Form	990-T	E	Exempt Organization Bus			ax Return	·	OMB No. 1545-0687			
	tment of the Treasury		(and proxy tax und	ler se	ction 6033(e))	0.1		Open to Public Inspection for			
	al Revenue Service	For c	alendar year 2012 or other tax year beginning AUG 1			UL 31, 20		501(c)(3) Organizations Only			
A L	Check box if address changed		Name of organization (Check box if name of	changed	and see instructions.)		(Emploinstruc	byees' trust, see ctions.) 3 - 0 2 0 4 6 2 0			
	xempt under section	_									
X	501(c)(3)	or Type	Number, street, and room or suite no. If a P.O. bo		ted business activity codes istructions)						
	408(e) 220(e)	1600 ZIST STREET, NW									
	408A □ 530(a)		City or town, state, and ZIP code				4	200			
<u>_</u>	∫529(a)	- 0	WASHINGTON, DC 20009				531	390			
	ok value of all assets end of year		exemption number (see instructions)	<u> </u>		1 104/)					
	•	G Check	corganization type X 501(c) corporation	n L	501(c) trust	401(a) trust	L	Other trust			
_	,795,596 .	nla muina	on considered business settivity. > DADMNET	СПТ	D TNVECOMEN	TIC .					
_			ary unrelated business activity. $ ightharpoonup PARTNEF$ poration a subsidiary in an affiliated group or a pare				Ye	s X No			
			tifying number of the parent corporation.	III-SubSi	ulary controlled group?		1 16:	S A INU			
_			SUSAN J. NICHOLS		Talanho	one number \triangleright 2	02-	387-2151			
_			de or Business Income		(A) Income	(B) Expenses		(C) Net			
	Gross receipts or sale		as or Business intollis		(-,/	(= / = - + = - = = =		(-)			
	Less returns and allo		c Balance	1c							
2			A, line 7)	2							
3			rom line 1c	3							
4 a			h Schedule D)	4a				_			
			art II, line 17) (attach Form 4797)	4b							
C	Capital loss deductio	n for trus	sts	4c							
5			ips and S corporations (attach statement)	5							
6	Rent income (Schedu	ule C) .		6							
7	Unrelated debt-finance	nrelated debt-financed income (Schedule E) 7									
8	Interest, annuities, ro	yalties, a	and rents from controlled organizations (Sch. F)	8							
9			on 501(c)(7), (9), or (17) organization								
				9							
10			me (Schedule I)	10							
11	Advertising income (Schedule	e J)								
12	,		s; attach statement) STATEMENT 1	12	5,987.			5,987.			
13			gh 12	13	5,987.			5,987.			
Pa			ot Taken Elsewhere (see instructions for utions, deductions must be directly connected		,	income)					
14	Compensation of of	ficers, di	rectors, and trustees (Schedule K)				14				
15	Salaries and wages						15				
16	Repairs and mainter	nance .					16				
17	Bad debts						17				
18							18				
19	Taxes and licenses						19	497.			
20			e instructions for limitation rules)				20				
21			562)								
22			n Schedule A and elsewhere on return				22b				
23							23				
24			mpensation plans				24				
25 26			phodulo I\				25				
26 27			chedule I)				26 27				
28			hedule J) tement)				28				
20 29			es 14 through 28				29	497.			
30			ncome before net operating loss deduction. Subtra				30	5,490.			
31			ı (limited to the amount on line 30)				31	<u> </u>			
32			ncome before specific deduction. Subtract line 31 f				32	5,490.			
33			/ \$1,000, but see instructions for exceptions)				33	1,000.			
34			able income. Subtract line 33 from line 32. If line				0.4	1 100			

223701 01-11-13 LHA For Paperwork Reduction Act Notice, see instructions.

4,490. Form **990-T** (2012)

Form 990-T	(2012)	THE PHILLIP	S COL	LECTION				53-020	4620	F	Page
Part I	II .	Tax Computation									
35	Orga	nizations taxable as corporat	ions (see ins	structions for tax c	omputation).						
	Conti	olled group members (section	ns 1561 and	1563) check here	► See	instructions an	d:				
а		your share of the \$50,000, \$2		•							
	(1)	Ís í	(2) \$, ,			/-				
b		organization's share of: (1) A						_			
-		dditional 3% tax (not more that						_			
c		ne tax on the amount on line 3							35c	6'	74
36	True	s taxable at trust rates (see in	etructions f	or tay computation		the amount o	 n lina 2/	I from:	000		
00		Tax rate schedule or							36		
97									37		
37		y tax (see instructions)									
38	Aiteri	native minimum tax							38		74
39		. Add lines 37 and 38 to line 3	50 Or 36, Wr	licnever applies .					39	0	/ 4
		Tax and Payments		10			T 1				
		gn tax credit (corporations atta					40a				
b	Other	credits (see instructions)					40b				
		ral business credit. Attach For									
		t for prior year minimum tax (a									
		credits. Add lines 40a throug							40e		_
41	Subti	act line 40e from line 39	<u></u>	<u></u> <u></u>	<u></u>	. <u></u>	<u></u>	<u></u>	41	6	74
42	Other	taxes. Check if from: Fo	rm 4255 L	Form 8611	Form 8697	Form 88	66	Other (attach statement)	42		
43	Total	tax. Add lines 41 and 42							43	6	74
44 a	Paym	nents: A 2011 overpayment cr	edited to 20	12			44a				
		estimated tax payments					44b				
		eposited with Form 8868					44c				
		gn organizations: Tax paid or v					44d				
		up withholding (see instruction					44e				
		t for small employer health ins					44f				
		credits and payments:		Form 2439							
9		Form 4136		Other		Total -	44g				
45									45		
46	Entire	payments. Add lines 44a thro nated tax penalty (see instruction	one) Cheek	if Earm 2220 is att	raphad	 1			46		15
									47		89
47		lue. If line 45 is less than the t							 		0 9
48		payment. If line 45 is larger th				verpaid			48		
49		the amount of line 48 you was				Informati	om /	Refunded >	49		
Part \		Statements Regarding									
	,	e during the 2012 calendar ye	,	•		•		,	, ,	, Yes	N
		, or other) in a foreign country									
Acc 2 Durii	ounts.	If "Yes," enter the name of the ax year, did the organization receive e instructions for other forms the org	foreign cou	intry here	antor of or transfer	ror to a foreign tri	ict?				X
											Х
		amount of tax-exempt interest									
Sched	lule	A - Cost of Goods S	old. Enter	method of inver							
1 Inve	entory	at beginning of year	1		6 Invento	ry at end of yea	ar		6		
2 Pur	chase	S	2		7 Cost of	goods sold. Si	ubtract l	ine 6			
3 Cos	t of la	oor	3		from lin	ie 5. Enter here	and in F	Part I, line 2	7		
4a Addi	itional s	section 263A costs (att. statement)	4a		8 Do the	rules of section	263A (with respect to	,	Yes	N
b Oth	er cos	ts (attach statement)	4b		propert	y produced or a	acquired	for resale) apply to			
5 Tota	al. Ad	d lines 1 through 4b	5			anization?					
	Uı	nder penalties of perjury, I declare the treet, and complete. Declaration of	nat I have exan	nined this return, inclu	iding accompanyin	g schedules and s	statement	s, and to the best of my kno	wledge and be	lief, it is true,	
Sign	cc	rrect, and complete. Declaration of	preparer (other	r than taxpayer) is bas	sed on all information	CHIEF C	PER	N Knowledge. ATING	av the IDC dies	cuss this return w	طفند
Here						OFFICER			ay the IHS disc e preparer sho		VILII
		Signature of officer		Date		tle			structions)?	_ `	N
		Print/Type preparer's name		Preparer's sig	gnature	Da	te	Check			
D-''					g. /m.m. 0	الما		self- employed			
Paid								John omployed			
Prepa	irer	Firm's name ▶ GELMA	N. RO	SENBERG A	& FREEDI	MAN		Firm's FIN	52-	1392008	8

Form **990-T** (2012)

(301) 951-9090

Phone no.

4550 MONTGOMERY AVE SUITE 650N

Firm's address ► BETHESDA, MD 20814-2930

Schedule C - Rent Inco	me (Fr	om Real	Proper	rty and	l Personal	Propert	ty Lease	d With Real P	rope	erty)(see instructions)
1. Description of property										
(1)										
(2)										
(3)										
(4)										
	2.	Rent receiv						2/a\D-du-di-	-41	and the state of t
(a) From personal property (if rent for personal property 10% but not more that	is more than	age of	(b) F	of rent for po	nd personal proper ersonal property ex t is based on profit	ceeds 50% c	entage or if			nnected with the income in b) (attach statement)
(1)										
(2)										
(3)										
(4)										
Total		0.	Total				0.			
(c) Total income. Add totals of columere and on page 1, Part I, line 6, c	olumn (A)		▶				0.	(b) Total deductions Enter here and on page Part I, line 6, column (B)	1.	0.
Schedule E - Unrelated	Debt-F	inanced	Incom	1e (see i	nstructions)					
					0 -	_		3. Deductions directly to debt-fir	connect	ted with or allocable
1. Description of	debt-finance	ed property			2. Gross ind or allocable financed	e to debt-	(a) :	Straight line depreciation (attach statement)		(b) Other deductions (attach statement)
(1)										
(2)										
(3)										
debt on or allocable to debt-financed of or a property (attach statement) debt-fina		of or a debt-fina	e adjusted basis allocable to anced property th statement)		6. Column 4 divided by column 5			7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of column: 3(a) and 3(b))	
(1)						%	,			
(2)						%				
(3)						%	,			
(4)						%	,			
	•							ter here and on page 1, art I, line 7, column (A).		Enter here and on page 1, Part I, line 7, column (B).
Totals							▶		0.	0.
Total dividends-received deducti	ons includ	ed in columr	8						.▶	0.
Schedule F - Interest, A									nstruc	tions)
				Exemp	t Controlled O	rganizatio	ns			·
1. Name of controlled organization	on	Employer ide numb	entification	Net un (loss) (s	3. prelated income see instructions)		4. of specified ents made	5. Part of column included in the con organization's gross	trolling	connected with income
(1)										
(2)										
(3)										
(4)										
Nonexempt Controlled Organiz	ations	•				•		•		•
7. Taxable Income		nrelated incom see instructions		9. To	tal of specified pay made	ments	in the cont	olumn 9 that is included rolling organization's coss income		Deductions directly connected with income in column 10
(1)						+				
(2)						- 				
(3)						+				
(4)						+				
\7)				I			Enter here	olumns 5 and 10. and on page 1, Part I, 8, column (A).	Ent	Add columns 6 and 11. ter here and on page 1, Part I, line 8, column (B).
Totala								0.		
Totals		<u></u>		<u></u>	<u></u>	<a> 		υ.		0.

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Schedule G - Investm (see in	nent Incor	ne of a	Section 8	501(c)(7), (9), or (17) O	rganizat	tion		
1 . D	escription of incor	me			2. Amount of income		ductions connected statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)						,			, , ,
(2)									
(3)							-		
(4)									Foton bons and as a second
					Enter here and on page 1, Part I, line 9, column (A).				Enter here and on page 1 Part I, line 9, column (B).
Totals				▶	0.				0.
Schedule I - Exploite (see ins	d Exempt structions)	Activity	/ Income	, Othe	r Than Advertis	ing Inco	ome		
			3		4. Net income (loss)				7 5
1. Description of	2. Gi unrelated		3. Exper directly con	nected	from unrelated trade or business (column 2		s income ivity that	6. Expenses	7. Excess exempt expenses (column
exploited activity	income	e from	with produ		minus column 3). If a	is not u	nrelated	attributable to column 5	6 minus column 5, but not more than
	trade or b	ousiness	business in		gain, compute cols. 5 through 7.	busines	s income	ooranni o	column 4).
(4)	_				z-g				
(1)									
(2)									
(3)									
(4)									
	Enter here		Enter here						Enter here and on page 1,
	page 1, line 10,		page 1, P line 10, co						Part II, line 26.
Totals		0.		0.					0.
Schedule J - Adverti	sing Incor		inetructions)						
					solidated Basis	;			
					A Advantisina asin				7. Excess readership
1. Name of periodical		2. Gross advertising income		Direct sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compu cols. 5 through 7.		rculation come	6. Readership costs	costs (column 6 minus column 5, but not more than column 4).
(1)									
(2)									
(3)									
						_	-		
(4)									
			_	^					•
Totals (carry to Part II, line (5))	>		0.	0					0.
Part II Income From columns 2 throu				a Sepa	arate Basis _{(For}	each peric	odical listed	in Part II, fill in	
		2. Gross			4. Advertising gain	_		_	7. Excess readership
1. Name of periodical		advertising income		Direct sing costs	or (loss) (col. 2 minus col. 3). If a gain, compu cols. 5 through 7.		rculation come	6. Readership costs	costs (column 6 minus column 5, but not more than column 4).
(1)									
(2)									
(3)									
(4)									
			0.	0					0.
Totals from Part I	- F-								Enter here and
Tatala Davill (linea 1.5)	lir F	ter here and o page 1, Part I, ne 11, col. (A)	, page	ere and on 1, Part I, 1, col. (B).					on page 1, Part II, line 27.
Totals, Part II (lines 1-5)						in alm ratio			0.
Schedule K - Compe	ensation o	Office	rs, Direct	ors, ar	id Trustees (see	Instructio	ns) 3. Percent	of I	
1	. Name				2. Title		time devoted	d to	ensation attributable related business
(1)								%	
(2)								%	
(3)								%	
								%	
(4)	1 Dort II II 1	4					<u> </u>		^
Total. Enter here and on page	i, Part II, line 1	4						<u> ▶ </u>	0.

01-11-13

Form **990-T** (2012)

FORM 990-T	OTHER INCOME	STATEMENT 1
DESCRIPTION		AMOUNT
LONE JUNIPER LP TUCKER ANTHONY PRIVATE EQUITY PAUL CAPITAL IX FLAG ENERGY & NATURAL RESOURCES IRON POINT REAL ESTATE PARTNERS		7,435. 2,831. 14,880. -17,562. -1,597.
TOTAL TO FORM 990-T, PAGE 1, LIN	NE 12	5,987.