

Form **990**

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

OMB No. 1545-0047

**2016**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**A** For the 2016 calendar year, or tax year beginning **JUL 1, 2016** and ending **JUN 30, 2017**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>MUSEUM OF THE CITY OF NEW YORK</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>1220 FIFTH AVENUE</b> City or town, state or province, country, and ZIP or foreign postal code <b>NEW YORK, NY 10029</b>	<b>D</b> Employer identification number <b>13-1624098</b>  <b>E</b> Telephone number <b>212-534-1672</b>
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>G</b> Gross receipts \$ <b>31,139,818.</b>
<b>J</b> Website: ▶ <b>WWW.MCNY.ORG</b>		<b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1923</b> <b>M</b> State of legal domicile: <b>NY</b>
<b>Part I Summary</b>		

<b>Part I</b>	<b>Summary</b>	
<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <u>SEE SCHEDULE O</u>	
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b> <b>43</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b> <b>42</b>
	<b>5</b> Total number of individuals employed in calendar year 2016 (Part V, line 2a)	<b>5</b> <b>246</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b> <b>107</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b> <b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b> <b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> <b>14,466,594.</b> <b>Current Year</b> <b>19,068,949.</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>1,896,177.</b> <b>2,118,281.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>827,582.</b> <b>1,034,882.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>210,998.</b> <b>-164,723.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>17,401,351.</b> <b>22,057,389.</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>0.</b> <b>0.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>0.</b> <b>0.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>9,494,782.</b> <b>9,967,113.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>65,000.</b> <b>68,567.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>1,993,569.</b>	
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>8,451,519.</b> <b>11,954,587.</b>
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>18,011,301.</b> <b>21,990,267.</b>	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>-609,950.</b> <b>67,122.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b> <b>58,044,024.</b> <b>End of Year</b> <b>60,138,300.</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>1,207,262.</b> <b>1,247,915.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>56,836,762.</b> <b>58,890,385.</b>

<b>Part II Signature Block</b>				
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.				
<b>Sign Here</b>	▶ Signature of officer	Date		
	▶ <b>OSMAN KURTULUS, CFO</b> Type or print name and title			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>AARON SHAPIRO</b>	Preparer's signature	Date	Check if self-employed <input type="checkbox"/> PTIN <b>P01333816</b>
	Firm's name ▶ <b>LOEB &amp; TROPER LLP</b>	Firm's EIN ▶ <b>13-1517563</b>		Phone no. <b>212-867-4000</b>
Firm's address ▶ <b>655 THIRD AVENUE, 12TH FLOOR</b>		<b>NEW YORK, NY 10017</b>		

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

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: SEE SCHEDULE O

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code: ) (Expenses \$ 13,125,831. including grants of \$ ) (Revenue \$ 1,325,650.) EXHIBITIONS AND PUBLICATIONS: CONTINUED ON SCHEDULE O

4b (Code: ) (Expenses \$ 2,935,803. including grants of \$ ) (Revenue \$ 275,442.) COLLECTIONS CARE: CONTINUED ON SCHEDULE O

4c (Code: ) (Expenses \$ 1,677,028. including grants of \$ ) (Revenue \$ 517,189.) EDUCATIONAL PROGRAMS: CONTINUED ON SCHEDULE O

4d Other program services (Describe in Schedule O.) (Expenses \$ 382,436. including grants of \$ ) (Revenue \$ 143,136.)

4e Total program service expenses 18,121,098.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> 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	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors?</i> .....	X	
<b>3</b> 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
<b>4 Section 501(c)(3) organizations.</b> 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
<b>5</b> 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
<b>6</b> 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
<b>7</b> 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
<b>8</b> 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	
<b>9</b> 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
<b>10</b> 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	
<b>11</b> 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.		
<b>a</b> 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>b</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	
<b>c</b> 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
<b>d</b> 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
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>f</b> 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	
<b>12a</b> 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>b</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
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....		X
<b>b</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	
<b>15</b> 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
<b>16</b> 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
<b>17</b> 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</i> .....	X	
<b>18</b> 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	
<b>19</b> 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

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> 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
<b>22</b> 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
<b>23</b> 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	
<b>24a</b> 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>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> 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>b</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
<b>26</b> 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
<b>27</b> 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
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</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
<b>c</b> 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
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b> 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
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> 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
<b>33</b> 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
<b>34</b> 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
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</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> .....		
<b>36</b> <b>Section 501(c)(3) organizations.</b> 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
<b>37</b> 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
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	X	

**Note.** All Form 990 filers are required to complete Schedule O .....

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

Input box for Schedule O

Table with columns for question number, description, and Yes/No checkboxes. Includes rows for backup withholding, employee counts, foreign accounts, and charitable contributions.

**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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	<b>1a</b> 43		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent		
	<b>1b</b> 42		
<b>2</b>	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?	X	
<b>3</b>	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?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	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?		X
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	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		X

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>10b</b>			
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
<b>12c</b>		X	
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official		X
<b>b</b>	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
<b>16b</b>			

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **NY**
- 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.  
 Own website  Another's website  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: **OSMAN KURTULUS, CFO - 212-534-1672**  
**1220 FIFTH AVENUE, NEW YORK, NY 10029**

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

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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 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) JAMES G. DINAN CHAIR	1.00	X		X				0.	0.	0.
(2) NEWTON P.S. MERRILL VICE CHAIR & CHAIRMAN EMER	1.00	X		X				0.	0.	0.
(3) RONAY MENSCHER VICE CHAIR	1.00	X		X				0.	0.	0.
(4) BRUNO A. QUINSON VICE CHAIR	1.00	X		X				0.	0.	0.
(5) JANE B. OCONNELL TREASURER	1.00	X		X				0.	0.	0.
(6) TRACEY PONTARELLI SECRETARY	1.00	X		X				0.	0.	0.
(7) DAVID GUIN COUNSEL	1.00	X		X				0.	0.	0.
(8) ELIZABETH BELFER BOARD MEMBER	1.00	X						0.	0.	0.
(9) CYNTHIA FOSTER CURRY BOARD MEMBER	1.00	X						0.	0.	0.
(10) TODD DEGARMO BOARD MEMBER	1.00	X						0.	0.	0.
(11) BARBARA J. FIFE BOARD MEMBER	1.00	X						0.	0.	0.
(12) THOMAS M. FLEXNER BOARD MEMBER	1.00	X						0.	0.	0.
(13) LAURA LOFARO FREEMAN BOARD MEMBER	1.00	X						0.	0.	0.
(14) MARK F. GILBERTSON BOARD MEMBER	1.00	X						0.	0.	0.
(15) LESLIE GODRIDGE BOARD MEMBER	1.00	X						0.	0.	0.
(16) ROBERT GOLDSTEIN BOARD MEMBER	1.00	X						0.	0.	0.
(17) LORNA GOODMAN BOARD MEMBER	1.00	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 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			
(18) ELIZABETH GRAZIOLO BOARD MEMBER	1.00	X						0.	0.	0.
(19) JAMES HANLEY BOARD MEMBER	1.00	X						0.	0.	0.
(20) SYLVIA HEMINGWAY BOARD MEMBER	1.00	X						0.	0.	0.
(21) STEPHANIE HESSLER BOARD MEMBER	1.00	X						0.	0.	0.
(22) ROBERT A. JEFFE BOARD MEMBER	1.00	X						0.	0.	0.
(23) WILLIAM M. KAHANE BOARD MEMBER	1.00	X						0.	0.	0.
(24) STEPHEN A. KETCHUM BOARD MEMBER	1.00	X						0.	0.	0.
(25) STANFORD G. LADNER BOARD MEMBER	1.00	X						0.	0.	0.
(26) KENNETH E. LEE BOARD MEMBER	1.00	X						0.	0.	0.
<b>1b Sub-total</b>								0.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b>								1,612,431.	0.	292,110.
<b>d Total (add lines 1b and 1c)</b>								1,612,431.	0.	292,110.

**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 **9**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
<b>4</b> 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	
<b>5</b> 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
SOUTHSIDE DESIGN AND BUILDING 1205 MANHATTAN AVENUE, BROOKLYN, NY 11222	EXHIBITION DESIGN AND SET UP	1,069,451.
BBI ENGINEERING 241 QUINT ST, SAN FRANCISCO, CA 94124	AUDIOVISUAL SYSTEM INSTALLATIONS	893,337.
LAPLACA COHEN ADVERTISING INC. 43 WEST 24TH STREET, NEW YORK, NY 10010	MARKETING/COMMUNICATION SERVICES	693,533.
ENNEAD ARCHITECTS 320 WEST 13TH STREET, NEW YORK, NY 10014	ARCHITECTURAL SERVICES	316,100.
GREAT PERFORMANCES 304 HUDSON STREET, NEW YORK, NY 10013	CATERING FOR EVENTS	312,120.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **13**

SEE PART VII, SECTION A CONTINUATION SHEETS



**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 line)	(C) Position (check all that apply)						(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			
(27) JEANNE MANISCHEWITZ BOARD MEMBER	1.00	X						0.	0.	0.
(28) GURUDATTA NADKARNI BOARD MEMBER	1.00	X						0.	0.	0.
(29) GOV. DAVID A. PATERSON BOARD MEMBER	1.00	X						0.	0.	0.
(30) KATHRYN PROUNIS BOARD MEMBER	1.00	X						0.	0.	0.
(31) NATHAN ROMANO BOARD MEMBER	1.00	X						0.	0.	0.
(32) ARTHUR J. ROSNER BOARD MEMBER	1.00	X						0.	0.	0.
(33) VALERIE ROWE BOARD MEMBER	1.00	X						0.	0.	0.
(34) ALAN SIEGEL BOARD MEMBER	1.00	X						0.	0.	0.
(35) MICHAEL SILLERMAN BOARD MEMBER	1.00	X						0.	0.	0.
(36) LAWRENCE J. SIMON BOARD MEMBER	1.00	X						0.	0.	0.
(37) MITCHELL S. STEIR BOARD MEMBER	1.00	X						0.	0.	0.
(38) JEFFREY S. TABAK BOARD MEMBER	1.00	X						0.	0.	0.
(39) ELIZABETH FARRAN TOZER BOARD MEMBER	1.00	X						0.	0.	0.
(40) REMY W. TRAFELET BOARD MEMBER	1.00	X						0.	0.	0.
(41) DARYL BROWN UBER BOARD MEMBER	1.00	X						0.	0.	0.
(42) WILLIAM C. VRATTOS BOARD MEMBER	1.00	X						0.	0.	0.
(43) WHITNEY W. DONHAUSER PRESIDENT AND DIRECTOR	40.00	X		X				322,400.	0.	52,878.
(44) OSMAN KURTULUS CHIEF FINANCIAL OFFICER	40.00			X				168,446.	0.	36,194.
(45) JERRY GALLAGHER CHIEF OPERATING OFFICER	40.00			X				149,530.	0.	22,833.
(46) SARAH HENRY DEPUTY DIRECTOR AND CHIEF CURATOR	40.00				X			240,945.	0.	43,918.
Total to Part VII, Section A, line 1c .....										

**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 line)	(C) Position (check all that apply)						(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			
(47) SUSAN MADDEN SENIOR VICE PRESIDENT EXTERNAL AFFAI	40.00				X			242,060.	0.	32,834.
(48) PATRICIA ZEDALIS PROJECT MANAGER	40.00				X			145,036.	0.	27,944.
(49) DONALD ALBRECHT CURATOR	40.00				X			133,129.	0.	20,574.
(50) STEVEN JAFFE CURATOR	40.00				X			108,258.	0.	30,565.
(51) FRANNY KENT VICE PRESIDENT OF EDUCATION	40.00				X			102,627.	0.	24,370.
Total to Part VII, Section A, line 1c .....								1,612,431.		292,110.

**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>	11,862.				
	<b>c</b> Fundraising events	<b>1c</b>	2,910,599.				
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	1,725,718.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	14,420,770.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$		209,086.				
	<b>h Total.</b> Add lines 1a-1f		19,068,949.				
	<b>Program Service Revenue</b>	<b>2 a</b> ADMISSIONS	<b>Business Code</b>	900099	1,035,704.	1,035,704.	
<b>b</b> EDUCATIONAL PROGRAMS			611710	517,189.	517,189.		
<b>c</b> MEMBERSHIP DUES			900099	289,946.	289,946.		
<b>d</b> LICENSING AND OTHER FEES			900099	275,442.	275,442.		
<b>e</b>							
<b>f</b> All other program service revenue							
<b>g Total.</b> Add lines 2a-2f				2,118,281.			
<b>Other Revenue</b>		<b>3</b> Investment income (including dividends, interest, and other similar amounts)			282,128.		282,128.
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6 a</b> Gross rents	(i) Real	522,931.				
		(ii) Personal					
		<b>b</b> Less: rental expenses	389,225.				
		<b>c</b> Rental income or (loss)	133,706.				
	<b>d</b> Net rental income or (loss)			133,706.		133,706.	
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities	8,414,430.				
		(ii) Other	28,770.				
		<b>b</b> Less: cost or other basis and sales expenses	7,690,446.	0.			
		<b>c</b> Gain or (loss)	723,984.	28,770.			
	<b>d</b> Net gain or (loss)			752,754.		752,754.	
	<b>8 a</b> Gross income from fundraising events (not including \$ 2,910,599. of contributions reported on line 1c). See Part IV, line 18	<b>a</b>	177,642.				
		<b>b</b> Less: direct expenses	619,207.				
<b>c</b> Net income or (loss) from fundraising events				-441,565.		-441,565.	
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>						
	<b>b</b> Less: direct expenses						
	<b>c</b> Net income or (loss) from gaming activities						
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>a</b>	526,687.					
	<b>b</b> Less: cost of goods sold	383,551.					
	<b>c</b> Net income or (loss) from sales of inventory			143,136.	143,136.		
<b>Miscellaneous Revenue</b>		<b>Business Code</b>					
<b>11 a</b>							
	<b>b</b>						
	<b>c</b>						
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d						
<b>12 Total revenue.</b> See instructions.			22,057,389.	2,261,417.	0.	727,023.	

**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  X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,182,403.	448,484.	612,119.	121,800.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	6,596,320.	5,158,741.	360,631.	1,076,948.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	590,873.	491,702.		99,171.
9 Other employee benefits	971,644.	717,821.	188,550.	65,273.
10 Payroll taxes	625,873.	468,160.	99,921.	57,792.
11 Fees for services (non-employees):				
a Management				
b Legal	16,375.		16,375.	
c Accounting	34,987.		34,987.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	68,567.			68,567.
f Investment management fees	106,388.		106,388.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	3,529,216.	3,353,625.	66,117.	109,474.
12 Advertising and promotion	70,601.	60,494.	7,044.	3,063.
13 Office expenses	1,237,030.	1,078,888.	46,408.	111,734.
14 Information technology	471,063.	430,052.	18,964.	22,047.
15 Royalties				
16 Occupancy	1,019,701.	935,025.	41,015.	43,661.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	906,811.	747,680.	80,731.	78,400.
23 Insurance	192,881.	170,222.	10,763.	11,896.
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 <b>EXHIBITION DESIGN</b>	3,876,040.	3,771,266.	26,941.	77,833.
b				
c				
d				
e All other expenses	493,494.	288,938.	158,646.	45,910.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	<b>21,990,267.</b>	<b>18,121,098.</b>	<b>1,875,600.</b>	<b>1,993,569.</b>
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	6,987,595.	<b>1</b>	5,915,382.
	<b>2</b> Savings and temporary cash investments .....	122,521.	<b>2</b>	79,196.
	<b>3</b> Pledges and grants receivable, net .....	3,517,853.	<b>3</b>	2,114,426.
	<b>4</b> Accounts receivable, net .....		<b>4</b>	
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>	
	<b>6</b> 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 instr). Complete Part II of Sch L .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....	149,439.	<b>8</b>	166,784.
	<b>9</b> Prepaid expenses and deferred charges .....	825,212.	<b>9</b>	629,678.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 32,758,374.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 9,692,789.	22,998,141.	<b>10c</b> 23,065,585.
	<b>11</b> Investments - publicly traded securities .....	15,539,451.	<b>11</b>	20,287,752.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	7,903,812.	<b>12</b>	7,879,497.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	58,044,024.	<b>16</b>	60,138,300.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	1,098,919.	<b>17</b>	903,509.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	185,944.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> 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 .....	108,343.	<b>25</b>	158,462.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	1,207,262.	<b>26</b>	1,247,915.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets .....	31,485,453.	<b>27</b>	31,239,087.
	<b>28</b> Temporarily restricted net assets .....	16,216,338.	<b>28</b>	7,282,269.
	<b>29</b> Permanently restricted net assets .....	9,134,971.	<b>29</b>	20,369,029.
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>	
<b>33</b> Total net assets or fund balances .....	56,836,762.	<b>33</b>	58,890,385.	
<b>34</b> Total liabilities and net assets/fund balances .....	58,044,024.	<b>34</b>	60,138,300.	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	22,057,389.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	21,990,267.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	67,122.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	56,836,762.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	1,986,501.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	58,890,385.

**Part XII Financial Statements and Reporting**

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

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b> 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<b>X</b>
<b>b</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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>X</b>	
<b>c</b> 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.	<b>X</b>	
<b>3a</b> 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>X</b>
<b>b</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 _____		

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

**Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.**  
**▶ Attach to Form 990 or Form 990-EZ.**

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

**Open to Public Inspection**

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

**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		
<b>Total</b>						

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	8,991,870.	14,124,146.	20,899,837.	14,466,594.	19,068,949.	77,551,396.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge ...						
<b>4 Total.</b> Add lines 1 through 3 .....	8,991,870.	14,124,146.	20,899,837.	14,466,594.	19,068,949.	77,551,396.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						17,976,215.
<b>6 Public support.</b> Subtract line 5 from line 4.						59,575,181.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>7</b> Amounts from line 4 .....	8,991,870.	14,124,146.	20,899,837.	14,466,594.	19,068,949.	77,551,396.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	628,335.	636,219.	699,058.	729,646.	805,059.	3,498,317.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on ...						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						81,049,713.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	11,451,136.
<b>13 First five years.</b> 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 <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	73.50 %
<b>15</b> Public support percentage from 2015 Schedule A, Part II, line 14 .....	<b>15</b>	82.10 %
<b>16a 33 1/3% support test - 2016.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2015.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2016.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2015.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>



**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**

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 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**

<b>15</b> Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2015 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2015 Schedule A, Part III, line 17 .....	<b>18</b>	%

**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 .....

**b 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
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>c</b> 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)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> 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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</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? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> 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)? <i>If "Yes," answer 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>3</b> By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
<b>1</b>		
<b>2</b>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
<b>2</b> Activities Test. Answer (a) and (b) below.		Yes	No
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.			
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.			
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
<b>2a</b>			
<b>2b</b>			
<b>3a</b>			
<b>3b</b>			

**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.

<b>Section A - Adjusted Net Income</b>		(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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

<b>Section B - Minimum Asset Amount</b>		(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	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

<b>Section C - Distributable Amount</b>			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	<b>Distributable Amount.</b> 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).		

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

Section D - Distributions	Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions	
<b>7 Total annual distributions.</b> Add lines 1 through 6	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions	
<b>9</b> Distributable amount for 2016 from Section C, line 6	
<b>10</b> 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
<b>1</b> Distributable amount for 2016 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
<b>3</b> Excess distributions carryover, if any, to 2016:			
<b>a</b>			
<b>b</b>			
<b>c</b> From 2013			
<b>d</b> From 2014			
<b>e</b> From 2015			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2016 distributable amount			
<b>i</b> Carryover from 2011 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2016 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2016 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4			
<b>5</b> 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			
<b>6</b> Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
<b>7 Excess distributions carryover to 2017.</b> Add lines 3j and 4c			
<b>8</b> Breakdown of line 7:			
<b>a</b>			
<b>b</b> Excess from 2013			
<b>c</b> Excess from 2014			
<b>d</b> Excess from 2015			
<b>e</b> Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

**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.)

Multiple horizontal lines for supplemental information.

**Schedule B**

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

Name of the organization

MUSEUM OF THE CITY OF NEW YORK

Employer identification number

13-1624098

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization  <b>MUSEUM OF THE CITY OF NEW YORK</b>	Employer identification number  <b>13-1624098</b>
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**Part I Contributors** (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	_____ _____ _____	\$ <u>1,679,318.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____ _____ _____	\$ <u>10,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____ _____ _____	\$ <u>490,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____ _____ _____	\$ <u>422,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization  <b>MUSEUM OF THE CITY OF NEW YORK</b>	Employer identification number  <b>13-1624098</b>
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**Part II Noncash Property** (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization <b>MUSEUM OF THE CITY OF NEW YORK</b>	Employer identification number <b>13-1624098</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

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

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ **Complete if the organization answered "Yes" 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](http://www.irs.gov/form990).**

OMB No. 1545-0047

**2016**

**Open to Public Inspection**

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

**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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
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? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (e.g., recreation or education)  Preservation of a historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

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.

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 on 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 on Form 990, Part VIII, line 1 .....

b Assets included in Form 990, Part X .....

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

Schedule D (Form 990) 2016

**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

**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	13,806,325.	10,238,713.	10,521,976.	9,063,084.	7,956,795.
b Contributions	10,500,000.	4,664,076.		479,899.	500,403.
c Net investment earnings, gains, and losses	2,367,004.	-397,162.	-23,583.	1,279,274.	831,931.
d Grants or scholarships					
e Other expenditures for facilities and programs	1,373,584.	699,302.	259,680.	300,281.	226,045.
f Administrative expenses					
g End of year balance	25,299,745.	13,806,325.	10,238,713.	10,521,976.	9,063,084.

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

- a Board designated or quasi-endowment  81.00 %
- b Permanent endowment  17.20 %
- c Temporarily restricted endowment  1.80 %

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:

	Yes	No
(i) unrelated organizations		<input checked="" type="checkbox"/>
(ii) related organizations		<input checked="" type="checkbox"/>

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				
b Buildings		28,199,869.	5,922,286.	22,277,583.
c Leasehold improvements		64,506.	52,246.	12,260.
d Equipment		708,010.	629,521.	78,489.
e Other		3,785,989.	3,088,736.	697,253.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				23,065,585.

**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) <b>ALTERNATIVE INVESTMENTS</b>	<b>7,879,497.</b>	<b>END-OF-YEAR MARKET VALUE</b>
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	<b>7,879,497.</b>	

**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)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (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) <b>DEFERED RENT EXPENSE</b>	<b>158,462.</b>
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	<b>158,462.</b>

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

**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.

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>	24,419,866.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	1,986,501.	
<b>b</b>	Donated services and use of facilities	<b>2b</b>	93,139.	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	389,225.	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>		2,468,865.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	21,951,001.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	106,388.	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>		106,388.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>	22,057,389.

**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.

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>	22,366,243.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities	<b>2a</b>	93,139.	
<b>b</b>	Prior year adjustments	<b>2b</b>		
<b>c</b>	Other losses	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	389,225.	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>		482,364.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	21,883,879.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	106,388.	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>		106,388.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>	21,990,267.

**Part XIII Supplemental Information.**

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

**PART III, LINE 1A:**

THE MUSEUM'S COLLECTION, WHICH WAS ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS SINCE ITS INCEPTION, IS NOT RECOGNIZED AS AN ASSET ON THE ACCOMPANYING BALANCE SHEET. COLLECTION ITEMS ARE EXPENSED WHEN ACQUIRED. CONTRIBUTED COLLECTION ITEMS ARE NOT REFLECTED IN THE ACCOMPANYING FINANCIAL STATEMENTS. DETAILED INVENTORY RECORDS, HOWEVER, ARE MAINTAINED FOR COLLECTIONS. THE VALUE OF THE COLLECTION IS NOT READILY DETERMINABLE AND THE MUSEUM DOES NOT INSURE THE COLLECTION FOR THE COST OF ITS REPLACEMENT.

**PART III, LINE 4:**

THE MUSEUM HAS VARIOUS COLLECTIONS WHICH IT USES FOR ITS DIFFERENT

**Part XIII** Supplemental Information (continued)

EXHIBITIONS AND PROGRAMS THROUGHOUT THE YEAR.

PART V, LINE 4:

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

PART X, LINE 2:

THE MUSEUM HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. PERIODS ENDING JUNE 30, 2014 AND SUBSEQUENT REMAIN SUBJECT TO EXAMINATION BY APPLICABLE TAXING AUTHORITIES.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES INCLUDED ON FORM 990, PART VII, LINE 6B 389,225.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES INCLUDED ON FORM 990, PART VII, LINE 6B 389,225.

**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

**2016**

Open to Public  
Inspection

Name of the organization <b>MUSEUM OF THE CITY OF NEW YORK</b>	Employer identification number <b>13-1624098</b>
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**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
CENTRAL AMERICA AND THE CARIBBEAN -	0	0	INVESTMENTS		7,879,497.
<b>3 a</b> Sub-total .....	0	0			7,879,497.
<b>b</b> Total from continuation sheets to Part I .....	0	0			0.
<b>c Totals</b> (add lines 3a and 3b) .....	0	0			7,879,497.

LHA 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.

<b>1</b> <b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	<b>(h)</b> Description of noncash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)

**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 ..... ▶ \_\_\_\_\_

**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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

**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

**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.

Multiple horizontal lines for supplemental information.

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding Fundraising or Gaming Activities**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 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.**  
▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

Open to Public Inspection

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

**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
- 2 a 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			
MARK GILBERTSON - 22 EAST 81ST ST, NEW YORK, NY 10028	DIRECTOR'S COUNCIL EVENTS		X	1,065,570.	68,567.	997,003.
<b>Total</b>				1,065,570.	68,567.	997,003.

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.

NY

**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	
		CHAIRMAN'S LEADERSHIP AWINTER BALL (event type)	(event type)	4 (total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts	1,531,238.	647,385.	909,618.	3,088,241.
	2	Less: Contributions	1,517,488.	569,185.	823,926.	2,910,599.
	3	Gross income (line 1 minus line 2)	13,750.	78,200.	85,692.	177,642.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes			5,576.	5,576.
	6	Rent/facility costs	26,864.	30,000.	33,039.	89,903.
	7	Food and beverages	120,984.	84,990.	153,414.	359,388.
	8	Entertainment		10,000.	14,155.	24,155.
	9	Other direct expenses	1,624.	13,819.	124,742.	140,185.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				619,207.
11	Net income summary. Subtract line 10 from line 3, column (d)				-441,565.	

**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: \_\_\_\_\_

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

- 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:
- |                                      |            |   |
|--------------------------------------|------------|---|
| <b>a</b> The organization's facility | <b>13a</b> | % |
| <b>b</b> An outside facility         | <b>13b</b> | % |

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

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

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 explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Part IV** Supplemental Information *(continued)*

Lined area for supplemental information.



**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2016**

Open to Public Inspection

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](http://www.irs.gov/form990).

Department of the Treasury  
Internal Revenue Service

Name of the organization  
**MUSEUM OF THE CITY OF NEW YORK**

Employer identification number  
**13-1624098**

**Part I Questions Regarding Compensation**

**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 type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use    |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence    |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees      |
| <input type="checkbox"/> Discretionary spending account            | <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 .....

**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? .....

**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 type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study                               |
| <input type="checkbox"/> Form 990 of other organizations     | <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? .....
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....
- c** Participate in, or receive payment from, an equity-based compensation arrangement? .....
- 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? .....
- b** Any related organization? .....
- 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? .....
- b** Any related organization? .....
- 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 .....

**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 .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2016

**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) WHITNEY W. DONHAUSER PRESIDENT AND DIRECTOR	(i)	322,400.	0.	0.	35,464.	17,414.	375,278.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) OSMAN KURTULUS CHIEF FINANCIAL OFFICER	(i)	168,446.	0.	0.	18,529.	17,665.	204,640.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JERRY GALLAGHER CHIEF OPERATING OFFICER	(i)	149,530.	0.	0.	16,448.	6,385.	172,363.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) SARAH HENRY DEPUTY DIRECTOR AND CHIEF CURATOR	(i)	240,945.	0.	0.	26,504.	17,414.	284,863.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) SUSAN MADDEN SENIOR VICE PRESIDENT EXTERNAL AFFAI	(i)	242,060.	0.	0.	26,627.	6,207.	274,894.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) PATRICIA ZEDALIS PROJECT MANAGER	(i)	145,036.	0.	0.	15,954.	11,990.	172,980.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) DONALD ALBRECHT CURATOR	(i)	133,129.	0.	0.	14,644.	5,930.	153,703.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							



**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](http://www.irs.gov/form990).

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

**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				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	8	206,962.	FMV
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	X	2	2,124.	COST
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**

	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.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2016)

**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 ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS

Multiple horizontal lines for data entry.

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

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

**2016**

Open to Public  
Inspection

Name of the organization

MUSEUM OF THE CITY OF NEW YORK

Employer identification number

13-1624098

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

THE MUSEUM OF THE CITY OF NEW YORK CELEBRATES AND INTERPRETS THE CITY,  
EDUCATING THE PUBLIC ABOUT ITS DISTINCTIVE CHARACTER, ESPECIALLY ITS  
HERITAGE OF DIVERSITY, OPPORTUNITY, AND PERPETUAL TRANSFORMATION.

FOUNDED IN 1923 AS A PRIVATE, NONPROFIT CORPORATION, THE MUSEUM  
CONNECTS THE PAST, PRESENT, AND FUTURE OF NEW YORK CITY. IT SERVES THE  
PEOPLE OF NEW YORK AND VISITORS FROM AROUND THE WORLD THROUGH  
EXHIBITIONS, SCHOOL AND PUBLIC PROGRAMS, PUBLICATIONS, AND COLLECTIONS.

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

THE MUSEUM OF THE CITY OF NEW YORK CELEBRATES AND INTERPRETS THE CITY,  
EDUCATING THE PUBLIC ABOUT ITS DISTINCTIVE CHARACTER, ESPECIALLY ITS  
HERITAGE OF DIVERSITY, OPPORTUNITY, AND PERPETUAL TRANSFORMATION.

FOUNDED IN 1923 AS A PRIVATE, NONPROFIT CORPORATION, THE MUSEUM  
CONNECTS THE PAST, PRESENT, AND FUTURE OF NEW YORK CITY. IT SERVES THE  
PEOPLE OF NEW YORK AND VISITORS FROM AROUND THE WORLD THROUGH  
EXHIBITIONS, SCHOOL AND PUBLIC PROGRAMS, PUBLICATIONS, AND COLLECTIONS.

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

ONGOING/LONG-TERM EXHIBITIONS OPEN THROUGH FY2017:

NEW YORK AT ITS CORE (OPENED NOVEMBER 18, 2016-CURRENT)

FRAMED AROUND THE KEY THEMES OF MONEY, DENSITY, DIVERSITY, AND  
CREATIVITY, NEW YORK CITY'S HISTORY AND FUTURE COME ALIVE IN THIS  
FIRST-OF-ITS-KIND EXHIBITION, THROUGH THE STORIES OF INNOVATION,  
ENERGY, STRUGGLE, AND THE VISION OF GENERATIONS OF IMMIGRANTS,

POLITICIANS, TYCOONS, DREAMERS, MASTER BUILDERS, AND ORDINARY NEW

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

Schedule O (Form 990 or 990-EZ) (2016)

Name of the organization MUSEUM OF THE CITY OF NEW YORK	Employer identification number 13-1624098
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YORKERS. NEW YORK AT ITS CORE CAPTURES THE HUMAN ENERGY THAT DROVE NEW YORK TO BECOME A CITY LIKE NO OTHER, FEATURING THE CITY'S "BIG PERSONALITIES" - AMONG THEM, ALEXANDER HAMILTON, WALT WHITMAN, EMMA GOLDMAN, JP MORGAN, FIORELLO LA GUARDIA, JANE JACOBS, AND JAY Z. THE STORIES OF LESSER-KNOWN NEW YORK PERSONALITIES, LIKE LENAPE CHIEFTAIN PENHAWITZ AND LOWER EAST SIDE DENIZEN SUSIE ROCCO, ALSO FIGURE PROMINENTLY IN THE EXHIBITION, AS DO SOME OF THE FURRED AND SHELLED RESIDENTS WHO SHAPED THE CITY'S ECONOMIC AND DAILY LIFE - AMONG THEM, THE PIG, THE BEAVER, AND THE OYSTER. AND THE FINAL GALLERY, THE FUTURE CITY LAB INVITES VISITORS TO DELVE INTO THE ISSUES FACING THE CITY OVER THE COMING YEARS IN AN IMMERSIVE, HANDS-ON SPACE. THROUGH ALMOST 450 HISTORIC OBJECTS AND IMAGES, MANY FROM THE MUSEUM'S RICH COLLECTION, AS WELL AS CONTEMPORARY VIDEO, PHOTOGRAPHY, AND INTERACTIVE DIGITAL EXPERIENCES, WE WELCOME YOU TO DIVE DEEP INTO THE CITY'S PAST AND CREATE YOUR OWN VISIONS FOR ITS FUTURE.

NEW YORK SILVER, THEN AND NOW (OPENED JUNE 28, 2017-CURRENT)

NEW YORK SILVER, THEN AND NOW LINKS THE RICH HISTORY OF SILVERSMITHING IN NEW YORK CITY TO PRESENT-DAY ARTISTIC PRACTICE. IT FEATURES NEWLY COMMISSIONED WORKS BY LEADING METALWORKERS, CREATED IN RESPONSE TO HISTORICAL OBJECTS FROM THE MUSEUM'S COLLECTION. THE EXHIBITION OPENS A DIALOGUE BETWEEN PAST AND PRESENT, PAIRING HISTORIC PIECES WITH REMARKABLE NEW WORK BY CONTEMPORARY ARTISTS. INTERNATIONALLY RECOGNIZED ARTISTS FROM THE NEW YORK AREA WHO HAVE BEEN INVITED TO PARTICIPATE INCLUDE DESIGNERS DROR BENSHETRIT AND TED MUEHLING; ARCHITECT/INTERIOR DESIGNERS WILLIAM GEORGIS AND SHEILA BRIDGES; ARTISTS MICHELE OKA DONER, KIKI SMITH, AND CHITRA GANESH; METALSMITHS MYRA MIMLITSCH-GRAY AND WENDY YOTHERS, AND MANY OTHERS.

Name of the organization MUSEUM OF THE CITY OF NEW YORK	Employer identification number 13-1624098
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## EXHIBITIONS THAT OPENED IN FY2017:

RHYTHM & POWER: SALSA IN NEW YORK (JUNE 14-NOVEMBER 26, 2017)

THE STORY OF NEW YORK SALSA-AN UP-TEMPO PERFORMANCE OF PERCUSSIVE LATIN MUSIC AND AFRO-CARIBBEAN-INFUSED DANCE-IS ONE OF CULTURAL FUSION, ARTISTRY, AND SKILLED MARKETING. RHYTHM & POWER ILLUMINATED SALSA AS A SOCIAL MOVEMENT FROM THE 1960S TO THE PRESENT, EXPLORING HOW IMMIGRANT AND MIGRANT COMMUNITIES IN NEW YORK CITY-MOST NOTABLY FROM CUBA AND PUERTO RICO-NURTURED AND DEVELOPED SALSA, GROWING IT FROM A LOCAL MOVEMENT PLAYING OUT IN THE CITY'S STREETS AND CLUBS INTO A GLOBAL PHENOMENON. THE EXHIBITION ALSO LOOKED AT THE ROLE OF RECORD COMPANIES AND STORES IN SUPPORTING AND PROMOTING THE MOVEMENT, AND SALSA'S OFTEN-OVERLOOKED TIES TO ACTIVISM IN THE CITY.

AIDS AT HOME: ART AND EVERYDAY ACTIVISM (MAY 23-OCTOBER 22, 2017)

AIDS AT HOME EXAMINED HOW ARTISTS AND ACTIVISTS HAVE EXPANDED THE IDEA OF CARETAKING AND FAMILY AND NAVIGATED THE POLITICAL STAKES OF DOMESTIC LIFE IN THE FACE OF THE HIV/AIDS CRISIS, FROM THE EARLY 1980S TO THE PRESENT. THE EXHIBITION PLACED PAINTINGS, PHOTOGRAPHY, AND FILM ALONGSIDE ARCHIVAL OBJECTS FROM ACTIVIST GROUPS AND SUPPORT PROGRAMS TO UNCOVER THE PRIVATE STORIES OF HIV AND AIDS AND RECONSIDER CARETAKING, COMMUNITY BUILDING, AND MAKING ART AS ACTS OF RESISTANCE.

POSTERS & PATRIOTISM: SELLING WORLD WAR I IN NEW YORK (APRIL 5-OCTOBER 9, 2017)

WHEN THE UNITED STATES ENTERED WORLD WAR I IN APRIL 1917, NEW YORK CITY'S ARTISTS AND ILLUSTRATORS WERE ENLISTED IN THE WAR EFFORT. MANY OF THEM WORKED FOR THE FEDERAL GOVERNMENT'S NEW DIVISION OF PICTORIAL PUBLICITY. POSTERS AND PATRIOTISM EXAMINED THE OUTPOURING OF POSTERS, FLYERS, MAGAZINE ART, SHEET MUSIC COVERS, AND OTHER MASS-PRODUCED IMAGES CREATED BY THESE NEW YORKERS TO STIR THE AMERICAN PUBLIC TO



Name of the organization MUSEUM OF THE CITY OF NEW YORK	Employer identification number 13-1624098
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WARTIME LOYALTY, DUTY, AND SACRIFICE.

A CITY SEEN: TODD WEBB'S POSTWAR NEW YORK, 1945-1960 (APRIL 20-SEPTEMBER 4, 2017)

A CITY SEEN EXAMINED NEW YORK THROUGH THE EYES-AND LENS-OF PHOTOGRAPHER TODD WEBB. FEATURING MORE THAN 100 IMAGES, ACCOMPANIED BY ENTRIES FROM WEBB'S OWN JOURNAL, THE EXHIBITION HIGHLIGHTED TODD WEBB'S PERSONAL EXPLORATION OF THE CITY THAT ENTHRALLED HIM WHILE PROVIDING AN EXPANSIVE DOCUMENT OF NEW YORK IN THE YEARS FOLLOWING WORLD WAR II. ALSO FEATURED WERE PORTRAITS BY WEBB OF MEMBERS OF HIS INTIMATE CIRCLE OF FRIENDS, INCLUDING ALFRED STIEGLITZ, HARRY CALLAHAN, BERENICE ABBOTT, HELEN LEVITT, AND LISETTE MODEL. THIS WAS THE FIRST MAJOR MUSEUM EXHIBITION OF WEBB'S WORK SINCE THE MUSEUM OF THE CITY OF NEW YORK FIRST EXHIBITED HIS EARLY IMAGES IN 1946.

MUSLIM IN NEW YORK (FEBRUARY 18-AUGUST 14, 2017)

MUSLIMS HAVE BEEN WOVEN INTO THE FABRIC OF NEW YORK SINCE THE CITY'S ORIGINS AS NEW AMSTERDAM, AND TODAY NEW YORK'S DIVERSE MUSLIM COMMUNITY-IMMIGRANT AND AMERICAN-BORN, FROM MULTIPLE RACIAL, ETHNIC, AND CULTURAL BACKGROUNDS-CONSTITUTES AN ESTIMATED 3% OF THE CITY'S POPULATION, SOME 270,000 PEOPLE LIVING IN ALL FIVE BOROUGHES. MUSLIM IN NEW YORK FEATURED 34 IMAGES BY FOUR PHOTOGRAPHERS-ALEXANDER ALLAND, ED GRAZDA, MEL ROSENTHAL, AND ROBERT GERHARDT-WHO HAVE DOCUMENTED MUSLIM NEW YORKERS FROM THE MID-20TH TO THE EARLY 21ST CENTURY. TOGETHER THESE PHOTOGRAPHS PAINT A GROUP PORTRAIT OF NEW YORKERS WHO HAVE GREATLY ENRICHED THE LIFE OF THE CITY.

EXHIBITIONS THAT CLOSED IN FY2017:

GILDED NEW YORK (NOV 13, 2013-MAY 29, 2017)

INAUGURATING THE MUSEUM'S TIFFANY & CO. FOUNDATION GALLERY, GILDED NEW YORK EXPLORED THE CITY'S VISUAL CULTURE AT THE END OF THE 19TH CENTURY,

Name of the organization MUSEUM OF THE CITY OF NEW YORK	Employer identification number 13-1624098
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WHEN ITS ELITE CLASS FLAUNTED THEIR MONEY AS NEVER BEFORE. THE EXHIBITION PRESENTED A LAVISH DISPLAY OF SOME 100 WORKS, INCLUDING COSTUMES, JEWELRY, PORTRAITS, AND DECORATIVE OBJECTS, ALL CREATED BETWEEN THE MID-1870S AND THE EARLY 20TH CENTURY.

THE CITY & THE YOUNG IMAGINATION: ART FROM STUDIO IN A SCHOOL (JANUARY 14-MAY 21, 2017)

THE CITY & THE YOUNG IMAGINATION EXPLORED THE 40-YEAR HISTORY OF ONE OF NEW YORK CITY'S MOST CREATIVE ARTS EDUCATION INITIATIVES, STUDIO IN A SCHOOL, WHICH WAS FOUNDED IN 1977, WHEN THE CITY'S ECONOMIC CRISIS DRASTICALLY REDUCED ARTS PROGRAMMING IN PUBLIC SCHOOLS. THE EXHIBITION FEATURED STUDENT WORKS-WATERCOLORS, DRAWINGS, COLLAGES, AND SCULPTURE-PRODUCED THROUGH THE STUDIO'S APPROACH TO ENHANCING CHILDHOOD ART EDUCATION AND VISUAL LITERACY AND REVEALING THE CITY AS INTERPRETED BY ITS YOUNGEST RESIDENTS.

MASTERING THE METROPOLIS: NEW YORK AND ZONING NOVEMBER 9, 2016-APRIL 23, 2017

THE CHARACTER OF NEW YORK'S VARIED NEIGHBORHOODS IS GOVERNED BY A NOVEL SET OF RULES FIRST ENVISIONED BY NEW YORK REFORMERS 100 YEARS AGO - THE GROUNDBREAKING ZONING RESOLUTION OF 1916. ZONING, WHICH WAS DESIGNED TO TAME THE UNRULY PROCESS OF FREE-MARKET REAL ESTATE DEVELOPMENT, HAS CONTINUED TO SHAPE THE CITY WE KNOW TODAY IN COUNTLESS, OFTEN UNSEEN, WAYS. ON THE 100TH ANNIVERSARY OF AMERICA'S FIRST COMPREHENSIVE ZONING RESOLUTION, MASTERING THE METROPOLIS EXAMINED THE EFFECTS OF THE EVOLVING LAW AND CHARTED THE HISTORY OF THE CITY'S ZONING RULES AND DEBATES TO THE CURRENT DAY, ILLUMINATING HOW THE TOOLS OF ZONING HAVE REFLECTED A CENTURY OF EVOLVING IDEAS ABOUT WHAT CONSTITUTES AN "IDEAL" CITY.

GAY GOTHAM: ART AND UNDERGROUND CULTURE IN NEW YORK (OCTOBER 7,

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2016-MARCH 26, 2017)

NEW YORK HAS LONG BEEN A BEACON FOR LESBIAN, GAY, BISEXUAL, AND TRANSGENDER ARTISTS SEEKING FREEDOM, ACCEPTANCE, AND COMMUNITY. GAY GOTHAM BROUGHT TO LIFE THE QUEER CREATIVE NETWORKS THAT SPRANG UP IN THE CITY ACROSS THE 20TH CENTURY-A SERIES OF ARTISTIC SUBCULTURES WHOSE RADICAL IDEAS HAD LASTING EFFECTS ON THE MAINSTREAM.

THE EXHIBITION FEATURED THE WORK OF WELL-KNOWN FIGURES LIKE ANDY WARHOL AS WELL AS LESSER-KNOWN ARTISTS, SUCH AS FEMINIST ARTIST HARMONY HAMMOND, PAINTER AND WRITER RICHARD BRUCE NUGENT, AND TRANSGENDER ARTIST GREER LANKTON. THE EXHIBITION SHOWCASED PAINTINGS AND PHOTOGRAPHS, AS WELL AS LETTERS, SNAPSHOTS, AND EPHEMERA THAT ILLUMINATE THEIR PERSONAL BONDS AND REVEAL SECRETS THAT WERE SCANDAL-PROVOKING IN THEIR TIME AND REMAIN LARGELY UNKNOWN TODAY.

IN THE SOUTH BRONX OF AMERICA: PHOTOGRAPHS BY MEL ROSENTHAL (MAY 7, 2016-JANUARY 8, 2017)

THE 1970S MARKED THE START OF A TUMULTUOUS PERIOD OF DECLINE IN THE SOUTH BRONX, BROUGHT ON BY A LOSS OF MANUFACTURING JOBS, REDUCTIONS IN MUNICIPAL SERVICES, PLUMMETING PROPERTY VALUES, A MASS EXODUS OF ITS RESIDENTS, AND RAMPANT ARSON. IN THE SOUTH BRONX OF AMERICA FEATURES IMAGES TAKEN BETWEEN 1976 AND 1982 BY PHOTOGRAPHER MEL ROSENTHAL AT THE HEIGHT OF THE AREA'S DEVASTATION, FOCUSING ON THE RESILIENT RESIDENTS WHO REFUSED TO ABANDON THEIR NEIGHBORHOODS.

FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE:

SANTA AND THE CITY (DECEMBER 3, 2016-JANUARY 8, 2017)

THIS HOLIDAY INSTALLATION FEATURED EXAMPLES OF SANTA IN THE CITY FROM THE MUSEUM'S COLLECTIONS.

FROM TEASPOONS TO TITANIC: RECENT ACQUISITIONS (AUGUST 4-DECEMBER 18,

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2016)

FROM TEASPOONS TO TITANIC SHOWCASED A SELECTION OF NEW ADDITIONS TO THE MUSEUM'S COLLECTION, INCLUDING A DECK CHAIR FROM RMS TITANIC, SOUVENIR SPOONS DEPICTING NEW YORK SCENES, WORKS BY SEVERAL NOTABLE PHOTOGRAPHERS, AND RICHARD HAAS'S PREPARATORY PAINTINGS FOR NEW YORK STREET MURALS-ALL OF WHICH SPEAK TO THE LIFE OF THE CITY.

ROZ CHAST: CARTOON MEMOIRS (APRIL 14-OCTOBER 16, 2016)

ONE OF THE MOST DISTINCTIVE AND COMPLEX AMERICAN COMIC VOICES TO EMERGE IN THE LAST FOUR DECADES IS THAT OF ARTIST AND NEW YORKER CARTOONIST ROZ CHAST (B. 1954). SINCE THE 1970S, CHAST HAS CHRONICLED THE ANXIETIES, PLEASURES, AND PERILS OF CONTEMPORARY LIFE IN A BODY OF WORK THAT INCLUDES OVER 1,200 CARTOONS PUBLISHED IN THE NEW YORKER AND OTHER MAGAZINES, SEVERAL ILLUSTRATED CHILDREN'S BOOKS, AND HER AWARD-WINNING 2014 VISUAL MEMOIR, CAN'T WE TALK ABOUT SOMETHING MORE PLEASANT?

ROZ CHAST: CARTOON MEMOIRS FEATURED MORE THAN 200 WORKS BY THIS DISTINGUISHED ARTIST, SHOWCASING HER KEEN EYE FOR THE ABSURDITIES AND INSECURITIES THAT PERMEATE DAILY LIFE-INCLUDING MANY SITUATIONS THAT ARE PARTICULAR TO NEW YORK CITY. THE EXHIBITION WAS ORIGINALLY ORGANIZED BY THE NORMAN ROCKWELL MUSEUM IN STOCKBRIDGE, MASSACHUSETTS, AND WAS A CO-PRESENTATION OF THE MUSEUM OF THE CITY OF NEW YORK AND THE NORMAN ROCKWELL MUSEUM.

PICTURING PRESTIGE: NEW YORK PORTRAITS, 1700-1860 (FEBRUARY 5-SEPTEMBER 18, 2016)

BEGINNING IN THE 18TH CENTURY, NEW YORK CITY'S WELL-TO-DO DENIZENS COMMISSIONED PAINTINGS OF THEMSELVES AND THEIR LOVED ONES TO DISPLAY IN THEIR HOMES AS INDICATORS OF PRESTIGE. DRAWN FROM THE PERMANENT COLLECTION OF THE MUSEUM OF THE CITY OF NEW YORK, PICTURING PRESTIGE, 1700-1860, FEATURES WORKS BY MANY OF THE LEADING AMERICAN PAINTERS OF

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THEIR DAY AND CAPTURES THE ASPIRATIONS OF THE RISING, UPSTART MERCHANT CITY AS IT BECAME THE MOST POPULOUS AND THE MOST IMPORTANT PORT IN THE YOUNG COUNTRY. IN ADDITION, THE EXHIBITION CHRONICLED THE CHANGING NATURE OF PORTRAITURE AND ARTISTIC PATRONAGE, AND TIED TOGETHER THE LIVES OF A GROUP OF LEADING CITIZENS WHO ENJOYED FINANCIAL AND SOCIAL BENEFITS THAT WERE BEYOND THE REACH OF MOST NEW YORKERS.

NEW YORK'S YIDDISH THEATER: FROM THE BOWERY TO BROADWAY (MARCH 9-AUGUST 14, 2016)

FROM THE LATE 19TH TO THE MID- 20TH CENTURY, A THRIVING YIDDISH THEATER CULTURE BLOSSOMED ON MANHATTAN'S LOWER EAST SIDE, ENTERTAINING OVER 1.5 MILLION FIRST AND SECOND GENERATION EASTERN-EUROPEAN JEWISH IMMIGRANTS. SECOND AVENUE BECAME THE "YIDDISH BROADWAY," WHERE AUDIENCES OF NEW NEW YORKERS CELEBRATED THEIR CULTURE AND LEARNED ABOUT URBAN LIFE IN THE CITY VIA CUTTING-EDGE DRAMAS, MUSICAL COMEDIES, AND AVANT-GARDE POLITICAL THEATER. AS STARS OF THE YIDDISH STAGE GAINED MAINSTREAM POPULARITY, NEW YORK'S YIDDISH THEATER BECAME AN AMERICAN PHENOMENON. THIS LEGACY RESONATES TODAY THROUGH ENDURING DRAMATIC THEMES, CLASSIC NEW YORK HUMOR, AND A LARGE CROP OF CROSSOVER ACTORS, DIRECTORS, AND DESIGNERS WHO FOUND WORK ON THE MAINSTREAM NEW YORK STAGE AND IN HOLLYWOOD.

NEW YORK'S YIDDISH THEATER WAS A CO-PRESENTATION OF THE MUSEUM OF THE CITY OF NEW YORK, THE YIVO INSTITUTE FOR JEWISH RESEARCH, THE NATIONAL YIDDISH BOOK CENTER, AND THE NATIONAL YIDDISH THEATER-FOLKSBIENE.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:  
DURING FY2017, THE CITY MUSEUM SAW VIGOROUS ACTIVITY IN COLLECTIONS MANAGEMENT, AND RECEIVED GENEROUS SUPPORT TO ACCOMPLISH PROJECTS WITH

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LONG-TERM IMPACT FOR OUR AUDIENCES. COLLECTION ASSESSMENTS ARE ONGOING IN SEVERAL DEPARTMENTS, INCLUDING COSTUMES AND TEXTILES, MANUSCRIPTS AND EPHEMERA, PAINTINGS, AND THEATER MATERIALS. WE ARE CONTINUING TO INVENTORY AND CATALOG OBJECTS FROM ALL COLLECTIONS, INCLUDING SCULPTURE, FURNITURE AND DECORATIVE ARTS, PHOTOGRAPHY, AND TOYS, IN ADDITION TO THE DEPARTMENTS PREVIOUSLY MENTIONED WITH ACTIVE ASSESSMENTS UNDERWAY-ENSURING THAT EVERY OBJECT HAD AN ACCURATE RECORD IN THE MUSEUM DATABASE. WITH AN ESTIMATED THREE-QUARTER MILLION COLLECTION OBJECTS IN TOTAL-FROM DANCE CARDS AND MENUS TO A POLICE WAGON AND MODEL OF THE EMPIRE STATE BUILDING-THE MUSEUM NOW HAS RECORDS FOR OVER HALF A MILLION, AND DURING THIS PERIOD 18,133 OBJECTS WERE CATALOGUED. TO SUPPORT THIS EFFORT, THE MUSEUM COMPLETED A PROJECT TO MIGRATE TO A NEW COLLECTIONS MANAGEMENT SYSTEM (CMS) WITH SUPPORT OF \$121,242 FROM THE IMLS.

AS PART OF THIS ONGOING WORK, WE CREATED NEARLY 9,155 DIGITAL IMAGES TO ACCOMPANY 3,389 NEW ONLINE CATALOG RECORDS EXPANDING PUBLIC AND SCHOLARLY ACCESS TO OUR HOLDINGS. THE MUSEUM COMPLETED A PROJECT FUNDED BY AN \$150,000 GRANT FROM THE LUCE FOUNDATION, A \$148,000 GRANT FROM THE INSTITUTE OF MUSEUM AND LIBRARY SERVICES (IMLS), AND SUPPORT FROM THE LOUISE AND VIRGINIA CLEMENTE FOUNDATION TO PROVIDE FOR A RANGE OF WORK ON OUR RENOWNED SILVER COLLECTION-INCLUDING DIGITIZATION, CATALOGING, CONSERVATION, AND IMPROVED STORAGE FOR MORE THAN 2,000 PIECES MADE BY NEW YORK SILVERSMITHS OVER THREE CENTURIES. THE MUSEUM ALSO COMPLETED A PROJECT TO PROCESS, DIGITIZE, CATALOG, AND REHOUSE OUR EPHEMERA COLLECTIONS CONTAINING PAMPHLETS, INVITATIONS, MEDALS, SASHES, AND MORE, SUPPORTED BY A \$125,000 GRANT FROM THE NATIONAL ENDOWMENT FOR THE HUMANITIES (NEH), AS WELL AS THE SECOND PHASE OF A PROJECT TO DIGITIZE AND CATALOG A SUPERB COLLECTION OF HAND FANS. ADDITIONALLY,

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WITH \$92,383 SUPPORT FROM THE IMLS, THE MUSEUM COMPLETED A PROJECT TO DIGITIZE AND CATALOG OVER 500 MID-20TH CENTURY WOMEN'S GARMENTS. NEW FUNDING IN FY2017 INCLUDED \$129,467 TO CATALOG AND DIGITIZE THE SCRIPTS, SCORES, AND PUBLISHED SHEET MUSIC IN THE GEORGE M. COHAN COLLECTION.

WE CONTINUED OUR ONLINE ACCESS BY MIGRATING THE WEEKLY COLLECTIONS BLOG TO THE "STORIES" PAGE OF THE MUSEUM'S MAIN WEBSITE TO IMPROVE VISIBILITY, ATTRACTING 151,531 VISITS DURING THE PERIOD. IN ADDITION, WE CONTINUE TO SHARE NEW COLLECTIONS INFORMATION VIA THE "CATABLOG"-ONLINE FINDING AIDS FOR RESEARCH AND SCHOLARLY ACCESS TO PREVIOUSLY INACCESSIBLE ARCHIVAL COLLECTIONS, WHICH DREW 8,242 VISITS. OVER THE PAST YEAR, THE MUSEUM CONTINUED A MAJOR, MULTI-YEAR INITIATIVE TO CATALOG AND DIGITIZE OUR RICH COLLECTIONS AND MAKE THEM ACCESSIBLE ON A USER-FRIENDLY COLLECTIONS PORTAL AT COLLECTIONS.MCNY.ORG WHERE THEY MAY BE STUDIED AND ENJOYED BY ANYONE, ANYWHERE IN THE WORLD WITH AN INTERNET CONNECTION. SINCE THE PORTAL LAUNCHED IN 2010, MORE THAN 973,404 UNIQUE VISITORS FROM EVERY COUNTRY IN THE WORLD HAVE VISITED THE SITE. THE NUMBER OF OBJECTS ACCESSIBLE ONLINE HAS GROWN SIGNIFICANTLY TO NEARLY 190,000 TRACKING OVER 1.8 MILLION PAGE VIEWS DURING THE PERIOD.

CONTINUING ON PREVIOUS YEARS' IMPLEMENTATION OF A COLLECTING PLAN FOR PHOTOGRAPHY; THE THEATER COLLECTION; AND INTERIM COLLECTING GUIDELINES FOR BOOKS, MANUSCRIPTS, AND EPHEMERA; WORK ALSO BEGAN ON CRITERIA FOR COSTUMES. AS A NATURAL OUTCOME OF OUR COLLECTIONS ASSESSMENT, SUCH PLANS ESTABLISH CRITERIA APPROPRIATE TO OUR MANDATE, AND PROVIDE A FRAMEWORK FOR CONSIDERING NEW ACQUISITIONS IN RELATION TO OBJECTS ALREADY ACCESSIONED. A MAJOR CONSERVATION PROJECT FOR FY2017 INVOLVED THE DEINSTALLATION AND CONSERVATION TREATMENT OF TWO ICONIC SCULPTURES

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DESIGNED BY ADOLPH ALEXANDER WEINMAN (1870-1952) OF ALEXANDER HAMILTON (1757-1804) AND DEWITT CLINTON (1769-1828). THESE SCULPTURES HAVE BEEN INSTALL IN FACADE NICHEs OF THE MUSEUM'S HISTORIC BUILDING SINCE THE EARLY 1940S, AND HAD RECEIVED NO MAJOR CONSERVATION TREATMENT SINCE THIS TIME. THIS PROJECT WAS SUPPORTED BY A \$100,000 GRANT FROM AMERICAN EXPRESS PHILANTHROPY, AND WILL BE COMPLETED IN FY2018 FOLLOWING THE SCULPTURES DEINSTALLATION.

DURING THIS PERIOD, THE MUSEUM ACQUIRED A NUMBER OF OBJECTS FOR THE COLLECTION, INCLUDING: A GARMENT WORN BY HELENA RUBENTEIN, 15 PHOTOGRAPHS BY MILT HINTON OF NOTABLE JAZZ MUSICIANS, A SCULPTURE OF CASEY STENDEL BY RHODA SHERBELL, 2 PHOTOS OF THE LOWER EAST SIDE BY KEN SCHLES, 5 PHOTOGRAPHS BY JANELLE LYNCH FROM HER SERIES RIVER, 3 AERIAL PHOTOGRAPHS OF NEW YORK CITY BY MARILYN BRIDGES, AND NEARLY 100 PIECES OF POLITICAL EPHEMERA COLLECTED BY JUSTICE MICHAEL STALLMAN.

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

ATTENDANCE FOR FIELDTRIPS, OUT-OF-SCHOOL TIME PROGRAMS, PROFESSIONAL DEVELOPMENT, AND FAMILY PROGRAMS WAS 45,509 CHILDREN AND ADULTS.

APPROXIMATELY 70% OF PARTICIPANTS WERE FROM UNDER-RESOURCED SCHOOLS.

ADULT GROUP TOURS SERVED AN ADDITIONAL 4,938 PEOPLE. FIELDTRIPS MAKE UP THE BULK OF OUR CENTER'S ATTENDANCE. WE OFFERED THE FOLLOWING THREE PROGRAMS IN THE MUSEUM'S GROUNDBREAKING NEW YORK AT ITS CORE

EXHIBITION: THE MAKING OF NEW YORK: MANHATTAN TO THE FIVE-BOROUGH CITY, CREATIVE CITY: 20TH CENTURY NEW YORK, FUTURE CITY LAB. OTHER

FIELD TRIPS INCLUDE THE MUSEUM'S LONG-TERM EXHIBITION ACTIVIST NEW YORK AND THE TEMPORARY EXHIBITIONS BEYOND SUFFRAGE: A CENTURY OF NEW YORK WOMEN IN POLITICS, KING IN NEW YORK, AND SPECIAL EXHIBITIONS TOURS TO RHYTHM AND POWER: SALSA IN NEW YORK, AIDS AT HOME: ART AND EVERYDAY



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ACTIVISM, TO QUENCH THE THIRST OF NEW YORKERS, MOD NEW YORK, AND ART IN THE OPEN: FIFTY YEARS OF PUBLIC ART IN NEW YORK. ADDITIONALLY, WE CONTINUE TO OFFER HISTORY LAB PROGRAMS THAT TOOK PLACE IN OUR CLASSROOMS, SUCH AS THE GRID: URBAN PLANNING IN NEW YORK CITY, MANNAHATTA: THE LENAPE AND THE LAND, AND LIFE IN NEW AMSTERDAM. DURING THE SCHOOL YEAR, FULL-TIME AND PER DIEM MUSEUM EDUCATORS LED THE FIELDTRIPS. IN THE SUMMER MONTHS, INTERNS LED THE PROGRAMS. THESE YOUNG ADULTS (18-24 YEARS OLD) WERE CONSIDERED DISCONNECTED YOUTH-THEY'D FALLEN OFF TRACK IN CONTINUING THEIR EDUCATION (IN MANY CASES FINISHING HIGH SCHOOL) OR IN FINDING EMPLOYMENT. FROM JULY 5TH THROUGH AUGUST 17TH, THE 8 INTERNS SERVED A TOTAL OF 63 CAMP GROUPS FROM MANHATTAN, BRONX, QUEENS AND BROOKLYN. THE MAJORITY OF THESE GROUPS CAME FROM MANHATTAN AND THE BRONX. IN SUMMER PROGRAMS ALONE, THE INTERNS SERVED A TOTAL OF 1583 PEOPLE, 1290 CHILDREN AGES 5 TO 18, AS WELL 253 ADULTS WHO ACCOMPANIED THE GROUPS. FAMILY PROGRAMS SERVED 7,749 CHILDREN AND ADULTS. 358 PARTICIPANTS OF OUR TOTAL SERVED CAME TO US FROM SHELTERS LOCATED THROUGHOUT THE CITY. 157 PROGRAMS WERE OFFERED INCLUDING 2ND ANNUAL NATIVE AMERICAN HERITAGE FAMILY DAY, SPOOKY CITY: HALLOWEEN AT THE MUSEUM, AILEY ARTS IN EDUCATION DANCE & MUSIC DEMONSTRATION, GERGANA CHORUS AND SCHOOL PERFORMANCE, HANUKKAH FAMILY DAY, KWANZAA FAMILY DAY, ACTIVIST NY: DR. MLK DAY CELEBRATION, KEITH HARING BODY PAINTING WORKSHOP, OCTAVITAS: PUERTO RICAN CELEBRATION, LUNAR NEW YEAR CELEBRATION, ANDY WARHOL: PRINTMAKING WORKSHOP, SWORD DANCING FESTIVAL, PRESIDENTS' DAY CELEBRATION, 1ST ANNUAL LGBTQ TEEN SUMMIT, DUTCH FAMILY DAY, 1ST ANNUAL HERSTORY DAY, 48TH EARTH DAY CELEBRATION, CINCO DE MAYO CELEBRATION, INTERNATIONAL FAMILY DAY OF EQUALITY, INTERNATIONAL FAMILY DAY OF DANCE, MOTHER'S DAY CARD MAKING, CAMPAIGN FOR A CLEAN CITY, MEMORIAL

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DAY BADGE-MAKING, FATHER'S DAY CARD MAKING, AND EID AL-FITR  
CELEBRATION.

OUR NYC TOTS PROGRAMMING HAS BEEN GROWING. NEW YORK CITY TOTS OFFERS  
ENRICHING, EARLY CHILDHOOD PROGRAMMING FOR TODDLERS AND ADULTS.  
SESSIONS FOCUS ON EXPLORATION AND DISCOVERY OF THE CITY THROUGH SONG,  
PLAY, GALLERY VISITS, AND HANDS-ON EXPERIENCES. THIS PROGRAM IS PLANNED  
FOR CHILDREN AGES 2-4 AND THEIR ADULTS. ATTENDANCE FOR SINGLE AND  
MULTI-SESSION TODDLER PROGRAMS WAS 910 TODDLERS AND THEIR CAREGIVERS.  
SATURDAY ACADEMY, IN PARTNERSHIP WITH THE GILDER LEHRMAN INSTITUTE OF  
AMERICAN HISTORY, HAPPENED DURING FALL 2017. THIS 6 SESSION, FREE  
ELECTIVE PROGRAM IN AMERICAN HISTORY AND SAT PREPARATION SERVED ALMOST  
200 MIDDLE AND HIGH SCHOOL STUDENTS. STUDENTS CAME MAINLY FROM EAST AND  
CENTRAL HARLEM AND THE SOUTH BRONX AND PARTICIPATED IN COURSES LIKE ART  
IN THE CITY: THE HISTORY OF PUBLIC ART IN NEW YORK, MAKING BLACK LIVES  
MATTER: BLACK POLITICAL THOUGHT FROM PRESENT TO PAST, AMERICAN FASHION  
IN THE 20TH CENTURY, AND THE CHANGING CITY: URBAN PLANNING AND THE  
MAKING OF NEW YORK. THE SAT SKILLS PREPARATION COURSE WAS ADMINISTERED  
BY BELL CURVES. 48% OF PARTICIPANTS WHO HAD TAKEN THE TEST BEFORE  
INCREASED THEIR SCORES BY AN AVERAGE OF 91 POINTS; 45% OF THESE  
STUDENTS IMPROVED BY 100 POINTS OR MORE.

NEW YORK CITY HISTORY DAY, A MULTI-MONTH HISTORICAL RESEARCH PROGRAM  
FOR MIDDLE AND HIGH SCHOOL STUDENTS CITYWIDE CULMINATED IN A CONTEST TO  
EVALUATE STUDENT PROJECTS BASED ON THE THEME "TAKING A STAND IN  
HISTORY" IN FY17. THE FREDERICK A.O. SCHWARZ EDUCATION CENTER PARTNERED  
FOR ITS THIRD YEAR WITH THE NEW YORK CITY DEPARTMENT OF EDUCATION AND  
THE CURRICULUM, INSTRUCTION AND PROFESSIONAL DEVELOPMENT OFFICE. WITH  
THEIR SUPPORT (VIA OUTREACH AND FUNDING), EDUCATORS NEW TO THE NATIONAL  
HISTORY DAY PROGRAM WERE RECRUITED TO PARTICIPATE IN A WORKSHOP SERIES

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THAT INTRODUCED THE METHODOLOGY AND BEST PRACTICES OF HISTORICAL RESEARCH THROUGH THE LENS OF THE NHD JUDGE. THANKS TO THEIR TRAINING, THESE EDUCATORS WERE BETTER PREPARED TO PARTICIPATE WITH THEIR STUDENTS. 438 STUDENTS ATTENDED THE CONTEST DAY HELD ON SUNDAY, MARCH 5, 2017, WITH AN ADDITIONAL 660 PARENTS, TEACHERS AND VOLUNTEER JUDGES SUPPORTED THEM FOR A TOTAL OF ALMOST 1,100 PARTICIPANTS CELEBRATING THE DAY. 32 PUBLIC, PRIVATE, PAROCHIAL AND HOMESCHOOLS PARTICIPATED. 69 STUDENTS FROM NEW YORK CITY HISTORY DAY ADVANCED TO THE STATE AND 11 ENTRIES ADVANCED TO THE NATIONAL HISTORY DAY COMPETITION. PARTICIPATING STUDENTS, EDUCATORS, AND JUDGES RECEIVED TICKETS TO A YANKEES GAME AND WINNERS PARTICIPATED IN AN ON-FIELD PREGAME CEREMONY.

IN FALL 2016 AND SPRING 2017, THE MUSEUM OF THE CITY OF NEW YORK'S FREDERICK A.O. SCHWARZ EDUCATION CENTER OFFERED STUDENTS AN OPPORTUNITY TO LEARN ABOUT THE HISTORY OF NEW YORK CITY THROUGH THE ART OF PHOTOGRAPHY AND THE CRAFT OF FASHION DESIGN. ELEMENTARY SCHOOL STUDENTS JOINED US FROM SCHOOLS THROUGHOUT MANHATTAN INCLUDING THE DALTON SCHOOL, THE CHAPIN SCHOOL, AND THE TREVOR DAY SCHOOL FOR AFTERSCHOOL AND PHOTO CAMPS. IN ADDITION, THE MUSEUM WELCOMED STUDENTS IN GRADES 3 THROUGH 5 FROM PUBLIC SCHOOLS ACROSS THE CITY FOR A STEM MATTERS, THE SCIENCE OF PHOTOGRAPHY CAMP.

SEVENTH AND EIGHTH GRADERS PARTICIPATED IN PHOTOGRAPHY AND FASHION HISTORY AFTERSCHOOL THROUGH THE PROGRAM, TEEN THURSDAYS, A NEW YORK CITY DEPARTMENT OF EDUCATION AFTERSCHOOL INITIATIVE TO PAIR CULTURAL INSTITUTIONS WITH MIDDLE SCHOOLS ACROSS THE FIVE BOROUGHES. ALL PHOTOGRAPHY PARTICIPANTS LEARNED ABOUT A VARIETY OF PHOTOGRAPHIC TECHNIQUES AND PROCESSES, INCLUDING POINT-OF-VIEW, PIN-HOLE CAMERAS, PORTRAITURE, AND STREET PHOTOGRAPHY. THROUGHOUT THE COURSES, STUDENTS VIEWED AND DISCUSSED PHOTOGRAPHS BOTH FROM THE MUSEUM'S COLLECTION AND

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THOSE TAKEN BY EACH OTHER. AT THE END OF THE ELEMENTARY AND MIDDLE SCHOOL AFTERSCHOOL COURSES, THESE BUDDING PHOTOGRAPHERS CURATED THEIR BEST PHOTOGRAPHS FOR A STUDENT INSTALLATION HERE AT THE MUSEUM. STUDENTS PARTICIPATING IN THE AFTERSCHOOL FASHION HISTORY CLASS LEARNED ABOUT THE DEVELOPMENT OF AMERICAN SPORTSWEAR FROM THE 1930S THROUGH 1950S. THEY WENT BEHIND-THE-SCENES TO SEE COSTUME COLLECTION PIECES NOT ON VIEW TO THE PUBLIC, TOOK A TRIP TO THE GARMENT DISTRICT TO BUY THEIR OWN FABRICS, AND MET WITH A WORKING DESIGNER TO LEARN ABOUT THE FIELD TODAY. AS A CULMINATING PROJECT, THEY DESIGNED AND CREATED AN ORIGINAL SHIRT THAT PAID HOMAGE TO AMERICAN DESIGNS OF THE 1930S, 40S, AND 50S, AS WELL AS RESPONDED TO THE NEEDS OF THEIR DAILY LIVES. STUDENTS DISPLAYED THEIR CREATIONS DURING A FASHION SHOW AND PRESENTATION. 2,077 TEACHERS PARTICIPATED IN PROFESSIONAL DEVELOPMENT AT THE MUSEUM IN FY17. EDUCATORS HAD THE OPPORTUNITY TO JOIN US FOR 3 FREE HISTORIAN-LED LECTURES, 3 FREE CURATOR-LED EXHIBITION OPEN HOUSES, 6 WORKSHOPS AND 6 P-CREDIT COURSES TEACHING CONTENT AND PRIMARY SOURCE ANALYSIS FOR TEACHERS TO TURNKEY IN THEIR CLASSROOMS. INCLUDED IN THE WORKSHOPS WERE THREE FREE FULL DAY EXPERIENCES INTRODUCING EDUCATORS TO THE NEWLY OPENED NEW YORK AT ITS CORE. BRAIN FOOD ON DECEMBER 11 WAS ORGANIZED IN COLLABORATION WITH THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE AND FEATURED DISCUSSIONS ABOUT HEALTH AND WELLBEING FROM BOTH A HISTORIC AND CONTEMPORARY PERSPECTIVE.

FEBRUARY 11, TITLED RHYTHM AND POWER, BEGAN WITH A POWERFUL DISCUSSION WITH TEACHER COLLEGE'S DR. CHRIS EMDIN AS WELL AS A ONE-OF-A-KIND PERFORMANCE, FROM HAMMERSTEIN TO HAMILTON, WRITTEN AND PERFORMED EXPRESSLY FOR THE EDUCATORS. THE FINAL OF THE THREE DAYS, GAME DAY ON MARCH 19 LINKED THE FUTURE CITY LAB'S INTERACTIVE ELEMENTS WITH OPPORTUNITIES FOR BRINGING TECHNOLOGY INTO THE CLASSROOM HELMED BY THE

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ORGANIZATION GAMES FOR CHANGE. ADDITIONALLY, THE CENTER HELD THE 5TH ANNUAL TEACHING SOCIAL ACTIVISM CONFERENCE WHICH WELCOMED 150 EDUCATORS AND ACTIVISTS FROM ACROSS THE COUNTRY TO LEARN ABOUT CONTENT AND PEDAGOGY BEING USED IN THE SOCIAL STUDIES CLASSROOM THAT FOCUSSES ON SOCIAL ACTIVISM. AN ADDITIONAL 2,737 VISITORS USED OUR SPACES TO HOST EDUCATIONAL EVENTS, SUCH AS DANCING DREAMS.

FORM 990, PART III, LINE 4C, DESCRIPTION OF PROGRAM SERVICE:

FY17 WAS ALSO THE SECOND YEAR OF THE MUSEUM'S ANDREW W. MELLON FOUNDATION PREDOCTORAL FELLOWSHIP IN HISTORY EDUCATION, IN WHICH EMERGING SCHOLARS WHO ARE COMPLETING THEIR DISSERTATIONS SPEND 14 MONTHS INTEGRATED INTO THE MUSEUM'S EDUCATION CENTER. A TOTAL OF 6 FELLOWS WORKED IN THE EDUCATION CENTER DURING FY17; OUTGOING FELLOWS - THE FIRST YEAR COHORT - COMPLETED THEIR FELLOWSHIPS IN AUGUST 2016, OVERLAPPING WITH THE INCOMING SECOND YEAR COHORT WHO BEGAN IN JULY 2016. FELLOWS COMPLETE AN INTENSIVE TRAINING PROGRAM IN MUSEUM EDUCATION THAT PREPARES THEM TO LEAD TOURS AND PROGRAMS IN THE MUSEUM WHILE ALSO PREPARING THEM FOR FUTURE CAREERS AS PROFESSORS OR PUBLIC HISTORIANS. EACH OF THE FELLOWS TAUGHT OVER 1,500 STUDENTS AND EDUCATORS, GREATLY INCREASING THE NUMBER OF VISITORS WHO COULD BE SERVED BY THE CENTER'S PROGRAMMING. FELLOWS CONTRIBUTED RESEARCH TO AND WORKED CLOSELY WITH THE CENTER'S FULL-TIME STAFF TO PRODUCE THE FOLLOWING PROGRAMS: NEW YORK CITY HISTORY DAY, THREE COMMUNITY ENGAGEMENT DAYS AND SIX FAMILY PROGRAMS, THE 2ND ANNUAL LGBTQ TEEN SUMMIT, TEEN THURSDAYS FASHION AFTERSCHOOL, STEM PHOTO CAMP, THREE NEW YORK AT ITS CORE THEMED AND ONE GAY GOTHAM INSPIRED PROFESSIONAL DEVELOPMENT PROGRAMS FOR TEACHERS. IN ADDITION, FELLOWS MET WITH

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CURATORS AND HELPED DEVELOP TEACHING GUIDES FOR SPECIAL EXHIBITIONS, ASSISTED WITH TEXT EDITING FOR THE PEOPLE INTERACTIVES IN NEW YORK AT ITS CORE, AND ONE FELLOW, CHRISTOPHER PAUL HARRIS, WORKED WITH DR. SARAH SEIDMAN, PUFFIN FOUNDATION CURATOR OF SOCIAL ACTIVISM, TO CO-CURATE A NEW ACTIVIST NEW YORK CASE STUDY: "RADICAL JUSTICE TODAY: THE MOVEMENT FOR BLACK LIVES, 2012-2017." EACH FELLOW ALSO PRESENTED LECTURES ON THEIR OWN RESEARCH TO A TOTAL OF 110 NYC SCHOOL EDUCATORS AND MEMBERS OF THE PUBLIC.

FORM 990, PART VI, SECTION A, LINE 2:

MR. QUINSON AND MS. GOODMAN HAVE A FAMILY RELATIONSHIP.

MR. DINAN, AND MR. VRATTOS HAVE A BUSINESS RELATIONSHIP

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

THE FORM 990 WAS EMAILED TO THE AUDIT AND FINANCE COMMITTEES FOR REVIEW AND APPROVAL. ANY QUESTIONS THAT AROSE WERE ADDRESSED BY MANAGEMENT PRIOR TO APPROVAL. ONCE APPROVED BY THE AUDIT AND FINANCE COMMITTEES, THE 990 WAS EMAILED TO THE REMAINDER OF THE BOARD FOR REVIEW PRIOR TO BEING FILED.

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

EACH MEMBER, TRUSTEE, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE WITH GOVERNING BOARD-DELEGATED POWERS SHALL ANNUALLY SIGN A CONFLICT OF INTEREST FORM. IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE TRUSTEES AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER DISCLOSURE OF THE FINANCIAL

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INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE GOVERNING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS. AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE GOVERNING BOARD OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST. THE CHAIRMAN OR THE GOVERNING BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE WHETHER MCNY CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED TRUSTEES WHETHER THE TRANSACTION OR ARRANGEMENT IS IN MCNY'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE. IN CONFORMITY WITH THE ABOVE DETERMINATION IT SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT. ANY DECISION BY A COMMITTEE SHALL BE SUBJECT TO REVIEW AND DETERMINATION BY THE GOVERNING BOARD SHOULD IT ELECT TO DO SO.

FORM 990, PART VI, SECTION C, LINE 19:

THE MUSEUM OF THE CITY OF NEW YORK MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST

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FORM 990, PART IX, LINE 11G, OTHER FEES:

OUTSIDE SERVICES:

PROGRAM SERVICE EXPENSES	3,353,625.
MANAGEMENT AND GENERAL EXPENSES	66,117.
FUNDRAISING EXPENSES	109,474.
TOTAL EXPENSES	3,529,216.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	3,529,216.

FORM 990, PART XII LINE 2C

THE PROCESS HAS NOT CHANGED