Department of the Treasury

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

benefit trust or private foundation)

Open to Public Inspection

OMB No. 1545-0047

Intern	al Revenu	e Service The organization may have to use a copy of this return to sa	A 10.00 (1.0		mspection
A F	or the	2010 calendar year, or tax year beginning JUL 1, 2010 and	ending J	JN 30, 2011	
B C	heck if oplicable:	C Name of organization		D Employer identific	ation number
	Address change	MUSEUM OF CONTEMPORARY ART			
	Name change	Doing Business As MOCA		95-3433	8820
]Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	to the second se
	Termin- ated	250 S. GRAND AVE.		213-621	
	Amende return	Uity or town, state or country, and ZIP + 4		G Gross receipts \$	34,997,627.
	Applica-	LOS ANGELES, CA 90012		H(a) Is this a group re	turn
	pending	F Name and address of principal officer:MICHAEL HARRISON		for affiliates?	Yes X No
		250 S. GRAND AVENUE, LOS ANGELES, CA 90012		H(b) Are all affiliates incl	uded? Yeş No
I T	ax-exe	mpt status: X 501(c)(3)	or 527	If "No," attach a l	ist. (see instructions)
		: > WWW.MOCA.ORG		H(c) Group exemption	
		rganization: x Corporation Trust Association Other	L Year	of formation: 1979 M	State of legal domicile; CA
The real Property lies, the last of the la		Summary			
-	1 E	riefly describe the organization's mission or most significant activities: ${ t SEE \ \ SC}$	HEDULE O		
Governance					
E	2 0	check this box 🕨 📖 if the organization discontinued its operations or dispo	sed of more	than 25% of its net as	sets.
Ş		lumber of voting members of the governing body (Part VI, line 1a)			43
Ğ		lumber of independent voting members of the governing body (Part VI, line 1b)			40
SS		otal number of individuals employed in calendar year 2010 (Part V, line 2a)			218
Activities &		otal number of volunteers (estimate if necessary)			110
cţ		otal unrelated business revenue from Part VIII, column (C), line 12			-9,994.
⋖		let unrelated business taxable income from Form 990-T, line 34			-9,994.
_				Prior Year	Current Year
40	8 (Contributions and grants (Part VIII, line 1h)		18,646,717.	14,587,926.
Revenue		Program service revenue (Part VIII, line 2g)		1,249,089.	1,704,574.
eve		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	CANADACTOR	341,798.	617,929.
æ	ı	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,027,846.	912,328.
	ı	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	and the second second	21,265,450.	17,822,757.
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0,	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
w		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		6,740,333.	6,922,336.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0,
ber		otal fundraising expenses (Part IX, column (D), line 25)			
X	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		9,140,073.	10,584,352.
	1	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		15,880,406.	17,506,688.
	1	Revenue less expenses. Subtract line 18 from line 12		5,385,044.	316,069.
es	10 1	to remain the second contract into to the rate of the second seco	В	eginning of Current Year	End of Year
Net Assets or Fund Balances	20	Fotal assets (Part X, line 16)		40,152,169.	40,250,914.
ASS	21	Total liabilities (Part X, line 26)		2,118,738.	2,007,559.
Net	22	Net assets or fund balances. Subtract line 21 from line 20		38,033,431.	38,243,355.
P	art II	Signature Block			
		ties of perjury, I declare that I have examined this return, including accompanying schedul	es and staten	nents, and to the best of m	y knowledge and belief, it is
true	. correct	, and complete. Declaration of preparer (other than officer) is based on all information of w	vhich prepare	r has any knowledge.	
		No. of the control of			
Sig	ո	Signature of officer		Date	
Her	- 1	MICHAEL HARRISON, CFO			
1101	٠	Type or print name and title			
_		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pai	d	LIOR TEMKIN	>)5/08/12 self-employe	ed
	parer	Firm's name SINGERLEWAK LLP		Firm's EIN	
	Only	Firm's address 10960 WILSHIRE BLVD, STE 700			
200	J,	LOS ANGELES, CA 90024-3783		Phone no. (3	310) 477-3924
1/10	v the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
ivid	y ule if	o discuss trils return with the preparer shown above: (see instructions)			

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orm	990 (2010) MUSEUM OF CONTEMPORARY ART 95-3433820		Pa	age 3
	IV Checklist of Required Schedules			
	r		Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	х	
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	x	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	x	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	-
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
-	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		х
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			1

operate one or more hospitals must attach audited financial statements (see instructions)

Pa	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х_
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	Х	<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes, " complete			١
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	١		ļ "
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			١
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			l
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	-	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		l	
	Note. All Form 990 filers are required to complete Schedule O	38	X	10.5
		Form	990	(2010)

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	990 (2010) MUSEUM OF CONTEMPORARY ART	_	- E	aye o
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			
_	Check if Schedule O contains a response to any question in this Part V			片
	Enter the number reported in Box 3 of Form 1096. Enter .0. if not applicable	_	Yes	No
1a	Effet the number reported in Box 5 of Form 1050. Effet of infocusion			
b	Enter the number of Forms W-2G included in line 1a. Enter ·0· if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	4.	х	
•	(gambling) winnings to prize winners?	1c	A	-
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.			
	med for the calendar year ending with or within the year covered by this reterm	2b	x	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	20	^	-
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	За	х	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3b	х	_
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30	-	_
48	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
L	N 4450	40		_
D	If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
E0	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	-	X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		_
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	-00		_
Va	any contributions that were not tax deductible?	6a		x
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			-
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	- 0.0		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	x	
b		7b	х	\vdash
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			\vdash
·	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			l
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		1	1
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand		_	_
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	_	Х
100	If "Vee " has it filed a Form 700 to report these payments? If "No " provide an evaluation in Schedule O	14h	1	1

Form **990** (2010)

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 to any question in this Part VI					x
Sec	tion A. Governing Body and Management					
		all			Ye	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1	1	43		
b	Enter the number of voting members included in line 1a, above, who are independent	1	0	40		1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip w	th any other			
	officer, director, trustee, or key employee?			2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the	he d	rect supervision		1	
	of officers, directors or trustees, or key employees to a management company or other person?				\rightarrow	X
4	Did the organization make any significant changes to its governing documents since the prior Form			0.00.00	_	X
5	Did the organization become aware during the year of a significant diversion of the organization's as					X
6	Does the organization have members or stockholders?			_6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more m			-		x
	governing body? Are any decisions of the governing body subject to approval by members, stockholders, or other pe					T X
_	Did the organization contemporaneously document the meetings held or written actions undertaker					+
8	by the following:	i uui	ing the year			
	•			8	a x	
	The governing body? Each committee with authority to act on behalf of the governing body?					+
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re			····· F	+	+
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			6		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F					
					Ye	No No
10a	Does the organization have local chapters, branches, or affiliates?			10	a	Х
	If "Yes," does the organization have written policies and procedures governing the activities of such					
				10	ь	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before				a X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12	a X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that co	ould	jive rise			
	to conflicts?			12	ьх	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Ye	," describe			
	in Schedule O how this is done					
13	Does the organization have a written whistleblower policy?					-
14	Does the organization have a written document retention and destruction policy?			1	4 X	-
15	Did the process for determining compensation of the following persons include a review and approx		/ independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision			. ا	a x	
	The organization's CEO, Executive Director, or top management official					+-
D	Other officers or key employees of the organization	******	****************	18	<u>ь х</u>	_
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	amor	t with a			
IVA	taxable entity during the year?			10	ia	x
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to ev					_
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization			`		
	exempt status with respect to such arrangements?	-		16	ib	
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶CA					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	-T (5	01(c)(3)s only) av	ailable for		
	public inspection. Indicate how you make these available. Check all that apply.					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents,	conf	lict of interest po	licy, and	inancia	ıl
	statements available to the public.					
20	State the name, physical address, and telephone number of the person who possesses the books	and	ecords of the org	ganizatior	: -> _	
	JAY MYRES - (213) 621-2766					
	250 SOUTH GRAND AVE., LOS ANGELES, CA 90012					
				Fo	rm 99 ((2010)

032006 12-21-10

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

Check if Schedule O contains a response to any question 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 organiz (A)	(B)			(0	;)			(D)	(-/	(F)	
Name and Title	Average		ı	Posi	ition	1		Reportable	Reportable	Estimated	
radino dila Tilio	hours per	(ch	ieck	all t	hat	appl	y)	compensation from	compensation from related	amount of other	
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Кеу етріоуее	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
MARIA ARENA BELL										0	
CO-CHAIR	1.00	х		х				0,	0.	0.	
DAVID G. JOHNSON										0.	
CO-CHAIR	1.00	X		х	L			0.	0.	0,	
FRED SANDS									0.	0.	
VICE CHAIR	1.00	х		Х	_	_		0.	0,		
JEFFREY SOROS									0.	0.	
PRESIDENT	1.00	х		Х	上	_	_	0,	0.		
JOHN BALDESSARI								0	0.	0.	
TRUSTEE	1.00	х		\perp	1	-	_	0,	0.		
PETER M. BRANT								0	0.	0.	
TRUSTEE	1.00	х	1	1	\perp	1	-	U,			
CHARLES S. COHEN						1	1	0	0,	0.	
TRUSTEE	1.00	Х	_	╀	+	+	╀		-		
CHARLES L. CONLAN II			1					0	0	0.	
TRUSTEE	1.00	Х	+	+	╀	+	+				
GARY CYPRES	1 00	١,,,		1	1			0	. 0	0.	
TRUSTEE	1,00	Х	+	+	+	+	+-				
KATHI CYPRES	1.00	x	1				1	0	. 0	. 0	
TRUSTEE	1.00	l^	+	+	+	+	╁				
CLIFFORD J. EINSTEIN	1,00	x	1					0	. 0	. 0	
CHAIR EMERITUS	1.00	╀	+	+	+	+	+				
GIL FRIESEN	1,00	x	1		1		1	0	. 0	. 0	
TRUSTEE		Ť	+	十	+	+	+				
ERIC GARCETTI	1.00	x		1	1		1	C	0	. 0	
EX OFFICIO TRUSTEE RICHARD J. GRAD		+	+	+	+	\top	\top				
	1.00	x						- 0	0.	. 0	
TRUSTEE LAURENCE GRAFF		T	1	1	\top		\top				
TRUSTEE	1.00	x						(0	. 0	
SUSAN GERSH		+		T	\top						
TRUSTEE	1.00	x c	:).	0	
NANCY JANE GOLDSTON		T					T				
TRUSTEE	1.00	k c							0.	Form 990 (2010	

032007 12-21-10

Form 990 (2010)

Form 990 (2010) MUSEUM OF COI			_						95-3433020	Page 0
Part VII Section A. Officers, Directors, Tru	ustees, Key Er	nplo	yee			ligh	est	Compensated Employ		
(A)	(B)			(0	-			(D)	(E)	(F)
Name and title	Average			Pos				Reportable	Reportable	Estimated
	hours per	(cl	neck	all	that	app	ly)	compensation	compensation	amount of
	week (describe	tor						from	from related	other compensation
	hours for	or director				· b		the organization	organizations (W-2/1099-MISC)	from the
	related	tee or	stee			ensate		(W-2/1099-MISC)	(** Z/ 1000 Mileo)	organization
	organizations	Individual trustee	Institutional trustee		oyee	Hignest compensated employee		(** =: *********************************		and related
	in Schedule	ividua	itufio	Officer	Кеу етрюуее	nest o	mer			organizations
	O)	Ind	Inst	#5	Key	FFI em	장			
LILLY TARTIKOFF KARATZ										
TRUSTEE	1.00	х					_	0.	0.	0.
LAREN KING										_
TRUSTEE	1.00	х				L		0.	0.	0.
BARBARA KRUGER										_
TRUSTEE	1,00	х				L	_	0.	0.	0,
WONMI KWON										_
TRUSTEE	1.00	Х				_	_	0.	0.	0.
TIMOTHY LEIWEKE										
TRUSTEE	1,00	Х		_			L	0.	0.	0.
DANIEL S. LOEB										,
TRUSTEE	1.00	Х	_	_	_			0.	0.	0.
EUGENIO LOPEZ										
TRUSTEE	1,00	Х	_	_		_	L	0.	0.	0.
LILLIAN P. LOVELACE										
TRUSTEE	1.00	Х	_	L	_	_	_	0.	0.	0.
NANCY MARKS								2		
TRUSTEE	1.00	х	L	_	L	_	L	0.	0.	0.
1b Sub-total			9	g				0,	0.	
c Total from continuation sheets to Part V	II, Section A							2,072,904	0.	42,493.
d Total (add lines 1b and 1c)						P		2,072,904.	0.	42,493.
2 Total number of individuals (including but	not limited to th	nose	list (ed a	bov	e) w	ho r	eceived more than \$10	0,000 in reportable	

	compensation from the organization			10
	omponoutor nom the organization p		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3	X	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes," complete Schedule J for such person	5		х

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from

the organization. (A) Name and business address	(B) Description of services	(C) Compensation
ALONG CAME MARY	CATERING	249,231
5265 W. PICO BLVD., LOS ANGELES, CA 90024	CULTATIO	215,862.
2 Total number of independent contractors (including but not limited	d to those listed above) who received more than	

\$100,000 in compensation from the organization > SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2010)

Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	oyee	s, a	nd F	łigh	est	Compensated Employ	ees (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average			Pos	ition	1		Reportable	Reportable	Estimated
	hours per week	(cl	heck	c all	that	Ė	ly)	compensation from the	compensation from related organizations	amount of other compensation
		Individual trustee or director	Institutional trustee	Officer	Кеу етріоуее	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
EDWARD MINSKOFF										
TRUSTEE	1.00	х						0.	0.	0.
STEVEN T. MNUCHIN										
TRUSTEE	1.00	х						0,	0.	0.
PETER MORTON										
TRUSTEE	1.00	х		L				0.	0.	0.
JANE NATHANSON	1									
TRUSTEE	1.00	х					1	0.	0,	0.
CATHERINE OPIE			ı							
TRUSTEE	1.00	x						0,	0.	0.
VICTOR PINCHUK		П	T	Г						
TRUSTEE	1.00	x		l			l	0.	0.	0.
CAROLYN CLARK POWERS		Т	ı	Т						
TRUSTEE	1,00	x		l			1	0.	0.	0.
DALLAS PRICE-VAN BREDA	†	Т	T	\vdash		T				
PRESIDENT EMERITUS	1,00	x						0.	0.	0.
STEVEN F. ROTH		\vdash	\vdash	\vdash	Н		T			
TRUSTEE	1.00	x						0.	0.	0.
ED RUSCHA		H	1	\vdash	\vdash	一	\vdash			
TRUSTEE	1.00	x					1	0.	0.	0.
DARREN STAR		Н	\vdash	\vdash	\vdash	\vdash	\vdash			
TRUSTEE	1.00	x						0.	0.	0.
DONALD TANG	-	<u> </u>				\vdash	\vdash			
TRUSTEE	1.00	x					1	0.	٥.	0,
JAMIE TISCH	1,00	H	\vdash	\vdash	\vdash	\vdash	╁			
TRUSTEE	1.00	l _x					1	0.	0.	0
ANTONIO VILLARAIGOSA		H	\vdash	┪		\vdash	\vdash			
EX OFFICIO TRUSTEE	1.00	x						0.	0.	0.
DR. CHARLES E. YOUNG	1,00	H	\vdash	1	1	\vdash	H			
CEO	40.00	x		x	1		1	217,789.	0.	0
RICHARD WEIL	10,00	<u> </u>	+	╀	\vdash	\vdash	╁	227,102	·	
CFO	40.00	1		x	l		1	214,453,	0.	202
JEFFREY DEITCH	40,00	-	\vdash	╀╨	-	\vdash	+	211, 100,	ļ	
DIRECTOR	40.00	x		x	1		1	648,281,	0.	1,340
DAVID M. GALLIGAN	40,00	┢	\vdash	1	+	\vdash	+-	040,201	,	1,010
SECRETARY (STARTED 3/29/11)	40.00	x		x	1			0.	0.	. 0
ARI WISEMAN	40.00	+	+	1	-	\vdash	+	1	ļ	
	40.00	1		x	1			33,081	. 0.	1,751
SECRETARY (LEFT 1/22/10)	40.00	\vdash	-	1^	+	\vdash	+	33,001	1	1,,31
PAUL SCHIMMEL	40.00	1			x			235,414		24,266
CHIEF CURATOR	40.00	_			T_			233,414,	1	27,200

Form 990 (2010) MUSEUM OF CON									95-3433620	
Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, aı	nd H	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(C				(D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
	hours	(cl	neck	all t	hat	app	y)	compensation	compensation from related	amount of other
	per					a		from the	organizations	compensation
	week	tor				ploye		organization	(W-2/1099-MISC)	from the
		direc				на ра		(W-2/1099-MISC)		organization
		tee or	ustee	П		ensat				and related
		al trus	nal tr		loyee	сошр				organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JENNIFER ARCENEAUX								110 707	0.	5,793
DIRECTOR OF DEVELOPMENT (LEFT 8/27/1	40.00					х		110,707.	U.,	5,155
SUZANNE ISKEN								116 007	0.	991
DIR. OF EDUCATION (LEFT 1/28/11)	40,00	_		_		х	-	116,897.	0.	
LAURIE MCGAHEY						l.,		110 063	0.	4,756
DEPT. DIR. OF DEVELOPMENT	40,00		⊢		_	х	_	110,063.	0,	1,,,,,
JAY MYRES	40.00		1			,		119,327.	0.	534
CONTROLLER	40.00	-	-	-	-	х	_	119,347.	· · · · · · · · · · · · · · · · · · ·	
LYN WINTER	40.00					x		124,717.	0.	2,860
DIR. OF COMMUNICATIONS	40,00	-		-	\vdash	_	-	121,717.	-	
JEREMY STRICK	40.00	1					x	142,175.	0.	0
EXECUTIVE DIRECTOR (LEFT 1/16/09)	10,00	\vdash		╁	\vdash		-			_
		\vdash	\vdash	\vdash			\vdash			
				1	1		1			
			\vdash	\vdash	\vdash					
		1								
		\vdash	\vdash	\dagger						
		T				Т	Г			
		T	Т	Т		Г	Г			
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					Т					
					_					
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		_	1	Ļ	\perp	1	\perp			
						1				
		+	1	+	_	1	╀			-
		+	-	-	+	+	╁			
		+	+	+	+	+	+			
		+	+-	+	+	+-	+			
							-			42.46
Total to Part VII, Section A, line 1c		*****						2,072,904		42,49

Part VIII Statement of Revenue (D) Revenue excluded from (A) (B) (C) Unrelated Related or Total revenue tax under sections 512, 513, or 514 exempt function business revenue revenue Contributions, gifts, grants and other similar amounts 1 a Federated campaigns 1a 1,006,431 1b Membership dues 1,584,866 Fundraising events 1c d Related organizations 1d 142,400. 1e e Government grants (contributions) All other contributions, gifts, grants, and 11,854,229 similar amounts not included above 1f 302,195 g Noncash contributions included in lines 1a-1f: \$ 14,587,926 h Total. Add lines 1a-1f **Business Code** 1,148,411 2 a ADMISSIONS 900099 1,148,411 Program Service 900099 525,000 525,000 EXHIBITION FEES 17,478 REPRODUCTION FEES 900099 17,478 13,285 13,285 900099 EDUCATIONAL WORKSHOP F 400 LOAN FEES 900099 400 f All other program service revenue 1,704,574 Total. Add lines 2a-2f Investment income (including dividends, interest, and 607,789. 607,789 other similar amounts) Income from investment of tax-exempt bond proceeds 15,500. 15,500. 5 Royalties (i) Real (ii) Personal 6 a Gross Rents 55,981 **b** Less: rental expenses 55,981 c Rental income or (loss) 55,981. 55,981 d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 14,362,095 assets other than inventory **b** Less: cost or other basis 14,351,955 and sales expenses c Gain or (loss) 10,140 10,140. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue 1,584,866. of including \$ contributions reported on line 1c). See 2,092,006 Part IV, line 18 2,092,006 b Less: direct expenses _____b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 1,536,714 and allowances 730,909 **b** Less: cost of goods sold 815,799 -9,994 805,805 Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 23,526, CAFE INCOME 722210 23,526 11 a MISCELLANEOUS INCOME 900099 11,516. 11,516. d All other revenue 35,042 e Total. Add lines 11a-11d 724,452. -9,994 17,822,757 2,520,373. Total revenue. See instructions. 032009 12-21-10 Form 990 (2010)

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) but are not required to complete columns (B), (C), and (D). (**D**) Fundraising (A) Do not include amounts reported on lines 6b, Management and general expenses Program service Total expenses expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, 3 organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 246,891 1,512,154 1,759,045 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 643,184 412,907. 4,212,141 3,156,050 Other salaries and wages 7 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 44,248. 136,895 556,845 375,702 Other employee benefits 9 34,350. 242,289 117,666 394,305 10 Payroll taxes Fees for services (non-employees): Management 14,682 25,047 10,365 þ Legal 66,294 66,294 Accounting C Professional fundraising services. See Part IV, line 17 Investment management fees 243,855. 617,103 206,108 1,067,066 124,450 4,448 128,898 Advertising and promotion 12 14,823 11,543. 112,163 85,797 13 Office expenses 18,628. 54,292 95,973 23,053 14 Information technology Royalties 15 622. 1,549,397 1,550,019 16 Occupancy 70,391. 16,545 286,121 373,057 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 240. 193. 400 833 19 Conferences, conventions, and meetings 12,919 12,919 20 Payments to affiliates 21 841,981 841,981 Depreciation, depletion, and amortization 22 288,816 5,629 283,187 23 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) 48,371. 5,177 2,020,024 1,966,476 SECURITY 963,237 611 0. 963.848 EXHIBITION EXPENSES 25,852 101,601. 870,125 742.672 EXHIBITION SHIPPING 25,250. 45,294 401,239 330,695 TRANSPORTATION 25,153 51,450. 291,882 368,485 EQUIPMENT 398,691. 457,571 1,397,565 541,303 f All other expenses 1,462,147. 3,643,255 12,401,286 17,506,688 Total functional expenses. Add lines 1 through 24f 25 Joint costs. Check here
if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

032010 12-21-10

Form 990 (2010)

art	X	Balance Sheet	(A) Beginning of year		(B) End of year
			4,154,129.	1	6,478,804.
Т	1	Cash - non-interest-bearing	1,250,104.	2	833,145.
	2	Savings and temporary cash investments	7,154,155.	3	4,729,249.
- 1	3	Pledges and grants receivable, net	496,444.	4	459,932.
- 1	4	Accounts receivable, net	450,444.	4	
- 1	5	Receivables from current and former officers, directors, trustees, key		- 1	
-1		employees, and highest compensated employees. Complete Part II	1	5	
- 1		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
- 1	-	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
- 1		employers and sponsoring organizations of section 501(c)(9) voluntary		0	
- 1		employees' beneficiary organizations (see instructions)		7	
1	7	Notes and loans receivable, net	000 047		1,016,291.
	8	Inventories for sale or use	988,847.	8	33,374.
١ ١	9	Prepaid expenses and deferred charges	42,046.	9	
- 1	100	Land, buildings, and equipment: cost or other		- 1	
	104	basis Complete Part VI of Schedule D 10a 30,131,204	1 1		5,755,560.
	h	Less: accumulated depreciation 10b 24,395,724.			20,925,179.
		Investments - publicly traded securities	19,116,315.	11	20,525,115.
	11	Investments - other securities. See Part IV, line 11		12	
	12	Investments - program-related. See Part IV, line 11		13	
	13	Intangible assets		14	19,380.
	14	Other assets. See Part IV, line 11	352,588.	15	
	15	Total assets. Add lines 1 through 15 (must equal line 34)	40,152,169.	16	40,250,914.
_	16	Accounts payable and accrued expenses	1,930,055.	17	1,726,912.
	17	Grants payable		18	171 627
	18	Deferred revenue	34,990.	19	171,627.
	19	Tax-exempt bond liabilities		20	
	20	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
<u>es</u>	21	Payables to current and former officers, directors, trustees, key employees,		1 1	
Liabilities	22	highest compensated employees, and disqualified persons. Complete Part II		1 1	
<u>ra</u>				22	100 000
		of Schedule L Secured mortgages and notes payable to unrelated third parties	153,693	. 23	109,020
	23	Unsecured notes and loans payable to unrelated third parties		24	
	24	Other liabilities. Complete Part X of Schedule D		25	
	25	Total liabilities. Add lines 17 through 25	2,118,738	. 26	2,007,559
_	26	Organizations that follow SFAS 117, check here X and complete			
		Organizations that follow SFAS 117, cleek note			
es		lines 27 through 29, and lines 33 and 34.	-8,873,183	. 27	-7,780,825
and	27	Unrestricted net assets Temporarily restricted net assets	9,312,790	. 28	7,787,629
Bal	28		37,593,824	. 29	38,236,551
pu	29	Permanently restricted net assets			
E	1	Organizations that do not follow SFAS 117, check here	N .		
ō		complete lines 30 through 34.		30	
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		31	
ASS	31	Paid-in or capital surplus, or land, building, or equipment fund		32	
et	32	Retained earnings, endowment, accumulated income, or other funds	38,033,43	33	38,243,355
Z	33	Total net assets or fund balances	40,152,16	9. 34	40,250,914
	34	Total liabilities and net assets/fund balances			Form 990 (2010

Form	990 (2010) MUSEUM OF CONTEMPORARY ART	93-3433040		Pay	16.12
	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		*******		X
		269			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			757.
2	Total expenses (must equal Part IX, column (A), line 25)	2	17		688.
3	Revenue less expenses. Subtract line 2 from line 1	3			069.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			431.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			145.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	38	,243	355.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				بيا
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.		Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	e audit,	2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a		ĺ	
	separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			l x
	Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	iired audit	۱		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	000	(0040)
			Form	990	(2010)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 95-3433820 MUSEUM OF CONTEMPORARY ART 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 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. d Type III - Other c ___ Type III - Functionally integrated **b** Type II a L___ Type I By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below. 11g(i) the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? h Provide the following information about the supported organization(s). (vi) Is the organization in col. (III) Type of (v) Did you notify the (iv) Is the organization (i) Name of supported (vii) Amount of (ii) EIN organization in col. (i) listed in your organization in col. (i) organized in the U.S.? support organization (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes

032021 12-21-10

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2010

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and					1.00	
	membership fees received. (Do not						
	include any "unusual grants.")	16,451,215.	10,976,228.	29,479,758.	18,646,717.	13,682,148.	89,236,066.
2	Tax revenues levied for the organ-						-
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	16,451,215.	10,976,228.	29,479,758.	18,646,717.	13,682,148.	89,236,066.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included					13	
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						15,546,385.
6	Public support. Subtract line 5 from line 4.						73,689,681.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	16,451,215.	10,976,228.	29,479,758.	18,646,717.	13,682,148.	89,236,066.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	3,201,453.	402,676.	114,476.	364,858.	607,789.	4,691,252.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	-818.	-2,586.	-8,589.	-7,252.	-9,994.	-29,239.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)	130,431.	231,954.	110,138.	100,406.	112,906.	685,835.
11	Total support. Add lines 7 through 10						94,583,914.
12	Gross receipts from related activities,	etc. (see instruction	ons)		VIV. 17710000001000000000000	12	10,195,758.
13	First five years. If the Form 990 is for	the organization's	first, second, thire	d, fourth, or fifth ta	x year as a section	n 501(c)(3)	
	organization, check this box and stop						
Sec	tion C. Computation of Publi	ic Support Pe	rcentage				
14	Public support percentage for 2010 (li	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	77.91 %
15	Public support percentage from 2009	Schedule A, Part	II, line 14			15	75.48 %
16a	33 1/3% support test - 2010.If the or	rganization did not	check the box on	line 13, and line 14	4 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies						
b	33 1/3% support test - 2009.If the or						
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test	t - 2010. If the orga	anization did not cl	neck a box on line	13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and stop h e	ere. Explain in Par	t IV how the organ	ization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	organization		▶□□
þ	10% -facts-and-circumstances test	t - 2009. If the orga	nization did not ch	neck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	0% or
	more, and if the organization meets th	e "facts-and-circu	metanoos" tost ob	ook this boy and s	ton hore Evolein	in Part IV how the	
	more, and it the organization moote th	ie lacis-aliu-ciicu	mstances test, ci	IECK II IIS DOX AITO 8	stop nere. Explain	III Fait IV HOW tile	114
	organization meets the "facts-and-circ						-

Schedule A (Form 990 or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

_	tion A. Public Support						
Calen	dar year (or fiscal year beginning in) 🖊	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
1 1	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
i	iness under section 513						
	Tax revenues levied for the organ- ization's benefit and either paid to						
	or expended on its behalf						
	The value of services or facilities						
1	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
1	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support					711	
Calen	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
;	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization	's first, second, thi	rd, fourth, or fifth	tax year as a sect	ion 501(c)(3) org	anization,
	check this box and stop here			*****************			>
Sec	tion C. Computation of Publi	ic Support Pe	ercentage				
15	Public support percentage for 2010 (l	ine 8, column (f)	divided by line 13,	column (f))	***************************************	15	%
	Public support percentage from 2009					16	%
Sec	tion D. Computation of Inves	stment Incom	ne Percentage				
17	Investment income percentage for 20	10 (line 10c, colu	ımn (f) divided by li	ne 13, column (f))		17	%
	Investment income percentage from 2						%
19a	33 1/3% support tests - 2010. If the	organization did	not check the box	on line 14, and lin	ne 15 is more than	33 1/3%, and li	ne 17 is not
	more than 33 1/3%, check this box a	nd stop here. Th	e organization qua	lifies as a publicly	supported organi	ization	,
b	33 1/3% support tests - 2009. If the	organization did	not check a box o	n line 14 or line 19	a, and line 16 is n	nore than 33 1/3	%, and
	line 18 is not more than 33 1/3%, che	ck this box and s	stop here. The org	anization qualifies	as a publicly sup	ported organizat	tion
	Private foundation. If the organizatio						
	3 12-21-10						990 or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010 MUSEUM OF CONTEMPORARY ART	95-3433820	Page 4
Part IV Supplemental Information. Complete this part to provide the explanations required by Part II	, line 10; Part II, line 17a	
and Part III, line 12. Also complete this part for any additional information. (See instructions).		
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:		
2006 OTHER INCOME - \$44,730		
2006 RENTAL INCOME - \$85,701		
2007 OTHER INCOME - \$231,954		
2000 OWITH TYCOYE 4110 120		
2008 OTHER INCOME - \$110,138		
2009 OTHER INCOME - \$100,406		
2005 OTHER INCOME - \$100, \$00		
2010 OTHER INCOME - \$112,906		
2020 0311211 24100322 9222,700		
10		
a.		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number 95-3433820

a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Number of states where property subject to conservation easements it holds? Number of states where property subject to conservation easements in succeed Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Part XIV, describe how the organization reports conservation easements of section 170(h)(4)(B)(li) Pert XIV, 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" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Pert the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report	I D	MUSEUM OF CONTEMPORARI ARI	d Funds or Other Similar Fund	s or Accounts. Complete if the
Total number at end of year	Par	Organizations Maintaining Donor Advise		C. Freedomines Completes it and
1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year 5 Did the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all donors and donor advisors in writing that grant funds can be used only for charidable purposes and not for the benefit of the donor advisors in writing that grant funds can be used only for charidable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990. Part IV, line 7. 1 Purpose(s) of conservation essements held by the organization (check all that apply). Preservation of and for public use (e.g., recreation or education) Preservation of a certified historic structure Preservation of open space Complete inse 2 through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the 1 day of the tax year. a Total number of conservation easements c Number of conservation easements included in (e) acquired atter 8/17/08, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year year Year 1 Number of states where property subject to conservation easement is located \$\infty\$ Does the organization have a written policy regarding the periodic monitoring, inspection, and enforcing conservation easements during the year \$\infty\$ Does the organization have a written policy regarding the periodic monitoring, inspection, and enforcing conservation easements and solutions, and enforcement of the conservation easements in financial statements that describes the organization and section 17(0)h(4)(9)(9) 1 Part XIV, describe how the organization reports conservation easements in furtherance of public service		organization answered "Yes" to Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts
2 Aggregate contributions to (futing year) 3 Aggregate grants from (curing year) 4 Aggregate value at end of year 5 Did the organization's property, subject to the organization's exclusive legal control? 6 Did the organization's property, subject to the organization's exclusive legal control? 7 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part III Conservation Easements. Complete if the organization (check all that apply). □ Preservation of land for public use (e.g., recreation or education) □ Preservation of land for public use (e.g., recreation or education) □ Preservation of land for public use (e.g., recreation or education) □ 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 of easements a Total number of conservation easements a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements included in (e) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easements is located ▶ Number of states where property subject to conservation easements in the state of the total volunter house develed to monitoring, inspection, and enforcing conservation easements during the year ▶ \$ Staff and volunteer house develed to monitoring, inspection, and enforcing conservation easements during the year ▶ \$ Does denote conservation be develed to monitoring, inspection, and enforcing conservation assements during the year ▶ \$ Does denote conservation because the total for public exhibition, education, or r		-	(a) Donor advised funds	(b) I dilas dilas salas
Aggregate grants from (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control. 6 Did the organization inform all 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? 7 Part II Conservation Easements. Complete if the organization can any other purpose conferring impermissible private benefit? 8 Part II Conservation Easements. Complete if the organization can any other purpose conferring impermissible private benefit? 9 Preservation of a dorf or public use (e.g., recreation or education) Preservation of an historically important land area Preservation of organization despends on a control of preservation of a conservation of public use (e.g., recreation or education) Preservation of a certified historic structure Preservation of open space 2 Complete lines 2 through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the laday of the tax year. 8 Total number of conservation easements 9 Total acreage restricted by conservation easements 10 Total acreage restricted by conservation easements 11 Total acreage restricted by conservation easements 12 Total number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 12 Number of conservation easements modified, transferred, released, extingulshed, or terminated by the organization during the tax year 13 Number of conservation easements modified, transferred, released, extingulshed, or terminated by the organization during the presence of the presenc				
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 inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charattable purposes and not for the benefit of the donor of donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization in writing that grant funds can be used only for charattable purposes and not for the benefit of the donor of ordon advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or advisors). Preservation of land for public use (e.g., recreation or advisors). 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 lide of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements included in (c) acquired after 8/17/08, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of conservation easements modified, transferred, released, extinguished,	2	Aggregate contributions to (during year)		
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are the organization's property, subject to the organization's exclusive legal control?	4	Aggregate value at end of year		
are the organization's property, subject to the organization's exclusive legal control?	5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor adv	ised funds
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 1 Purpose(s) of conservation assements held by the organization (check all that apply). □ Preservation of hatural habitat □ Preservation of on fatural habitat □ Preservation of on fatural habitat □ Preservation of on fatural habitat □ Preservation of one pen space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the I day of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements C Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements. Part III ☐ Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization leasements. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of an historical treasures, o		are the organization's property, subject to the organization's	exclusive legal control?	L Yes L No
for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). □ Preservation of and for public use (e.g., recreation or education) □ Preservation of an historically important land area □ Protection of natural habitat □ Preservation of natural habitat □ Preservation of open space 2 Complete lines 2 at through 2 dif the organization held a qualified conservation contribution in the form of a conservation easement on the I day of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can b	e used only
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Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). □ Protection of land for public use (e.g., recreation or education) □ Protection of natural habitat □ Preservation of pan space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the I day of the tax year. 2 In the day of the tax year. 2 In the lines 2 at through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the I day of the tax year. 2 In the lines 2d through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the I day of the tax year. 2 In the lines 2d through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the I day of the tax year. 3 Number of conservation easements on a certified historic structure included in (a) 4 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 4 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(li) and section 170(h)(B)(B)(li) and section 170(h)(B)(B)(B) and secti		impermissible private benefit?	***************************************	Yes No
1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of 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 I day of the tax year. 8 Total number of conservation easements 9 Total acreage restricted by conservation easements 10 Number of conservation easements on a certified historic structure included in (a) 11 Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 12 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 12 Number of states where property subject to conservation easement is located 13 Number of states where property subject to conservation easement is located 14 Number of states where property subject to conservation easement is located 15 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it blods? 15 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 16 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(li)		II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990,	Part IV, line 7.
Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the I day of the tax year. I Held at the End of the Ta 2a Total number of conservation easements Total acreage restricted by conservation easements Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Para expective of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Para 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" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not report in its revenue statement and balance shee				
Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the I day of the tax year. It all number of conservation easements District of conservation easements Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)4()B(l)0 year on the conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)4()B(l)0 year on 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' to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of an historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part treasures, or other similar assets held for public exhib	•	Preservation of land for public use (e.g., recreation or e	education) Preservation of an h	istorically important land area
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Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of an historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part 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, his treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following a relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: A Provenues included in Form 990, Part VIII, line 1		include, if applicable, the text of the footnote to the organiza	ation's financial statements that describ	es the organization's accounting for
Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of ar historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Pathetext 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, his treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following a relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:		concentation agreements		
Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of ar historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Pathetext 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, his treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following a relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	Pai	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or	Other Similar Assets.
historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Pathetext 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, his treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following a relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:		Complete if the organization answered "Yes" to Form	n 990, Part IV, line 8.	
historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Pathetext 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, his treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following a relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue sta	tement and balance sheet works of art,
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, his treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following a relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:		historical treasures, or other similar assets held for public ex	chibition, education, or research in furth	erance of public service, provide, in Part XIV,
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, he treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following a relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:		the text of the footnote to its financial statements that described	ribes these items.	
treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following a relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statem	ent and balance sheet works of art, historical
relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	~	treasures, or other similar assets held for public exhibition,	education, or research in furtherance of	public service, provide the following amounts
(ii) Revenues included in Form 990, Part VIII, line 1 (iii) 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:				
 (ii) Assets included in Form 990, Part X 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: 		(i) Revenues included in Form 990. Part VIII. line 1	T	> \$
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: 2 Provinces included in Form 990, Part VIII, line 1		(ii) Accete included in Form 900 Part Y		\$
the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: • Payenus included in Form 990, Part VIII, line 1	_	(ii) Assets included in routing 300, Fait A	easures, or other similar assets for finar	icial gain, provide
a Povenues included in Form 990 Part VIII line 1	2	in the organization received or field works of art, historical to	116 (ASC 958) relating to these items:	-
a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X 25		the following amounts required to be reported under SFAS	110 (AGO 300) Telating to these items.	▶ \$
b Assets included in Form 990, Part X	_	Revenues included in Form 990, Part VIII, line 1		\$ 256,500
	b	Assets included in Form 990, Part X		

Schedule D (Form 990) 2010

032051 12-20-10

3a	by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organization	ns listed as required	**********			******		3a(i) 3a(ii) 3b		X
	(i) unrelated organizations		**********			******		3a(ii)		_
Je	(i) unrelated organizations	***************************************	~		4 6 6 6 7 7 7 7 7	******		. (")		_
38	py:							a		
- 0									Yes	No
_ `	A CONTRACTOR OF THE PROPERTY O	- ession of the organiz	ation that are held a	and administered	for the	organ	ization	i	. 1	
-	Term endowment .00	%								
ь	100 00	%								
_ a	m 1 1 1 1 - the standard and and appropriate	.00	_%							
2	Provide the estimated percentage of the year	ar end balance held a	as:							
g	End of year balance	19,857,712.	18,591,456.	14,237,67	0.					_
f	Administrative expenses									_
•	and programs			-128,65	9.					
e	Other expenditures for facilities									
d	Grants or scholarships				_			-		_
C	Net investment earnings, gains, and losses	769,190.	353,786.	-2,730,55	1.					_
b	Contributions	497,066.	4,000,000.	2,858,33	_				_	_
1a	Beginning of year balance	18,591,456.	14,237,670.	14,238,54	_				_	
	122-013	(a) Current year	(b) Prior year	(c) Two years bac	k (d)	Three	years back	(e) Four	years t	oack
	rt V Endowment Funds. Complete i	f the organization an	swered "Yes" to Fo	rm 990, Part IV, Iir	ne 10.			10000	ANDERSON	_
	If "Yes," explain the arrangement in Part XIV.		EMERICANNI							
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?	2112257227572787	******			Yes		No
f	Ending balance					1f		-	_	
u e	Distributions during the year					1e				_
ن بہ	Additions during the year			******************		1d				
_	Beginning balance	1.19		*****************		1c				
IJ	ii 100, explain the analigement are service		_					Amount		
h	If "Yes," explain the arrangement in Part XIV	and complete the fol	lowing table:							
1a	on Form 990, Part X?	and outlet member		70-11-70-11-81-4		********	******	Yes		No
	Is the organization an agent, trustee, custodi	on or other intermed	iany for contributions	s or other assets	not inc	luded				
Pai	t IV Escrow and Custodial Arrangereported an amount on Form 990, Par	yernemus. Comple t X line 21	te ii trie organizatior	i di lawei eu i ea	.0101	500	,,	, - ,		
	to be sold to raise funds rather than to be ma	intained as part of ti	te if the organization	answered "Yes"	to For	m 990				
5	During the year, did the organization solicit or	receive donations of	or art, historical treas	laction?	illai as	3613	х	Yes		No
4	Provide a description of the organization's co	llections and explain	now they further th	e organization s e	ilar ac	. puipi este	730 IIII ai	. 711 530		
C	Preservation for future generations	u u laba	. L Ale and do not be on the	o organization's e	vemnt	nurne	se in Par	t XIV.		
b	Scholarly research	е	Other							
а	X Public exhibition	d								
	(check all that apply):	_	X Loan or exch	ange programs						
	Using the organization's acquisition, accession	n, and other records	s, check any or the is	Ollowing that are t	. o.g					

Part VII Investments - Other Securities.	See Form 990, Part X, line 12	()	
(a) Description of security or category (including name of security)	(b) Book value	(c) Met	thod of valuation: d-of-year market value
1) Financial derivatives			
2) Closely-held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(1)			
otal. (Col (b) must equal Form 990, Part X, col (B) line 12.)	`		
Part VIII Investments - Program Related	See Form 990, Part X, line 1	3. (a) Ma	thod of valuation:
(a) Description of investment type	(b) Book value		d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)	<u> </u>		
Part IX Other Assets. See Form 990, Part X,	(a) Description		(b) Book value
	(a) Description		
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10) Total. (Column (b) must equal Form 990, Part X, col (B,) line 15.)		>
Part X Other Liabilities. See Form 990, Part X, Col (5)	t X line 25		
(a) Description of liability	7.5 m to 201	(b) Amount	
100 INC. ACCUSED TO A CONTROL OF THE		``	
(1) Federal income taxes			
(2)			
(3)			
<u>(4)</u>			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col (B) FIN 48 (ASC 740) FOOTNOTE. IN Part XIV, provide the text of the footnote.	N # 05)		
Total, (Column (b) must equal Form 990, Part X, col (E) line 25.)	ements that reports the organization s	Hability for uncertain tax positions under

ACQUIRED, OR AS DECREASES IN TEMPORARILY OR PERMANENTLY RESTRICTED NET

ASSETS IF THE NET ASSETS USED TO PURCHASE THE ITEMS ARE RESTRICTED BY

Schedule D (Form 990) 2010

Part XIV Supplemental Information

Schedule D (Form 990) 2010

1

2

3

Total revenue (Form 990, Part VIII, column (A), line 12)

Schedule D (Form 990) 2010 MUSEUM OF CONTEMPORARY ART	95-3433820	Page 5
Part XIV Supplemental Information (continued)		
STATEMENTS, PROCEEDS FROM DEACCESSIONS OR INSURANCE RECOVERIES ARE		
REFLECTED AS INCREASES IN THE APPROPRIATE NET ASSET CLASSES.		
PART III, LINE 4: THE MUSEUM'S ART COLLECTION IS MADE UP OF MORE THAN		
6,000 CONTEMPORARY ART OBJECTS THAT ARE HELD FOR EXHIBITION AND VARIOUS		
OTHER PROGRAM ACTIVITIES. EACH OF THE ITEMS IS CATALOGED, PRESERVED AND		
CARED FOR, AND ACTIVITIES VERIFYING THEIR EXISTENCE AND ASSESSING THEIR		
CONDITION ARE PERFORMED CONTINUOUSLY,		
PART V, LINE 4: AT JUNE 30, 2009, THE MUSEUM'S ENDOWMENT SUMMARIZED BY		
PURPOSE CONSISTS OF THE FOLLOWING:		
GENERAL ENDOWMENT 12,538,031		
EDUCATION 2,648,527		
EXHIBITIONS 4,018,086		
ACQUISITIONS 653,068		
TOTAL 19,857,712		-
AS OF JUNE 30, 2011, THE TOTAL OF THE MUSEUM'S PERMANENTLY RESTRICTED		
FUNDS WAS \$38,236,551. THERE WAS \$19,857,711 IN THE MUSEUM'S DESIGNATED		
ENDOWMENT PORTFOLIO (WHICH CONSISTS OF INVESTMENTS AND OTHER ASSETS), A		
DEFICIENCY OF \$18,378,840. THE DEFICIENCY RESULTED FROM WITHDRAWALS FROM		
THE ENDOWMENT IN PRIOR YEARS. AS NOTED BELOW, THE BOARD OF TRUSTEES HAS		
DEVELOPED A PLAN TO REPAY THE DEFICIENCY. ECONOMIC CONDITIONS IN RECENT		
YEARS HAVE CREATED MANY CHALLENGES FOR CULTURAL INSTITUTIONS, AND MOCA HAS		
HAD DIFFICULTY MEETING OPERATING NEEDS. IN THE PAST, LOSSES HAVE DEPLETED		
WORKING CAPITAL, AND HAVE PUT MOCA IN A POSITION WHERE PERMANENTLY		
RESTRICTED ASSETS HAVE BEEN USED FOR WORKING CAPITAL, THERE ARE		
INSUFFICIENT NET ASSETS TO SUPPORT PERMANENTLY RESTRICTED NET ASSETS. THIS	Schedule D (Fo	m 000\ 2040

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open To Public Inspection Employer identification number

Name of the organization MUSEUM OF (CONTEMPORARY ART				95-343382)
	Complete if the organization answe	ered "Y	'es" to	Form 990, Part IV, I	ine 17. Form 990-E	Z filers are not
Indicate whether the organization rais a	e Solicitat f Solicitat g Special or oral agreement with any individual rart VII) or entity in connection with p ividuals or entities (fundraisers) pursu	ion of ion of fundra (includerofess	non-g gover ising o ding o ional f	overnment grants nment grants events fficers, directors, true fundraising services?	stees or Ye	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
						-
						<u> </u>
Total			•			
List all states in which the organization or licensing.		contril	oution	s or has been notifie	d it is exempt from	registration

032081 01-13-11

Schedule G (Form 990 or 990-EZ) 2010

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

Schedule G (Form 990 or 990 EZ) 2010 MUSEUM OF CONTEMPORARY ART 95-3433820 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (c) Other events (b) Event #2 (a) Event #1 (d) Total events (add col. (a) through ART AUCTION col. (c)) (total number) (event type) (event type) Revenue 3,676,872. 263,845. 3,112,627 300,400 1 Gross receipts 59,786 1,584,866. 74,354 1,450,726 2 Less: Charitable contributions 2,092,006. 204,059 226,046 1,661,901 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs Food and beverages 8 Entertainment 2,092,006. 204,059 1,661,901. Other direct expenses 2,092,006) 10 Direct expense summary. Add lines 4 through 9 in column (d) Net income summary. Combine line 3, column (d), and line 10 Part III | Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (add (b) Pull tabs/instant (c) Other gaming (a) Bingo col. (a) through col. (c)) Revenue bingo/progressive bingo Gross revenue . Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes No Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? **b** If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2010

032082 01-13-11

Schedule G (Form 990 or 990-EZ) 2010 MUSEUM OF CONTEMPORARY ART	95-3433	3820		Page 3
11 Does the organization operate gaming activities with nonmembers?			Yes	☐ No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed				
to administer charitable gaming?			Yes	☐ No
13 Indicate the percentage of gaming activity operated in:	Stration and			
a The organization's facility		13a		%
b An outside facility		13b		%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and reco				
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 am	ount			
of gaming revenue retained by the third party ▶\$				
c If "Yes," enter name and address of the third party:				
- 1 - 100, 0.100 Name and decision and amarparay.				
Name				
Address				
16 Gaming manager information:				
Name				
Gaming manager compensation > \$				
Description of services provided				
			_	
			_	
Director/officer Employee Independent contractor				
E Billectonomicei E E Employee E Indopension 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 spen				
organization's own exempt activities during the tax year > \$				
Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, co	lumns (iii)	and (v	/), and	Part III,
lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional in	nformation	(see i	nstru	ctions).
		-	-	
032083 01-13-11 Schedul	e G (Form	1 990	or 99()-EZ) 2010

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" to Form 990,

Part IV, line 23. Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

MUSEUM OF CONTEMPORARY ART

See separate instructions.

Employer identification number 95-3433820

Pai	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990	,		
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
Į,	First-class or charter travel Housing allowance or residence for personal			
- 1	Travel for companions Payments for business use of personal reside	nce		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, director	ors,		
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. X Compensation committee X Written employment contract X Independent compensation consultant X Compensation survey or study X Form 990 of other organizations X Approval by the board or compensation compensat	mittee		
	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a	 	Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	_	Х
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	_	Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		1	
	contingent on the revenues of:	1_		_v
а	The organization?	5a	-	X
b	Any related organization?	5b	-	<u> </u>
	If "Yes" to line 5a or 5b, describe in Part III.			1
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1		1
	contingent on the net earnings of:			x
a	The organization?	6a	+	x
b	Any related organization?	6b		+^-
	If "Yes" to line 6a or 6b, describe in Part III.			1
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	_		l x
	not described in lines 5 and 6? If "Yes," describe in Part III	7	-	+^
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			x
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		+
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	0-bdula 1/5	000	1 0040
ΙНΔ	For Panerwork Reduction Act Notice, see the Instructions for Form 990.	Schedule J (For	m 990) ZUT(

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

Page 2

95-3433820

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Schedule J (Form 990) 2010

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(i) Base compensation (i) 217,789. 2 RICHARD WEIL (ii) 648,281. 3 JEFFREY DEITCH (ii) 648,281. 5 JEFREY DEITCH (ii) 648,281. 6 (ii) 142,175. 7 (ii) 0. 9 (ii) 0. 11 (iii) 0.	on incentive compensation (ii) Bonus & 1789. 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0	(iii) Other reportable compensation 0.	other deferred compensation	benefits	(B)(i)-(D)	reported in prior Form 990 or
E. YOUNG (i) 217,785 (ii) 648,285 (ii) 648,285 (ii) 648,285 (iii) 235,41 (ii) 648,17 (ii) 648,287 (iii) 648,287 (ii			_			Form 990-EZ
E. YOUNG (f) 211,702 CH (f) 648,28			0	0	217,789.	0.
E. YOUNG (ii) 214,455 (iii) 648,28 (iii) 648			0	0	0	.0
CH (II) 648,285,41 CH (II) 648,287 T. (III) (III) 142,17 TX (III) (II			0.	202.	214,655.	.0
CH (II) 648,28. CH (II) 648,28. L (III) 142,17 (III) (IIII) (III) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIII) (IIII) (IIII) (IIII) (IIIII) (IIII) (IIIII) (IIIII) (IIIII) (IIIII) (IIIII) (IIIIII) (IIIIII) (IIIIIII) (IIIIIIII			0	0	0	0
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(i) (35,41) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiiiiii			22,000.	2,266.	259,680.	0
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(ii)					School	Schedule .1 (Form 990) 2010

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

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

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

OMB No. 1545-0047

Open To Public Inspection

Name of the organization								Employer identification number				
	EUM OF CONT						!	95-34338	320		_	
					501(c)(4) organizatio		9° D4	W. line 40	i.			
				990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.						ected?		
(a) Name of disqualified person				(b) Description of transaction			ction	n		Yes	No	
										-		
2 Enter the amount of tax imposection 49583 Enter the amount of tax, if a								▶ \$				
Part II Loans to and/o	or From Int	erested	Persons	s.								
	anization ansv	wered "Yes'	on Form	990, Part IV,	line 26, or Form 990-E	Z, Part V	, line 3	88a.	around.			
(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount		(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?		
	То	From	ļ			Yes	No	Yes	No	Yes	No	
			!					+				
	-		-									
											-	
							-	-	-	-		
		-					_	-				
Total												
Part III Grants or Assi												
Complete if the organization answered "Yes" on Form (a) Name of interested person (b) Relate			tionship between interested person and			T	(c) Amount and type of assistance					
(-,	·			the o	ganization		_		assista	nce		
							+					
							+					
							_					
							+-					
		50					+					
LHA For Paperwork Reduction	on Act Notice	, see the In	struction	s for Form 9	90 or 990-EZ.		Sched	lule L (Fo	rm 990	or 990-l	E Z) 20 1	

chedule L (Form 990 or 990-EZ) 2010 Part IV Business Transactions Inv	olving Interested Persons.				
	ered "Yes" on Form 990, Part IV, line 28a, 28	8b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharin organization	
				Yes	N
ARLES S. COHEN	TRUSTEE	525,000.	MOCA PROVID		х
					_
					L
					L
					L
					L
					L
art V Supplemental Information					
	tional information for responses to question	s on Schedule L (see	instructions).		
Complete this part to provide data	torial information to respect to				
L, PART IV, BUSINESS TRANSACTION	NS THVOLVING INTERESTED PERSONS:				
I B, PART IV, BODINEDS INMINISTED	1110211110				
NAME OF PERSON: CHARLES S. COHE	NI.				
NAME OF PERSON: CHARDES S. CORE					
DELAMINATED DEMMENT INTERESTED	DEDGOM AND ODGANIZATION.				
RELATIONSHIP BETWEEN INTERESTED	PERSON AND ORGANIZATION:				
JSTEE					_
) AMOUNT OF TRANSACTION \$ 525,000	•			_	_
) DESCRIPTION OF TRANSACTION: MOC.	A PROVIDES EXHIBITION PROGRAMMING	AT			_
E GALLERY OF THE PACIFIC DESIGN C	ENTER (PDC). CHARLES S. COHEN IS	тне			_
ESIDENT AND CEO OF COHEN BROTHERS	REALTY CORPORATION, THE OWNERS A	AND			
NAGERS OF PDC.					_
) SHARING OF ORGANIZATION REVENUE	S? = NO				_
					_
					_
					_

SCHEDULE M (Form 990)

Noncash Contributions

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

Attach to Form 990.

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

ALIGETTAL OF COMMEMDODY APA

Employer identification number

	MUSEUM OF CONTEMPO	KARY ART			30-343	5020		
Pa	rt 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 de noncash contribu			3
1	Art - Works of art	х	50	0.	N/A			
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	х	9	302,195.	MARKET VALUE			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential						-	
16	Real estate - Commercial						_	
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()		1					
28	Other ()		1					
29	Number of Forms 8283 received by the organ							
	for which the organization completed Form 82	283, Part IV,	Donee Acknowled	gement 29				
				=			Yes	No
30a	During the year, did the organization receive b	y contributi	on any property re	ported in Part I, lines 1-28 th	at it must hold for			
	at least three years from the date of the initial							x
	the entire holding period?			6,8		30a		
	If "Yes," describe the arrangement in Part II.						v	
31	Does the organization have a gift acceptance					31	x	_
32a	Does the organization hire or use third parties					00.	х	
	contributions?					32a		_
	If "Yes," describe in Part II.				haalead			
33	If the organization did not report an amount in	n column (c)	for a type of brope	erty for which column (a) is c	пескеа,	11		1

Schedule M (Form 990) (2010)

describe in Part II.

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

SCHEDULE 0

(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.

2010
Open to Public Inspection

Employer identification number Name of the organization 95-3433820 MUSEUM OF CONTEMPORARY ART FORM 990 PART I LINE 1 DESCRIPTION OF ORGANIZATION MISSION: THE MUSEUM OF CONTEMPORARY ART WAS FOUNDED IN 1979 TO COLLECT, EXHIBIT INTERPRET, AND PRESERVE CONTEMPORARY ART FOR THE PUBLIC BENEFIT, TO ENHANCE ACCESSIBILITY, TO FURTHER PUBLIC UNDERSTANDING AND APPRECIATION OF CONTEMPORARY ART, AND TO ENCOURAGE ONGOING CREATIVE ACTIVITY. MUSEUM ORGANIZES DIVERSE EXHIBITIONS AND PROGRAMS TO ENHANCE PUBLIC KNOWLEDGE AND APPRECIATION OF THE ART OF OUR TIME. FORM 990 PART III LINE 1 DESCRIPTION OF ORGANIZATION MISSION: THE MUSEUM OF CONTEMPORARY ART WAS FOUNDED IN 1979 TO COLLECT, EXHIBIT INTERPRET. AND PRESERVE CONTEMPORARY ART FOR THE PUBLIC BENEFIT, TO ENHANCE ACCESSIBILITY, TO FURTHER PUBLIC UNDERSTANDING AND APPRECIATION OF CONTEMPORARY ART, AND TO ENCOURAGE ONGOING CREATIVE ACTIVITY. MUSEUM ORGANIZES DIVERSE EXHIBITIONS AND PROGRAMS TO ENHANCE PUBLIC KNOWLEDGE AND APPRECIATION OF THE ART OF OUR TIME. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: PUBLIC AFFAIRS/INFORMATION: A VARIETY OF PROMOTIONAL ADVERTISING AND PUBLIC PROGRAMS WERE PRODUCED BY MOCA'S COMMUNICATIONS DEPARTMENT TO INFORM THE PUBLIC OF MOCA'S ACTIVITIES AND DISSEMINATE INFORMATION ABOUT CONTEMPORARY ART. EXPENSES \$ 837,375. INCLUDING GRANTS OF \$ 0. REVENUE S 0 FORM 990, PART VI, SECTION A, LINE 2: TRUSTEE SUSAN GERSH IS THE DAUGHTER-IN-LAW OF LIFE TRUSTEE BEA GERSH.

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

Schedule O (Form 990 or 990-EZ) (2010)

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS: