,335,448)
CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS	\$5,002,054
PENSION RELATED CHANGES OTHER THAN NPPC	(\$5,877,933)
DECREASE IN FAIR VALUE OF INTEREST RATE	
EXCHANGE AGREEMENT	(\$730,116)
RECLASSIFICATIONS, FEES AND OTHER	(\$15,167,752)
TOTAL	(\$22,109,195)

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE MISSION OF THE METROPOLITAN MUSEUM OF ART IS TO COLLECT, PRESERVE, STUDY, EXHIBIT, AND STIMULATE APPRECIATION FOR AND ADVANCE KNOWLEDGE OF WORKS OF ART THAT COLLECTIVELY REPRESENT THE BROADEST SPECTRUM OF HUMAN ACHIEVEMENT AT THE HIGHEST LEVEL OF QUALITY, ALL IN THE SERVICE OF THE PUBLIC AND IN ACCORDANCE WITH THE HIGHEST PROFESSIONAL STANDARDS.

		ATTACHMENT	2
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES	<u> </u>		
DESCRIPTION	GRANTS	EXPENSES	REVENUE
MERCHANDISING OPERATIONS		38,091,552.	37,280,087.

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Schedule O (Form 990 or 990-EZ) 2013		Page 2
Name of the organization	Employer identifi	cation number
METROPOLITAN MUSEUM OF ART	13-1624	086
	ATTACHMEN	NT 2 (CONT'D)
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES		
DESCRIPTION GRANTS	EXPENSES	REVENUE
OPERATION OF RESTAURANTS	22,616,752.	
SPECIAL EXHIBITIONS	16,261,342.	
COMMUNITY PROGRAMS AND LIBRARIES	14,327,072.	
RENOVATION OF GALLERIES	4,014,357.	
COMMUNICATIONS	10,393,137.	17,236.
MEMBERSHIP SERVICES INC BULLETIN	6,461,859.	
OPERATION OF AUDITORIUM	3,466,554.	1,607,796.
OPERATION OF PARKING GARAGE	1,621,899.	
CORPORATE EVENTS & FUNDRAISING	904,020.	805,705.
OPERATING SERVICES	5,788,126.	
TOTALS	123,946,670.	39,710,824.

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AR, CA, CO, CT,

NEWARK, NJ 07105

FL,GA,HI,IL,KS,KY,LA,ME,MD,MA,MI,

MN,MS,MO,NH,NJ,NM,NY,NC,ND,OH,OK,OR,PA,

RI,SC,TN,UT,VA,WA,WV,WI,

ATTACHMENT 4

990, PART VII- COMPENSATION OF THE FIVE HIGHEST	PAID IND. CONTRACTORS	
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
RC DOLNER, LLC 2 PENN PLAZA EAST, 11TH FLOOR	CONSTRUCTION MANAGER	5,614,200.

ATTACHMENT 3

Name of the organization	Employer identification number			
METROPOLITAN MUSEUM OF ART 13-1624086				
METROPOLITAN MUSEUM OF ART 13-1624086				

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION				
MASTERPIECE INTERNATIONAL 39 BROADWAY NEW YORK, NY 10006	CUSTOMHOUSE BROKERS	1,821,689.				
GIF SERVICES 2525 BRUNSWICK AVENUE SUITE 204 LINDEN, NJ 07036	SHIPPING	1,513,899.				
DILLER SCOFIDIO & RENFRO LLC 601 WEST 26TH STREET SUITE 1815 NEW YORK, NY 100001	CONSULTANT/CI	1,511,396.				
LP ART 274 RUE DE ROSNY, MONTREUIL PARIS, FRANCE, 93100	SHIPPING	1,428,789.				

METROPOLITAN MUSEUM OF ART

13-1624086

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

See separate instructions.

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

Internal Revenue Service Name of the organization

JSA

Department of the Treasury

SCHEDULE R (Form 990)

METROPOLITAN MUSEUM OF ART

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
_(1)	-				
_(2)	-				
(3)	-				
_(4)	-				
(5)	-				
(6)	_				

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g Section 5 contr ent	rolled
						Yes	No
_(1)							
_(2)							
_(3)							
_(4)							
_(5)							
_(6)							
_(7)							

3 Open to Public Inspection Employer identification number 13-1624086

OMB No. 1545-0047

Schedule R (Form 990) 2013

METROPOLITAN MUSEUM OF ART

13-1624086

Schedule R (Form 990) 2013

Page 2

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	() Disprop alloca		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ner?	(k) Percentage ownership
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,			Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												

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

(a) Name, address, and EIN of related organization		(c) Legal domicile (state or foreign country)		(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percen- tage ownership	(i) Section 512(b)(1 controlle entity?
								Yes No
(1) CHARITABLE TRUSTS (13)								
т	RUST		N/A	TRUST				x
<u>(2)</u>								
(3)								
(4)								
(5)								
(6)								\square
<u>(7)</u>								

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Schedule R (Form 990) 2013

METROPOLITAN MUSEUM OF ART

13-1624086

Schedule R (Form 990) 2013

Pa	rt V Transactions With Related Organizations Complete if the organization answered "	Yes" on Form 990, Pa	rt IV, line 34, 35b, or 36.				
Not	te. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	No	
1	During the tax year, did the organization engage in any of the following transactions with one or more						
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			1a			
b	Gift, grant, or capital contribution to related organization(s)			1b			
С	Gift, grant, or capital contribution from related organization(s)			1c			
d	Loans or loan guarantees to or for related organization(s)			1d			
е	Loans or loan guarantees by related organization(s)			1e			
f	Dividends from related organization(s)			1f			
q	Sale of assets to related organization(s)			1g		1	
ĥ	Purchase of assets from related organization(s)			1h		1	
i	Exchange of assets with related organization(s)						
i	Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets to related organization(s)					<u> </u>	
,				<u>1j</u>			
k	Lease of facilities, equipment, or other assets from related organization(s)			1k			
ī	Performance of services or membership or fundraising solicitations for related organization(s)			11		+	
m	Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s)						
 n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			<u>1m</u> 1n	-	<u> </u>	
0	Sharing of paid employees with related organization(s)			10			
U		• • • • • • • • • • • • • • •					
p	Reimbursement paid to related organization(s) for expenses						
р q	Reimbursement paid by related organization(s) for expenses			1q			
ч							
r	Other transfer of cash or property to related organization(s)			1r			
	Other transfer of cash or property from related organization(s)	• • • • • • • • • • • • • •		11		+	
2						L	
<u> </u>		r to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.					
	Name of related organization	Transaction	Amount involved	Method of det			
		type (a-s)		amount inv	/olved		
(1)							
<u>()</u>							
(2)							
(2)							
(2)							
(3)							
(1)							
(4)							
(F)							
(5)							
<u>(6)</u>				Ochodul D (T			
JSA 3E130	09 1.000			Schedule R (For	m 990) 2013	

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METROPOLITAN MUSEUM OF ART

13-1624086

Schedule R (Form 990) 2013

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

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

(a) Name, address, and EIN of entity	(b) (c) Primary activity (state or foreign country)		(d) Predominant income (related, unrelated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?		total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			section 512-514)	Yes	No			Yes	No	(Yes	No	
<u>(1)</u>													
(2)													
(3)													
(4)													
(6)													
(8)													
<u>(9)</u>													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

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Schedule R (Form 990) 2013								
Part VII	Supplemental Information							
	Complete this part to provide additional information for responses to questions on Schedule R (see							
	instructions).							