Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency	$\overline{\neg}$
specifications. When using Acrobat 5.x products, uncheck the "Shrink oversized pages to paper size" and	
uncheck the "Expand small pages to paper size" options, in the Adobe "Print" dialog. When using Acrobat	
6.x and later products versions, select "None" in the "Page Scaling" selection box in the Adobe "Print" dialog.	
d.x and later products versions, select None in the rage ocaling selection box in the Adobe 1 lint dialog.	
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TAX RETURN FILING INSTRUCTIONS

** FORM 990 PUBLIC DISCLOSURE COPY **

FOR THE YEAR ENDING

JULY 31, 2014

Prepared for	THE PHILLIPS COLLECTION 1600 21ST STREET, NW
	WASHINGTON, DC 20009
Prepared by	GELMAN, ROSENBERG & FREEDMAN 4550 MONTGOMERY AVE SUITE 650N BETHESDA, MD 20814-2930
Amount due or refund	NOT APPLICABLE
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED.

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

	-		_			
r calendar year 2013, or fiscal year beginning	AUG	1	, 2013, and ending	${\sf JUL}$	31	,20 1

4

Department of the Treasury Internal Revenue Service

Name of exempt organization

▶ Do not send to the IRS. Keep for your records.

► Information about Form 8879-EO and its instructions is at www irs gov/form8879eo

Employer identification number

OMB No. 1545-1878

THE PHILLIPS COLLECTION		53-0204620
Name and title of officer SUSAN J. NICHOLS		
CHIEF OPERATING OFFICER		
Part I Type of Return and Return Information (Whole Dollars Only)		
Check the box for the return for which you are using this Form 8879-EO and enter the appron line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then than 1 line in Part I.	vith this form was blank, t	then leave line 1b, 2b, 3b, 4b, or 5b,
1a Form 990 check here X b Total revenue, if any (Form 990, Part VIII, colu	mn (A). line 12)	1b 15,089,317.
2a Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	(7,	2b
3a Form 1120-POL check here b Total tax (Form 1120-POL, line 22)		3b
4a Form 990-PF check here b Tax based on investment income (Form	990-PF, Part VI, line 5)	4b
5a Form 8868 check here ▶ b Balance Due (Form 8868, Part I, line 3c or Par	t II, line 8c)	5b
Part II Declaration and Signature Authorization of Officer		
further declare that the amount in Part I above is the amount shown on the copy of the or intermediate service provider, transmitter, or electronic return originator (ERO) to send the (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reas the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Fina debit) entry to the financial institution account indicated in the tax preparation software for return, and the financial institution to debit the entry to this account. To revoke a payment 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I als processing of the electronic payment of taxes to receive confidential information necessa payment. I have selected a personal identification number (PIN) as my signature for the or organization's consent to electronic funds withdrawal. Officer's PIN: check one box only	e organization's return to to on for any delay in procesoncial Agent to initiate an ear payment of the organizat, I must contact the U.S. o authorize the financial irry to answer inquiries and organization's electronic re	the IRS and to receive from the IRS ssing the return or refund, and (c) electronic funds withdrawal (direct ation's federal taxes owed on this Treasury Financial Agent at institutions involved in the diresolve issues related to the turn and, if applicable, the
X authorize GELMAN, ROSENBERG & FREEDMAN		to enter my PIN 25457
ERO firm name		Enter five numbers, bu do not enter all zeros
as my signature on the organization's tax year 2013 electronically filed return. If is being filed with a state agency(ies) regulating charities as part of the IRS Fedrenter my PIN on the return's disclosure consent screen.		
As an officer of the organization, I will enter my PIN as my signature on the orga indicated within this return that a copy of the return is being filed with a state ac program, I will enter my PIN on the return's disclosure consent screen.		
Officer's signature	Date >	
Part III Certification and Authentication		
ERO's EFIN/PIN. Enter your six-digit electronic filing identification		
number (EFIN) followed by your five-digit self-selected PIN.	52697404550 do not enter all zeros	
I certify that the above numeric entry is my PIN, which is my signature on the 2013 electroconfirm that I am submitting this return in accordance with the requirements of Pub. 4163 e-file Providers for Business Returns.	-	-
ERO's signature	Date ▶	
ERO Must Retain This Form - See		<u> </u>

LHA For Paperwork Reduction Act Notice, see instructions. 323051 10-01-13

Form **8879-EO** (2013)

** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www irs gov/form990 tax year beginning AUG 1, 2013 and ending JUL 31, Open to Public

A F	or the	2013 calendar year, or tax year beginning $AUG 1$, 2013 and ending	<u>J</u> ŬL 3	1, 2014	
B c	Check if pplicable	C Name of organization	D Em	ployer identifi	cation number
	Addres change	THE PHILLIPS COLLECTION			
	Name change	Doing Business As		204620	
	return Termin ated	1000 ZIDI DIREBI, NW	uite E Tele	ephone numbe 202–	387-2151
F	Amend return Applica tion	City or town, state or province, country, and ZIP or foreign postal code		s receipts \$ s this a group re	32,597,270.
	pendin			or subordinates	
		SAME AS C ABOVE			ncluded? Yes No
<u> </u>	Гах-ехе	mpt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or □			list. (see instructions)
JΝ	Nebsit	e: ▶ WWW.PHILLIPSCOLLECTION.ORG	H(c) G	roup exemptio	n number 🕨
K F	orm of	organization: X Corporation Trust Association Other Ly			State of legal domicile: DC
Pa		Summary			
•	1	Briefly describe the organization's mission or most significant activities: ${ m THE}$ ${ m PHIL}$	LIPS C	COLLECTI	ON IS THE
Activities & Governance		OLDEST MUSEUM OF MODERN AND CONTEMPORARY ART	IN TH	E U.S.	IN ADDITION
ĸ.	2 (Check this box $lacktriangle$ if the organization discontinued its operations or disposed of n	nore than 25	5% of its net as	
ŏ	3	Number of voting members of the governing body (Part VI, line 1a)		3	30
<u>ھ</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)			30
es		Total number of individuals employed in calendar year 2013 (Part V, line 2a)			215
ĬΞ	6	Total number of volunteers (estimate if necessary)		6	120
Act	7 a -	Total unrelated business revenue from Part VIII, column (C), line 12		7a	-18,202.
_	b l	Net unrelated business taxable income from Form 990-T, line 34		7b	-18,202.
				or Year	Current Year
<u>e</u>	8 (Contributions and grants (Part VIII, line 1h)		14,077.	7,233,001.
enr	9 1	Program service revenue (Part VIII, line 2g)		16,459.	3,693,452.
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		65,145.	3,746,164.
_	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		15,233.	416,700.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,8	310,914.	15,089,317.
	13 (Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	6,4	47,034.	6,795,702.
Expenses	16a I	Professional fundraising fees (Part IX, column (A), line 11e)		28,355.	122,888.
ž	b ·	Total fundraising expenses (Part IX, column (D), line 25) 1,848,577.			
ш	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		35,159.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		10,548.	13,177,359.
	19	Revenue less expenses. Subtract line 18 from line 12		99,634.	1,911,958.
Net Assets or Fund Balances				of Current Year	End of Year
sset	20	Total assets (Part X, line 16)		95,596.	90,558,400.
nd A	21	Total liabilities (Part X, line 26)		63,673.	14,365,630.
킾	22	Net assets or fund balances. Subtract line 21 from line 20	/1,8	31,923.	76,192,770.
_	art II	Signature Block			
		ties of perjury, I declare that I have examined this return, including accompanying schedules and sta			y knowledge and belief, it is
true,	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any	knowledge.	
		Signature of officer		Date Date	
Sig	n			Date	
Her	е	SUSAN J. NICHOLS, CHIEF OPERATING OFFICER Type or print name and title			
		· · · · · · · · · · · · · · · · · · ·	Date	1	PTIN
D-'	,	Print/Type preparer's name Preparer's signature	Date	Check _ if	 ' '''∖
Paid		CEL MAN DOCUMENCO C EDEEDWAY		self-employe	
		Firm's name GELMAN, ROSENBERG & FREEDMAN		Firm's EIN	52-1392008
use	Only	Firm's address 4550 MONTGOMERY AVE SUITE 650N		/ 2	01\ 051 0000
		BETHESDA, MD 20814-2930		Phone no. (3	$\frac{01) 951 - 9090}{ X _{Yes}}$
1/1/2/	/thall	S discuss this return with the preparer shown above? (see instructions)			I A I Voc I I No

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	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
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			37
	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
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	, , , , , , , , , , , , , , , , , , , ,	14a		Х
b	3 3 3 7			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	446	х	
15	or more? If "Yes," complete Schedule F, Parts I and IV	14b		
15	foreign organization? 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 other assistance to	13		
.0	or for foreign individuals? 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 hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		_	000	

Form **990** (2013)

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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			
		23	Х	
24a				
2 -1 a	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
		24a	х	
b	Schedule K. If "No", go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a	- 25	Х
		240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		х
	any tax-exempt bonds?	24c		X
	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			х
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<u> </u>		$\overline{}$
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form **990** (2013)

| Part V | Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V					Ш
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	86			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gam	iing			
	(gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	215			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ทร?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other $\frac{1}{2}$	authority over,	, a			
	$financial\ account\ in\ a\ foreign\ country\ (such\ as\ a\ bank\ account,\ securities\ account,\ or\ other\ financial$	account)?		4a		Х
b	If "Yes," enter the name of the foreign country: ►					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accounts.				
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne organizatior	n solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribute	ions or gifts				
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	=				
	to file Form 8282?			7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year					77
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		T T	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control		r	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, a			7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D		-	_		
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time during	tne year?	8		
9	Sponsoring organizations maintaining donor advised funds.			•		
a	Did the organization make any taxable distributions under section 4966?			9a		
40	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	10a				
a h	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a				
11	Section 501(c)(12) organizations. Enter:	וטטן				
''	Gross income from members or shareholders	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against	. 14				
D	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		u		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	.=				
	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	13b				
С	Enter the amount of reserves on hand	13c				
	Did the experiention version and property for independent or property of visit the territory			14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul		<u></u>	14b		
				Form	990	(2013)

Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI				X					
Sec	tion A. Governing Body and Management									
				Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	30							
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.									
b										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi									
_	officer, director, trustee, or key employee?									
3										
Ŭ	of officers, directors, or trustees, or key employees to a management company or other person?	· ·	3		х					
4	Did the organization make any significant changes to its governing documents since the prior Form 9			X	+					
5	Did the organization become aware during the year of a significant diversion of the organization's as			╅▔	Х					
6	Did the organization have members or stockholders?			+	X					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a		···· - •		+					
, u	more members of the governing body?	: - '	7a		х					
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, s				+					
D	persons other than the governing body?		7t		x					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year				1					
	The governing body?		88	Х						
a b	Each committee with authority to act on behalf of the governing body?			77						
				1 11	+					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X					
800	tion B. Policies (This Section B requests information about policies not required by the Internal R		9		21					
366	tion B. Foncies (This Section B requests information about policies not required by the internal h	evenue Code.)		V	Na					
10-	Did the averagination have lead about an hypnakas as affiliates?		10	Yes	No X					
	Did the organization have local chapters, branches, or affiliates?		10	*	+					
D	If "Yes," did the organization have written policies and procedures governing the activities of such c		140							
	and branches to ensure their operations are consistent with the organization's exempt purposes?				X					
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly before filling the form	i? 11	3						
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conflicto?			+					
b			12) <u>^</u>	-					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y		10	x la						
10	in Schedule O how this was done									
13	Did the organization have a written whistleblower policy?				+					
14	Did the organization have a written document retention and destruction policy?		14							
15	Did the process for determining compensation of the following persons include a review and approve									
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		45	X						
	The organization's CEO, Executive Director, or top management official			+	X					
D	Other officers or key employees of the organization		15	,	- 21					
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.	mont with a								
ioa			16		Х					
L	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua		16	2	- 21					
D	in "Yes," did the organization follow a written policy or procedure requiring the organization to evaluation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization and take steps to safeguard the organization to evaluation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization to evaluation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization to evaluation to evaluati									
			16							
S00	exempt status with respect to such arrangements? tion C. Disclosure		16	,						
		0								
17 10	List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE		aha) esse:	able						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	(3800001 301 (C)(3)S OF	ny) avall	auie						
	for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain	in Schedula (1)								
10		in Schedule O)	ond #:-	onoi-l						
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	or interest policy	, and tin	ancial						
00	statements available to the public during the tax year.	nd rooms of the en	ni=c+!							
20	State the name, physical address, and telephone number of the person who possesses the books a SUSAN J. NICHOLS $-202-387-2151$	nu records of the orga	nization:	_						
	1600 21ST STREET, NW, WASHINGTON, DC 20009									
	1000 2101 DIREEL, MM, MADHINGTON, DC 20009									

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week	box	not c unle	heck ss pe	ition more rson i	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) GEORGE VRADENBURG	15.00	x		Х				0.	0.	0
(2) A. FENNER MILTON	2.00	^		Λ				0.	0.	0.
VICE CHAIRMAN	2.00	x		х				0.	0.	0.
(3) GEORGE D. SWYGERT	2.00	^		Λ				0.	0.	
VICE CHAIRMAN	2.00	x		х				0.	0.	0.
(4) THOMAS D. RUTHERFORD	2.00			21				0.	0.	
TREASURER	2.00	x		Х				0.	0.	0.
(5) LINDA LICHTENBERG KAPLAN	2.00								•	
SECRETARY		x		х				0.	0.	0.
(6) SCOTT SPECTOR	2.00							-		
TRUSTEE		x						0.	0.	0.
(7) TONI H. PAUL	1.00									
TRUSTEE		х						0.	0.	0.
(8) CAROLYN SMALL ALPER	1.00									
TRUSTEE		Х						0.	0.	0.
(9) C. RICHARD BELGER	1.00									
TRUSTEE		Х						0.	0.	0.
(10) JAMES T. DEMETRION	1.00									
TRUSTEE		Х						0.	0.	0.
(11) LAWRENCE DUNCAN III	1.00									
TRUSTEE		Х						0.	0.	0.
(12) JANET BRENNER	1.00							_	_	_
TRUSTEE		Х						0.	0.	0.
(13) CAROL BROWN GOLDBERG	1.00									
TRUSTEE		Х						0.	0.	0.
(14) JOHN DESPRES	2.00									
TRUSTEE	1 00	Х						0.	0.	0.
(15) LYN RALES	1.00	,,								0
TRUSTEE (16) GERALD W. FLIGGUED	1.00	Х				_	_	0.	0.	0.
(16) GERALD W. FISCHER	1.00	x						0.	0.	0.
TRUSTEE	4.00	^				_	H	0.	0.	<u> </u>
(17) BONNIE BURKE HIMMELMAN TRUSTEE	4.00	x						0.	0.	0.
IKUSIEE		ΙΔ.						<u> </u>	U •	- 000

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)	(B) (C) (D) (E)							(E)	(F)
Name and title	Average	(do	not c	Position			one	Reportable	Reportable	Estimated
	hours per	box.	box, unless p		s person is both an			compensation	compensation	amount of
	week	-	Jei ai		II ecit) / ii us	100)	from	from related	other
	(list any hours for	irecto						the organization	organizations (W-2/1099-MISC)	compensation from the
	related	e or d	tee			sated		(W-2/1099-MISC)	(88-2/1099-181130)	organization
	organizations	Individual trustee or director	Institutional trustee		ge ye	mper		(** 2) 1000 (**100)		and related
	below	idual	ution	 	Key employee	est co oyee	er			organizations
	line)	Indiv	Instit	Officer	Key e	Highest compensated employee	Form			
(18) LYNNE HORNING	2.00									
TRUSTEE		Х						0.	0.	0.
(19) LINDSAY ELLENBOGAN	1.00									
TRUSTEE		Х						0.	0.	0.
(20) MARY HOWELL	2.00									
TRUSTEE		Х						0.	0.	0.
(21) B. THOMAS MANSBACH	1.00									
TRUSTEE		Х						0.	0.	0.
(22) LEO ZICKLER	2.00									
TRUSTEE		Х						0.	0.	0.
(23) ALAN FLEISCHMAN	1.00									
TRUSTEE		Х						0.	0.	0.
(24) ALICE PHILLIPS SWISTEL	1.00									
TRUSTEE		Х						0.	0.	0.
(25) ALAN L. WURTZEL	2.00								_	_
TRUSTEE		Х						0.	0.	0.
(26) MOSHIRA SOLIMAN	1.00								_	_
TRUSTEE		Х						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part V								950,418.	0.	32,008.
d Total (add lines 1b and 1c)							<u> </u>	950,418.	0.	32,008.
2 Total number of individuals (including but r	ot limited to th	ose	liste	ed a	bove	e) wl	no re	eceived more than \$100	0,000 of reportable	-
compensation from the organization										<u> </u>
					_					Yes No
3 Did the organization list any former officer,				y er	nplo	yee	, or l	highest compensated e	mployee on	y

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

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

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 X

Section B. Independent Contractors

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

(B) Description of services	(C) Compensation
INTERNATIONAL ART	
TRANSPORT	339,755.
ART STORAGE &	
TRANSPORT	216,003.
CATERING SERVICES	145,589.
CAMPAIGN CONSULTING	136,516.
MEDIA/PROMOTION	110,138.
d above) who received more than	
	Description of services INTERNATIONAL ART TRANSPORT ART STORAGE & TRANSPORT CATERING SERVICES CAMPAIGN CONSULTING MEDIA/PROMOTION

SEE PART VII, SECTION A CONTINUATION SHEETS

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	LIPS CO								53-020	1020
Part VII Section A. Officers, Directors, Tro	ustees, Key Eı	nplo	oyee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)	Ė	_	(((D)	(E)	(F)
Name and title	Average hours	(c	heck	Pos	ition		ly)	Reportable compensation	Reportable compensation	Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) ROBIN ROWAN CLARKE TRUSTEE	1.00	X						0.	0.	0
(28) ERIC RICHTER TRUSTEE	1.00	х						0.	0.	0
(29) RONALD A. PAUL TRUSTEE	1.00	X						0.	0.	0
(30) JANET MACOMBER WILLIAMSON TRUSTEE	1.00	X						0.	0.	0
(31) SUSAN J. NICHOLS	45.00	^								
CHIEF OPERATING OFFICER (32) DOROTHY KOSINSKI	60.00			Х				168,446.	0.	6,909
DIRECTOR (33) DALE MOTT	45.00			Х				316,409.	0.	9,711
DIRECTOR OF DEVELOPMENT	43.00	ł			x			170,677.	0.	5,581
(34) ELIZA RATHBONE	42.00				Λ			170,077.	0.	3,301
CHIEF CURATOR						Х		138,028.	0.	8,706
(35) KLAUS OTTMANN, DIRECTOR OF THE CENTER FOR THE STUDY OF MODERN ART	42.00					Х		156,858.	0.	1,101
						l				

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		Check if Schedule O conta		or note to any line	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
is a	b	Membership dues	1b	562,799.				
Am (С	Fundraising events	1c	718,034.				
直	d	Related organizations	1d					
ā,ï	е	Government grants (contributi	ions) 1e	172,560.				
ig ig	f	All other contributions, gifts, grant	ts, and					
를		similar amounts not included abov	ve 1f	5,779,608.				
탈	g	Noncash contributions included in lines	1a-1f: \$	477,717.				
<u>ခ် မ</u>	h	Total. Add lines 1a-1f		>	7,233,001.			
				Business Code				
9	2 a	VISITOR FEES		900099	1,334,868.	1,334,868.		
ا و چَ	b	MEMBERSHIP DUES		900099	1,054,492.	1,054,492.		
Program Service Revenue	С	FEES FROM EXHIBITIONS/		900099	927,987.	927,987.		
e a	d	FACILITY RENTAL INCOME		900099	201,039.	201,039.		
δ <u>.</u>	е	EDUCATIONAL PROGRAMS		900099	175,066.	175,066.		
-	f	All other program service reve	nue					
\perp	g	Total. Add lines 2a-2f			3,693,452.			
	3	Investment income (including	dividends, inter	est, and				
		other similar amounts)		▶ [616,561.		-18,202.	634,763.
	4	Income from investment of tax	x-exempt bond	proceeds 🕨				
	5	Royalties			18,707.			18,707.
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	19,881,857					
	b	Less: cost or other basis						
		and sales expenses	16,752,254					
	С	Gain or (loss)	3,129,603					
	d	Net gain or (loss)			3,129,603.			3,129,603.
<u>e</u>	8 a	Gross income from fundraising						
Ę		including \$ 718						
§ ∣		contributions reported on line	•					
Other Revenu		Part IV, line 18						
₹│		Less: direct expenses		250,083.				
		Net income or (loss) from fund	-	>	-120,342.			-120,342.
	9 a	Gross income from gaming ac						
		Part IV, line 19						
		Less: direct expenses		`				
		Net income or (loss) from gam	-					
	10 a	Gross sales of inventory, less		1 016 020				
		and allowances						
		Less: cost of goods sold		505,616.	E11 212	E11 212		
H	С	Net income or (loss) from sales			511,313.	511,313.		
-	44 :	Miscellaneous Revenu	e	Business Code 900099	7 022			7,022.
	11 a	-		300033	7,022.			7,022.
	b	-						
	C	All abla as server : -						
		All other revenue			7,022.			
		Total. Add lines 11a-11d Total revenue. See instructions.		····· ₹ ŀ	15,089,317.	4,204,765.	-18,202.	3,669,753.
332009 10-29-1	12	TOTAL TOTOMAGE OUT MISH MUNICIPALS.			,000,011.	-,202,703.	10,202.	Form 990 (2013)

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (A)
Total expenses **(D)** Fundraising (B) Do not include amounts reported on lines 6b. Management and general expenses Program service 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments. organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 702,598. 278,825. 98,074. 325,699. 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) 4,999,593. 4,282,610. 59,976. 657,007. Other salaries and wages 7 Pension plan accruals and contributions (include 172,489. 29,142. section 401(k) and 403(b) employer contributions) 219,463. 17,832. 359,815. 21,024. Other employee benefits 428,170. 47,331. 9 445,878. 352,738. 34,700. 58,440. Payroll taxes 10 Fees for services (non-employees): Management 5.127. 2.949. 1,536. 642. 47,239. 30,445. 10,165. 6,629. Accounting 122,888. 122,888. Professional fundraising services. See Part IV. line 17 193,019 193,019. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 895,477. 661,740. 37,550. 196,187. column (A) amount, list line 11g expenses on Sch O.) 261,456. 247,039. 2,997. 11.420. 12 Advertising and promotion 682,168. 414,607. 97,422. 170,139. 13 Office expenses 32,219. 302,256. 210,471. 59,566. Information technology 14 Royalties 15 722,246. 830,736. 82,438. 26,052. 16 Occupancy 145,544. 104,272. 13,645. 27,627. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 370,452. 343,244. 13,063. 14,145. 20 Payments to affiliates _____ 21 1,186,971. 1,048,095. 104,810. 34,066. 22 Depreciation, depletion, and amortization 374,831. 363,554. 8,292. 2,985. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 570,345. 754. 569,556. 35. OTHER EXHIBITION EXP. **MISCELLANEOUS** 323,764. 213,635. 12,895. 97,234. 69,384. 69,384. PURCHASE OF ART С d All other expenses 13,177,359. 10,447,714. 881,068. 1,848,577. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2013) Part X Balance Sheet

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	330,122.	2	94,354.
	3	Pledges and grants receivable, net	3,065,210.	3	3,164,195.
	4	Accounts receivable, net	371,000.	4	46,571.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
⋖	8	Inventories for sale or use	300,749.	8	305,963.
	9	Prepaid expenses and deferred charges	104,271.	9	99,884.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D Less: accumulated depreciation 10a 47,185,617. 17,234,372.			
	b	Less: accumulated depreciation	30,955,546.	10c	29,951,245.
	11	Investments - publicly traded securities	17,346,068.		14,789,845.
	12	Investments - other securities. See Part IV, line 11	35,322,630.	12	42,106,343.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	87,795,596.	16	90,558,400.
	17	Accounts payable and accrued expenses	772,944.	17	773,847.
	18	Grants payable	064 000	18	100 200
	19	Deferred revenue	264,033.	19	100,307.
	20	Tax-exempt bond liabilities	13,402,558.	20	12,696,893.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to current and former officers, directors, trustees,			
ij		key employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties	1,280,529.	23	620 520
	24	Unsecured notes and loans payable to unrelated third parties	1,200,329.	24	630,529.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of	243,609.	0.5	164,054.
	000	Schedule D	15,963,673.		14,365,630.
	26	Total liabilities. Add lines 17 through 25	13,903,073.	26	14,303,030.
"		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34.			
čě	07		14,825,038.	27	15,936,372.
alan	27 28	Unrestricted net assets Temporarily restricted net assets	22,747,904.	28	23,890,447.
B			34,258,981.	29	36,365,951.
Net Assets or Fund Balances	29	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here	J 1 / 2 J J J J J J T •	23	30,303,331.
Ē		and complete lines 30 through 34.			
ts o	30	Capital stock or trust principal, or current funds		30	
SSe	30	Paid-in or capital surplus, or land, building, or equipment fund		31	
t As	31	Retained earnings, endowment, accumulated income, or other funds		32	
Ne	32		71,831,923.	33	76,192,770.
	34	Total net assets or fund balances Total liabilities and net assets/fund balances	87,795,596.	34	90,558,400.
	J '1	TOTAL HADHILLES ATTUTTED ASSETS/TUTTU DAIALITES	0.,,50,550.	J -1	Form 990 (2013)

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Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	15,08	9,3	17.	
2	Total expenses (must equal Part IX, column (A), line 25)	2	13,17	7,3	<u>59.</u>	
3	Revenue less expenses. Subtract line 2 from line 1	3	1,91	,911,958.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	71,83	,831,923		
5	Net unrealized gains (losses) on investments	5	2,44	8,8	89.	
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B)) 10 76					
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				Ш	
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	X		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
	consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,					
	review, or compilation of its financial statements and selection of an independent accountant?					
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.				
3a	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit					
	Act and OMB Circular A-133?		3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				1	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b			

Form **990** (2013)

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.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE PHILLIPS COLLECTION

Employer identification number 53-0204620

Part I	rt I Reason for Public Charity Status (All organizations must complete this part.) See instructions.											
The organ	ization is not a	a private foundation	because it is: (For lines 1	1 through	11, check	only one b	ox.)					
1	A church, cor	nvention of churche	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)					
2	A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)								
з 🗌	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii) .											
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,											
	city, and state				•				•	•		,
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
•	section 170(b)(1)(A)(iv). (Complete Part II.)											
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7 X												
,	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)											
8	-		section 170(b)(1)(A)(vi).	(Complete	Dort II \							
9 🗆			eives: (1) more than 33 1			rom contri	hutione m	namharshi	n fees a	nd arnee re	cainte	from
J	_	•	nctions - subject to certa							-	-	
			axable income (less sect									
		509(a)(2). (Complete	•	lion o i i ta	x) IIOIII bu	311103303 6	ioquired b	y the orga	unzation	arter durie v	50, 157	0.
10			perated exclusively to te	st for nubl	ic safety S	See sectio	n 509(a)(4	1)				
11 🔲	-	-	perated exclusively for the	· ·	•			-	v out the	nurnoses	of one	or
	Ü		ations described in section		′ '		,		•			Oi
			organization and comple		-		.,. 000 000	, , , , , , , , , , , , , , , , , , ,	u)(0). 0		· inat	
	a Type I				nctionally i		d	тур	e III - Noi	n-functiona	lly inted	arated
е 🗌			at the organization is not		•	•		• •				-
		•	han one or more publicly		-	-	-		-	=		
f			ten determination from t						- (-)(-)		- (/(/-	
		rganization, check th										
g		•	organization accepted ar					owina per	sons?			•
J			lirectly controls, either al								Yes	No
	-		n described in (i) above?									
			person described in (i) o									
h			about the supported or									
		J		9	. ,							
(i) Name	of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Did you	ı notify the	(yi) ls	the	(vii) Amoun	t of moi	netary
. ,	anization	(, =	(described on lines 1-9	in col. (i) lis		organizat		orgaňizátio (i) organiz U.S	on in col. ed in the		port	notal y
			above or IRC section	governing	document?	(i) of your	support?	U.S	.?			
			(see instructions))	Yes	No	Yes	No	Yes	No			
_												
_												
Total												

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

Schedule A (Form 990 or 990-EZ) 2013

332021 09-25-13

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	Section A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	19,807,865.	6,528,586.	4,504,494.	5,014,077.	7,233,001.	43,088,023.	
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	19,807,865.	6,528,586.	4,504,494.	5,014,077.	7,233,001.	43,088,023.	
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)						15,015,657.	
	Public support. Subtract line 5 from line 4.						28,072,366.	
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
7	Amounts from line 4	19,807,865.	6,528,586.	4,504,494.	5,014,077.	7,233,001.	43,088,023.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar sources	564,973.	614,277.	571,311.	618,626.	653,470.	3,022,657.	
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on		11,416.	10,049.	5,987.	-18,202.	9,250.	
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part IV.)	448,365.	44,584.	50,443.	8,053.	7,022.	558,467.	
11	Total support. Add lines 7 through 10						46,678,397.	
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 19	,070,335.	
13	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)		
	organization, check this box and stor						>	
Sec	ction C. Computation of Publ	ic Support Pe	rcentage					
	Public support percentage for 2013 (14	60.14 %	
15	Public support percentage from 2012	Schedule A, Part	II, line 14			15	52.70 %	
16a	33 1/3% support test - 2013. If the	-						
	stop here. The organization qualifies	as a publicly supp	orted organization				▶ X	
b	33 1/3% support test - 2012. If the	-						
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶□	
17a	17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,							
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization							
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization							
b	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or	
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, ch	neck this box and	stop here. Explain	in Part IV how the		
	organization meets the "facts-and-circ	cumstances" test.	The organization o	qualifies as a public	cly supported orga	anization	▶∐	
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instruction	s ▶□	
							000 F7) 0040	

Schedule A (Form 990 or 990-EZ) 2013

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.)

Section A. Public Support	now, prodec com	proto r art my				
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and		, , , , , , , , , , , , , , , , , , ,	, ,	` '		.,
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, 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-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 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						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b, whether or not the business is						
regularly carried on						
12 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV.)						
14 First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax vear as a sectic	on 501(c)(3) organiz	ation.
check this box and stop here	•		•	•		
Section C. Computation of Publi	c Support Pe	rcentage				
15 Public support percentage for 2013 (li	ne 8, column (f) d	livided by line 13, o	column (f))		15	%
16 Public support percentage from 2012	Schedule A, Part	III, line 15			16	%
Section D. Computation of Inves	tment Incom	e Percentage				
17 Investment income percentage for 20	13 (line 10c, colur	mn (f) divided by lir	ne 13, column (f))		17	%
18 Investment income percentage from 2	:012 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2013. If the					33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box ar	nd stop here. The	e organization qual	ifies as a publicly	supported organiz	ation	▶□
b 33 1/3% support tests - 2012. If the	organization did r	not check a box or	line 14 or line 19	a, and line 16 is mo	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, chec	ck this box and s	top here. The orga	anization qualifies	as a publicly supp	orted organization	
20 Private foundation. If the organization	า did not check a	box on line 14, 19	a, or 19b, check t	his box and see in:	structions	<u> </u>

332023 09-25-13

Schedule A (Form 990 or 990-EZ) 2013

Schedule A	(Form 990 or 990-EZ) 2013 THE	PHILLIPS COLLECTION	53-0204620 Page 4
Part IV	Supplemental Information	 Provide the explanations required by Part II 	, line 10; Part II, line 17a or 17b; and Part III, line 12.
	Also complete this part for any ad	litional information. (See instructions).	
-			
-			

** PUBLIC DISCLOSURE COPY **

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

Employer identification number

2013

53-0204620 THE PHILLIPS COLLECTION Organization type (check one): Filers of Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

THE PHILLIPS COLLECTION

53-0204620

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		ss	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
222452 10 2		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization **Employer identification number**

THE PHILLIPS COLLECTION

53-0204620

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	3000 SHARES CATAMARAN CORP; 1000 SHARES EDWARDS LIFE SCIENCES		
		\$\$	11/26/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
23453 10-2-2	4.19	\$Schedule B (Form 9	90, 990-EZ, or 990-PF) (201:

Name of organization

Employer identification number

	COLLECTION

53-0204620

Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional additional contents.	ridual contributions to section 501 he following line entry. For organiza he, contributions of \$1,000 or less hal space is needed.	c)(7), (8), or (10) or ions completing Part or the year. (Enter this info	rganizations that total more than \$1,000 for the till, enter ormation once.)			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	Transferee's name, address, ar	(e) Transfer of g		nip of transferor to transferee			
(a) No.							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	Transferse's name address or	(e) Transfer of g	sfer of gift Relationship of transferor to transferee				
	Transferee's name, address, ar	IU ZIF + 4	neiduoristi	ip of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
		(e) Transfer of g	ift				
	Transferee's name, address, ar	nd ZIP + 4	Relationsh	nip of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
-		(a) Transfer of					
	Transferee's name, address, ar	(e) Transfer of o		nip of transferor to transferee			

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

➤ See separate instructions. ➤ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

Open to Public Inspection

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

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

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

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

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

	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nar	ne of organization			Empl	oyer identification number
		LLIPS COLLECTION			53-0204620
Pa	art I-A Complete if the org	ganization is exempt und	der section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organize Political expenditures Volunteer hours	·		▶ \$	
Pá	art I-B Complete if the org	ganization is exempt und	der section 501(c)	(3).	
1	Enter the amount of any excise tax				
2	Enter the amount of any excise tax	incurred by organization manag	gers under section 495	5	
3	If the organization incurred a section	on 4955 tax, did it file Form 4720) for this year?		Yes No
4	a Was a correction made?				Yes No
ŀ	If "Yes," describe in Part IV.				
Pa	art I-C Complete if the org	ganization is exempt und	der section 501(c)		
1	Enter the amount directly expended	d by the filing organization for se	ection 527 exempt fund	ction activities > \$	
2	Enter the amount of the filing organ		· ·		
	exempt function activities			 ▶\$	
3	Total exempt function expenditures			,	
	line 17b			▶ \$	
4	Did the filing organization file Form				
5	,				
	made payments. For each organiza				
	contributions received that were pr political action committee (PAC). If			•	ate segregated fund or a
	. , ,	· · · · · · · · · · · · · · · · · · ·		1	1
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly
				,	delivered to a separate
					political organization. If none, enter -0
					Ti Tione, enter e :

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

Schedule C (Form 990 or 990-EZ) 2013

LHA

332041 11-08-13

Part II-A Complete if the orgative (election under sect		npt under sectio	n 501(c)(3) and fil	ed Form 5768	J
		iated group (and list i	n Part IV each affiliated	group member's nan	ne, address, EIN,
• •	e of excess lobbying	· · ·			, , ,
B Check ▶ ☐ if the filing organization	on checked box A ar	nd "limited control" pro	ovisions apply.		
	s on Lobbying Exper itures" means amou	nditures nts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influ	ence a legislative boo	ly (direct lobbying)			
c Total lobbying expenditures (add lin	es 1a and 1b)				
d Other exempt purpose expenditure					
e Total exempt purpose expenditures					
f Lobbying nontaxable amount. Enter					
If the amount on line 1e, column (a) or	(b) is: The lob	bying nontaxable am	ount is:		
Not over \$500,000	20% of	the amount on line 1e			
Over \$500,000 but not over \$1,000		0 plus 15% of the exc			
Over \$1,000,000 but not over \$1,50		0 plus 10% of the exc			
Over \$1,500,000 but not over \$17,0	000,000 \$225,00	0 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000,0	000.			
g Grassroots nontaxable amount (ent	,				
h Subtract line 1g from line 1a. If zero					
i Subtract line 1f from line 1c. If zero					
j If there is an amount other than zero	_]	Yes No
reporting section 4911 tax for this y		raging Period Under	Saction FO1/h)	L	tes NO
· · · · · · · · · · · · · · · · · · ·	itions that made a s	ection 501(h) electio	n do not have to comp es 2a through 2f on pa		
	Lobbying Exper	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2013

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

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a	a)	(k	b)
	e lobbying activity.	Yes	No	Amo	<u> </u>
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?		Х		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?		X		
	Mailings to members, legislators, or the public?		Х		
	Publications, or published or broadcast statements?		Х		
	Grants to other organizations for lobbying purposes?		X		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		X		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
i	Other activities?	X			1,625.
j	Total. Add lines 1c through 1i			1	1,625.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912		X		
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or sec	tion	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				ne 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic				
	507(0 to one 10)				

•	Duce, descending and entitle antenne non-monitore		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political		
	expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
	Carryover from last year	2b	
С	Total	2c	
		3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess		
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political		
	expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV | Supplemental Information

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

PART II-B, LINE 1, LOBBYING ACTIVITIES:

EXPLANATION: THE PHILLIPS COLLECTION ENGAGES A LOBBYING FIRM TO EDUCATE

CONGRESS ON THE IMPORTANCE OF FUNDING FOR THE ARTS IN THE DISTRICT OF

COLUMBIA. EACH YEAR, THE FEDERAL BUDGET APPROPRIATES MONEY FOR SUPPORT

THROUGH THE NATIONAL CAPITAL ARTS AND CULTURAL AFFAIRS PROGRAM.

Schedule C (Form 990 or 990-EZ) 2013

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

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

2013
Open to Public Inspection

Employer identification number 53-0204620

	THE PHILLIPS COLLECTION	53-0204620
Pai	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	Accounts.Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
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 inform all donors and donor advisors in writing that the assets held in donor advised ful	nds
	are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	only
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confe	erring
	impermissible private benefit?	Yes No
Paı	rt 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 education)	ılly important land area
	Protection of natural habitat Preservation of a certified h	nistoric structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a c	onservation easement on the last
	day of the tax year.	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	Number of conservation easements on a certified historic structure included in (a)	2c
d	,	
	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the orga	nization 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	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the y	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(
_	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense state	
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization assembles.	ganization's accounting for
Pai	conservation easements. III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets
. u.	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	ommar 7.000tor
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a	and halance sheet works of art
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance or	
	the text of the footnote to its financial statements that describes these items.	, passe co. 1.00, p. 01.20, 1 a. 17.11.,
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and	balance sheet works of art, historical
-	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public se	•
	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.	
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1	▶ \$
	Assets included in Form 990, Part X	

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

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$_{1}$	$\mathbf{F}\mathbf{\Pi}\mathbf{I}\mathbf{\Pi}\mathbf{I}$	11 53	(.())	1616.11	()IV

	t III Organizations Maintaining C	collections of Ar		easures. or (Other	Similar /			ved)
	Using the organization's acquisition, accession							· '	
Ü	(check all that apply):	on, and other record	s, oncor any or the	Tollowing triat ar	c a sign	illicarit usc	01 113	CONCOLION	ritoriis
а	X Public exhibition	d	X Loan or exc	hange programs					
b	X Scholarly research	e	Other	nange programs					
C	X Preservation for future generations	E							
4	Provide a description of the organization's co	alloctions and ovalain	how thoy further t	ho organization's	ovomn	ot nurnoso	in Dar	+ VIII	
5	During the year, did the organization solicit o						пга	t AIII.	
3	to be sold to raise funds rather than to be ma							Yes	X No
Pai	t IV Escrow and Custodial Arran								INO
	reported an amount on Form 990, Par		te ii tile organizatio	iranswered res	3 1010	1111 990, 1 a	1117,1	1116 3, 01	
12	Is the organization an agent, trustee, custodi		iany for contribution	s or other assets	e not inc	cluded			
ıa								Yes	□ No
h	on Form 990, Part X? If "Yes," explain the arrangement in Part XIII						🗀	J 1€5	
b	Tes, explain the arrangement in art Am	and complete the for	lowing table.					Amount	
_	Reginning balance					1c		Amount	
	Additions during the year					1d			
	Additions during the year Distributions during the year					1e			
f	Ending balance					1f			
) 2a	Did the organization include an amount on Fo	orm 990 Part X line	 212					Yes	□ No
	If "Yes," explain the arrangement in Part XIII.							J 103	
	t V Endowment Funds. Complete in								
		(a) Current year	(b) Prior year	(c) Two years ba		Three years	back	(e) Four	vears back
1a	Beginning of year balance	32,323,928.	29,684,874.			28,428,		` '	858,980.
	Contributions	2,158,489.	104,637.		-	909,			509,677.
	Net investment earnings, gains, and losses	5,088,700.	4,841,892.		_	4,567,			307,092.
	Grants or scholarships	, , ,	, , :	,				,	
	Other expenditures for facilities								
ŭ	and programs	2,310,983.	2,183,094.	2,051,4	49.	2,363,	509.	1.	258,553.
f	Administrative expenses	56,964.	124,381.				933.		-31,054.
g g	End of year balance	37,203,170.	32,323,928.			31,525,			428,896.
2	Provide the estimated percentage of the curr							,	
	Board designated or quasi-endowment	one your one balance	%	2)) Hold do.					
	Permanent endowment > 98.00	%							
c	Temporarily restricted endowment								
·	The percentages in lines 2a, 2b, and 2c shou								
За	Are there endowment funds not in the posse	•	ition that are held a	nd administered	for the	organizatio	ın		
-	by:	oolon or the organiza	anon that are mora a	ira aariii iiotoroa	101 1110	organizatio		Г	Yes No
	(i) unrelated organizations							3a(i)	X
	(ii) related organizations							3a(ii)	X
b	If "Yes" to 3a(ii), are the related organizations							3b	
4	Describe in Part XIII the intended uses of the								
Pai	t VI Land, Buildings, and Equipm								
	Complete if the organization answered		Part IV, line 11a. S	ee Form 990, Pa	rt X, line	e 10.			
	Description of property	(a) Cost or ot				umulated		(d) Book	value
	, , ,	basis (investm	1 ' '	(other)		ciation		` ,	
	Land		83	3,240.				833	3,240.
	Buildings				3,91	6,008	. 2		765.
	Leasehold improvements						\top	-	
	Equipment		2,72	9,862.	2,50	3,871	$\overline{\cdot}$	225	5,991.
	Other			0,742.		4,493	•	316	5,249.
	I. Add lines 1a through 1e. (Column (d) must e	<u> </u>	X, column (B), line 1	0(c))			2	9,951	.,245.

3011eddie D (1 01111 330) 2013		0011011	•
Part VII Investments -	- Other Securities.		

Complete if the organization answered "Yes"	to Form 990, Part IV, line 1	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) TIFF MULTI-ASSET FUNDS	1,750,706.	END-OF-YEAR MARKET VALUE
(B) ALTERNATIVE FUNDS	40,355,637.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total (Col (b) must equal Form 990 Part X col (B) line 12)	42.106.343.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes"	to Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) GIFT ANNUITIES	160,605.	
(3) CAPITAL LEASES	3,449.	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	164,054.	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2013

332053 09-25-13

352,996.

11,288,834.

1,888,525.

13,177,359.

2e

4c

1,888,525.

Add lines 2a through 2d

Subtract line **2e** from line **1**Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

Concadio D	(1 01111 000) 2010					
Part XI	Reconciliation of Revenue per A	udite	d Finar	cial Statements	With Revenue per Return.	

	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.								
1	Total revenue, gains, and other support per audited financial statements	1	13,751,715.						
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:								
а	Net unrealized gains on investments	2a							
b	Donated services and use of facilities	2b	352,996.						
	Recoveries of prior year grants	2c							
d	Other (Describe in Part XIII.)	2d	2,120,378.						
е	Add lines 2a through 2d			2e	2,473,374.				
3	Subtract line 2e from line 1			3	11,278,341.				
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:								
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a							
b	Other (Describe in Part XIII.)	4b	3,810,976.						
С	Add lines 4a and 4b	4c	3,810,976.						
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	15,089,317.						
Pa	Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.								
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.								
1	Total expenses and losses per audited financial statements			1	11,641,830.				
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		352,996.						
а	Donated services and use of facilities								
b	Prior year adjustments	2b							

Part XIII Supplemental Information.

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

4a

PART III, LINE 1A:

d Other (Describe in Part XIII.)

Other (Describe in Part XIII.)

c Add lines 4a and 4b

EXPLANATION: WORKS OF ART IN THE MUSEUM'S COLLECTION ARE NOT RECOGNIZED AS

ASSETS ON THE STATEMENTS OF FINANCIAL POSITION. PURCHASES OF ART ARE

RECORDED AS DECREASES IN UNRESTRICTED NET ASSETS IF PURCHASED WITH

UNRESTRICTED ASSETS AND AS DECREASES IN TEMPORARILY RESTRICTED OR

PERMANENTLY RESTRICTED NET ASSETS IF PURCHASED WITH DONOR-RESTRICTED

ASSETS. CONTRIBUTIONS OF COLLECTION ITEMS ARE NOT RECOGNIZED IN THE

STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS; HOWEVER, CERTAIN

CONTRIBUTIONS ARE RECORDED AS INCREASES IN TEMPORARILY RESTRICTED NET

ASSETS IF A DONOR MAKES A CONTRIBUTION INTENDED TO FUND THE SUBSEQUENT

PURCHASE OF ART. PROCEEDS FROM THE SALE OF DEACCESSIONS OR INSURANCE

RECOVERIES ARE REFLECTED ON THE STATEMENTS OF ACTIVITIES AND CHANGES IN

332054 09-25-13

Part XIII | Supplemental Information (continued)

NET ASSETS BASED ON THE ABSENCE OR EXISTENCE AND NATURE OF DONOR-IMPOSED

RESTRICTIONS. THERE WERE NO DEACCESSIONS DURING EACH OF THE YEARS ENDED

JULY 31, 2014 AND 2013.

PART III, LINE 4:

EXPLANATION: AS STATED IN ARTICLE 3 OF THE COLLECTION'S ARTICLES OF
INCORPORATION, THE FOCUS OF THE PERMANENT COLLECTION IS THE EMERGENCE OF
MODERN ART IN EUROPE AND THE UNITED STATES IN THE LATE NINETEENTH AND THE
TWENTIETH CENTURIES (NOW THE 21ST AS WELL), AND IN PARTICULAR THE
EXPRESSIVE, INDIVIDUALISTIC, COLORFUL, NATURE-BASED ART FAVORED BY DUNCAN
PHILLIPS. PHILLIPS WISHED FOR THE MUSEUM TO CONTINUE TO COLLECT
CONTEMPORARY ART OF THE KIND HE FAVORED SO THAT LIVING AND EMERGING
ARTISTS WOULD HAVE A VENUE TO SHOW THE RESULTS OF THEIR RESEARCH AND THEIR
AESTHETIC ADVENTURES. THE COLLECTION PERMITS THE MUSEUM TO PROVIDE
OUTSTANDING EXHIBITIONS AND RELATED ART PROGRAMMING FOR THE EDUCATION OF

PART V, LINE 4:

EXPLANATION: THE MUSEUM'S ENDOWMENT IS INVESTED TO PROVIDE INCOME FOR

OPERATIONS, FOR PROGRAMS AND EXHIBITIONS, FOR DISPLAY AND PRESERVATION OF

THE PERMANENT COLLECTION, AND FOR PURCHASES OF WORKS OF ART.

PART X, LINE 2:

EXPLANATION: FOR THE YEARS ENDED JULY 31, 2014 AND 2013, THE COLLECTION

HAS DOCUMENTED ITS CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT

PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES AND HAS

DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER

RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

THE FEDERAL FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, IS

SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE, GENERALLY FOR

THREE YEARS AFTER IT IS FILED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

ENDOWMENT EARNINGS TRANSFERRED FOR OPERATIONS 2,120,378.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

GALA EXPENSES NETTED AGAINST REVENUE ON THE FINANCIAL 48,690.

STATEMENTS AND INCLUDED AS AN EXPENSE ON FORM 990, PART VIII

MEMBERSHIP TRAVEL EXPENSES NETTED AGAINST REVENUE ON THE 24,210.

FINANCIAL STATEMENTS AND INCLUDED AS AN EXPENSE ON FORM 990,

PART VIII

INTEREST/DIVIDENDS, NON-OPERATING, REPORTED AS AN "OTHER 610,095.

ITEM" ON THE FINANCIAL STATEMENTS AND INCLUDED AS REVENUE ON

FORM 990, PART VIII

REALIZED GAINS, NON-OPERATING, REPORTED AS AN "OTHER ITEM" 3,129,603.

ON THE FINANCIAL STATEMENTS AND INCLUDED AS REVENUE ON FORM

990, PART VIII

OPERATING UNREALIZED LOSSES NOT REPORTED ON FORM 990, PART

VIII -1,622.

TOTAL TO SCHEDULE D, PART XI, LINE 4B 3,810,976.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

BOND EXPENSES, NON-OPERATING REPORTED AS AN "OTHER ITEM" ON 371,503.

THE FINANCIAL STATEMENTS AND INCLUDED AS AN EXPENSE ON FORM

990, PART IX

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

➤ Attach to Form 990. ➤ See separate instructions.

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Inspection **Employer identification number**

Part General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, make the selection orderia used to award the grants or assistance? Ves No No No No No No No No	THE PHILLIPS CO	N.T.ECTTON	•			53-02046	20
Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, it the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Doescribe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region, (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of fices in the region (b) Number of contracts in regions in the region of fices in the region of service(s) in region or recipients located in the region of service(s) in region of service(s) in region or s							
the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?				•			
2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of Offices in the region of offices in the region in the region of offices in the							
United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of offices in the region of following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of offices and the region of offices in the region in the region in the region of services in region o	the grantees' eligibility f	for the grants or a	assistance, and	the selection criteria used to award the	e grants or ass	sistance?	J Yes □ No
3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of offices in the region offices in the region in the region of in the region of in the region of the regi		cribe in Part V the	e organization's	procedures for monitoring the use of it	ts grants and o	other assistance ou	tside the
(a) Region (b) Number of crifices angles, and in the region of service (b) in region of service (c) in region in region of service (c) in region of ser		The fellowing Davi	t I line O telele e				
### Sub-total					1	ivity listed in (d)	(f) Total
PACIFIC 0 0 PROGRAM SERVICE ART EXHIBITION 363,845. 3 a Sub-total 0 0 0 363,845. b Total from continuation sheets to Part 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(a) negron	offices	employees, agents, and independent contractors	(by type) (e.g., fundraising, program services, investments, grants to	is a pro describ	ogram service, e specific type	expenditures for and investments
PACIFIC 0 0 PROGRAM SERVICE ART EXHIBITION 363,845. 3 a Sub-total 0 0 0 363,845. b Total from continuation sheets to Part 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0							
3 a Sub-total				DDOGDAM SEDVICE	מסת בצעדפדי	TTON	363 845
b Total from continuation sheets to Part I 0 0 0 c Totals (add lines 3a and 3b) 0 0 363,845.	FACIFIC	<u> </u>		FROGRAM SERVICE	AKI EXHIDI	110N	303,043.
b Total from continuation sheets to Part I 0 0 0 c Totals (add lines 3a and 3b) 0 0 363,845.							
b Total from continuation sheets to Part I 0 0 0 c Totals (add lines 3a and 3b) 0 0 363,845.							
b Total from continuation sheets to Part I 0 0 0 c Totals (add lines 3a and 3b) 0 0 363,845.							
b Total from continuation sheets to Part I 0 0 0 c Totals (add lines 3a and 3b) 0 0 363,845.							
b Total from continuation sheets to Part I 0 0 0 c Totals (add lines 3a and 3b) 0 0 363,845.							
b Total from continuation sheets to Part I 0 0 0 c Totals (add lines 3a and 3b) 0 0 363,845.							
b Total from continuation sheets to Part I 0 0 0 c Totals (add lines 3a and 3b) 0 0 363,845.							
b Total from continuation sheets to Part I 0 0 0 c Totals (add lines 3a and 3b) 0 0 363,845.							
b Total from continuation sheets to Part I 0 0 0 c Totals (add lines 3a and 3b) 0 0 363,845.							
b Total from continuation sheets to Part I 0 0 0 c Totals (add lines 3a and 3b) 0 0 363,845.							
b Total from continuation sheets to Part I 0 0 0 c Totals (add lines 3a and 3b) 0 0 363,845.							
b Total from continuation sheets to Part I 0 0 0 c Totals (add lines 3a and 3b) 0 0 363,845.							
b Total from continuation sheets to Part I 0 0 0 c Totals (add lines 3a and 3b) 0 0 363,845.							
sheets to Part I 0 0 c Totals (add lines 3a and 3b) 0 0 363,845.			0				363,845.
and 3b)			0				0.
		0	0				363,845.

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

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by									
the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 3 Enter total number of other organizations or entities									

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.									
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		

<u>Sched</u>	ule F (Form 990) 2013 THE PHILLIPS COLLECTION	53-0204620	Page 4
Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes [No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes [X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	<u>X</u> Yes [No

X Yes No

Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," 5 the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund.

(see Instructions for Form 8621)

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)

Yes X No.

Schedule F (Form 990) 2013

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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.

OMB No. 1545-0047

Open To Public Inspection

Name of the organization

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

Employer identification number

THE PHI	LLIPS COLLECTION				53-0204	620
Part I Fundraising Activities required to complete this part	• Complete if the organization answert.	ered "Y	'es" to	Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
Indicate whether the organization rai	sed funds through any of the following with a Solicitar or oral agreement with any individual Part VII) or entity in connection with pulividuals or entities (fundraisers) purs	tion of tion of fundra (includerofess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, true fundraising services?	stees or X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundr have c or con contrib	ustody itrol of	(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
BREAKTHROUGH STRATEGIES - 161	TELEMARKETING & MEMBERSHIP	Yes	No			
KENYON STREET NW #48,	APPEALS		Х	723,332.	92,000.	631,332.
GRENZEBACH GLIER & ASSOCIATES - BOX 88277 DEPT A, CHICAGO,	CAMPAIGN PLAN DEVELOPMENT		х	0.	128,971.	-128,971.
List all states in which the organization or licensing. AL, AK, AZ, AR, CA, CO, CT,	DE,DC,FL,GA,ID,IL,	IN,	IA,	KS,KY,LA,M	E,MD,MA,MI	,MN,MS,MO
MT, NE, VN, HN, NJ, NM, YM,	NC, ND, OH, OK, OR, PA,	SC,	SD,	TN,TX,UT,V	T, VA, WA, WV	,WI,WY

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2013

332081 09-12-13

53-0204620 Page 2 Schedule G (Form 990 or 990-EZ) 2013 THE PHILLIPS COLLECTION Part II 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. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE (add col. (a) through 0 ${ t GALA}$ col. (c)) (event type) (event type) (total number) Revenue 847,775. 847,775. 1 Gross receipts 718,034 718,034. 2 Less: Contributions 129,741 129,741. Gross income (line 1 minus line 2) 4 Cash prizes Noncash prizes Direct Expenses 11,000. 11,000. Rent/facility costs 113,458. 113,458. Food and beverages 13,077 13,077. 8 Entertainment 112,548. 112,548. Other direct expenses 250,083. 10 Direct expense summary. Add lines 4 through 9 in column (d) -120,342. 11 Net income summary. Subtract line 10 from line 3, column (d) 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. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Expenses Noncash prizes Direct | Rent/facility costs 5 Other direct expenses Yes Yes No 6 Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization operates gaming activities:

10a Were any of the organization's gaming licenses revoked, suspended or terminated d b If "Yes," explain:	uring the tax year?	Yes N

a Is the organization licensed to operate gaming activities in each of these states?

332082 09-12-13

Schedule G (Form 990 or 990-EZ) 2013

Sch	edule G (Form 990 or 990-EZ) 2013 THE PHILLIPS COLLECTION 53-	0204	620	Page 3
	Does the organization operate gaming activities with nonmembers?		Yes	☐ No
	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:			
	The organization's facility	13a		%
	An outside facility			%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
b	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party \$\bigs\sum_{			
c	If "Yes," enter name and address of the third party:			
	Name			
	Address >			
16	Gaming manager information:			
	Name			
	Gaming manager compensation ▶ \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
	Brector/officer Independent contractor			
	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Yes	☐ No
b	retain the state gaming license? Discrete the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
_	organization's own exempt activities during the tax year ▶ \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).	lines 9,	9b, 10	b, 15b,
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISE	RS.		
<u> </u>	HEDOLD O, TIME I, BINE 2D, BIST OF TEM HISHEST THIS TONDRITOR			
(I) NAME OF FUNDRAISER: BREAKTHROUGH STRATEGIES			
<u>\ </u>	7 MMH OF TOMBERTIBLE. BREMETIKOOON BIRKIEGIEB			
<u>(I</u>) ADDRESS OF FUNDRAISER: 161 KENYON STREET NW #48, WASHINGTON	, DC	: 2	0010
	.			
<u>(I</u>) NAME OF FUNDRAISER: GRENZEBACH GLIER & ASSOCIATES			
<u>(I</u>) ADDRESS OF FUNDRAISER: BOX 88277 DEPT A, CHICAGO, IL 60680			

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE PHILLIPS COLLECTION

Employer identification number 53-0204620

Pa	art I Questions Regarding Compensation			
			Yes	No
1 a	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.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	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 directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
_				
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	 Compensation committee Independent compensation consultant Written employment contract Compensation survey or study 			
	Independent compensation consultant X Compensation survey or study Form 990 of other organizations X Approval by the board or compensation committee			
	Approval by the board or compensation committee			
1	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?	4a		Х
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) 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			
	contingent on the revenues of:			
а	The organization?	5a		_X_
b	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6				
	contingent on the net earnings of:			
	The organization?	6a		X
b	Any related organization?	6b		Х
_	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	_		v
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			Х
0	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		- 77
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	0		
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2013

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

THE PHILLIPS COLLECTION

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(6)(1)-(0)	in prior Form 990	
(1) SUSAN J. NICHOLS	(i)	157,061.	0.	11,385.	0.	6,909.	175,355.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)	298,393.	0.	18,016.	0.	9,711.	326,120.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) DALE MOTT	(i)	159,547.	0.	11,130.	0.	5,581.	176,258.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)	146,206.	0.	10,652.	0.	1,101.	157,959.	0.	
CENTER FOR THE STUDY OF MODERN ART	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
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	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

SCHEDULE K (Form 990) Department of the Treasury

Supplemental Information on Tax-Exempt Bonds

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

explanations, and any additional information in Part VI.

Attach to Form 990. See separate instructions.

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

OMB No. 1545-0047
2013
Open to Public Inspection

Internal Revenue Service Employer identification number Name of the organization 53-0204620 THE PHILLIPS COLLECTION SEE PART VI FOR COLUMN (F) CONTINUATIONS Part I **Bond Issues** (a) Defeased (h) On behalf (i) Pooled (a) Issuer name (b) Issuer EIN (c) CUSIP# (d) Date issued (f) Description of purpose (e) Issue price of issuer financing Yes No Yes No Yes No MUSEUM EXPANSION |53-6001131|254839E82| 11/01/12 Х A DISTRICT OF COLUMBIA 27,000,000. DC 30 YEAR BOND Х X D Part II Proceeds В С D 15,468,940. 1 Amount of bonds retired 2 Amount of bonds legally defeased 27,000,000. 3 Total proceeds of issue ... **4** Gross proceeds in reserve funds **5** Capitalized interest from proceeds 6 Proceeds in refunding escrows Issuance costs from proceeds **8** Credit enhancement from proceeds Working capital expenditures from proceeds 27,000,000. Capital expenditures from proceeds Other spent proceeds 11 Other unspent proceeds 2006 Year of substantial completion Yes No Yes No Yes No Yes No X 14 Were the bonds issued as part of a current refunding issue? X Were the bonds issued as part of an advance refunding issue? Has the final allocation of proceeds been made? Does the organization maintain adequate books and records to support the final allocation of proceeds? Part III Private Business Use В C D Α 1 Was the organization a partner in a partnership, or a member of an LLC, Yes No Yes No Yes No Yes No X which owned property financed by tax-exempt bonds? 2 Are there any lease arrangements that may result in private business use of Х bond-financed property?

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

Part IV Arbitrage (Continued)								
		A	E	3	С		Г)
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of								
section 148?		X						
Part V Procedures To Undertake Corrective Action								
		A	E	3			[)
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of								
federal tax requirements are timely identified and corrected through the voluntary								
closing agreement program if self-remediation is not available under applicable								
regulations?		X						
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedul	e K (see instr	uctions).					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: DISTRICT OF COLUMBIA								
(F) DESCRIPTION OF PURPOSE:								
MUSEUM EXPANSION - DC 30 YEAR BOND ISSUED IN 2003	3 AND 1	REISSUE	D IN 20	012.				

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE PHILLIPS COLLECTION

Employer identification number 53-0204620

Pai	rt I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of	Noncash contribution	Method of de		•	
		applicable	contributions or items contributed	amounts reported on Form 990, Part VIII, line 1g	noncash contribu	ution a	mount	.S
1	Art - Works of art	Х	157	Trominoso, rait viii, iino ig				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	27	397.741.	TRADE CONFI	тяма	ΤΤΟ	NS
10	Securities - Closely held stock			33777111	TIGIDE CONT.			
11	Securities - Partnership, LLC, or							
40	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		11	40.245				
25	Other (GIVE-AWAYS, A)	X	11	,	VENDOR CONF			
26	Other \blacktriangleright ($\overline{FOOD/BEVERAGE}$)	X	6	37,631.	VENDOR CONF	TKW.	A'I'I	<u>ON</u>
27	Other ()							
28	Other (
29	Number of Forms 8283 received by the organization		•				•	
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement 29			0	
							Yes	No
30a	During the year, did the organization receive by	y contributio	on any property rep	ported in Part I, lines 1 - 28,	that it must hold for			
	at least three years from the date of the initial of			•				
	the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	policy that r	equires the review	of any non-standard contrib	outions?	31	X	
32a	Does the organization hire or use third parties	or related or	rganizations to soli	icit, process, or sell noncash	1			
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization did not report an amount in	column (c) f	or a type of prope	rty for which column (a) is c	necked,			
	describe in Part II.							
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.	Schedule M	(Form	990) ((2013)

Schedule M (Form 990) (2013)

332142 09-03-13

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047
2013
Open to Public Inspection

Name of the organization

THE PHILLIPS COLLECTION

Employer identification number 53-0204620

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

TO PRESENTATION OF WORKS FROM THE PERMANENT COLLECTION AND SPECIAL

EXHIBITIONS, THE MUSEUM MAINTAINS ACTIVE EDUCATIONAL, ACADEMIC, AND

PUBLIC PROGRAM SERIES AND NUMEROUS PARTNERSHIPS WITH OTHER D.C. ARTS

ORGANIZATIONS, EMBASSIES, AND EDUCATIONAL INSTITUTIONS. THE PHILLIPS

TAKES PRIDE IN ITS HERITAGE AS AN INTIMATE MUSEUM COMBINED WITH AN

EXPERIMENT STATION.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: THROUGH 8TH GRADE, INCLUDING SPECIAL EDUCATION AND AUTISM CLASSROOMS. ADULT PROGRAMS INCLUDE FILM SCREENINGS, IN-GALLERY PROGRAMS, PERFORMANCES, LECTURES, PANELS, AND SYMPOSIA, AS WELL AS GUIDE BY CELL AUDIO TOURS. THE ART AND WELLNESS INITIATIVE, SERVING OLDER ADULTS AND THEIR FAMILIES AND CAREGIVERS, USES ARTWORK AS VISUAL STIMULUS TO SUPPORT THE ART THERAPY STUDIO AT THE SENIORS' IONA SENIOR SERVICES JAZZ 'N FAMILIES FUN DAYS, THE MUSEUM'S ANNUAL 2-DAY FAMILY RESIDENCE. FESTIVAL, WELCOMED OVER 2000 VISITORS. THE FESTIVAL, IN COLLABORATION WITH THE DC JAZZ FESTIVAL, HIGHLIGHTED THE SYNERGY BETWEEN JAZZ AND THE VISUAL ARTS WITH MUSICIANS THROUGHOUT THE MUSEUM IMPROVISING IN RESPONSE TO PAINTINGS. FREE ADMISSION IS PROVIDED FOR THIS ANNUAL DURING FY14, THE EDUCATION STAFF CONTINUED WEEKEND EVENT. EXPERIMENTATION WITH THE USE OF MOBILE DEVICES TO ENGAGE VISITORS, INCLUDING A UCURATE OPPORTUNITY FOR VISITORS TO CREATE THEIR OWN VIRTUAL EXHIBITIONS OF WORKS FROM THE MUSEUM'S COLLECTION AND THE WEEKLY #BREAKFORART TWITTER EXCHANGE.

Employer identification number 53-0204620

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

MUSICAL PERFORMANCES, CONVERSATIONS WITH CONTEMPORARY ARTISTS,

INSTALLATION INCLUDING LECTURES, FILM SCREENINGS, DANCE, THEATRE, AND

IN-GALLERY PROGRAMS, AND SYMPOSIA AND PANELS.

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

THE MUSEUM'S POPULAR "CONVERSATIONS WITH ARTISTS" SERIES, FEATURING

INTERNATIONAL CONTEMPORARY ARTISTS, EMBRACES THE FULL SPECTRUM OF

ARTISTIC PRACTICE AND PRODUCTION AND FEATURED WADE GUYTON, HASSAN KHAN,

AND ZOE CHARLTON, AMONG OTHERS. A DAY OF CONVERSATIONS AMONG

POLICYMAKERS, ENTREPRENEURS, ARTS PROFESSIONALS, AND ARTISTS (THE

CULTURE OF POWER/THE POWER OF CULTURE) PROVIDED INSIGHT INTO THE SHARED

PERSPECTIVES ON THE POLITICAL IMPACT OF THE ARTS, THE ROLE OF THE ART

MARKET ON THE ARTISTIC AND ECONOMIC COMMUNITIES, AND THE PERTINENCE OF

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

ART BIENNIALS IN A GLOBALIZED WORLD.

PUBLIC ACTIVITIES AND OUTREACH INCLUDING SPECIAL EVENTS, MEDIA AND
MARKETING ACTIVITIES, VISITOR AMENITIES, AND COMMUNITY RELATIONS. THE
MUSEUM'S RENOWNED SUNDAY CONCERT SERIES, BEGUN IN 1941, FILLS THE MUSIC
ROOM EACH SUNDAY AFTERNOON OCTOBER THROUGH MAY AND DRAWS RAVE REVIEWS.
THE CONCERTS ARE FREQUENTLY AIRED ON WASHINGTON'S CLASSICAL MUSIC
STATION, WETA, AFTER THE LIVE PERFORMANCE. SOME CONCERTS, FEATURING
THE PHILLIPS CAMERATA, ARE SHARED WITH THE NATIONAL GALLERY OF ART.
FY14 PERFORMERS INCLUDED QUEEN ELISABETH COMPETITION WINNER BORIS
GILTBURG, IMA HOGG COMPETITION WINNER MORAN KATZ, AUSTRALIAN DIDGERIDOO
STAR WILLIAM BARTON, WIDEMAN INTERNATIONAL COMPETITION WINNER ASIYA
KOREPANOVA, AND PROMINENT U.K. CELLIST PHILIP HIGHAM. THE LEADING

Schedule O (Form 990 or 990-EZ) (2013)

EUROPEAN COMPOSERS SERIES CONTINUED IN FY14 IN PARTNERSHIP WITH THE

EMBASSIES OF SLOVENIA AND ESTONIA. A REBRANDING CAMPAIGN AUTHORIZED IN

FY14 HAS ADAPTED THE MUSEUM'S LOGO AND MARKETING MATERIALS TO ALIGN

WITH OUR STRATEGIC GOALS AND OUR CONTEMPOARY THINKING ABOUT THE FUTURE

OF THE MUSEUM. THE MUSEUM CONTINUES TO COLLABORATE WITH NUMEROUS

PARTNER INSTITUTIONS IN D.C., NATIONALLY, AND INTERNATIONALLY.

EXPENSES \$ 2,373,457. INCLUDING GRANTS OF \$ 0. REVENUE \$ 3,055,846.

FORM 990, PART VI, SECTION A, LINE 4:

EXPLANATION: DURING FY14, THE BOARD OF TRUSTEES APPROVED AN INCREASE IN THE MAXIMUM NUMBER OF BOARD MEMBERS PERMITTED FROM 30 TO 35.

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

EXPLANATION: THE AUDITED FINANCIALS WERE PREPARED BY MANAGEMENT AND AUDITED BY THE MUSEUM'S ACCOUNTANTS. THE FORM 990 WAS PREPARED BY MANAGEMENT AND REVIEWED BY THE MUSEUM'S ACCOUNTANTS. THE AUDIT COMMITTEE OF THE BOARD WAS CHARGED WITH REVIEWING THE AUDITED FINANCIALS AND THE ANNUAL 990 FILING.

THESE DOCUMENTS WERE REVIEWED IN SPECIAL MEETINGS OF THE COMMITTEE ATTENDED BY MUSEUM STAFF AND (IN THE INSTANCE OF THE AUDITED FINANCIALS) THE EXTERNAL AUDITORS.

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

EXPLANATION: KEY EMPLOYEES ARE REQUIRED TO COMPLY WITH THE CONFLICTS OF

INTEREST POLICY DETAILED IN THE STAFF HANDBOOK AND TO SIGN ACKNOWLEDGING

THAT THEY HAVE DONE SO. LETTERS REITERATING THE POLICY FOR BOARD MEMBERS

ARE SENT ANNUALLY TO EACH BOARD MEMBER AS PART OF THE ANNUAL AUDIT PROCESS.

EACH BOARD MEMBER IS REQUIRED TO SEND A WRITTEN RESPONSE INDICATING THEIR

COMPLIANCE. IF A CONFLICT WERE TO ARISE, IT WOULD BE RESOLVED BY DISCUSSION

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Schedule O (Form 990 or 990-EZ) (2013)

THE PHILLIPS COLLECTION

Employer identification number 53-0204620

WITH THE BOARD CHAIR AND VICE CHAIRS, LEGAL COUNSEL, AND THE BOARD MEMBER
AS TO THE APPROPRIATE RESOLUTION.

FORM 990, PART VI, SECTION B, LINE 15A:

EXPLANATION: THE DIRECTOR OF THE MUSEUM WAS HIRED WITH THE ASSISTANCE OF A SEARCH FIRM WITH MAJOR NOT-FOR-PROFIT CLIENTS. ITS SALARY RECOMMENDATION WAS BASED UPON COMPARABLES FROM THAT FIRM'S EXPERIENCE AS WELL AS ON NATIONAL STATISTICAL SURVEYS. GOING FORWARD, THE DIRECTOR'S SALARY IS DETERMINED BY THE BOARD'S CHAIR AND VICE CHAIRS BASED UPON PERFORMANCE RESULTS AND COMPARABLES WITH OTHER MUSEUMS. ALL OTHER EMPLOYEES ARE HIRED IN SALARY RANGES UTILIZING LOCAL AND/OR NATIONAL STATISTICAL SURVEYS.

INCREASES IN COMPENSATION (IF ANY) ARE DETERMINED BY THE DIRECTOR BASED UPON PERFORMANCE RESULTS AND IN COMPARISON WITH OTHER INSTITUTIONS BASED UPON STATISTICAL SURVEYS. FOR PROFESSIONAL STAFF, THE MOST COMMON SURVEY USED IS THE AMERICAN ASSOCIATION OF MUSEUM DIRECTORS ANNUAL SALARY SURVEY. THE LAST SALARY REVIEW TOOK PLACE IN JULY 2013.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL,AK,AZ,AR,CA,CO,CT,DC,FL,IL,KS,KY,ME,MA,MI,MN,MS,MO,NH,NJ,NM,NY,NC,ND,OH

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

FORM 990, PART VI, SECTION C, LINE 18:

EXPLANATION: THE ORGANIZATION'S MOST RECENT 990 IS POSTED ON THE MUSEUM'S WEBSITE AND IS AVAILABLE UPON REQUEST.

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

EXPLANATION: THE GOVERNING DOCUMENTS, AUDITED FINANCIAL STATEMENTS, AND

CONFLICT OF INTEREST POLICY ARE AVAILABLE BY REQUEST. THE AUDITED FINANCIAL

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Schedule O (Form 990 or 990-EZ) (2013)

THE PHILLIPS COLLECTION	53-02040	520
STATEMENTS ARE ALSO AVAILABLE IN SUMMARY FORM WITHIN THE	MUSEUM'S MI	EMBER
MAGAZINE EACH YEAR. THE MOST RECENT AUDITED FINANCIAL ST	TATEMENTS AI	1D 990
ARE POSTED ON THE MUSEUM'S WEBSITE.		