

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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

2016

Department of the Treasury Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A For the 2016 calendar year, or tax year beginning 07/01, 2016, and ending 06/30, 2017

B Check if applicable: C Name of organization METROPOLITAN MUSEUM OF ART D Employer identification number 13-1624086 E Telephone number (212) 879-5500 G Gross receipts \$ 1,205,931,798.

I Tax-exempt status: X 501(c)(3) 501(c)() (insert no.) 4947(a)(1) or 527 J Website: WWW.METMUSEUM.ORG H(c) Group exemption number

K Form of organization: X Corporation Trust Association Other L Year of formation: 1870 M State of legal domicile: NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities: THE METROPOLITAN MUSEUM OF ART COLLECTS, STUDIES, CONSERVES, AND PRESENTS SIGNIFICANT WORKS OF ART ACROSS ALL TIMES AND CULTURES; SEE SCHEDULE O FOR MORE DETAILS

Table with columns: Revenue, Expenses, Net Assets or Fund Balances. Rows 8-19 detailing contributions, program service revenue, grants, and expenses.

Table with columns: Net Assets or Fund Balances. Rows 20-22 detailing total assets, liabilities, and net assets or fund balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here Signature of officer JAMESON KELLEHER VP, CFO & TREASURER Date 02/13/2018

Paid Preparer Use Only Print/Type preparer's name TRAVIS L PATTON Preparer's signature Date Check self-employed if PTIN P00369623

May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2016)

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE METROPOLITAN MUSEUM OF ART COLLECTS, STUDIES, CONSERVES, AND PRESENTS SIGNIFICANT WORKS OF ART ACROSS ALL TIMES AND CULTURES IN ORDER TO CONNECT PEOPLE TO CREATIVITY, KNOWLEDGE, AND IDEAS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 168,735,051 including grants of \$ 3,443,793) (Revenue \$ 5,459,870)

CURATORIAL DEPARTMENTS, INCLUDING OPERATION OF THE CLOISTERS OPERATIONS OF BREUER, CONSERVATION, CATALOGUING AND SCHOLARLY PUBLICATIONS (INCLUDES FELLOWSHIP AWARDS AND TRAVEL STIPENDS IN THE AMOUNT OF \$3,443,793) - SEE SCHEDULE O FOR MORE INFORMATION

4b (Code:) (Expenses \$ 68,644,058 including grants of \$ 0) (Revenue \$ 0)

GUARDIANSHIP AND MAINTENANCE OF THE MUSEUM AND ITS ART COLLECTION - SEE SCHEDULE O FOR MORE INFORMATION

4c (Code:) (Expenses \$ 25,506,598 including grants of \$ 0) (Revenue \$ 13,407,462)

ACQUISITIONS AND SALES OF ART - SEE SCHEDULE O FOR MORE INFORMATION

4d Other program services (Describe in Schedule O.) ATTACHMENT 1 (Expenses \$ 84,606,199 including grants of \$) (Revenue \$ 4,465,933)

4e Total program service expenses 347,491,906

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		X
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>	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? <i>If "Yes," complete Schedule C, Part III.</i>		X
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? <i>If "Yes," complete Schedule D, Part I.</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>	X	
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? <i>If "Yes," complete Schedule D, Part IV.</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>	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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII.</i>	X	
c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		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? <i>If "Yes," complete Schedule D, Part IX.</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV.</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	X	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions).</i>	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	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>		X

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Part IV Checklist of Required Schedules (continued)

		Yes	No
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>	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? <i>If "Yes," complete Schedule J.</i>	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		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? <i>If "Yes," complete Schedule L, Part I.</i>		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		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):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		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? <i>If "Yes," complete Schedule R, Part I.</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		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)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		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? <i>If "Yes," complete Schedule R, Part VI.</i>		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.	X	

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Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question numbers (1a-14b), Yes, and No. Contains various tax compliance questions and their corresponding 'Yes' or 'No' responses.

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 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?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?; b Each committee with authority to act on behalf of the governing body?; 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.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 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?; 16b 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?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 2
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 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 interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: CONTROLLER'S OFFICE 1000 FIFTH AVENUE NEW YORK, NY 10028-0198 212-879-5500

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DANIEL BRODSKY ELECTIVE TRUSTEE & CHAIRMAN	5.00 0.	X		X				0.	0.	0.
(2) RUSSELL L. CARSON ELECTIVE TRUSTEE & VICE CHAIR	2.00 0.	X		X				0.	0.	0.
(3) RICHARD L. CHILTON, JR. ELECTIVE TRUSTEE & VICE CHAIR	2.00 0.	X		X				0.	0.	0.
(4) LULU C. WANG ELECTIVE TRUSTEE & VICE CHAIR	2.00 0.	X		X				0.	0.	0.
(5) CANDACE K. BEINECKE ELECTIVE TRUSTEE	2.00 0.	X						0.	0.	0.
(6) MERRYL H. TISCH ELECTIVE TRUSTEE FROM 9/2016	1.00 0.	X						0.	0.	0.
(7) WELLINGTON Z. CHEN ELECTIVE TRUSTEE	1.00 0.	X						0.	0.	0.
(8) MARK FISCH ELECTIVE TRUSTEE	1.00 0.	X						0.	0.	0.
(9) MARINA KELLEN FRENCH ELECTIVE TRUSTEE	1.00 0.	X						0.	0.	0.
(10) JEFFREY W. GREENBERG ELECTIVE TRUSTEE	2.00 0.	X						0.	0.	0.
(11) CHARLES N. ATKINS ELECTIVE TRUSTEE	1.00 0.	X						0.	0.	0.
(12) J. TOMILSON HILL ELECTIVE TRUSTEE	1.00 0.	X						0.	0.	0.
(13) BONNIE B. HIMMELMAN ELECTIVE TRUSTEE	1.00 0.	X						0.	0.	0.
(14) PHILIP H. ISLES ELECTIVE TRUSTEE TO 9/16	1.00 0.	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) HAMILTON E. JAMES ----- ELECTIVE TRUSTEE	2.00 0.	X					0.	0.	0.	
(16) DEBRA BLACK ----- ELECTIVE TRUSTEE	1.00 0.	X					0.	0.	0.	
(17) STEPHEN M. CUTLER ----- ELECTIVE TRUSTEE	1.00 0.	X					0.	0.	0.	
(18) DASHA ZHUKOVA ----- ELECTIVE TRUSTEE FROM 9/2016	1.00 0.	X					0.	0.	0.	
(19) BIJAN MOSSAVAR-RAHMANI ----- ELECTIVE TRUSTEE	1.00 0.	X					0.	0.	0.	
(20) JEFFREY M. PEEK ----- ELECTIVE TRUSTEE	2.00 0.	X					0.	0.	0.	
(21) BLAIR EFFRON ----- ELECTIVE TRUSTEE	2.00 0.	X					0.	0.	0.	
(22) JOHN PAULSON ----- ELECTIVE TRUSTEE	1.00 0.	X					0.	0.	0.	
(23) SAMANTHA BOARDMAN ----- ELECTIVE TRUSTEE	2.00 0.	X					0.	0.	0.	
(24) SIR PAUL RUDDOCK ----- ELECTIVE TRUSTEE	1.00 0.	X					0.	0.	0.	
(25) WILLIAM C. RUDIN ----- ELECTIVE TRUSTEE TO 9/16	1.00 0.	X					0.	0.	0.	
1b Sub-total							0.	0.	0.	
c Total from continuation sheets to Part VII, Section A							11,428,305.	0.	1,768,356.	
d Total (add lines 1b and 1c)							11,428,305.	0.	1,768,356.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **316**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 3		

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 **51**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) BONNIE J. SACERDOTE ----- ELECTIVE TRUSTEE	2.00 0.	X					0.	0.	0.	
(27) ALEJANDRO SANTO DOMINGO ----- ELECTIVE TRUSTEE	2.00 0.	X					0.	0.	0.	
(28) ANDREW M. SAUL ----- ELECTIVE TRUSTEE	2.00 0.	X					0.	0.	0.	
(29) JAMES E. SHIPP ----- ELECTIVE TRUSTEE	1.00 0.	X					0.	0.	0.	
(30) ANDREW SOLOMON ----- ELECTIVE TRUSTEE	1.00 0.	X					0.	0.	0.	
(31) ANN G. TENENBAUM ----- ELECTIVE TRUSTEE	1.00 0.	X					0.	0.	0.	
(32) BEATRICE STERN ----- ELECTIVE TRUSTEE	1.00 0.	X					0.	0.	0.	
(33) BARRIE A. WIGMORE ----- ELECTIVE TRUSTEE	1.00 0.	X					0.	0.	0.	
(34) ANNA WINTOUR ----- ELECTIVE TRUSTEE	1.00 0.	X					0.	0.	0.	
(35) JAMES BREYER ----- ELECTIVE TRUSTEE	1.00 0.	X					0.	0.	0.	
(36) CAROLINE DIAMOND HARRISON ----- ELECTIVE TRUSTEE	1.00 0.	X					0.	0.	0.	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 316

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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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METROPOLITAN MUSEUM OF ART

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(37) HOWARD MARKS ----- ELECTIVE TRUSTEE	1.00 0.	X						0.	0.	0.
(38) N. ANTHONY COLES ----- ELECTIVE TRUSTEE	2.00 0.	X						0.	0.	0.
(39) ALVARO SAIEH ----- ELECTIVE TRUSTEE	1.00 0.	X						0.	0.	0.
(40) COLVIN GRANNUM ----- ELECTIVE TRUSTEE	1.00 0.	X						0.	0.	0.
(41) PHILIP F. MARITZ ----- ELECTIVE TRUSTEE	1.00 0.	X						0.	0.	0.
(42) BILL DE BLASIO ----- EX-OFFICIO TRUSTEE	1.00 0.	X						0.	0.	0.
(43) MELISSA MARK-VIVERITO ----- EX-OFFICIO TRUSTEE	1.00 0.	X						0.	0.	0.
(44) MITCHELL J. SILVER ----- EX-OFFICIO TRUSTEE	1.00 0.	X						0.	0.	0.
(45) TOM FINKELPEARL ----- EX-OFFICIO TRUSTEE	1.00 0.	X						0.	0.	0.
(46) SCOTT STRINGER ----- EX-OFFICIO TRUSTEE	1.00 0.	X						0.	0.	0.
(47) THOMAS P. CAMPBELL ----- DIR TO 7/17, EX-OFFICIO TRUSTEE	35.00 0.			X				1,067,096.	0.	359,670.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **316**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(48) DANIEL H. WEISS PRES&CEO FROM 6/17; EX-OF TRUS	35.00 0.			X				842,002.	0.	59,669.
(49) CLYDE B. JONES III SVP INST. ADVANCEMENT	35.00 0.			X				472,440.	0.	46,673.
(50) CARRIE R. BARRATT DEPUTY DIR COLLECTIONS/ADMIN.	35.00 0.			X				358,499.	0.	59,009.
(51) QUINCY K. HOUGHTON ASSOC DIR OF EXHIB FROM 8/16	35.00 0.			X				141,159.	0.	25,877.
(52) SHARON H. COTT SVP, SEC & GEN COUNSEL	35.00 0.			X				436,152.	0.	58,961.
(53) JAMESON KELLEHER VP, CFO & TREASURER FROM 9/16	35.00 0.			X				293,810.	0.	58,286.
(54) TOM JAVITS VP CONSTRUCTION & FACILITIES	35.00 0.			X				360,135.	0.	58,628.
(55) WILL MANZER VP&GNL MGR MERCH&RET FROM 9/16	35.00 0.			X				97,309.	0.	8,846.
(56) DEBRA A. MCDOWELL VP HUMAN RESOURCES TO 10/17	35.00 0.			X				316,473.	0.	46,395.
(57) ELYSE TOPALIAN VP FOR COMMUNICATIONS TO 6/17	35.00 0.			X				254,405.	0.	57,332.
(58) SUZANNE E. BRENNER SVP & CHIEF INVESTMENT OFFICER	35.00 0.			X				1,081,250.	0.	229,903.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 316

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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 ►

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(59) LAUREN A. MESERVE CHIEF INVESTMENT OFFICER	35.00 0.			X				1,006,994.	0.	207,515.
(60) JEFFREY SPAR VP TECH & CHIEF TECH OFFICER	35.00 0.			X				352,827.	0.	58,997.
(61) KENNETH N. WEINE VP & CCO FROM 1/17	35.00 0.			X				0.	0.	0.
(62) BARBARA D. BOEHM SR CURATOR FOR THE CLOISTERS	35.00 0.					X		883,575.	0.	44,966.
(63) KEN M. WEINSTEIN GM MERCH FIN, OPS, SYS TO 8/16	35.00 0.					X		463,566.	0.	47,206.
(64) SREE SREENIVASAN CHIEF DIGITAL OFFICER TO 6/16	35.00 0.					X		356,095.	0.	38,533.
(65) STEPHEN A. MANZI CHIEF DEVELOP OFFICER INDIV	35.00 0.					X		290,783.	0.	58,678.
(66) KEITH R. CHRISTIANSEN CHAIRMAN, EUROPEAN PAINTINGS	35.00 0.					X		288,623.	0.	58,414.
(67) OLENA M. PASLAWSKY FMR. SVP, CFO & TREAS TO 6/16	35.00 0.						X	788,153.	0.	42,594.
(68) JENNIFER RUSSELL FMR. ASSOC DIR OF EXHIB TO 6/16	35.00 0.						X	222,378.	0.	29,688.
(69) NINA MCN. DIEFENBACH FMR. VP DEVEL & MEMBER TO 6/16	35.00 0.						X	223,795.	0.	42,489.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **316**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes entries for JO PROSSER and CYNTHIA ROUND.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 316

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

Yes/No table for questions 3, 4, and 5.

Section B. Independent Contractors

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

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation.

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 VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b	27,461,815.			
	c	Fundraising events	1c	19,143,189.			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	16,839,947.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	249,047,705.			
	g	Noncash contributions included in lines 1a-1f: \$		18,334,993.			
	h	Total. Add lines 1a-1f		312,492,656.			
Program Service Revenue				Business Code			
	2a	EDUCATIONAL PRGMS, CONCERTS & LECTURES	532000	6,806,033.	5,603,340.	1,202,693.	
	b	PHOTO RENTALS & FILM FEES	532000	30,250.		30,250.	
	c						
	d						
	e						
	g	Total. Add lines 2a-2f		6,836,283.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts).		21,706,888.		-17,654,525.	39,361,413.
	4	Income from investment of tax-exempt bond proceeds		0.			
	5	Royalties		51,579.			51,579.
			(i) Real (ii) Personal				
	6a	Gross rents					
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					0.
	7a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
				761,436,405.			
	b	Less: cost or other basis and sales expenses		572,866,882.			
	c	Gain or (loss)		188,569,523.			
d	Net gain or (loss)		188,569,522.			188,569,522.	
8a	Gross income from fundraising events (not including \$ 19,143,189. of contributions reported on line 1c). See Part IV, line 18	a	978,844.				
b	Less: direct expenses	b	5,862,816.				
c	Net income or (loss) from fundraising events		-4,883,972.			-4,883,972.	
9a	Gross income from gaming activities. See Part IV, line 19	a	0.				
b	Less: direct expenses	b	0.				
c	Net income or (loss) from gaming activities		0.				
10a	Gross sales of inventory, less returns and allowances	a	56,032,589.				
b	Less: cost of goods sold	b	53,449,425.				
c	Net income or (loss) from sales of inventory		2,583,164.	2,263,613.	319,551.		
Miscellaneous Revenue			Business Code				
11a	CORPORATE EVENTS	722320	2,872,556.	825,907.	2,046,649.		
b	PARKING GARAGE	812930	2,568,318.			2,568,318.	
c	RESTAURANT	722511	27,548,219.		1,702,883.	25,845,336.	
d	All other revenue	900099	13,407,462.	13,407,462.			
e	Total. Add lines 11a-11d		46,396,555.				
12	Total revenue. See instructions		573,752,675.	22,100,322.	-12,352,499.	251,512,196.	

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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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0.			
2 Grants and other assistance to domestic individuals. See Part IV, line 22	3,325,043.	3,325,043.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	118,750.	118,750.		
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	8,867,297.	3,798,371.	4,571,904.	497,022.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	128,710,033.	104,229,687.	18,973,379.	5,506,967.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	21,681,342.	18,323,435.	2,683,015.	674,892.
9 Other employee benefits	37,111,574.	31,869,124.	4,067,918.	1,174,532.
10 Payroll taxes	9,538,748.	8,224,140.	1,011,170.	303,438.
11 Fees for services (non-employees):				
a Management	0.			
b Legal	1,833,180.	205,428.	1,627,752.	
c Accounting	843,602.		843,602.	
d Lobbying	88,232.	88,232.		
e Professional fundraising services. See Part IV, line 17.	192,435.			192,435.
f Investment management fees	18,181,635.		18,181,635.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	11,986,080.	7,318,837.	3,575,922.	1,091,321.
12 Advertising and promotion	6,335,653.	5,916,866.	2,000.	416,787.
13 Office expenses	38,721,858.	34,262,210.	2,383,314.	2,076,334.
14 Information technology	1,737,523.	661,954.	893,870.	181,699.
15 Royalties	3,152.	3,152.		
16 Occupancy	5,776,655.	5,776,655.		
17 Travel	2,821,952.	2,626,750.	90,746.	104,456.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	387,555.	307,552.	56,020.	23,983.
20 Interest	12,264,166.	11,039,662.	1,224,504.	
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	53,663,140.	46,012,252.	7,508,466.	142,422.
23 Insurance	2,315,941.	1,615,639.	700,302.	
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.)				
a PURCHASES OF ART	25,506,598.	25,506,598.		
b RESTAURANT SERVICES&SUPPLIES	25,951,452.	25,950,652.	800.	
c REPAIRS & MAINTENANCE	5,263,144.	5,223,481.	39,663.	
d CATERING SERVICES	3,129,617.	2,389,856.	432,412.	307,349.
e All other expenses _____	3,467,321.	2,697,580.	650,234.	119,507.
25 Total functional expenses. Add lines 1 through 24e	429,823,678.	347,491,906.	69,518,628.	12,813,144.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0.			

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METROPOLITAN MUSEUM OF ART

13-1624086

Form 990 (2016)

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	7,237,908.	1 53,777,494.
	2	Savings and temporary cash investments	0.	2 0.
	3	Pledges and grants receivable, net	144,519,181.	3 202,602,890.
	4	Accounts receivable, net	12,685,488.	4 10,729,116.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0.	5 0.
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0.	6 0.
	7	Notes and loans receivable, net	0.	7 0.
	8	Inventories for sale or use	9,711,431.	8 7,113,639.
	9	Prepaid expenses and deferred charges	10,830,587.	9 9,912,363.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1115255443.	
	b	Less: accumulated depreciation	10b 721,793,092.	10c 393,462,351.
	11	Investments - publicly traded securities	ATCH 5 2,399,037,345.	11 2,604,459,356.
	12	Investments - other securities. See Part IV, line 11	760,492,215.	12 829,025,594.
	13	Investments - program-related. See Part IV, line 11	0.	13 0.
	14	Intangible assets	0.	14 0.
	15	Other assets. See Part IV, line 11	70,130,600.	15 72,315,918.
16	Total assets. Add lines 1 through 15 (must equal line 34)	3,828,721,524.	16 4,183,398,721.	
Liabilities	17	Accounts payable and accrued expenses	83,065,990.	17 75,662,875.
	18	Grants payable	0.	18 0.
	19	Deferred revenue	5,372,877.	19 5,328,692.
	20	Tax-exempt bond liabilities	185,497,941.	20 171,422,365.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21 0.
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0.	22 0.
	23	Secured mortgages and notes payable to unrelated third parties	22,522,000.	23 21,675,000.
	24	Unsecured notes and loans payable to unrelated third parties	248,618,472.	24 248,666,806.
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	247,819,509.	25 226,346,967.
	26	Total liabilities. Add lines 17 through 25.	792,896,789.	26 749,102,705.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets	687,449,710.	27 839,340,568.
	28	Temporarily restricted net assets	1,388,377,528.	28 1,535,971,088.
	29	Permanently restricted net assets	959,997,497.	29 1,058,984,360.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30
	31	Paid-in or capital surplus, or land, building, or equipment fund		31
	32	Retained earnings, endowment, accumulated income, or other funds		32
33	Total net assets or fund balances	3,035,824,735.	33 3,434,296,016.	
34	Total liabilities and net assets/fund balances	3,828,721,524.	34 4,183,398,721.	

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	573,752,675.
2	Total expenses (must equal Part IX, column (A), line 25)	2	429,823,678.
3	Revenue less expenses. Subtract line 2 from line 1	3	143,928,997.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,035,824,735.
5	Net unrealized gains (losses) on investments	5	178,731,218.
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	75,811,066.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,434,296,016.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed 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?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2016)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2016

Open to Public Inspection

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
 Attach to Form 990 or Form 990-EZ.
 Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

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

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

- The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)
- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
 - 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
 - 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
 - 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
 - 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
 - 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
 - 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
 - 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
 - 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
 - 10 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
 - 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
 - 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations.
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2012, (b) 2013, (c) 2014, (d) 2015, (e) 2016, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2012, (b) 2013, (c) 2014, (d) 2015, (e) 2016, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc. (see instructions); 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) 81.47%; 15 Public support percentage from 2015 Schedule A, Part II, line 14 80.83%; 16a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization [X]; 16b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization []; 17a 10%-facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization []; 17b 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization []; 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions [].

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2012, (b) 2013, (c) 2014, (d) 2015, (e) 2016, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2012, (b) 2013, (c) 2014, (d) 2015, (e) 2016, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support; 14 First five years.

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, Value, Percentage. Row 15: Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)), 15, %. Row 16: Public support percentage from 2015 Schedule A, Part III, line 15, 16, %.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, Value, Percentage. Row 17: Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)), 17, %. Row 18: Investment income percentage from 2015 Schedule A, Part III, line 17, 18, %.

- 19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.
19b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2.

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1.

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2, 3.

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2, 3.

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METROPOLITAN MUSEUM OF ART

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Schedule A (Form 990 or 990-EZ) 2016

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2016

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Schedule A (Form 990 or 990-EZ) 2016

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions.	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9	Distributable amount for 2016 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required-explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013.			
d	From 2014.			
e	From 2015.			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b	Excess from 2013. . . .			
c	Excess from 2014. . . .			
d	Excess from 2015. . . .			
e	Excess from 2016. . . .			

Schedule A (Form 990 or 990-EZ) 2016

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Schedule A (Form 990 or 990-EZ) 2016

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

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2016

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

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

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

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

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

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

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

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

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

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3 Volunteer hours for political campaign activities (see instructions) _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955. ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b. ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. 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) 2016

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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 (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		19,448.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)		323,014.	
c Total lobbying expenditures (add lines 1a and 1b)		342,462.	
d Other exempt purpose expenditures		488,793,457.	
e Total exempt purpose expenditures (add lines 1c and 1d)		489,135,919.	
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.		
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000.	
h 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 zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No

4-Year Averaging Period Under section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
c Total lobbying expenditures	259,178.	333,119.	339,239.	342,462.	1,273,998.
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	16,819.	18,573.	18,989.	19,448.	73,829.

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

Table with 3 columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation... a Volunteers? b Paid staff or management... c Media advertisements? d Mailings to members... e Publications... f Grants to other organizations... g Direct contact with legislators... h Rallies, demonstrations... i Other activities? j Total. Add lines 1c through 1i. 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912. c If "Yes," enter the amount of any tax incurred by organization managers under section 4912. d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

Table with 2 columns: Question, Amount. Rows include: 1 Dues, assessments and similar amounts from members. 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year. b Carryover from last year. c Total. 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions).

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Multiple horizontal lines provided for entering supplemental information.

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Schedule C (Form 990 or 990-EZ) 2016

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Part IV Supplemental Information *(continued)*

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

Name of the organization

METROPOLITAN MUSEUM OF ART

Employer identification number

13-1624086

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included in Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

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

Schedule D (Form 990) 2016

JSA 6E1268 1.000

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METROPOLITAN MUSEUM OF ART

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Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Yes No

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2523689299.	2700466038.	2656291524.	2371491241.	2181791580.
b Contributions	106,501,247.	20,417,352.	55,893,860.	38,131,683.	28,030,302.
c Net investment earnings, gains, and losses	388,580,757.	-26,064,305.	131,623,264.	384,102,896.	301,511,700.
d Grants or scholarships	2,998,554.	3,149,811.	2,949,425.	2,940,410.	2,502,016.
e Other expenditures for facilities and programs	122,377,612.	167,979,975.	140,393,185.	134,493,886.	137,340,325.
f Administrative expenses					
g End of year balance	2893395137.	2523689299.	2700466038.	2656291524.	2371491241.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 29.5454 %
- b Permanent endowment 36.6001 %
- c Temporarily restricted endowment 33.8545 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,015,000.		1,015,000.
b Buildings		41,643,852.	28,000,605.	13,643,247.
c Leasehold improvements		1006613512.	639,201,417.	367,412,095.
d Equipment		65,983,079.	54,591,070.	11,392,009.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				393,462,351.

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Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) PRIVATE EQUITY	427,941,297.	FMV
(B) REAL ASSETS	401,084,297.	FMV
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	829,025,594.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ANNUITY & SPLIT-INT OBLIGS.	18,587,587.
(3) PENSION AND OTHER ACCRUED RTRM	207,759,380.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	226,346,967.

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

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METROPOLITAN MUSEUM OF ART

13-1624086

Schedule D (Form 990) 2016

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Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Total revenue reported as 569,163,705.

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

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Total expenses reported as 395,420,684.

Part XIII Supplemental Information.

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

SEE PAGE 5

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Part XIII Supplemental Information (continued)

SCHEDULE D, PART III, LINE 1A

SFAS 116 FOOTNOTE

IN CONFORMITY WITH ACCOUNTING POLICIES GENERALLY FOLLOWED BY ART MUSEUMS, THE VALUE OF THE MUSEUM'S COLLECTIONS HAS BEEN EXCLUDED FROM THE STATEMENT OF FINANCIAL POSITION, 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.

SCHEDULE D, PART III, LINE 4

DESCRIPTION OF ORGANIZATION'S COLLECTIONS & FURTHERANCE OF EXEMPT PURPOSE

THE MUSEUM'S WORLD-CLASS ART COLLECTION SPANS THE GLOBE AND RANGES IN DATE FROM ANCIENT TO CONTEMPORARY ART. 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.

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Part XIII Supplemental Information (continued)

SCHEDULE D, PART V, LINE 3A & 4

INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUNDS: THE MUSEUM'S
ENDOWMENT FUNDS ARE INTENDED TO SUPPORT EDUCATIONAL PROGRAMS, SCHOLARLY
RESEARCH AND PUBLICATIONS, ACQUISITIONS OF WORKS OF ART, CONSERVATION OF
WORKS OF ART, SPECIAL EXHIBITS 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 \$389,911,115 FROM OPERATING
ACTIVITIES AND \$179,252,590 FROM NON-OPERATING ACTIVITIES FOR REVENUE,
GAINS AND OTHER SUPPORT. TOTAL PART XI, LINE 1 \$569,163,705.

SCHEDULE D, PART XI, LINE 2D

RECONCILING ITEMS FOR REVENUE INCLUDE THE FOLLOWING:

ADVERTISING GIFTS-IN-KIND	53,475
FEDERAL INDEMNIFICATION	1,131,557
UTILITIES PROVIDED BY THE CITY OF NEW YORK	13,536,236

TOTAL	14,721,268

SCHEDULE D, PART XI, LINE 4B

RECONCILING ITEMS FOR REVENUE INCLUDE THE FOLLOWING:

MANAGEMENT FEES AND OTHER INVESTMENT EXPENSES	17,821,049
EXCESS INVESTMENT RETURN	241,690,322

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Part XIII Supplemental Information (continued)

COST OF SALES	(53,449,425)
FUNDRAISING EVENTS	(5,862,816)
PROCEEDS FROM SALE OF ART	13,407,462
2015 BOND PROCEEDS	196,790
CORPORATE SPECIAL EVENTS	1,004,386
MUSEUM LOANS	888,213
PARTNERSHIP UBIT	(17,654,525)

TOTAL	198,041,456

SCHEDULE D, PART XII, LINE 2D

RECONCILING ITEMS FOR EXPENSES INCLUDE THE FOLLOWING:

COST OF SALES	53,449,425
FUNDRAISING EVENTS	5,862,816
ADVERTISING GIFTS-IN-KIND	53,475
FEDERAL INDEMNIFICATION	1,131,557
UTILITIES PROVIDED BY THE CITY OF NEW YORK	13,536,431

TOTAL	74,033,704

SCHEDULE D, PART XII, LINE 4B

RECONCILING ITEMS FOR EXPENSES INCLUDE THE FOLLOWING:

DEPRECIATION AND MISCELLANEOUS NON-CAPITAL EXPENSES	50,700,122
PURCHASES OF ART	25,506,598
MANAGEMENT FEES AND OTHER INVESTMENT INCOME	17,821,049

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Part XIII Supplemental Information *(continued)*

INVESTMENT EXPENSES ON THE SERIES 2015 BOND	360,585
CORPORATE SPECIAL EVENTS	1,004,386
MUSEUM LOANS	888,213
EFFECT OF INTEREST RATE SWAP	12,155,745

TOTAL	108,436,698

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990.
- ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

METROPOLITAN MUSEUM OF ART

Employer identification number

13-1624086

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) EUROPE			GRANTMAKING	T. ROUSSEAU FELLOWSHIP	118,750.
(2) EUROPE			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	737,440.
(3) SUB-SAHARAN AFRICA			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	1,673.
(4) EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	125,936.
(5) SOUTH ASIA			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	94,410.
(6) SOUTH AMERICA			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	12,826.
(7) MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	6,269.
(8) NORTH AMERICA			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	36,903.
(9) SOUTH ASIA			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	59,619.
(10) RUSSIA/INDEPENDENT STATES			PROGRAM SERVICES	RESEARCH & EXHIBITIONS	1,059.
(11) CENTRAL AMERICA/CARIBBEAN			INVESTMENTS		704,841,016.
(12) EUROPE			INVESTMENTS		40,900,242.
(13) NORTH AMERICA			INVESTMENTS		15,991,676.
(14)					
(15)					
(16)					
(17)					
3a Sub-total					762,927,819.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					762,927,819.

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

Schedule F (Form 990) 2016

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

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.

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) T. ROUSSEAU FELLOWSHIP	EUROPE/ICELAND/GREENLAND	3	118,750.	CHECK		N/A	N/A
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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METROPOLITAN MUSEUM OF ART

13-1624086

Schedule F (Form 990) 2016

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

Schedule F (Form 990) 2016

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METROPOLITAN MUSEUM OF ART

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Schedule F (Form 990) 2016

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Part V

Supplemental Information

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

MONITORING PROCEDURES- FORM 990, SCHEDULE F, PART I, LINE 2

THE MUSEUM AWARDS GRANTS, EDUCATIONAL TRAVEL STIPENDS AND FELLOWSHIPS ON AN OBJECTIVE AND NONDISCRIMINATORY BASIS. A GRANTS COMMITTEE, COMPRISED OF MUSEUM CURATORS, CONSERVATORS, EDUCATORS, SCIENTISTS AND LIBRARIANS MAKE 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 PERSON OF THE MUSEUM.

EVERY GRANTEE IS ASSIGNED A SPECIFIC SUPERVISOR AT THE START OF THEIR FELLOWSHIP PERIOD. THE SUPERVISOR IS EITHER A CURATOR, CONSERVATOR OR SCIENTIST 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 AND PROFESSIONAL PROGRAMS OFFICE, WHICH IS RESPONSIBLE FOR ALL OF THE FELLOWS, REQUIRES PERIODIC UPDATES ON THE INDIVIDUALS' RESEARCH.

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2016

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

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

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(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 ATTACHMENT 1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total				380,262.	190,159.	190,103.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AR, CA, CO, CT, FL, GA, HI, IL,
KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NV, NH, NJ, NM, NY, NC, ND, OH,
OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI,

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METROPOLITAN MUSEUM OF ART

13-1624086

Schedule G (Form 990 or 990-EZ) 2016

Page 2

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events		
		COSTUME INSTITUTU (event type)	ACQUISITIONS B (event type)	12. (total number)	(add col. (a) through col. (c))		
Revenue	1	Gross receipts	12,232,687.	2,231,496.	5,657,850.	20,122,033.	
	2	Less: Contributions	11,816,187.	2,167,836.	5,159,166.	19,143,189.	
	3	Gross income (line 1 minus line 2).	416,500.	63,660.	498,684.	978,844.	
Direct Expenses	4	Cash prizes					
	5	Noncash prizes					
	6	Rent/facility costs					
	7	Food and beverages					
	8	Entertainment					
	9	Other direct expenses	3,859,159.	331,850.	1,671,807.	5,862,816.	
	10	Direct expense summary. Add lines 4 through 9 in column (d) ▶					5,862,816.
	11	Net income summary. Subtract line 10 from line 3, column (d) ▶					-4,883,972.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
 b If "Yes," explain: _____

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METROPOLITAN MUSEUM OF ART

13-1624086

Schedule G (Form 990 or 990-EZ) 2016

Page 3

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a	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 books and records:

Name ▶ -----

Address ▶ -----

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If "Yes," enter name and address of the third party:

Name ▶ -----

Address ▶ -----

16 Gaming manager information:

Name ▶ -----

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ -----

Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B

THE MEMBERSHIP DEPARTMENT CONTRACTED TELEMARKETING FIRM DONOR SERVICES GROUP (DSG), TO FACILITATE CAMPAIGNS DIRECTED AT CURRENT AND LAPSED MEMBERS OF THE MET THROUGHOUT FISCAL 2017. DSG CALLERS REFERRED TO A SCRIPT, PREAPPROVED BY THE MEMBERSHIP DEPARTMENT, WHEN SOLICITING MEMBERS BY PHONE, WITH A REVISED SCRIPT IMPLEMENTED IN JUNE OF FY17 IN CONJUNCTION WITH THE MEMBERSHIP RECAST.

Schedule G (Form 990 or 990-EZ) 2016

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METROPOLITAN MUSEUM OF ART

13-1624086

Schedule G (Form 990 or 990-EZ) 2016

Page 3

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a 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 books and records:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

IN FISCAL 2017; 20,143 CURRENT MEMBERS WERE CONTACTED BY DSG REQUESTING A CONTRIBUTION TO THE MEMBERSHIP ANNUAL APPEAL; 47,225 CURRENT MEMBERS WERE CONTACTED BY DSG PRIOR TO EXPIRATION WITH MEMBERSHIP RENEWAL REQUESTS; 52,522 LAPSED MEMBERS WERE CONTACTED BY DSG AFTER EXPIRATION WITH A REQUEST TO RENEW THEIR MEMBERSHIP.

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METROPOLITAN MUSEUM OF ART

13-1624086

Schedule G (Form 990 or 990-EZ) 2016

Page 3

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a	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 books and records:

Name ▶ -----

Address ▶ -----

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If "Yes," enter name and address of the third party:

Name ▶ -----

Address ▶ -----

16 Gaming manager information:

Name ▶ -----

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ -----

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE G, PART II, LINE 11 AND FORM 990, PART VIII, LINE 8

NOTE THAT THE \$ 4,883,972 LOSS ON FORM 990, PART VIII, LINE 8(C) EXCLUDES THE \$19,143,189 OF CONTRIBUTIONS WHICH IF INCLUDED, WOULD RESULT IN A NET SURPLUS OF \$14.3 MILLION.

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METROPOLITAN MUSEUM OF ART

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ATTACHMENT 1

990, SCHEDULE G, PART I - HIGHEST PAID FUNDRAISER

NAME AND ADDRESS OF FUNDRAISER	ACTIVITY	DID FUNDRAISER HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS? YES NO	GROSS RECEIPTS FROM ACTIVITY	AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER	AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION
DONOR SERVICES GROUP 1200 WILSHIRE BOULEVARD SUITE 650 LOS ANGELES CA 90017	TELE- MARKETING	X	380,262.	190,159.	190,103.

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

METROPOLITAN MUSEUM OF ART

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

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

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

OMB No. 1545-0047

2016

Open to Public Inspection

Employer identification number

13-1624086

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of non-cash assistance, (h) Purpose of grant or assistance. Rows 1-12.

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
3 Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) (2016)

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METROPOLITAN MUSEUM OF ART

13-1624086

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Schedule I (Form 990) (2016)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 THE BOTHERM FELLOWSHIP	1.	39,583.		N/A	N/A
2 SYLVAN C. AND PAM COLEMAN MEMORIAL FELLOWSHIP	7.	180,083.		N/A	N/A
3 CHESTER DALE FELLOWSHIP	8.	165,813.		N/A	N/A
4 ANNETTE DE LA RENTA FELLOWSHIP	3.	44,833.		N/A	N/A
5 THE DOUGLASS FOUNDATION FELLOWSHIP	1.	42,791.		N/A	N/A
6 SHERMAN FAIRCHILD FOUNDATION FELLOWSHIP	3.	49,833.		N/A	N/A
7 ANDREW W. MELLON ART HISTORY FELLOWSHIP	12.	284,042.		N/A	N/A

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

Schedule I (Form 990) (2016)

JSA

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1	ANDREW W. MELLON CONSERVATION FELLOWSHIP	13.	334,359.		N/A	N/A
2	ANDREW W. MELLON POSTDOCTORAL CURATORIAL FELLOWSHIP	2.	116,243.		N/A	N/A
3	ANDREW W. MELLON COLLECTION SPECIALIST FELLOWSHIP	5.	254,978.		N/A	N/A
4	RESEARCH SCHOLARSHIP IN PHOTOGRAPH CONSERVATION FE	2.	97,096.		N/A	N/A
5	J. CLAWSON MILLS FELLOWSHIP	3.	101,250.		N/A	N/A
6	HAGOP KEVORKIAN FELLOWSHIP	2.	72,125.		N/A	N/A
7	SLIFKA FOUNDATION FELLOWSHIP	2.	43,333.		N/A	N/A

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

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METROPOLITAN MUSEUM OF ART

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Schedule I (Form 990) (2016)

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1	HANNS SHARZENSKI AND BRIGITTE HORNEY FELLOWSHIP	2	70,250.		N/A	N/A
2	JANE AND MORGAN WHITNEY FELLOWSHIP	21	496,709.		N/A	N/A
3	POLAIRE WEISSMAN FELLOWSHIP	1	43,333.		N/A	N/A
4	LEONARD A. LAUDER FELLOWSHIPS IN MODERN ART	6	226,436.		N/A	N/A
5	MARKOE	2	64,583.		N/A	N/A
6	ANDREW W. MELLON INDIAN CONSERVATION FELLOWSHIP PR	2	46,667.		N/A	N/A
7	MELLON SUPPLEMENTAL FELLOWSHIP FUNDS	87	532,701.		N/A	N/A

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

Schedule I (Form 990) (2016)

JSA

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 ARIAH FELLOWSHIP	1	16,000.		N/A	N/A
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

MONITORING PROCEDURES- FORM 990, SCHEDULE I, PART I, LINE 2

THE MUSEUM AWARDS GRANTS, EDUCATIONAL TRAVEL STIPENDS AND FELLOWSHIPS ON

AN OBJECTIVE AND NONDISCRIMINATORY BASIS. A GRANTS COMMITTEE, COMPRISED

OF MUSEUM CURATORS, CONSERVATORS, EDUCATORS, SCIENTISTS AND LIBRARIANS

MAKE SELECTIONS BASED UPON COMPETITIVE WRITTEN APPLICATIONS. THE PURPOSE

OF THE GRANTS IS TO PROVIDE AN OPPORTUNITY FOR THE GRANTEEES 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 PERSON OF THE MUSEUM.

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

EVERY GRANTEE IS ASSIGNED A SPECIFIC SUPERVISOR AT THE START OF THEIR FELLOWSHIP PERIOD. THE SUPERVISOR IS EITHER A CURATOR, CONSERVATOR OR SCIENTIST 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 AND PROFESSIONAL PROGRAMS OFFICE, WHICH IS RESPONSIBLE FOR ALL OF THE FELLOWS, REQUIRES PERIODIC UPDATES ON THE INDIVIDUALS' RESEARCH.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

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

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

▶ Attach to Form 990.

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

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

METROPOLITAN MUSEUM OF ART

Employer identification number

13-1624086

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input checked="" type="checkbox"/> First-class or charter travel		
<input type="checkbox"/> Travel for companions		
<input type="checkbox"/> Tax indemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<input checked="" type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Personal services (such as, maid, chauffeur, chef)		
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	X	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	X	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
<input checked="" type="checkbox"/> Compensation committee		
<input checked="" type="checkbox"/> Independent compensation consultant		
<input checked="" type="checkbox"/> Form 990 of other organizations		
<input checked="" type="checkbox"/> Written employment contract		
<input checked="" type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	X	
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	X	
c Participate in, or receive payment from, an equity-based compensation arrangement?		X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?		X
b Any related organization?		X
If "Yes" on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?		X
b Any related organization?		X
If "Yes" on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.	X	
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		X
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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

Schedule J (Form 990) 2016

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 THOMAS P. CAMPBELL DIR TO 7/17, EX-OFFICIO TRUSTEE	944,474.	0.	122,622.	37,501.	322,169.	1,426,766.	0.
2 DANIEL H. WEISS PRES&CEO FROM 6/17, EX-OF TRUS	670,600.	0.	171,402.	37,500.	22,169.	901,671.	0.
3 CLYDE B. JONES III SVP INST. ADVANCEMENT	468,828.	0.	3,612.	37,500.	9,173.	519,113.	0.
4 CARRIE R. BARRATT DEPUTY DIR COLLECTIONS/ADMIN.	355,000.	0.	3,499.	37,501.	21,508.	417,508.	0.
5 QUINCY K. HOUGHTON SSOC DIR OF EXHIB FROM 8/16	105,917.	35,000.	242.	15,246.	10,631.	167,036.	0.
6 SHARON H. COTT SVP, SEC & GEN COUNSEL	432,143.	0.	4,009.	37,500.	21,461.	495,113.	0.
7 JAMESON KELLEHER VP, CFO & TREASURER FROM 9/16	275,246.	0.	18,564.	37,158.	21,128.	352,096.	0.
8 TOM JAVITS VP CONSTRUCTION & FACILITIES	349,955.	0.	10,180.	37,500.	21,128.	418,763.	0.
9 DEBRA A. MCDOWELL VP HUMAN RESOURCES TO 10/17	311,837.	0.	4,636.	37,500.	8,895.	362,868.	0.
10 ELYSE TOPALIAN VP FOR COMMUNICATIONS TO 6/17	250,686.	0.	3,719.	36,618.	20,714.	311,737.	0.
11 SUZANNE E. BRENNER SVP & CHIEF INVESTMENT OFFICER	606,036.	470,313.	4,901.	207,734.	22,169.	1,311,153.	300,500.
12 LAUREN A. MESERVE CHIEF INVESTMENT OFFICER	580,695.	424,589.	1,710.	197,826.	9,689.	1,214,509.	283,364.
13 JEFFREY SPAR VP TECH & CHIEF TECH OFFICER	350,970.	0.	1,857.	37,501.	21,496.	411,824.	0.
14 BARBARA D. BOEHM SR CURATOR FOR THE CLOISTERS	173,071.	0.	710,504.	23,308.	21,658.	928,541.	0.
15 KEN M. WEINSTEIN GM MERCH FIN, OPS, SYS TO 8/16	177,642.	0.	285,924.	33,403.	13,803.	510,772.	0.
16 SREE SREENIVASAN CHIEF DIGITAL OFFICER TO 6/16	155,022.	0.	201,073.	27,168.	11,365.	394,628.	0.

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 STEPHEN A. MANZI CHIEF DEVELOP OFFICER INDIV	287,985.	0.	2,798.	37,500.	21,178.	349,461.	0.
2 KEITH R. CHRISTIANSEN CHAIRMAN, EUROPEAN PAINTINGS	282,018.	0.	6,605.	37,500.	20,914.	347,037.	0.
3 OLENA M. PASLAWSKY PR. SVP, CFO & TREAS TO 6/16	259,037.	0.	529,116.	37,501.	5,093.	830,747.	0.
4 JENNIFER RUSSELL PR. ASSOC DIR OF EXHIB TO 6/16	191,863.	0.	30,515.	28,945.	743.	252,066.	0.
5 NINA MCN. DIEFENBACH PR. VP DEVEL & MEMBER TO 6/16	76,680.	0.	147,115.	31,728.	10,761.	266,284.	0.
6 JO PROSSER PR. VP MERCH & RETAIL TO 4/16	127,384.	0.	236,217.	14,465.	6,513.	384,579.	0.
7 CYNTHIA ROUND PR. SVP, MKTG&EXT RELS TO 6/16	208,085.	0.	259,100.	37,500.	11,549.	516,234.	0.
8							
9							
10							
11							
12							
13							
14							
15							
16							

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METROPOLITAN MUSEUM OF ART

13-1624086

Schedule J (Form 990) 2016

Page 3

Part III Supplemental Information

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

SCHEDULE J, PART I, LINE 1A

FIRST-CLASS TRAVEL - FOR CALENDAR YEAR 2016, THE MUSEUM'S DIRECTOR AND CHIEF EXECUTIVE OFFICER, THOMAS CAMPBELL, AND THE MUSEUM'S PRESIDENT AND CHIEF OPERATING OFFICER, DANIEL WEISS, FLEW FIRST CLASS DOMESTICALLY ON AN EXCEPTIONAL BASIS WHERE THE AIRLINES DID NOT OFFER BUSINESS CLASS. THIS TRAVEL WAS NOT TREATED AS TAXABLE COMPENSATION.

PERSONAL HOUSING - FOR CALENDAR YEAR 2016, THE MUSEUM PROVIDED A HOUSING ALLOWANCE TO THE PRESIDENT AND CHIEF OPERATING OFFICER, DANIEL WEISS. THIS ALLOWANCE WAS TREATED AS TAXABLE COMPENSATION. FOR CALENDAR YEAR 2016, THE MUSEUM PROVIDED THE DIRECTOR AND CHIEF EXECUTIVE OFFICER, THOMAS CAMPBELL, WITH A RESIDENCE THAT HE WAS REQUIRED TO LIVE IN AS A CONDITION OF EMPLOYMENT FOR THE CONVENIENCE OF THE MUSEUM. THE VALUE OF THIS HOUSING WAS NOT TREATED AS TAXABLE COMPENSATION.

SCHEDULE J, PART I, LINE 4A

THE FOLLOWING PERSONS RECEIVED A SEVERANCE PAYMENT IN CALENDAR YEAR

2016:

USA

6E1605 2.000 06571Q K686 2/15/2018 8:32:30 AM V 16-7.16

Part III Supplemental Information

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

OLENA PASLAWSKY - \$492,816

JO PROSSER - \$211,150

CYNTHIA ROUND - \$203,919

KEN WEINSTEIN - \$223,441

SREE SREENIVASAN - \$155,000

SCHEDULE J, PART I, LINE 4B

THE FOLLOWING PERSONS PARTICIPATED IN OR RECEIVED PAYMENTS FROM A SUPPLEMENTAL NON -QUALIFIED RETIREMENT PLAN IN CALENDAR YEAR 2016:

THOMAS CAMPBELL - \$90,000

DANIEL WEISS - \$66,500

BARBARA BOEHM - \$708,048

SCHEDULE J, PART I, LINE 7

PURSUANT TO THE MUSEUM'S INCENTIVE COMPENSATION PLAN FOR INVESTMENT, STAFF SENIOR VICE PRESIDENT AND CHIEF INVESTMENT OFFICER, SUZANNE BRENNER, RECEIVED A BONUS PAYMENT OF \$470,313, AND CHIEF INVESTMENT OFFICER, LAUREN MESERVE, RECEIVED A BONUS PAYMENT OF \$424,589. ALL SUCH

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METROPOLITAN MUSEUM OF ART

13-1624086

Schedule J (Form 990) 2016

Page 3

Part III Supplemental Information

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

PAYMENTS ARE INCLUDED IN SCHEDULE J, PART II COLUMN B.

SCHEDULE J, PART II, COLUMN (C)

COLUMN (C) INCLUDES DEFERRED COMPENSATION AS FOLLOWS: BONUS PAYMENTS FOR

SUZANNE BRENNER OF \$170,234 AND FOR LAUREN MESERVE OF \$160,526. THIS

DEFERRED COMPENSATION MAY BE FORFEITED IF THE RECIPIENT LEAVES THE MUSEUM'S EMPLOYMENT BEFORE IT IS PAID. THE EXACT AMOUNT IS SUBJECT TO ADJUSTMENT BASED ON THE PERFORMANCE OF THE ENDOWMENT FUND.

FORM 990, PART VII

THOMAS CAMPBELL AND DANIEL WEISS WERE EX-OFFICIO TRUSTEES DURING CALENDAR YEAR 2016. THOMAS CAMPBELL WAS DIRECTOR AND CEO OF THE MUSEUM UNTIL FEBRUARY 2017, AND DIRECTOR OF THE MUSEUM UNTIL JULY 2017.

JSA

SCHEDULE K (Form 990)

Supplemental Information on Tax-Exempt Bonds

OMB No. 1545-0047

2016

Department of the Treasury Internal Revenue Service

Open to Public Inspection

Name of the organization

METROPOLITAN MUSEUM OF ART

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

Employer identification number 13-1624086

Part I Bond Issues

Table with columns: (a) Issuer name, (b) Issuer EIN, (c) CUSIP #, (d) Date issued, (e) Issue price, (f) Description of purpose, (g) Defeased, (h) On behalf of issuer, (i) Pooled financing.

Part II Proceeds

Table with columns: A, B, C, D for various categories like Amount of bonds retired, Total proceeds of issue, etc.

Part III Private Business Use

Table with columns: A, B, C, D for questions about organization as partner, bond-financed property, etc.

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METROPOLITAN MUSEUM OF ART

13-1624086

Part III Private Business Use (Continued)

TAX EXEMPT SE11

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X		X					
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?	X		X					
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?		X		X				
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X				
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
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					

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X				
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?								
b Exception to rebate?	X		X					
c No rebate due?								
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	X		X					
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X				
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider				X				
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 requirements of section 148?	X		X					

Part V Procedures To Undertake Corrective Action

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 isn't available under applicable regulations?

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
	X		X					

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions

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METROPOLITAN MUSEUM OF ART

13-1624086

Schedule K (Form 990) 2016

Page 4

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, 2017 TO BE NEARLY 0% IN TAX EXEMPT

BOND FINANCED SPACE. THIS ANALYSIS EXCLUDES COST OF ISSUANCE.

SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

2016

Open To Public
Inspection

Department of the Treasury
Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Correct?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization, ▶ \$ _____

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

1	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				To	From			Yes	No	Yes	No	Yes	No
				(1)									
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
Total ▶							\$						

Part III Grants or Assistance Benefiting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

1	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part 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	(e) Sharing of organization's revenues?	
				Yes	No
(1) WHALE ROCK FLAGSHIP FUND LTD.	SEE PART V	3,195,695.	MANAGEMENT & PERFORMANCE FEE		X
(2) BROADREACH CAPITAL PARTNERS	SEE PART V	52,425.	MANAGEMENT FEE		X
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

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

SCHEDULE L, PART IV

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 FEES TO

THE FUND.

TRUSTEE PHILIP MARITZ IS A MANAGING DIRECTOR OF BROADREACH CAPITAL

PARTNERS. THE MUSEUM IS INVESTED IN TWO FUNDS SPONSORED BY BROADREACH

AND PAYS FEES TO THE FUNDS.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2016

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

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

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art	X	219 .	0 .	
2 Art - Historical treasures				
3 Art - Fractional interests	X	9 .	0 .	
4 Books and publications	X			
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	183 .	18,334,993 .	MKT VALUE- GIFT 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 organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 92 .

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2016)

JSA

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METROPOLITAN MUSEUM OF ART

13-1624086

Schedule M (Form 990) (2016)

Page 2

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

SCHEDULE M, PART I, COLUMN (B)

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

USE OF THIRD PARTIES- FORM 990, SCHEDULE M, 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.

NON-REVENUE CONTRIBUTIONS- FORM 990, SCHEDULE M, 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.

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SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

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

2016

▶ Attach to Form 990 or 990-EZ.

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Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

METROPOLITAN MUSEUM OF ART

13-1624086

FORM 990, PART III - PROGRAM SERVICES

MISSION AND ACCOMPLISHMENTS

THE METROPOLITAN MUSEUM OF ART WAS FOUNDED ON APRIL 13, 1870, WITH A STATEMENT OF PURPOSE THAT HAS GUIDED IT FOR OVER 140 YEARS: "TO BE LOCATED IN THE CITY OF NEW YORK, FOR THE PURPOSE OF ESTABLISHING AND MAINTAINING IN SAID 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."

ON JANUARY 13, 2015, THE TRUSTEES OF THE METROPOLITAN MUSEUM OF ART REAFFIRMED THE ABOVE STATEMENT OF PURPOSE AND SUPPLEMENTED IT WITH THE FOLLOWING STATEMENT OF MISSION:

"THE METROPOLITAN MUSEUM OF ART COLLECTS, STUDIES, CONSERVES, AND PRESENTS SIGNIFICANT WORKS OF ART ACROSS ALL TIMES AND CULTURES IN ORDER TO CONNECT PEOPLE TO CREATIVITY, KNOWLEDGE, AND IDEAS."

THE MUSEUM'S COLLECTION AND ITS STAFF SET THE WORLD STANDARD FOR EXHIBITIONS, SCHOLARSHIP, CONSERVATION, AND PUBLIC PROGRAMMING. RECORD-HIGH ATTENDANCE IN FISCAL YEAR 2017 - SEVEN MILLION VISITORS ACROSS OUR THREE LOCATIONS - WAS A TESTAMENT TO THIS AS WELL AS TO THE STRENGTH, RELEVANCE, AND ENDURANCE OF THE MET'S MISSION. THE YEAR SAW A RANGE OF ACHIEVEMENTS AND ACTIVITIES, INCLUDING A SUCCESSFUL FIRST FULL

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Name of the organization

Employer identification number

METROPOLITAN MUSEUM OF ART

13-1624086

YEAR OF PROGRAMMING AT THE MET BREUER, WHERE WE EXPANDED OUR EXPLORATION OF MODERN AND CONTEMPORARY ART WITH GROUNDBREAKING EXHIBITIONS OF BOTH CONTEMPORARY AMERICAN ARTISTS AND ARTISTS REPRESENTING OTHER PARTS OF THE GLOBE.

ATTENDANCE

MUSEUM ATTENDANCE IN FISCAL YEAR 2017 WAS THE HIGHEST IN THE MET'S RECORDED HISTORY, WITH SEVEN MILLION VISITORS ACROSS OUR THREE LOCATIONS: THE MET FIFTH AVENUE, THE MET CLOISTERS, AND THE MET BREUER. THE INCREASE OVER LAST YEAR, WHICH SAW 6.7 MILLION VISITORS, WAS PRIMARILY DUE TO THE INFLUX OF VISITORS TO THE MET BREUER, WHICH HAD A TOTAL OF 505,590 VISITORS THIS YEAR.

THE MUSEUM ALSO CONTINUED TO BE NEW YORK CITY'S MOST VISITED TOURIST ATTRACTION FOR DOMESTIC AND INTERNATIONAL AUDIENCES. IN FISCAL YEAR 2017, INTERNATIONAL VISITORS ACCOUNTED FOR THIRTY-SEVEN PERCENT OF THE MUSEUM'S ATTENDEES. THIRTY PERCENT OF VISITORS CAME FROM THE FIVE BOROUGHES, AND AN ADDITIONAL TWELVE PERCENT CAME FROM THE TRISTATE AREA, AFFIRMING THAT THE MET CONTINUES TO BE A POPULAR DESTINATION FOR LOCAL VISITORS.

INTERNATIONAL ACTIVITY

IN FEBRUARY WE STRENGTHENED OUR COMMITMENT TO BRINGING OUR ENCYCLOPEDIA RESOURCES TO MILLIONS OF PEOPLE ALL OVER THE WORLD THROUGH THE ADOPTION OF AN OPEN ACCESS POLICY. UNDER THE NEW POLICY, ALL IMAGES OF PUBLIC DOMAIN ARTWORKS IN THE MUSEUM'S COLLECTION ARE NOW AVAILABLE ON THE MUSEUM'S WEBSITE FOR FREE AND UNRESTRICTED USE.

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Name of the organization METROPOLITAN MUSEUM OF ART	Employer identification number 13-1624086
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ALSO CENTRAL TO THE MET'S MISSION IS WORKING BEYOND THE WALLS OF OUR THREE LOCATIONS. IN APRIL THE MUSEUM WAS SELECTED BY THE WILLIAM R. KENAN, JR. CHARITABLE TRUST TO BE AN ANCHOR ORGANIZATION, ALONGSIDE THE TISCH SCHOOL OF THE ARTS AT NEW YORK UNIVERSITY, IN AN INITIATIVE THAT EXPLORES HOW ARTS-BASED ORGANIZATIONS CAN SERVE AS POSITIVE, RELEVANT, AND INSPIRING FORCES IN THE DAILY LIVES OF DIVERSE COMMUNITIES. IN SEPTEMBER 2016 WE WERE PRIVILEGED TO COSPONSOR A SYMPOSIUM ON PROTECTING CULTURAL HERITAGE WITH THE U.S. DEPARTMENT OF STATE. THE EVENT, "TODAY'S STRUGGLE TO PROTECT AND PRESERVE THE CULTURAL HERITAGE OF RELIGIOUS MINORITIES," WAS A CALL TO STRENGTHEN THE WORLD'S COMMITMENT TO CULTURAL PRESERVATION AND INCLUDED A PANEL DISCUSSION WITH LEADING EXPERTS. IN NOVEMBER, IN PARTNERSHIP WITH COLUMBIA UNIVERSITY, THE MUSEUM HELD ITS SECOND CULTURAL HERITAGE WORKSHOP IN AMMAN, JORDAN, FOR IRAQI AND SYRIAN MUSEUM PROFESSIONALS. TO COMPLEMENT THIS INITIATIVE, STAFF IN THE DEPARTMENT OF ANCIENT NEAR EASTERN ART AND THE IMAGING DEPARTMENT CONDUCTED A TRAINING PROGRAM IN PHOTOGRAPHIC DOCUMENTATION FOR STAFF OF REGIONAL MUSEUMS, AND PARTICIPANTS RECEIVED A KIT TO CARRY OUT THIS IMPORTANT PROCESS AT THEIR OWN INSTITUTIONS. ALSO LAST FALL, WE REAFFIRMED OUR LONG-TERM COOPERATIVE RELATIONSHIP WITH THE MINISTRY OF CULTURE OF THE GOVERNMENT OF INDIA THROUGH A NEW MEMORANDUM OF UNDERSTANDING. THE AGREEMENT IS A FIVE-YEAR RENEWAL OF THE ESTABLISHED TWO-WAY PARTNERSHIPS BETWEEN THE MUSEUM AND CULTURAL INSTITUTIONS IN INDIA FOR SHARING KNOWLEDGE AND EXPERTISE IN CONSERVATION, EXHIBITIONS, ACADEMIC RESEARCH, PUBLIC EDUCATION, PUBLICATIONS, AND MORE. IN FEBRUARY THE MET HOSTED THE FIRST GERMAN/AMERICAN PROVENANCE RESEARCH EXCHANGE

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

PROGRAM (PREP), WHICH BRINGS TOGETHER MUSEUM AND RESEARCH PROFESSIONALS FROM BOTH COUNTRIES WHO SPECIALIZE IN HOLOCAUST-ERA PROVENANCE PROJECTS. THE PROGRAM AT THE MET WAS THE FIRST OF SIX EXCHANGES OVER THREE YEARS IN WHICH PARTICIPANTS WILL COMPARE METHODOLOGIES, ASCERTAIN RESOURCES, AND CONNECT WITH OTHER EXPERTS.

COLLECTION AND ACQUISITIONS

THE MET PRESENTS OVER 5,000 YEARS OF ART FROM AROUND THE WORLD AT ITS MAIN BUILDING ON FIFTH AVENUE, AT THE MET BREUER, AND AT THE MET CLOISTERS. THE MET HAS ALWAYS ASPIRED TO BE MORE THAN A TREASURY OF RARE AND BEAUTIFUL OBJECTS. EVERY DAY, ART COMES ALIVE IN THE MUSEUM'S GALLERIES AND THROUGH ITS EXHIBITIONS AND EVENTS, REVEALING BOTH NEW IDEAS AND UNEXPECTED CONNECTIONS ACROSS TIME AND ACROSS CULTURES.

THE MUSEUM'S COLLECTION CONTINUED TO EVOLVE INTELLECTUALLY AND CULTURALLY WITH A NUMBER OF MAJOR ACQUISITIONS IN FISCAL YEAR 2017, KEEPING US A VIBRANT AND RELEVANT INSTITUTION. EACH WORK OF ART ADDS NEW STORIES, OFFERS NEW PERSPECTIVES, AND POSES NEW QUESTIONS FOR US. KEY ACQUISITIONS INCLUDED A HELMET, CUIRASS, AND GREAVE (SHIN GUARD) ENSEMBLE THAT EXEMPLIFIES THE QUALITIES OF FORM AND DECORATION OF THE GREATEST ARMORS MADE IN ETRURIA DURING THE CLASSICAL PERIOD (CA. 490-300 B.C.); AN EXTRAORDINARY SIXTEENTH-CENTURY NETHERLANDISH CARVING IN THE FORM OF THE LETTER P THAT OPENS TO REVEAL THE ACTION-PACKED LEGEND OF SAINT PHILIP; A MONUMENTAL CREST MASK MADE OF WOOD BY A BAMILEKE MASTER IN THE EIGHTEENTH CENTURY; A QUARTET OF GUITARS BY ONE OF THE PREMIER GUITAR MAKERS OF THE

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Schedule O (Form 990 or 990-EZ) 2016

Page 2

Name of the organization METROPOLITAN MUSEUM OF ART	Employer identification number 13-1624086
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LATE TWENTIETH AND EARLY TWENTY-FIRST CENTURIES, JOHN MONTELEONE; A HANGING SCROLL FROM THE TENTH CENTURY ATTRIBUTED TO LANDSCAPE PAINTER DONG YUAN AND A SMALL ALBUM BY THE FIGURE PAINTER GAI QI (1773-1829), BOTH FOR THE DEPARTMENT OF ASIAN ART; 174 SINGLE-CHANNEL VIDEOS BY ONE OF VIDEO ART'S GREAT PRACTITIONERS, AMERICAN ARTIST WILLIAM WEGMAN (BORN 1943), REPRESENTING THE ENTIRETY OF WEGMAN'S WORK IN VIDEO TO DATE (WITH THE EXCEPTION OF COMMISSIONED WORKS); AND, FOR THE AMERICAN WING, A GROUNDBREAKING COLLECTION OF NINETY-ONE MASTERPIECES OF NATIVE AMERICAN ART, RANGING FROM THE SECOND TO THE TWENTIETH CENTURY, INCLUDING PAINTINGS, DRAWINGS, SCULPTURE, CERAMICS, AND DRESS, THAT ENCOMPASSES NORTH AMERICA'S EARLIEST AND MOST ENDURING ARTISTIC HERITAGE AND HAS THE POTENTIAL TO MAKE THE MET A CONVENING SPACE FOR THIS CULTURAL AREA.

FORM 990, PART III - CONTINUED

CURATORIAL, CONSERVATION, AND RESEARCH

THE MUSEUM'S CURATORIAL PROGRAMS ARE SUPPORTED BY NUMEROUS SERVICES AND RESOURCES. THE DEPARTMENTS OF PAINTINGS, PAPER, OBJECTS, TEXTILE, AND PHOTOGRAPHS CONSERVATION ALONG WITH SCIENTIFIC RESEARCH PREPARE AND REVIEW EVERY ARTWORK SELECTED FOR AN EXHIBITION OR LOAN. THE MET'S 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 2017, 9,027 VISITS WERE MADE BY OUTSIDE RESEARCHERS, AND 2,079 NEW OUTSIDE RESEARCHERS WERE REGISTERED. THE MUSEUM LIBRARIES CIRCULATED 47,929 ITEMS TO READERS. ELEVEN WEEKLY SESSIONS OF STORY TIME IN NOLEN LIBRARY REACHED OVER 17,525 CHILDREN AND THEIR CAREGIVERS. THE

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LIBRARY CONTINUED TO DIGITIZE RARE COLLECTION MATERIALS, BOTH PRINTED AND MANUSCRIPT, AND TO MAKE THEM AVAILABLE ONLINE, CONTINUING TO AVERAGE MORE THAN 97,400 PAGE HITS PER MONTH. THE MET IS ONE OF THE WORLD'S PREEMINENT ART-BOOK PUBLISHERS, AND IN FISCAL YEAR 2017 OUR PUBLICATIONS AND EDITORIAL DEPARTMENT PRODUCED TWENTY-FOUR NEW TITLES. AMONG THESE WERE EXHIBITION CATALOGUES FOR MANY OF THE YEAR'S EXHIBITIONS, INCLUDING THOSE ON ANCIENT CHINA, MEDIEVAL JERUSALEM, THE MODERNIST PAINTINGS OF MAX BECKMANN AND MARSDEN HARTLEY, AND THE PHOTOGRAPHS OF IRVING PENN. THE DEPARTMENT ALSO PUBLISHED PRINT CATALOGUES ON THE MUSEUM'S COLLECTIONS OF ROMAN PORTRAITS, ITALIAN MAIOLICA, AND MASTERPIECE PAINTINGS, AND A DIGITAL CATALOGUE OF CYPRIOT TERRACOTTAS. THE YEAR SAW AN OVERALL INCREASE IN SALES INCOME OF TWENTY-TWO PERCENT OVER THE PREVIOUS YEAR. NINE OF OUR TITLES WON AWARDS, AND THIRTEEN WERE TRANSLATED INTO FOREIGN LANGUAGES. THE GROUNDBREAKING METPUBLICATIONS, A PORTAL TO OUR COMPREHENSIVE PUBLISHING PROGRAM WITH MORE THAN 1,500 ONLINE AND PRINT PUBLICATIONS FROM THE LAST FIVE DECADES, ATTRACTED NEARLY A MILLION VISITORS FROM AROUND THE WORLD.

EXHIBITIONS

THE MUSEUM'S WORLD-CLASS SCHOLARSHIP WAS REFLECTED THIS YEAR IN SIXTY EXHIBITIONS FROM SMALL, FOCUSED INSTALLATIONS TO LARGE INTERNATIONAL SHOWS. THE FOLLOWING EXHIBITIONS WERE AMONG THE HIGHLIGHTS IN FISCAL YEAR 2017: "JERUSALEM 1000-1400: EVERY PEOPLE UNDER HEAVEN"; "VALENTIN DE BOULOGNE: BEYOND CARAVAGGIO"; "FRAGONARD: DRAWING TRIUMPHANT WORKS IN NEW YORK COLLECTIONS"; "MAX BECKMANN IN NEW YORK"; "NATIVE AMERICAN

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MASTERPIECES FROM THE CHARLES AND VALERIE DIKER COLLECTION"; "THE MYSTERIOUS LANDSCAPES OF HERCULES SEGERS"; "SEURAT'S CIRCUS SIDESHOW"; "SARA BERMAN'S CLOSET"; "AGE OF EMPIRES: CHINESE ART OF THE QIN AND HAN DYNASTIES (221 B.C.-A.D. 220)"; "IRVING PENN: CENTENNIAL"; "THE ROOF GARDEN COMMISSION: ADRIÁN VILLAR ROJAS, THE THEATER OF DISAPPEARANCE"; "REI KAWAKUBO/COMME DES GARCONS: ART OF THE IN-BETWEEN"; "AMERICAN INDIAN ART FROM THE FENIMORE ART MUSEUM: THE THAW COLLECTION"; "JAPANESE BAMBOO ART: THE ABBEY COLLECTION"; "KERRY JAMES MARSHALL: MASTRY" AND "KERRY JAMES MARSHALL SELECTS" (THE MET BREUER); "DIANE ARBUS: IN THE BEGINNING" (BREUER); "MARISA MERZ: THE SKY IS A GREAT SPACE" (BREUER); "LYGIA PAPE: A MULTITUDE OF FORMS" (BREUER); "MARSDEN HARTLEY'S MAINE" (BREUER); AND "SMALL WONDERS: GOTHIC BOXWOOD MINIATURES" (THE MET CLOISTERS).

EDUCATION

THE EDUCATION DEPARTMENT FURTHER MAXIMIZED CREATIVE PROGRAMMING, SHOWCASED SCHOLARLY EFFORTS, AND INCREASED AUDIENCE ENGAGEMENT LAST FISCAL YEAR - ACHIEVEMENTS THAT WERE MADE POSSIBLE BY NEWLY DEFINED DEPARTMENT PRIORITIES, AN ALIGNED WORKFLOW, AND AN ARTICULATED EDUCATIONAL PHILOSOPHY CONNECTED TO OVERALL INSTITUTIONAL VALUES. THE DEPARTMENT'S FIVE PRIORITIES REFINE STAFF ORGANIZATION AND CONTINUE TO INVEST IN PROFESSIONAL DEVELOPMENT; SOLIDIFY THE DEPARTMENT AS A LEADER AND INFLUENCER IN THE FIELD; MAKE THE MET RESPONSIVE AND RELEVANT, SERVING AS A PLATFORM FOR TIMELY ISSUES; DEEPEN THE MUSEUM'S PRESENCE AND IMPACT OUTSIDE ITS PHYSICAL LOCATIONS INTO COMMUNITIES; AND ESTABLISH OUR GALLERIES AND OTHER SPACES AS ACTIVE LABORATORIES FOR SCHOLARS, ARTISTS,

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COLLEAGUES THROUGHOUT THE MUSEUM AND WITH PARTNERS ACROSS THE CITY, COUNTRY, AND WORLD.

IN FISCAL YEAR 2017, MORE THAN TEN PERCENT OF THE MUSEUM'S VISITORS WERE DIRECTLY SERVED BY EDUCATION PROGRAMS, AND MORE THAN THIRTY THOUSAND EVENTS DREW MORE THAN 740,000 PARTICIPANTS. CONTINUING OUR SUCCESSFUL ENGAGEMENT WITH PRACTICING ARTISTS, WE SELECTED SOUND ARTIST NATE DIMEO, CREATOR OF THE POWERFUL PODCAST THE MEMORY PALACE, AS THE YEAR'S ARTIST IN RESIDENCE. DURING HIS RESIDENCY, DIMEO PRODUCED A SINGULAR EXPLORATION OF THE AMERICAN WING IN TEN REVELATORY PODCAST EPISODES AND A SERIES OF LIVE EVENTS. ANOTHER PUBLIC PROGRAMMING HIGHLIGHT WAS THE SYMPOSIUM "KERRY JAMES MARSHALL A CREATIVE CONVENING," A DAYLONG EXPLORATION OF RADICAL CREATIVITY INSPIRED BY THE IDEAS, PRACTICE, AND WORK OF CHICAGO-BASED VISUAL ARTIST KERRY JAMES MARSHALL. DEVELOPED IN PARTNERSHIP WITH MARSHALL, THE SYMPOSIUM BROUGHT TOGETHER THOUGHT LEADERS AND CREATIVE PRACTITIONERS AROUND THE ROLE OF INNOVATION, SOCIAL JUSTICE, AND IMAGINATION IN ART. THE EVENT WAS WIDELY CELEBRATED, AND AS A RESULT THE PROCEEDINGS WILL BE MADE INTO A PUBLICATION.

VISITORS OF ALL AGES, BACKGROUNDS, INTERESTS, AND ABILITIES ENJOYED AN ENORMOUS RANGE OF PROGRAMS THROUGHOUT THE YEAR. METFRIDAYS: NEW YORK'S NIGHT OUT, EVENINGS OF DYNAMIC PROGRAMMING CONCEIVED AROUND A THEME, ENGAGED LOCAL RESIDENTS AND SERVED AS A CATALYST FOR PARTNERSHIPS WITH NEW YORK CITY'S CREATIVE COMMUNITIES, ATTRACTING MORE THAN THREE THOUSAND PARTICIPANTS. EACH EVENING, SUCH AS ONE CELEBRATING GAY PRIDE, FOSTERED CULTURAL LEARNING AND SENSITIVE DIALOGUE AND OFTEN DREW A HIGH PERCENTAGE

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OF YOUNG ADULTS AGED EIGHTEEN TO THIRTY-FOUR. LARGE-SCALE FESTIVALS MARKED LUNAR NEW YEAR, NEW YORK'S ANNUAL MUSEUM MILE FESTIVAL, AND, FOR THE FIRST TIME, WORLD CULTURE. WITH FREE-WITH-ADMISSION LIVE-ARTS PERFORMANCES IN THE GALLERIES, THESE EVENTS ATTRACTED MORE THAN TEN THOUSAND PEOPLE.

OUR ONGOING EFFORTS TO ENGAGE NEW AND DIVERSE YOUTH AUDIENCES AGAIN INCLUDED TWO LARGE-SCALE TEENS TAKE THE MET! EVENTS, WHICH INVOLVED MORE THAN 120 ORGANIZATIONAL PARTNERS PRESENTING A VARIETY OF ACTIVITIES: ART MAKING, MUSIC, GALLERY EXPERIENCES, INTERPRETIVE PROGRAMMING, 3-D PRINTING, DANCE CLASSES, AND MORE. MANY OF THE APPROXIMATELY 5,500 PARTICIPATING TEENS WERE VISITING THE MET FOR THE FIRST TIME (FIFTY-TWO PERCENT AT THE FALL EVENT, AND THIRTY-ONE PERCENT IN THE SPRING).

THE MET CONTINUES TO SERVE AS A RICH RESOURCE FOR K-12 TEACHERS AND THEIR STUDENTS. LAST FISCAL YEAR, 232,630 PEOPLE PARTICIPATED IN 6,677 GUIDED AND SELF-GUIDED SCHOOL GROUP VISITS TO THE MET'S THREE LOCATIONS, AND 2,187 TEACHERS AND SCHOOL LEADERS TOOK PART IN PROGRAMS ON INTEGRATING ART INTO CLASSROOM TEACHING. NOW IN ITS THIRD YEAR, OUR ASTOR EDUCATOR PROGRAM HAS SERVED FORTY-FIVE TEACHERS FROM ACROSS THE CITY. WORKING WITH TEACHERS TO IMPROVE STUDENT LEARNING IN AND THROUGH THE ARTS, THE PROGRAM FOCUSES LESS ON THE NUMBER OF STUDENTS SERVED AND MORE ON TRAINING FOR TEACHERS. WE ALSO CONTINUED TO OFFER ONE OF THE MOST CELEBRATED ACADEMIC AND PROFESSIONAL PROGRAMS IN THE FIELD, GRANTING SIXTY-TWO FELLOWSHIPS TO LEADING SCHOLARS FROM AROUND THE WORLD.

FORM 990, PART III - CONTINUED

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THE MET HAS EMERGED AS A GLOBAL LEADER IN BOTH ITS DIGITAL PRACTICES AND REACH. THE MUSEUM'S WEBSITE ENDED FISCAL YEAR 2017 WITH A TOTAL OF 31 MILLION VISITS, THIRTY-FIVE PERCENT OF WHICH WERE INTERNATIONAL. THE MET'S ONLINE COLLECTION AND THE HEILBRUNN TIMELINE OF ART HISTORY CONTINUE TO DRAW THE MOST VISITS, WITH 8.3 MILLION AND 10.4 MILLION, RESPECTIVELY. AS OF JUNE 30 OUR NEW OPEN ACCESS POLICY WHICH MADE OVER 375,000 ONLINE COLLECTION IMAGES AVAILABLE FOR FREE AND UNRESTRICTED USE HAD RESULTED IN 94,000 DOWNLOADS SINCE THE POLICY WAS ANNOUNCED IN FEBRUARY, AN INCREASE OF 128 PERCENT OVER THE PREVIOUS FIVE-MONTH PERIOD.

THE MUSEUM'S SOCIAL MEDIA FOLLOWING HAS GROWN: THE NUMBER OF FOLLOWERS ON OUR TWITTER FEED MORE THAN DOUBLED TO 3.3 MILLION (FORTY-SEVEN PERCENT INTERNATIONAL); OUR WEBBY AWARD-WINNING INSTAGRAM ACCOUNT GREW TO MORE THAN TWO MILLION FOLLOWERS (SIXTY-EIGHT PERCENT INTERNATIONAL); AND OUR FACEBOOK ACCOUNT HAD MORE THAN 1.7 MILLION (SIXTY-SEVEN PERCENT INTERNATIONAL) IN FISCAL YEAR 2017. THE MET 360" PROJECT WHICH PRESENTS VIDEOS THAT ALLOW THE EXPLORATION OF ICONIC OBJECTS AND SPACES IN THE MUSEUM FROM NEVER-BEFORE-SEEN PERSPECTIVES HAS PROVEN TO BE EXTREMELY POPULAR. THE PROJECT HAS WON BOTH A WEBBY AND A SHORTY AWARD, AND AS OF JUNE HAD GARNERED 11.5 MILLION VIEWS AND 451,000 INTERACTIONS, INCLUDING 22,000 COMMENTS.

CAPITAL PROJECTS

THE FIRST PHASE OF A MAJOR RENOVATION AND REINTERPRETATION OF THE MUSICAL INSTRUMENTS GALLERIES, WHICH BEGAN IN SPRING 2016, WAS COMPLETED IN JULY

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OF THIS YEAR WITH THE REOPENING OF THE GALLERY DEVOTED TO BRASS INSTRUMENTS. WORK ON THE OTHER GALLERIES CONTINUES. AN AMBITIOUS PROJECT TO RENOVATE TEN GALLERIES, INCLUDING THREE HISTORIC INTERIORS, DEVOTED TO BRITISH DECORATIVE ARTS AND SCULPTURE OF THE EARLY SIXTEENTH THROUGH THE NINETEENTH CENTURY BEGAN LAST FALL. ESTABLISHED IN THE 1980S, THE GALLERIES INCLUDE SOME 11,000 SQUARE FEET OF DISPLAY SPACE, AND WHEN THEY REOPEN IN WINTER 2018-19 THEY WILL PROVIDE OUR VISITORS WITH A NARRATIVE-RICH EXPERIENCE OF BRITISH DESIGN.

AT THE CLOSE OF THE FISCAL YEAR, THE MUSEUM WAS PREPARING TO BEGIN WORK ON ITS LARGEST INFRASTRUCTURE PROJECT TO DATE REPLACING THE SKYLIGHTS OVER THE EUROPEAN PAINTINGS GALLERIES, WHICH WERE INSTALLED IN THE 1930S. THE PROJECT WILL BE COMPLETED IN PHASES OVER APPROXIMATELY FOUR YEARS, WITH THE FIRST PHASE OF CONSTRUCTION SCHEDULED TO START IN JUNE 2018.

THE METROPOLITAN MUSEUM OF ART IS A REMARKABLE COMMUNITY WHOSE PRESENCE IN THE WORLD IS WELCOMING TO ALL AND A POWERFUL CIVILIZING FORCE, CHAMPIONING THE HIGHEST ACHIEVEMENTS IN ART FROM ALL CULTURES. AS WE APPROACH OUR 150TH ANNIVERSARY, WE LOOK FORWARD TO CREATING PROGRAMS THAT ALLOW THE MAGNIFICENCE OF THE MET TO SHINE.

FORM 990, PART VI, LINE 1A - VOTING RIGHTS 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) FILL VACANCIES IN THE BOARD OF TRUSTEES OR IN ANY COMMITTEE; (B) AMEND OR REPEAL THE BY-LAWS OR ADOPT NEW BY-LAWS; (C) AMEND OR REPEAL ANY

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RESOLUTION OF THE BOARD OF TRUSTEES WHICH BY ITS TERMS SHALL NOT BE SO AMENDABLE OR REPEALABLE; (D) ELECT OR REMOVE TRUSTEES OR OFFICERS; (E) APPROVE A MERGER OR PLAN OF DISSOLUTION; (F) ADOPT A RESOLUTION AUTHORIZING ACTION ON THE SALE, LEASE, EXCHANGE OR OTHER DISPOSITION OF ALL OR SUBSTANTIALLY ALL THE ASSETS OF THE MUSEUM; OR (G) APPROVE AMENDMENTS TO THE CHARTER.

FORM 990, PART VI, LINE 2 - FAMILY OR BUSINESS RELATIONSHIP
TWO TRUSTEES OF THE MUSEUM, HAMILTON E. JAMES AND J. TOMILSON HILL, HAVE A BUSINESS RELATIONSHIP. BOTH ARE OFFICERS OF THE BLACKSTONE GROUP.

FORM 990, PART VI, LINE 4 - CHANGE TO ORGANIZING DOCUMENTS
THE MUSEUM MADE SOME CHANGES TO ITS BY-LAWS, WHICH WERE APPROVED AT THE JUNE 13, 2017 MEETING OF THE BOARD OF TRUSTEES. THE REVISIONS WERE MADE TO UPDATE THE RESPECTIVE DUTIES OF THE DIRECTOR AND THE PRESIDENT.

FORM 990, PART VI, LINE 6 - MEMBERS OF THE ORGANIZATION
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.

FORM 990, PART VI, LINE 11B - REVIEW PROCESS
THE MUSEUM'S FORM 990, INCLUDING REQUIRED SCHEDULES AND SUPPORTING DOCUMENTATION, IS INITIALLY COMPILED BY THE MUSEUM'S FINANCE DEPARTMENT PRIMARILY RELYING ON THE MUSEUM'S GENERAL LEDGER, AUDITED FINANCIAL STATEMENTS AND OTHER FINANCIAL SYSTEMS. THE MUSEUM'S CONTROLLER, CHIEF

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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 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.

FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST

THE MUSEUM REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY BY REQUIRING ONGOING DISCLOSURE OF POTENTIAL CONFLICTS, REVIEW OF SUCH DISCLOSURES, 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 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 POTENTIAL CONFLICT 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

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COUNSEL WITH THE ASSISTANCE OF OUTSIDE LEGAL COUNSEL IF NECESSARY. ACTUAL CONFLICTS OF INTEREST ARE RESOLVED IN CONSULTATION WITH THE MUSEUM'S 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 AN ACTUAL CONFLICT OF INTEREST IS DETERMINED TO EXIST, THE INDIVIDUAL IS PROHIBITED FROM PARTICIPATING IN THE BOARD'S DELIBERATIONS AND DECISIONS REGARDING THE TRANSACTION. A SUMMARY OF THE POTENTIAL CONFLICTS OF INTEREST DISCLOSED BY THE TRUSTEES ARE PRESENTED TO THE AUDIT COMMITTEE EACH YEAR. A SUMMARY OF THE POTENTIAL CONFLICTS OF INTEREST DISCLOSED BY SENIOR STAFF IS PRESENTED TO THE PRESIDENT EACH YEAR.

FORM 990, PART VI, LINES 15A AND 15B-COMPENSATION REVIEW PROCESS
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 REVIEW 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

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SITUATED ORGANIZATIONS PRESENTED BY THE 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.

FORM 990, PART VI, SECTION C, LINE 19 - GOVERNING 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 XI, LINE 9, OTHER CHANGES IN NET ASSETS

CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	1,758,078
UNREALIZED GAINS AND LOSSES ON 2015 BOND PROCEEDS	13,399,180
NET RECLASSIFICATIONS, FEES, AND OTHER	296,889
PENSION - RELATED CHANGES OTHER THAN NPPC	28,627,226
CHANGE IN FAIR VALUE OF INTEREST RATE EXCHANGE AGREEMENTS	14,075,168
PARTNERSHIP UBIT	17,654,525

TOTAL	75,811,066

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ATTACHMENT 1

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

<u>DESCRIPTION</u>	<u>GRANTS</u>	<u>EXPENSES</u>	<u>REVENUE</u>
OPERATION OF RESTAURANTS		23,308,801.	
SPECIAL EXHIBITIONS		14,687,093.	
EDUCATION AND LIBRARIES		14,329,791.	
OPERATING SERVICES		7,481,989.	
COMMUNICATIONS		10,477,114.	30,250.
MEMBERSHIP		6,241,809.	
OPERATION OF AUDITORIUM		3,208,113.	1,346,163.
OPERATION OF PARKING GARAGE		1,435,616.	
CORPORATE EVENTS & FUNDRAISING			825,907.
RETAIL OPERATIONS		3,435,873.	2,263,613.
TOTALS		<u>84,606,199.</u>	<u>4,465,933.</u>

ATTACHMENT 2

FORM 990, PART VI, LINE 17 - STATES

AL, AR, CA, CO, CT,
 FL, GA, HI, IL, KS, KY, MD, MA, MI,
 MN, MS, MO, NH, NJ, NM, OH, OR, PA,
 RI, SC, TN, UT, VA, WV, WI,

ATTACHMENT 3

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

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
BEYER BLINDER BELLE ARCHITECTS&PLANNERS 120 BROADWAY NEW YORK, NY 10271	ARCHITECTURAL SVCS	7,071,325.

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ATTACHMENT 3 (CONT'D)

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

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
RC DOLNER LLC 307 5TH AVE. 3RD FLOOR NEW YORK, NY 10016	CONSTRUCTION MANAGER	3,649,181.
MASTERPIECE INTERNATIONAL 39 BROADWAY NEW YORK, NY 10006	CUSTOMHOUSE BROKERS	1,967,836.
RAUL AVILA INC 20 W 22ND ST STE 1012 NEW YORK, NY 10010	DESIGN CONSULTANT	1,781,512.
PRICEWATERHOUSECOOPERS LLP P.O. BOX 7247-8001 PHILADELPHIA, PA 191708001	PROFESSIONAL FEES	1,313,167.

ATTACHMENT 4

FORM 990, PART VIII - GROSS SALES AND COST OF GOODS SOLD

GROSS SALES LESS RETURNS AND ALLOWANCES	56,032,589.
INVENTORY AT BEGINNING OF YEAR	
PURCHASES	
SALARIES AND WAGES	
OTHER COSTS	53,449,425.
SUBTOTAL	<u>53,449,425.</u>
MINUS ENDING INVENTORY	
COST OF GOODS SOLD	<u>53,449,425.</u>

ATTACHMENT 5

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ATTACHMENT 5 (CONT'D)

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>
PUBLICLY TRADED SECURITY	2,604,459,356.
TOTALS	<u>2,604,459,356.</u>

SCHEDULE R (Form 990)

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.

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

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

METROPOLITAN MUSEUM OF ART

Employer identification number

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

Table with 6 columns: (a) Name, address, and EIN; (b) Primary activity; (c) Legal domicile; (d) Total income; (e) End-of-year assets; (f) Direct controlling entity. Rows 1-6 are empty.

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

Table with 7 columns: (a) Name, address, and EIN; (b) Primary activity; (c) Legal domicile; (d) Exempt Code section; (e) Public charity status; (f) Direct controlling entity; (g) Section 512(b)(13) controlled entity. Rows 1-7 are empty.

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

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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	(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
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 812(b)(13) controlled entity?	
								Yes	No
(1) CHARITABLE TRUSTS (13)	TRUST		N/A	TRUST					X
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Table with columns: (a) Name of related organization, (b) Transaction type (a-s), (c) Amount involved, (d) Method of determining amount involved, and Yes/No checkboxes. Rows include categories like Receipt of interest, Gift, Loans, Dividends, etc.

Summary table with rows (1) through (6) and columns for (a) Name of related organization, (b) Transaction type, (c) Amount involved, and (d) Method of determining amount involved.

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of 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
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII Supplemental Information

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