### \*\* 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)

▶ Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

A F	or the	2016 calendar year, or tax year beginning AUG 1, $2016$ and e	nding J	UL 31, 2017	<u> </u>			
B C	heck if oplicable:	C Name of organization		D Employer identification number				
	Address change	THE PHILLIPS COLLECTION						
	Name change	Doing business as		53-02	204620			
	Initial return		Room/suite	E Telephone number				
	Final return/	1600 21ST STREET, NW	100111/00110	202-387-2151				
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ 23,996,539.				
	]Amende			H(a) Is this a group return				
	Applica-	F Name and address of principal officer: DANT LEVINAS		for subordinates?				
	pending	SAME AS C ABOVE		H(b) Are all subordinates ind				
1 T	ax-exe	mpt status: $X = 501(c)(3) = 501(c)(3)$ (insert no.) 4947(a)(1) or	r 527		ist. (see instructions)			
Jγ	Vebsite	e: ► WWW.PHILLIPSCOLLECTION.ORG		H(c) Group exemption	•			
<b>K</b> F	orm of c	organization: X Corporation Trust Association Other	<b>∟</b> Year o		State of legal domicile: DC			
Pa	ırt I	Summary						
Φ	1 E	Briefly describe the organization's mission or most significant activities: THE P	HILLI	PS COLLECTION	ON IS THE			
Governance	9	OLDEST MUSEUM OF MODERN AND CONTEMPORARY	ART I	N THE U.S.	IN ADDITION			
. Lus	2 .0	Check this box 🕨 🔲 if the organization discontinued its operations or dispose	ed of more	than 25% of its net as:	sets.			
ove.	3 1	Number of voting members of the governing body (Part VI, line 1a)		3	34			
<u>გ</u>	4	Number of independent voting members of the governing body (Part VI, line 1b) $$		4	3.4			
es 6	5 T	Total number of individuals employed in calendar year 2016 (Part V, line 2a)		5	259			
Activities	6 ⊺	Fotal number of volunteers (estimate if necessary)		6	120			
∕cti		Fotal unrelated business revenue from Part VIII, column (C), line 12			13,874.			
_	b١	Net unrelated business taxable income from Form 990-T, line 34		7b	0.			
	· ·			Prior Year	Current Year			
<u>o</u>	8 (	Contributions and grants (Part VIII, line 1h)		18,663,794.	8,922,034.			
eun	9 F	Program service revenue (Part VIII, line 2g)		3,424,806.	4,096,025.			
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		2,079,135.	3,206,040.			
ш	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		346,312.	364,734.			
	12 7	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		24,514,047.	16,588,833.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) $_{\cdot\cdot\cdot}$		6,868,659.	7,159,935.			
ens		Professional fundraising fees (Part IX, column (A), line 11e)		59,912.	0.			
Expenses	1	Total fundraising expenses (Part IX, column (D), line 25) $ ightharpoonup 1,953,78$						
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,901,997.	6,399,954.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		13,830,568.	<u>13,559,889.</u>			
- (0		Revenue less expenses. Subtract line 18 from line 12		10,683,479.	3,028,944.			
Net Assets or Fund Balances				ginning of Current Year	End of Year			
sset	20	Total assets (Part X, line 16)		99,987,061.	111,438,630.			
et A	21	Total liabilities (Part X, line 26)		13,250,042.	<u>17,192,308.</u>			
		Net assets or fund balances. Subtract line 21 from line 20		<u>86,737,019.</u>	94,246,322.			
- annual delta	art II	Signature Block						
		lties of perjury, I declare that I have examined this return, including accompanying schedules			/ knowledge and belief, it is			
true	, correct	t, and complete Declaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge.	10			
		Signature of officer Wichols		6 [7]	18			
Sig		Signature of officer ()		Date				
Her	e .	SUSAN J. NICHOLS, CHIEF OPERATING OFFI	LCER					
				Opto Opto	DTIN.			
n-'		Print/Type preparer's name Preparer's signature	l.	Date  Check Check if self-employee	The PTIN			
Paid	ŀ	Eric J. Lawrence CA Z. L. CA	F1 1					
	parer Only	Firm's name GELMAN, ROSENBERG & FREEDMAN		Firm's EIN	52-1392008			
use	Only	Firm's address 4550 MONTGOMERY AVE SUITE 650N		Dia / 3	01 \ 051 0000			
	. +b - 15	BETHESDA, MD 20814-2930		Phone no. (3				
		RS discuss this return with the preparer shown above? (see instructions)			X Yes No			
6320	001,11-1	1-16 LHA For Paperwork Reduction Act Notice, see the separate instruction	ns.	*	Form <b>990</b> (2016)			

Par	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE PHILLIPS COLLECTION IS AN INTIMATE MUSEUM COMBINED WITH AN
	EXPERIMENT STATION. AT ITS HEART IS AN EXCEPTIONAL COLLECTION OF
	MODERN AND CONTEMPORARY ART AROUND WHICH WE CREATE A DYNAMIC
	ENVIRONMENT FOR LOOKING, LEARNING, AND ENJOYMENT.
2	Did the organization undertake any significant program services during the year which were not listed on the
2	
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ $2,145,025$ . including grants of \$) (Revenue \$ $673,965$ .
	DEVELOPMENT AND PRESENTATION OF SPECIAL EXHIBITIONS INCLUDING WORKS
	FROM THE MUSEUM'S OWN HOLDINGS, LOANS FROM INDIVIDUALS AND OTHER
	INSTITUTIONS, AND COLLABORATIONS WITH OTHER VENUES. HIGHLIGHTS FROM
	FY17 INCLUDED: JACOB LAWRENCE/WHITFIELD LOVELL, WHICH BROUGHT TOGETHER
	THE PHILLIPS'S AND MOMA'S COMBINED MIGRATION SERIES WORKS, COMPLEMENTED
	BY A REMARKABLE COLLECTION OF WORKS BY THE CONTEMPORARY ARTIST
	WHITFIELD LOVELL WHOSE JUXTAPOSITION OF FOUND OBJECTS OF DRAWN FIGURES
	REVEAL COMMON BONDS THAT TRANSCEND RACIAL, GENDER, RELIGIOUS, AND
	CULTURAL DIFFERENCES; AN OUTSTANDING COLLECTION OF TOULOUSE-LAUTREC
	PRINTS HIGHLIGHTING HIS EXPERIMENTS WITH PRINTMAKING AND DEPICTING THE
	POPULAR VENUES, ENTERTAINERS, AND CELEBRITIES OF THE DAY; AND THE FIRST
	U.S. COMPREHENSIVE SURVEY OF THE MONUMENTAL WORKS OF MARKUS LUPERTZ,
4b	(Code:) (Expenses \$1, 627, 704. including grants of \$) (Revenue \$110, 192.
	PRESENTATION OF A BROAD RANGE OF PROGRAMMING DESIGNED TO APPEAL TO THE
	MUSEUM'S EXPANDING VISITOR DEMOGRAPHIC. ACTIVITIES WITH OUR ACADEMIC
	PARTNER, THE UNIVERSITY OF MARYLAND, INCLUDED CONCERTS, LECTURES,
	"CONVERSATIONS" WITH LOCAL, NATIONAL, AND INTERNATIONAL ARTISTS, AND
	PARTICIPATION IN AN INNOVATIVE STEAM PROGRAM FOR FIRST YEAR STUDENTS.
	ADDITIONAL ACTIVITIES IN ADVANCE OF OUR INAUGURATION OF PROGRAMMING AT
	THEARC IN ANACOSTIA INVOLVED COMMUNITY MEETINGS TO DETERMINE EXISTING
٠.	ASSETS IN THE COMMUNITY, NEEDS WHICH COULD BE MET, AND PRIORITIES WHICH
	WOULD MOST BENEFICIALLY IMPACT THE COMMUNITY. THE PHILLIPS CONTINUES
	TO PROVIDE "POP-UP" SERVICES IN THE COMMUNITY, INCLUDING PARTICIPATION
	IN THE ANACOSTIA RIVER FESTIVAL. THE MUSEUM'S PHILLIPS AFTER 5 SERIES
	ON THE FIRST THURSDAY OF EACH MONTH WELCOMED AN AVERAGE OF 925 VISITORS
40	(Code:) (Expenses \$4,688,602. including grants of \$) (Revenue \$1,913,322.
	MANAGEMENT AND MAINTENANCE OF THE MUSEUM'S PERMANENT COLLECTION OF OVER
	4,500 WORKS ORIGINALLY CREATED BEGINNING IN 1913 BY DUNCAN PHILLIPS AND
	LATER HIS WIFE MARJORIE PHILLIPS AND OPENED TO THE PUBLIC IN 1921 AS
	THE NATION'S FIRST MUSEUM OF MODERN AND CONTEMPORARY ART. THE MUSEUM
	FEATURED THE WORK OF LIVING ARTISTS FROM ITS INCEPTION, AND THE
	TRADITION CONTINUES TODAY WITH RECENT ACQUISITIONS OF WORKS BY ARLENE
•	
	SHECHET, A SCULPTURE COMMISSIONED FROM ANGELA BULLOCH, BETTINA
	POUSTTCHI, AND KATE SHEPHERD. ACTIVITIES INCLUDE CONSERVATION,
	ACQUISITION OF NEW WORKS THROUGH BOTH GIFT AND PURCHASE, DIGITAL
	REPRODUCTION FOR PUBLICATIONS AND FOR PRESENTATION ON THE MUSEUM'S
	WEBSITE AND ON ARTSTOR AND GOOGLE ART. RESEARCH AND INTERPRETATION FOR
	SCHOLARS AND THE PUBLIC IS MADE AVAILABLE THROUGH THE USE OF OUR
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 2,267,099 • including grants of \$ ) (Revenue \$ 1,844,157 •)
4e	Total program service expenses ► 10,728,430.

SEE SCHEDULE O FOR CONTINUATION(S)

632002 11-11-16

# Form 990 (2016) THE PHILLIPS COLLECTION 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	X	
	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	İ	-	
	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	X	<u>:</u>
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		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		.	
	Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		_X_
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	X	
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
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	X	
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	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		17	
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	-
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	10	ľ	- v
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			<b>.</b>
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	1	<b>.</b>	,
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	-
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	100		v
	complete Schedule G, Part III	19	<u> </u>	X

Form **990** (2016)

# Form 990 (2016) THE PHILLIPS COLLE Part IV Checklist of Required Schedules (continued)

		r	Yes	No
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		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		- X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a	X	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		Х
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 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 "Yes,"			
	complete Schedule L, Part II	26		Х
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		28a		Х
b		28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		: : :	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	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		X
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		-		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	300	1	
	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?	000	<u> </u>	
	If "Yes," complete Schedule R, Part V, line 2			X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	- 55		1
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	31		+
30	Note. All Form 990 filers are required to complete Schedule O	38	×	
	TOTAL	<u> </u>	000	<del></del>

Form **990** (2016)

# O16) THE PHILLIPS COLLECTION Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a representation.

the Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  b. Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  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. 259  b. If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a. Did the organization have unrelated business gross income of \$1,000 or more during the year?  b. If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O  4a. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b. If "Yes," enter the name of the foreign country: ▶  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c. If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  6a. Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	- 1		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  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  2 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes," to line 5a or 5b, did the organization file Form 886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  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			
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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 259  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account?  b If "Yes," enter the name of the foreign country: ▶  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		37	
filed for the calendar year ending with or within the year covered by this return  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  lid the organization have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b If "Yes," enter the name of the foreign country: ▶  See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	1c	X	
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<ul><li>any contributions that were not tax deductible as charitable contributions?</li><li>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts</li></ul>			
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		Х
were not tax deductible?			
	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			-
to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the N/A			
sponsoring organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.  2 Did the sponsoring organization make any tayable distributions under section 49662	C-		
a Did the sponsoring organization make any taxable distributions under section 4966?  N/A	9a 9b		
<ul> <li>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</li> <li>N/A</li> <li>Section 501(c)(7) organizations. Enter:</li> </ul>	ab		
a Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders N/A 11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against			
amounts due or received from them.)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		100000000000000000000000000000000000000
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? N/A	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			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2016) THE PHILLIPS COLLECTION 53-0204620 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. v

Sec	tion A. Governing Body and Management		·····						
000	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	34		162	INU			
ıa	If there are material differences in voting rights among members of the governing body, or if the governing	ia .							
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
h	Enter the number of voting members included in line 1a, above, who are independent	1b	34						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship								
2	officer, director, trustee, or key employee?			2	Х				
3	Did the organization delegate control over management duties customarily performed by or under the					<b></b>			
3	of officers, directors, or trustees, or key employees to a management company or other person?			3		X			
4	Did the organization make any significant changes to its governing documents since the prior Form			4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's as			5		X			
6	Did the organization have members or stockholders?	( -		6		X			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a					21			
7 4	more members of the governing body?			7a		Х			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,				:				
~	persons other than the governing body?			7b		Х			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			-15					
a	The governing body?			8a	Х	MARINGS CA			
b	Each committee with authority to act on behalf of the governing body?			- 8b	X				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real								
				9		X			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F								
					Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?			10a		X			
b	If "Yes," did the organization have written policies and procedures governing the activities of such of								
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	dy before filin	g the form?	11a		X			
b									
12a									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to conflicts?		12b	X				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," describ	e		-				
	in Schedule O how this was done			12c	Х				
13	Did the organization have a written whistleblower policy?			13	X	<u> </u>			
14	Did the organization have a written document retention and destruction policy?			14	X	:			
15	Did the process for determining compensation of the following persons include a review and approve	al by indeper	ndent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision								
а	The organization's CEO, Executive Director, or top management official			15a	X				
b	Other officers or key employees of the organization			15b		X			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		•						
16a									
	taxable entity during the year?			16a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate its partici <sub>l</sub>	pation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	anization's							
	exempt status with respect to such arrangements?			16b		<u></u>			
	ction C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE		24 ( ) (0)						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	· I (Section 50	רע(c)(3)s only)	availat	ole .				
	for public inspection. Indicate how you made these available. Check all that apply.					٠			
		n in Schedule	•						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, c	onflict of inte	rest policy, an	d finar	icial				
-	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's b	ooks and rec	oras: 🟲	· ·					
	SUSAN J. NICHOLS - 202-387-2151					·			

1600 21ST STREET, NW, WASHINGTON,

Form **990** (2016)

632006 11-11-16

# 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	ss pei	ition more rson i	than o	n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of
	(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)	other compensation from the organization and related organizations
(1) DANI LEVINAS	15.00	х		х			-	0.	0.	•
CHAIRMAN (2) LINDSEY ELLENBOGAN	2.00	^		^				0.	0.	0.
VICE CHAIRMAN		х		x				0.	0.	0.
(3) SCOTT SPECTOR	2.00		-							
VICE CHAIRMAN		X		Х	_			0.	0.	0.
(4) GEORGE D. SWYGERT	2.00	3,2	ŀ	37	.*					•
TREASURER (F) GAROL MULTION	2.00	Х	<u> </u>	X		-		0.	0.	0.
(5) CAROL MELTON . SECRETARY	2.00	X		X				0.	0.	0.
(6) CAROLYN SMALL ALPER	1.00									<u> </u>
TRUSTEE	-	X						0.	0.	0.
(7) C. RICHARD BELGER	1.00									
TRUSTEE		X	<u> </u>	<u> </u>		-		0.	0.	0.
(8) SUSAN L. BUTLER	1.00	٠,						0		_
TRUSTEE	1.00	X	-	-		-	-	0.	0.	0.
(9) CHRISTOPHER CARR TRUSTEE	1.00	X		1				0.	0.	0.
(10) NANCY CLARVIT	1.00	23	-	<u> </u>						<u> </u>
TRUSTEE		x						0.	ο.	0.
(11) JOHN DESPRES	1.00									
TRUSTEE		X	<u> -</u>	<u> </u>	ļ	ļ	ļ	0.	0.	0.
(12) LAWRENCE DUNCAN III	1.00									
TRUSTEE	1 00	X	╁╌				<u> </u>	0.	0.	0.
(13) GERALD W. FISCHER TRUSTEE	1.00	$ \mathbf{x} $						0.	. 0.	0.
(14) ALAN H. FLEISCHMANN	1.00									
TRUSTEE		X						0.	0.	0.
(15) CAROL BROWN GOLDBERG	1.00									
TRUSTEE	1.00	X	+-	-	-	+	<del> </del>	0.	0.	0.
(16) BARBARA HALL TRUSTEE	1.00	x	[					0.	. 0.	0.
(17) BONNIE BURKE HIMMELMAN	1.00			+	-		$\vdash$			0.
TRUSTEE		X		L		· .		0	0.	0.
632007 11-11-16										Form <b>990</b> (2016)

Form **990** (2016)

Part VII Section A. Officers, Directors, Trus	tees, Kev Em	olov	ees.	and	Hie	ghes	st C	ompensated Employe	es (continued)	
(A)	(B)			(C	>)			(D)	(E)	· (F)
Name and title	Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)				than dis boti	n an	Reportable compensation from	Reportable compensation from related	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
(18) LYNNE N. HORNING TRUSTEE	1.00	Х						0.	0.	0.
(19) MICHELINE KLAGSBRUN TRUSTEE	1.00	Х						0.	0.	0.
(20) JOHN LAUER TRUSTEE	1.00	х						0.	0.	0.
(21) DALE LEFEBVRE TRUSTEE	1.00	X						0.	0.	0.
(22) JANET MACOMBER WILLIAMSON TRUSTEE	1.00	X		-				0.	0.	0.
(23) B. THOMAS MANSBACH TRUSTEE	1.00	X						0.	0.	0.
(24) A. FENNER MILTON TRUSTEE	1.00	X						0.	0.	0.
(25) RONALD A. PAUL TRUSTEE	1.00	X						0.	0.	0.
(26) TONI HARRIS PAUL TRUSTEE	1.00	x						0.	0.	0.
1b Sub-total c Total from continuation sheets to Part V	II, Section A							0. 633,562.		0. 76,901.
d Total (add lines 1b and 1c)  2 Total number of individuals (including but r								633,562. eceived more than \$100	0.000 of reportable	76,901.

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

			Yes	No
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		_X_
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes," complete Schedule J for such person	5		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	<b>(C)</b> Compensation
ART STORAGE &	• .
TRANSPORT	331,455.
ARCHITECTS	205,849.
CATERING	163,215.
INTERNATIONAL ART	
TRANSPORT	149,234.
CATERING	117,170.
d above) who received more than	
(	Description of services  ART STORAGE & TRANSPORT  ARCHITECTS  CATERING INTERNATIONAL ART TRANSPORT  CATERING CATERING

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2016)

Form 990 THE PHILI	LIPS COL	TI	<u>:C'</u>	PIC	<u>NC</u>				53-020	4620
Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, aı	nd F	ligh	est	Compensated Employ	ees (continued)	
(A) Name and title	<b>(B)</b> Average			(C Posi				<b>(D)</b> Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated
	hours per week (list any hours for related organizations below	stee or director	nstitutional trustee	c all t	that employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
000	1.00	Ē	Inst	Officer	Key	Hig	Former			
27) ERIC RICHTER RUSTEE		х						0.	0.	
28) HARVEY ROSS RUSTEE	1.00	X						0.	0.	(
29) THOMAS D. RUTHERFOORD, JR. RUSTEE	1.00	х						0.	0.	. (
30) MICHAEL SHAPIRO	1.00									-
RUSTEE 31) ALICE PHILLIPS SWISTEL	1.00	X						0.	0.	
RUSTEE 32) ELIZABETH WILLIAMS	1.00	X						0.	0.	
RUSTEE	1 00	X		ļ		·		0.	0.	
33) ALAN L. WURTZEL RUSTEE	1.00	x						0.	0.	
34) LEO E. ZICKLER	1.00	х						0.	0.	
RUSTEE 35) SUSAN J. NICHOLS	45.00									
HIEF OPERATING OFFICER 36) DOROTHY KOSINSKI	60.00	-	-	X			-	166,777.	0.	27,40
DIRECTOR			ļ.	х		ļ		299,885.	0.	41,14
37) KLAUS OTTMANN DEPUTY DIR. FOR ACAD. & CUR. AFFAIRS	45.00				X			166,900.	0.	8,36
zaou zan, zan nanz, a oon, munan	,									
										-
							-			
		-		-	-					
		-		-						
		<u> </u>								
Total to Part VII, Section A, line 1c						•		633,562		76,90

Form 990 (2016) THE PHILLIPS COLLECTION
Part VIII Statement of Revenue

Control of the Contro	Jackson (CO)		Check if Schedule O conta	ins a response	or note to any line	e in this Part VIII			
						<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts rts	1 8	a	Federated campaigns	1a					
ran Oun	_		Membership dues		585 919.				
Ĕ,			Fundraising events		850 456.				
ar /			Related organizations						
aji.G			Government grants (contribution		446,518.				
Sign			All other contributions, gifts, grants		440,510.				
le E			similar amounts not included abov	1 1	7.039.141.				
풀히			Noncash contributions included in lines		890,232.				
Contributions, Gifts, Grants and Other Similar Amounts			Total. Add lines 1a-1f		· 1	8 922 034.			
-		<u>''</u>	Total. / Ida miles Ta Ti		Business Code	0,022,034.			
a	9.	2	FEES FROM EXHIBITIONS/L	אסע משמעט	900099	1,912,842.	1,912,842.		
Ķ.			MEMBERSHIP DUES	OANED ART	900099	1,101,347.		:	
Program Service Revenue					900099	774,622.	1,101,347.		· · · · · ·
E a			VISITOR FEES FACILITY RENTAL INCOME				774,622.		
Reg					900099	184,970.	184,970.		
Pro			EDUCATIONAL PROGRAMS All other program service rever	2110	900099	122,244.	122,244.		
			Total. Add lines 2a-2f			4 006 005			
· <del>  </del>	3		Investment income (including			4,096,025.			,
	3		other similar amounts)			E32 000		12 074	F10 11F
	4		Income from investment of tax			532,989.		13,874.	519,115.
	5		Royalties		T .	25 565			05 565
	5		noyalies	(i) Real	(ii) Personal	25,565.			25,565 <u>.</u>
	6	_	Gross rents	(I) Neal	(ii) Personal				
	6		Gross rents Less: rental expenses						
			Rental income or (loss)						
			N. 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2						
			Gross amount from sales of	(i) Coourition					
	′	а		(i) Securities	(ii) Other				
			assets other than inventory	9,385,121	10,816.				
		D	Less: cost or other basis and sales expenses	C 700 00C					
			Gain or (loss)	6,722,886					
			Net gain or (loss)			0 672 051			0 672 051
			Gross income from fundraising			2,673,051.			2,673,051.
nue	٥	а	including \$850	•					
Ver			contributions reported on line						
Other Reven			· ·	•	105 265				
her		h	Part IV, line 18 Less: direct expenses						
ō			Net income or (loss) from fund		_	100 100			105 150
			Gross income from gaming ac		<b>&gt;</b>	-107,178.			-107,178.
	9	а	Part IV, line 19						
		Ĺ	Less: direct expenses						
			Net income or (loss) from gam						
	i		Gross sales of inventory, less	-					
	10	а							
		<b>L</b>	and allowances						
	ı		Less: cost of goods sold  Net income or (loss) from sale:			AAF 644	445 622		
	<u> </u>	Ü	Miscellaneous Revenu			445,611.	445,611,		
	11	_		<u> </u>	Business Code				724
	' '		MISCELLANEOUS		900099	736.			736.
		b	*					<u> </u>	
		d	All other revenue						
			Total. Add lines 11a-11d			736.			
	12		Total revenue. See instructions.				A EA1 C2C	12 074	2 111 000
_	12	-	TOTAL TEVERIUE, OUR MISH MUCHOLIS.		·····	16,588,833.	4,541,636	13,874.	3,111,289.

# Form 990 (2016) THE PHILLIPS COLLECTION Part IX Statement of Functional Expenses

Do r	Check if Schedule O contains a response not include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	( <b>D)</b> Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations			-	
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	<u> </u>			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
•	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	782,335.	498,232.	103,772.	180,331
6	Compensation not included above, to disqualified				
-	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	5,068,529.	4,007,952.	38,269.	1,022,308
8	Pension plan accruals and contributions (include	3,000,020.	2,00,,552.	20,203.	1,022,500
J	section 401(k) and 403(b) employer contributions)	240,829.	188,259.	11,590.	40,980
9	Other employee benefits	589,146.	438,530.	48,488.	102,128
10	Payroll taxes	479,096.	362,006.	44,346.	72,744
	Fees for services (non-employees):	419,090•	302,000.	44,340.	
11			. " "		
	Management	16,625.	10,470.	2 645	2 510
· b	Legal	42,850.	26,987.	3,645.	2,510
С	5	11,260.	40,907.	9,396.	6,467
d		11,200.			11,260
e	· · · · · · · · · · · · · · · · · · ·	100 252		100 252	
f	Investment management fees	198,352.		198,352.	
g		0.60 0.70	700 041	24 122	116 006
	column (A) amount, list line 11g expenses on Sch O.)	860,070.	709,041.	34,133.	116,896
12	Advertising and promotion	263,745.	261,533.	520.	1,692
13	Office expenses	606,624.	445,072.	48,018.	113,534
14	Information technology	269,252.	179,573.	42,404.	47,275
15	Royalties	5,603.	5,603.		
16	Occupancy	910,146.	782,051.	104,056.	24,039
17	Travel	134,097.	111,399.	15,965.	6,733
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				· ·
19	Conferences, conventions, and meetings	~			.1509.6
20	Interest	386,130.	322,674.	43,549.	19,907
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,151,641.	1,016,899.	101,690.	33,052
23	Insurance	285,512.	273,857.	8,522.	3,133
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)	·			
	amount, list line 24e expenses on Schedule 0.)				
а	OMITTO DIVITOTATOR DVD	762,496.	761,497.	541.	458
b	EVENTS	371,604.	203,963.	19,424.	148,217
С	DIDCIIX CEC OF ADD	91,689.	91,689.		
d	MT COTT T ANTHONY	32,258.	31,143.	997.	118
	All other expenses		,		
25	Total functional expenses. Add lines 1 through 24e	13,559,889.	10,728,430.	877,677.	1,953,782
26	Joint costs. Complete this line only if the organization			3, 0	
	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 (2016)
Part X Balance Sheet

Par	t X	Balance Sheet				
-		Check if Schedule O contains a response or note	to any line in this Part X			
				(A)		(B)
				Beginning of year		End of year
	1	Cash - non-interest-bearing			1	
	2	Savings and temporary cash investments		401,675.	2	5,314,883.
	3	Pledges and grants receivable, net		18,262,364.	3	15,179,626.
	4	Accounts receivable, net		499,575.	4	635,562.
	5	Loans and other receivables from current and form				
		trustees, key employees, and highest compensate	ed employees. Complete			
		Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified				
		section 4958(f)(1)), persons described in section 4	958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section	n 501(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instr). C	Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		·	7	
Ä	8	Inventories for sale or use		300,019.	8	303,339.
	9			429,458.	9	436,298.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a 46,332,380.			
	b	Less: accumulated depreciation	10b 18,352,288.	27,928,644.	10c	27,980,092.
	11	Investments - publicly traded securities		19,141,692.	11	28,199,748.
	12	Investments - other securities. See Part IV, line 11		33,023,634.	12	33,389,082
	13	Investments - program-related. See Part IV, line 1		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11			15	1,
	16	Total assets. Add lines 1 through 15 (must equal	line 34)	99,987,061.	16	111,438,630.
	17	Accounts payable and accrued expenses	1,454,479.	17	1,931,993	
	18	Grants payable		18		
	19	Deferred revenue		353,377.	19	518,397
	20	Tax-exempt bond liabilities		11,235,192.	20	10,325,866
	21	Escrow or custodial account liability. Complete Pa			21	
es	22	Loans and other payables to current and former of	· · · · · · · · · · · · · · · · · · ·			
Ħ		key employees, highest compensated employees				
Liabilities		Complete Part II of Schedule L			22	
-	23	Secured mortgages and notes payable to unrelat			23	4 065 000
	24	Unsecured notes and loans payable to unrelated			24	4,265,000.
	25	Other liabilities (including federal income tax, pay-				
		parties, and other liabilities not included on lines		206 204		151 050
		Schedule D		206,994.	25	151,052.
	26	Total liabilities. Add lines 17 through 25		13,250,042.	26	17,192,308
		Organizations that follow SFAS 117 (ASC 958)				
ces		complete lines 27 through 29, and lines 33 and		10 007 455		16 070 001
au	27	Unrestricted net assets		12,907,455.	27	16,072,081.
Ва	28	Temporarily restricted net assets		24,209,901.	28	25,777,807.
Net Assets or Fund Balances	29	Permanently restricted net assets		49,619,663.	29	52,396,434.
r F		Organizations that do not follow SFAS 117 (AS	5C 958), cneck here ▶∟			
io s		and complete lines 30 through 34.				
set	30	Capital stock or trust principal, or current funds			30	
As	31	Paid-in or capital surplus, or land, building, or equ			31	
Vet	32	Retained earnings, endowment, accumulated inc		06 727 010	32	04 046 300
_	33	Total net assets or fund balances		86,737,019.		94,246,322
	34	Total liabilities and net assets/fund balances		99,987,061.	34	111,438,630.

Form 990 (2016)

#### **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

Employer identification number

Name of the organization

•		PHILLIPS CO		<u> </u>			5	3-0204620
Part I	Reason for Public C			mplete thi	s part.) Se	e instructions		
The organ	organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)							
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).							
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)							
3	A hospital or a cooperative h	hospital service orga	anization described in <b>se</b>	ction 170	(b)(1)(A)(ii	i).		
4	A medical research organiza	ation operated in cor	njunction with a hospital	described	in section	n 170(b)(1)(A)	(iii). Enter i	the hospital's name,
	city, and state:							
5	An organization operated fo	r the benefit of a col	llege or university owned	or operat	ed by a go	overnmental u	nit describ	ed in
	section 170(b)(1)(A)(iv). (C	omplete Part II.)						
6	A federal, state, or local gov	ernment or governm	nental unit described in s	section 17	'0(b)(1)(A)(	(v).		
7 X	An organization that normal	ly receives a substa	ntial part of its support f	rom a gove	ernmental	unit or from th	ne general	public described in
•	section 170(b)(1)(A)(vi). (Co	omplete Part II.)						•
8	A community trust describe	d in section 170(b)(	1)(A)(vi). (Complete Part	: II.)				
9	An agricultural research org	anization described	in section 170(b)(1)(A)(i	i <b>x)</b> operate	ed in conju	nction with a	and-grant	college
	or university or a non-land-g	rant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	e or
	university:					- N		·
10	An organization that normal	ly receives: (1) more	than 33 1/3% of its sup	port from	contributio	ons, members	hip fees, a	nd gross receipts from
	activities related to its exem	pt functions - subjec	ct to certain exceptions,	and (2) no	more that	n 33 1/3% of i	ts support	from gross investment
	income and unrelated busin	ess taxable income	(less section 511 tax) fro	om busine	sses acqu	ired by the or	ganization	after June 30, 1975.
· .	See section 509(a)(2). (Con	nplete Part III.)						
11	An organization organized a	and operated exclusi	ively to test for public sa	fety. See s	section 50	9(a)(4).		**************************************
12	An organization organized a	and operated exclusi	ively for the benefit of, to	perform t	the functio	ns of, or to ca	rry out the	purposes of one or
	more publicly supported org	ganizations describe	ed in <b>section 509(a)(1)</b> o	r section !	509(a)(2).	See <b>section 5</b>	<b>09(a)(3).</b> C	Check the box in
	lines 12a through 12d that of	describes the type o	of supporting organizatio	n and com	nplete lines	s 12e, 12f, and	l 12g.	
a	☐ Type I. A supporting orga	nization operated, s	upervised, or controlled	by its sup	ported org	janization(s), t	ypically by	giving
	the supported organization	on(s) the power to re	gularly appoint or elect a	a majority o	of the direc	ctors or truste	es of the s	upporting
	organization. You must c	omplete Part IV, Se	ections A and B.					
b	☐ Type II. A supporting orga	anization supervised	l or controlled in connec	tion with it	s support	ed organizatio	n(s), by ha	ving
	control or management of	f the supporting orga	anization vested in the s	ame perso	ons that co	ontrol or mana	ge the sup	ported
	organization(s). You mus	t complete Part IV,	Sections A and C.					
c _	$oldsymbol{ol{ol{ol}}}}}}}}}}}}}}}}}}$	grated. A supporting	g organization operated	in connec	tion with, a	and functional	ly integrate	ed with,
	its supported organization	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.		
d L		<b>/ integrated.</b> A supp	orting organization oper	ated in co	nnection v	vith its suppor	ted organi	zation(s)
	that is not functionally int	egrated. The organiz	zation generally must sat	tisfy a dist	ribution re	quirement and	l an attent	iveness
	requirement (see instructi	ions). <b>You must co</b> n	nplete Part IV, Sections	s A and D,	, and Part	V.		
e	Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	a Type I, Type	II, Type III	
	functionally integrated, or		nally integrated support	ing organi	zation.			
	er the number of supported o	· ·	······································			•		
	vide the following information			(iv) Is the orga	anization lieted		<del></del>	
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your govern	ing document?	(v) Amount of support (see in	,	(vi) Amount of other support (see instructions)
	Organization		above (see instructions))	Yes	No.	support (see ii	istructions)	support (see instructions)
							•	
					1 .		÷	1.1
								× .
·								
Total								1

Schedule A (Form 990 or 990-EZ) 2016 THE PHILLIPS COLLECTION 53-02046

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

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

Sec	tion A. Public Support	-					
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	5,014,077.	7,233,001.	9,457,827.	18,663,794.	8,922,034.	49,290,733.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf			* 4			
3	The value of services or facilities						
	furnished by a governmental unit to				-		
	the organization without charge		·				
4	Total. Add lines 1 through 3	5,014,077.	7,233,001.	9,457,827.	18,663,794.	8,922,034.	49,290,733.
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)						10,695,955.
6	Public support. Subtract line 5 from line 4.						38 594 778.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
. 7	Amounts from line 4	5,014,077.	7,233,001.	9,457,827.	18,663,794.	8,922,034.	49,290,733.
. 8	Gross income from interest,		·				
	dividends, payments received on				* *		
	securities loans, rents, royalties						
	and income from similar sources	618,626.	653,470.	664,792.	536,418.	544,680.	3,017,986.
9	Net income from unrelated business		•				
	activities, whether or not the						
	business is regularly carried on	5,987.	-18,202.	-9,806.	7,663.	13,874.	-484.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	8,053.	7,022.	2,438.	1,511.	736.	<u> 19,760.</u>
11	<b>Total support.</b> Add lines 7 through 10						52,327,995.
12	Gross receipts from related activities,	•					<u>,789,503.</u>
13	First five years. If the Form 990 is fo	-	s first, second, thir	d, fourth, or fifth to	ax year as a sectio	n 501(c)(3)	
50	organization, check this box and stor	here	rcentane				······
				, aluman (f)		14	73.76 %
	Public support percentage for 2016 ( Public support percentage from 2015					15	73.76 % 69.44 %
	a 33 1/3% support test - 2016. If the						
102	stop here. The organization qualifies	-					
ı	33 1/3% support test - 2015. If the						
	and stop here. The organization qua						
17:	a 10% -facts-and-circumstances tes				the state of the s		
176	and if the organization meets the "fac	-					
	meets the "facts-and-circumstances"						
	10% -facts-and-circumstances tes						
. [	more, and if the organization meets t						
	organization meets the "facts-and-cir				-		<b>.</b>
18			-				
_10	THATE TOURIGE OF THE OTYAINZANG	on all flot offect a	SOX OIT III IO TO, TO	a, 100, 17a, 01 17		edule A (Form 990	
					SCIII	Cadie A (FUIII 990	01 330-LEJ 2010

# Schedule A (Form 990 or 990 EZ) 2016 THE PHILLIPS COLLECTION Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

<u></u>	qualify under the tests listed b	elow, please com	plete Part II.)	<del></del>		· · · · · · · · · · · · · · · · · · ·	<del></del>
	tion A. Public Support		T		T		
	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(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	•	2.4				
	are not an unrelated trade or bus-						
	iness under section 513						4
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						
5	furnished by a governmental unit to						
	the organization without charge						
	•						
	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			<u> </u>			
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(a) 2014	(4) 2015	(-) 2016	(f) Total
	Amounts from line 6	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						)
h	Unrelated business taxable income						
~	(less section 511 taxes) from businesses						*.
	acquired after June 30, 1975						
٠,	Add lines 10a and 10b						
11							
12	Other income. Do not include gain	-					
	or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)	<u> </u>	1	<u> </u>		<u> </u>	<u> </u>
14	First five years. If the Form 990 is for	_			•		
	check this box and stop here	<u></u>	·····				<b>.</b>
Se	ction C. Computation of Pub	lic Support Pe	ercentage				
15	Public support percentage for 2016	(line 8, column (f) d	divided by line 13,	column (f))		15	
16	Public support percentage from 201	5 Schedule A, Par	t III, line 15	********		16	
	ction D. Computation of Inve					·	
17	Investment income percentage for 2					17	
18	Investment income percentage from					18	
	a 33 1/3% support tests - 2016. If the						
198		-	•				
	more than 33 1/3%, check this box						
. 1	o 33 1/3% support tests - 2015. If the	=					_
	line 18 is not more than 33 1/3%, ch	eck this box and :	stop here. The org	anization qualifies	s as a publicly supp	orted organization	▶∟
				•			
20	Private foundation. If the organization	on did not check a	a box on line 14, 1		this box and see in	structions	<b>&gt;</b>

### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

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

	-	Vaa	No_
		Yes	INO_
	1		
	2		
	3a		
	3b		
	3c		
	4a		
	4b		
	710		
	4c		
	5a		
	5b		
	5c		
	7		
	8		
	9a		
	9b		
	· 9c		
	10a 10b		
1	990 or 9	90-EZ	) 2016

- how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a 2b За

632025 09-21-16

Schedule A (Form 990 or 990-EZ) 2016

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orgar	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on	Nov. 20, 1970 (explain in	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ctions A through E.	
Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	•	
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d		1d		
	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	- 100°	ed Type III supporting ord	anization (see
	instructions).		3. 11 3-3	•

rai	I v I Type III Non-Functionally integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Secti	on D - Distributions	Current Year		
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	S	
4	Amounts paid to acquire exempt-use assets			
	Qualified set-aside amounts (prior IRS approval required)			
	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions, Add lines 1 through 6			
8	Distributions to attentive supported organizations to which t	he organization is responsive	)	
	(provide details in <b>Part VI</b> ). See instructions	J 1		
9	Distributable amount for 2016 from Section C, line 6			
	Line 8 amount divided by Line 9 amount			
	,	(i)	(ii)	(iii)
		Excess Distributions	Underdistributions	Distributable
Secti	on E - Distribution Allocations (see instructions)	ZX0000 ZX011 ISULIONO	Pre-2016	Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
	From 2013			
	From 2014			
	From 2015			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7:			
a	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c			
8	Breakdown of line 7:			
a				
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Evenes from 0010			

Schedule A (Form 990 or 990-EZ) 2016

#### chedule 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

PHILLIPS COLLECTION 53-0204620 Organization type (check one): Section: Filers of: 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, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990 EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \_\_\_\_\_\_ \ \ \ \ \ \ \ \ \ \ \ \ \ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Name of organization

Employer identification number

#### THE PHILLIPS COLLECTION

53-0204620

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$1,025,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d)
2	Name, address, and ZIP + 4	\$ 1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$530,733.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$349,090.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 306,500.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ 241,500.	Person X Payroll Noncash (Complete Part II for
623452 10-1	8-16	Schedule B (Form	noncash contributions.) 990, 990-EZ, or 990-PF) (2016

Name of organization

Employer identification number

#### THE PHILLIPS COLLECTION

53-0204620

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional	ıl space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 224,970.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ 200,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occash Complete Part II for noncash contributions.)

Employer identification number

#### THE PHILLIPS COLLECTION

53-0204620

art II	Noncash Property (See instructions). Use duplicate copies of Part II i	f additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
3	5,240 SHARES OF VALSPAR CORPORATION	-	
		\$530,733.	11/17/16
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - - - - - -	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - - - - - - -	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - - - - - - - - -	
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - - - - - - -	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<u> </u>		_ _ _ _	

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

OMB No. 1545-0047
2016

Open to Public Inspection

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

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

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

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

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

<ul> <li>Section 501(c)(4), (5), or (6) organizate</li> <li>Name of organization</li> </ul>	tions: Complete Part III.		·	
ŭ			Empi	oyer identification number
Part I-A Complete if the org	LLIPS COLLECTION panization is exempt under	coation FO1(a) a	r is a section 527 a	53-0204620
Fart i-A Complete if the org	janization is exempt under	section sur(c) o	or is a section 527 o	rganization.
<ol> <li>Provide a description of the organiz</li> <li>Political campaign activity expendit</li> <li>Volunteer hours for political campai</li> </ol>	ures		<b></b> ►\$	
Part I-B Complete if the ord	janization is exempt unde	r section 501(c)(3	)_	······································
1 Enter the amount of any excise tax			*****	•
2 Enter the amount of any excise tax				
3 If the organization incurred a section				
4a Was a correction made?				
<b>b</b> If "Yes," describe in Part IV.				
Part I-C Complete if the org	janization is exempt unde	r section 501(c),	except section 501	(c)(3).
1 Enter the amount directly expended	d by the filing organization for secti	on 527 exempt function	on activities > \$	
2 Enter the amount of the filing organ	ization's funds contributed to othe	r organizations for sec	ction 527	
exempt function activities			▶\$	·
3 Total exempt function expenditures	s. Add lines 1 and 2. Enter here and	d on Form 1120-POL,		
line 17b				
4 Did the filing organization file Form	1120-POL for this year?			Yes No
5 Enter the names, addresses and er made payments. For each organiza contributions received that were pr political action committee (PAC). If	ition listed, enter the amount paid to omptly and directly delivered to a s	rom the filing organiza separate political orga	tion's funds. Also enter the nization, such as a separa	ne amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
			filing organization's funds. If none, enter -0	contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2016

LHA

632041 11-10-16

Schedule C (Form 990 or 990-EZ) 2016 THE  Part II-A Complete if the organiza	PHILLIF	S COLLECTION  mpt under section	ON on 501(c)(3) and file	53-( ed Form <b>5768</b> (e	204620 Page 2
section 501(h)).				· · · · · · · · · · · · · · · · · · ·	.oot.on anaor
A Check ► if the filing organization be	longs to an aff	iliated group (and list	in Part IV each affiliated	group member's nan	ne address FIN
expenses, and share of ex				group mombor o nam	10, add 000, E111,
B Check  if the filing organization ch	, ,	•	rovisions apply		
	obbying Expe	nditures		(a) Filing organization's	(b) Affiliated group totals
(The term expenditures	means and	unts paid of incurred	1.,	totals	
1a Total lobbying expenditures to influence p	oublic opinion	(grass roots lobbying)			
<b>b</b> Total lobbying expenditures to influence a	a legislative bo	dy (direct lobbying)			
c Total lobbying expenditures (add lines 1a	and 1b)				
d Other exempt purpose expenditures		· · · · · · · · · · · · · · · · · · ·			
e Total exempt purpose expenditures (add	lines 1c and 1	d)			
f _Lobbying nontaxable amount. Enter the a					
If the amount on line 1e, column (a) or (b) is:	The lok	bying nontaxable ar	nount is:		
Not over \$500,000	20% of	the amount on line 1	e.		
Over \$500,000 but not over \$1,000,000	\$100,0	00 plus 15% of the ex	cess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,0	00 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,00	00 \$225,0	00 plus 5% of the exc	cess over \$1,500,000.		
Over \$17,000,000	\$1,000	,000.			
g Grassroots nontaxable amount (enter 259	% of line 1f)				
h Subtract line 1g from line 1a. If zero or les	ss, enter -0-				
i Subtract line 1f from line 1c. If zero or les	s, enter -0				
j If there is an amount other than zero on e					
reporting section 4911 tax for this year?					Yes No
(Some organizations that ma	de a section (	veraging Period Unde 501(h) election do no rate instructions for	t have to complete all	of the five columns	pelow.
L	obbying Expe	enditures During 4-Y	ear Averaging Period		
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	( <b>d)</b> 2016	(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))					

Schedule C (Form 990 or 990-EZ) 2016

### Schedule C (Form 990 or 990 EZ) 2016 THE PHILLIPS COLLECTION 53-0204620 Page 3 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)).

or each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(	a)	(b	) )
f the lobbying activity.	Yes	No	Amo	ount
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:				
a Volunteers?		X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	1.0	X		
c Media advertisements?		Х		
d Mailings to members, legislators, or the public?		X		
e Publications, or published or broadcast statements?		X		
f 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?			11	L,26
j Total. Add lines 1c through 1i				1,26
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		х		- / 20
b If "Yes," enter the amount of any tax incurred under section 4912		21		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), se	ection 501(c)	(5) or se	ection	
501(c)(6).		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	otion	
			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?		2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from Part III-B Complete if the organization is exempt under section 501(c)(4), see	om the prior yea ection 501(c	ar? 3 )(5), or se		ne 3. is
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from Part III-B Complete if the organization is exempt under section 501(c)(4), second 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."	om the prior yea ection 501(c) red "No," O	ar? 3 )(5), or se R (b) Par		ne 3, is
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#### SCHEDULE D

(Form 990)

Department of the Treasury

### Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

Employer identification number

THE PHILLIPS COLLECTION 53-0204620 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1

632051 08-29-16

b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2016

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## 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment.

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

(ii) related organizations

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

(i) unrelated organizations

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	,	833,240.		833,240.
<b>b</b> Buildings		43,660,339.	16,973,031.	26,687,308.
c Leasehold improvements		10,000.	·	10,000.
d Equipment		1,828,801.	1,379,257.	449,544.
e Other				·
Total Add lines 1a through 1a (Column (d) must ea	ual Form 000 Part Y colu	mn (R) line 10c)		27 980 092

Schedule D (Form 990) 2016

3a(i)

3a(ii)

Х

Other Liabilities. Part X

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) GIFT ANNUITY DEBT	100,431.
(3) CAPITAL LEASE OBLIGATION	50,621.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	151,052.

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 X

Schedule D (Form 990) 2016

53-0204620 Pag	e <b>4</b>
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Pai	t XI Reconciliation of Revenue per Audited Financial Stateme	ents Wi	tn Revenue per R	eturr	ղ.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ı			
1	Total revenue, gains, and other support per audited financial statements			1	14,003,543.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	. 2a			
b	Donated services and use of facilities	. 2b	387,689.		
С	Recoveries of prior year grants	. 2c			
d	Other (Describe in Part XIII.)		2,392,160.		-
е	Add lines 2a through 2d			2e	2,779,849.
3	Subtract line 2e from line 1			3	11,223,694.
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	5,365,139.		
С	Add lines 4a and 4b			4c	5,365,139.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	16,588,833.
450					
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	nents W	ith Expenses per	Retu	irn.
Ра	rt XII Reconciliation of Expenses per Audited Financial Statem  Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	nents W	ith Expenses per	Retu	irn.
Pa 1		nents W	ith Expenses per	Retu	11,937,693.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	nents W	ith Expenses per	Retu	irn.
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements	nents W	ith Expenses per	Retu	irn.
1 2	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents W	ith Expenses per	Retu	irn.
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	nents W	ith Expenses per	Retu	irn.
1 2 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c	ith Expenses per	Retu	irn.
1 2 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c 2d	387,689.	Retu	irn.
1 2 a b c	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	387,689.	Retu	irn.
1 2 a b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	387,689.	1 2e	387,689.
1 2 a b c d e	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 2b 2c 2d	387,689.	1 2e 3	387,689.
1 2 a b c d e 3	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) 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:	2a 2b 2c 2d 4a	387,689.	1 2e 3	387,689.
1 2 a b c d e 3	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)  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	2a 2b 2c 2d 4a 4b	387,689.  198,352. 1,811,533.	1 2e 3	387,689.

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

#### PART III, LINE 1A:

Part XIII Supplemental Information.

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 NET ASSETS BASED ON THE ABSENCE OR 632054 08-29-16 Schedule D (Form 990) 2016 EXISTENCE AND NATURE OF DONOR-IMPOSED RESTRICTIONS. THERE WERE NO
DEACCESSIONS DURING EACH OF THE YEARS ENDED JULY 31, 2017 AND 2016.

#### PART III, LINE 4:

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 THE PUBLIC.

#### PART V, LINE 4:

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:

FOR THE YEARS ENDED JULY 31, 2017 AND 2016, 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.

#### PART XI, LINE 2D - OTHER ADJUSTMENTS:

Schedule D (Form 990) 2016

Schedule D (Form 990) 2016 THE PHILLIPS COLLECTION  Part XIII Supplemental Information (continued)	53-0204620 Page 5
ENDOWMENT EARNINGS TRANSFERRED FOR OPERATIONS	2,392,160.
INCLUDED IN REVENUE ON THE FINANCIAL STATEMENTS AND	
EXCLUDED FROM REVENUE ON FORM 990, PART VIII.	
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
INTEREST/DIVIDENDS, NON-OPERATING, REPORTED AS AN "OTHER	519,932.
ITEM" ON THE FINANCIAL STATEMENTS AND INCLUDED AS REVENUE ON	1
FORM 990, PART VIII.	
MEMBERSHIP TRAVEL EXPENSES NETTED AGAINST REVENUE ON THE	74,227.
FINANCIAL STATEMENTS AND INCLUDED AS AN EXPENSE ON FORM 990,	
PART IX.	
REALIZED GAINS, NON-OPERATING, REPORTED AS AN "OTHER ITEM"	2,662,235.
ON THE FINANCIAL STATEMENTS AND INCLUDED AS REVENUE ON FORM	
990, PART VIII.	
GALA EXPENSES NETTED AGAINST REVENUE ON THE FINANCIAL	42,232.
STATEMENTS AND INCLUDED AS AN EXPENSE ON FORM 990, PART IX.	
HVAC UPGRADE PROJECT REPORTED AS AN "OTHER ITEM" ON	1,000,000.
THE FINANCIAL STATEMENTS AND INCLUDED AS REVENUE	
REVENUE ON FORM 990, PART VIII.	
NON-OPERATING GIFTS, GRANTS AND CORPORATE SUPPORT FOR	1,066,523.
HVAC UPGRADE PROJECT REPORTED AS AN "OTHER ITEM" ON	
THE FINANCIAL STATEMENTS AND INCLUDED AS REVENUE	
ON FORM 990, PART VIII.	
OPERATING UNREALIZED LOSSES INCLUDED IN REVENUE	-10.
ON THE FINANCIAL STATEMENTS AND EXCLUDED FROM FORM	
990, PART VIII.	
TOTAL TO SCHEDULE D, PART XI, LINE 4B	5,365,139.

Schedule D (Form 990) 2016 THE PHILLIPS COLLECTION 5 Part XIII Supplemental Information (continued)	3-0204620 Page 5
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
MEMBERSHIP TRAVEL EXPENSES NETTED AGAINST REVENUE ON THE	• 74,227.
FINANCIAL STATEMENTS AND INCLUDED AS AN EXPENSE ON FORM 990,	
PART IX.	
GALA EXPENSES NETTED AGAINST REVENUE ON THE FINANCIAL	
STATEMENTS AND INCLUDED AS AN EXPENSE ON FORM 990, PART IX.	·
BOND EXPENSES, NON-OPERATING REPORTED AS AN "OTHER ITEM"	313,943.
ON THE FINANCIAL STATEMENTS AND INCLUDED AS AN EXPENSE ON	· · · · · · · · · · · · · · · · · · ·
FORM 990, PART IX.	
ART ACQUISITION COSTS REPORTED AS AN "OTHER ITEM" ON THE	
FINANCIAL STATEMENTS AND INCLUDED AS AN EXPENSE ON FORM	
990, PART IX.	· · · · · · · · · · · · · · · · · · ·
DEPRECIATION, NON-OPERATING, REPORTED AS AN "OTHER ITEM"	1,027,469.
ON THE FINANCIAL STATEMENTS AND INCLUDED AS AN EXPENSE ON	
FORM 990, PART IX.	
CAPITAL CAMPAIGN EXPENSES REPORTED AS AN "OTHER ITEM" ON	
THE FINANCIAL STATEMENTS AND INCLUDED AS AN EXPENSE ON	
FORM 990, PART IX.	
UBIT TAX EXPENSE REPORTED AS AN "OTHER ITEM" ON THE	4,443.
FINANCIAL STATEMENTS AND INCLUDED AS AN EXPENSE ON FORM	
990, PART IX.	·
TOTAL TO SCHEDULE D, PART XII, LINE 4B	1,811,533.
	·
	· · · · · · · · · · · · · · · · · · ·
	·

### **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.

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.

Open to Public Inspection **Employer identification number** 

THE PHILLIPS CO				53-020462	
Part I General Infor	mation on A	ctivities Out	tside the United States. Comple		
Form 990, Part IV	/, line 14b.				
			ds to substantiate the amount of its gra		
the grantees' eligibility fo	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assistance?	Yes No
		*			
	ribe in Part V the	organization's	procedures for monitoring the use of it	s grants and other assistance outs	ide the
United States.					
			an be duplicated if additional space is a dditional		(0 T. ) .
(a) Region	(b) Number of offices	(c) Number of employees,	(by type) (such as, fundraising, pro-	(e) If activity listed in (d) is a program service.	(f) Total expenditures
	in the region	agents, and independent	gram services, investments, grants to	, , ,	for and
		contractors in the region	recipients located in the region)	of service(s) in the region	investments in the region
	*				
EUROPE	. 0	0	PROGRAM SERVICES	ART EXHIBITION	193,076.
CENTRAL AMERICA AND					
THE CARIBBEAN	0	0	INVESTMENTS IN REGION		20,230,849.
EUROPE	0	0	INVESTMENTS IN REGION		92,524.
	·				
					٠
		-			
		1.			
•					
					1
3 a Sub-total	С	0			20,516,449.
<b>b</b> Total from continuation	-				
sheets to Part I		, 0			0.
c Totals (add lines 3a					
and 3b)					20 516 449.
LHA For Paperwork Reduct	tion Act Notice,	see the Instruc	ctions for Form 990.	Schedule F (	Form 990) 2016

632071 09-21-16

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. Part II

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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
						·		
2 Enter total number of recipient organizations listed a the IRS, or for which the grantee or counsel has pro	recipient organization the grantee or counse	Enter total number of recipient organizations listed above that are recognised in the IRS, or for which the grantee or counsel has provided a section 501	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	foreign country,	recognized as tax-ex	empt by		
-		000000					Sched	Schedule F (Form 990) 2016

38

53-0204620

Page 3

THE PHILLIPS COLLECTION

Schedule F (Form 990) 2016

990) 2016 THE PHILLE

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.

Schedule F (Form 990) 2016 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement (c) Number of recipients cash grant Part III can be duplicated if additional space is needed. (b) Region (a) Type of grant or assistance

Schedule F (Form 990) 2016

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

632074 09-21-16

#### **SCHEDULE G**

(Form 990 or 990-EZ)

# Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

➤ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. **Open to Public** Inspection

THE PHI	LLIPS COLLECTION				53-0204	620
Part I Fundraising Activities. required to complete this part	Complete if the organization answe	red "Y	es" or	Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
<ul> <li>1 Indicate whether the organization rais a Mail solicitations</li> <li>b Internet and email solicitations</li> <li>c Phone solicitations</li> <li>d In-person solicitations</li> <li>2 a Did the organization have a written of key employees listed in Form 990, P</li> <li>b If "Yes," list the 10 highest paid individed compensated at least \$5,000 by the</li> </ul>	e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with p	ion of ion of fundra (includ	non-go governising of ling of onal f	overnment grants nment grants events fficers, directors, trus undraising services?	stees, or Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
in the second of						
						* 21
					·	
Total			<u> </u>			
List all states in which the organization or licensing.	on is registered or licensed to solicit	contrik	putions	s or has been notifie	d it is exempt from r	egistration
			-	· · · · · · · · · · · · · · · · · · ·		

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

Schedule G (Form 990 or 990-EZ) 2016

53-0204620 Page 2

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE (add col. (a) through ANNUAL GALA col. (c)) (total number) (event type) (event type) Revenue 975,821. 975,821. Gross receipts Less: Contributions 850,456 850,456. Gross income (line 1 minus line 2) 125,365 125,365. Cash prizes Noncash prizes Direct Expenses 6,300. Rent/facility costs 6,300. 129,175. 129,175. Food and beverages Entertainment Other direct expenses 97,068. 97,068. 10 Direct expense summary. Add lines 4 through 9 in column (d) 232,543. -107,178. 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (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 Direct Expenses Noncash prizes 3 Rent/facility costs Other direct expenses Yes Yes Yes Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain: 632082 09-12-16 Schedule G (Form 990 or 990-EZ) 2016

12	Does the organization conduct gaming activities with nonmembers?	Y	es	J 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?	Y	es 🗀	] No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a		9
	o An outside facility			9
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			•
	Name ▶		·	
	Address >			
15e	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	· •	es 🗀	] No
b	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			٠.
	of gaming revenue retained by the third party ▶\$			
C	c If "Yes," enter name and address of the third party:			
	Name ▶	•		
	Address	• • •		
16	Gaming manager information:			
				>
	Name	2 .		
	Gaming manager compensation > \$	4		
	Description of complete muscided .			
	Description of services provided			
	Director/officer Employee Independent contractor			
	Director/officer Employee independent contractor			
	Mandatory distributions:			
17.				•
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	🗀 Y	es 🗆	] No
á	<ul> <li>a Is the organization required under state law to make charitable distributions from the gaming proceeds to</li> <li>retain the state gaming license?</li> <li>b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the</li> </ul>	<b>Y</b>	es 🗆	□No
l	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$			
i	<ul> <li>a Is the organization required under state law to make charitable distributions from the gaming proceeds to</li> <li>retain the state gaming license?</li> <li>b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the</li> </ul>			
i	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III,			
i	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III,			
i	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III,			
i	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III,			
i	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III,			
i	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III,			
l	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III,			
l	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III,			
l	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III,			
ı	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III,			No.
i	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III,			
i	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$  art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III,			

Schedule G (Form 990 or 990 EZ) THE PHILLIPS COLLECTION  Part IV Supplemental Information (continued)	53-0204620 Page 4
Part IV Supplemental Information (continued)	
	:

## **SCHEDULE J** (Form 990)

# **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. 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

Department of the Treasury

Internal Revenue Service

THE PHILLIPS COLLECTION

Employer identification number 53-0204620

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on 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  LX Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	X	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Approval by the board or compensation committee			
•				
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?			X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?			X
. с	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), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			<b></b> -
а	The organization?	1	-	X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.	-		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	<u>6a</u>		X
b	Any related organization?	6b		X
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			1
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?		<u> </u>	1
LH/	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	le J (For	m 990	2016

Schedule J (Form 990) 2016

Page 2

THE PHILLIPS COLLECTION

Schedule J (Form 990) 2016

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII. Note: The sum of columns (B)(i) (iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	·		reported as deferred on prior Form 990
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Schedule J (Form 990) 2016

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

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Department of the Treasury Internal Revenue Service SCHEDULE K (Form 990)

Name of the organization

Supplemental Information on Tax-Exempt Bonds

Open to Public Inspection 2016

OMB No. 1545-0047

Employer identification number

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990. Attach to Form 990.

ŝ (g) Defeased (h) On behalf (i) Pooled financing × Yes ŝ 53-0204620 No Yes No of issuer × Ω Yes Yes × Yes ŝ - DC 30 YEAR BOND MUSEUM EXPANSION (f) Description of purpose O O Yes ŝ Ω Ω 27,000,000. Yes CONTINUATIONS (e) Issue price 17,420,268. 27,000,000 27,000,000 × × × ŝ 2006 (d) Date issued 11/01/12 Yes × (F) COLUMN 53-6001131254839E82 (c) CUSIP# Does the organization maintain adequate books and records to support the final allocation of proceeds? FOR PHILLIPS COLLECTION SEE PART VI (b) Issuer EIN Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? Has the final allocation of proceeds been made? Working capital expenditures from proceeds A DISTRICT OF COLUMBIA Credit enhancement from proceeds Capital expenditures from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds Proceeds in refunding escrows THE Issuance costs from proceeds Year of substantial completion (a) Issuer name Part III Private Business Use Amount of bonds retired Other unspent proceeds Total proceeds of issue Other spent proceeds Bond Issues Proceeds Part I Part II က 2 ဖ ω 6 유 m ပ 4 ^ 11 12 5 4 15 16

Are there any lease arrangements that may result in private business use of

Was the organization a partner in a partnership, or a member of an LLC,

which owned property financed by tax-exempt bonds?

Schedule K (Form 990) 2016

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Yes

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Yes

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Yes

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2122 10-19-16						X X X X X X X X X X X X X X X X X X X	No   No   No   No   No   No   No   No	No   No   No   No   No   No   No   No

Schedule K (Form 990) 2016

632123 10-19-16

# SCHEDULE M (Form 990)

**Noncash Contributions** 

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

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

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

**Employer identification number** 

	THE PHILLIPS	COLLE	CTION	·	53-	0204620
Par	t I Types of Property					
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of	d) determining ibution amounts
. 1	Art - Works of art	X	59	0.		
2	Art - Historical treasures			,		· · · · · · · · · · · · · · · · · · ·
3	Art - Fractional interests					· · ·
4	Books and publications	X		5,570.	MARKET PRI	CE
5	Clothing and household goods					
6	Cars and other vehicles					
7	Boats and planes					
8	Intellectual property					
9	Securities - Publicly traded	X	23	776,122.	TRADE CONF	TIRMATIONS_
10	Securities - Closely held stock					
11	Securities - Partnership, LLC, or trust interests					
12	Securities - Miscellaneous					
13	Qualified conservation contribution - Historic structures					
14	Qualified conservation contribution - Other					
15	Real estate - Residential					
16	Real estate - Commercial					
17	Real estate - Other					
18	Collectibles					
19	Food inventory					
20	Drugs and medical supplies					
21	Taxidermy					
22	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts					
25	Other ► ( PAINT/DECOR. )	X	2		VENDOR CON	
26	Other ► ( <u>FOOD/BEVERAGE</u> )	X	2		VENDOR CON	
27	Other (FURNITURE)	X	1		VENDOR CON	
28	Other ► (PRIZES )	X	8	2,040.	VENDOR CON	NFIRMATION _
29	Number of Forms 8283 received by the organ for which the organization completed Form 82		-	1 1		9 Yes No
	During the year, did the organization receive to must hold for at least three years from the dat exempt purposes for the entire holding period of "Voo." describe the except purposes.	te of the initi	al contribution, an	d which isn't required to be ι	used for	
		noliov that	roquiron the roules	of any nanatondard access	utiono?	04 8
31	Does the organization have a gift acceptance					31 X
	Does the organization hire or use third parties contributions?	5.				32a X
33	If the organization didn't report an amount in describe in Part II.	column (c) f	or a type of proper	ty for which column (a) is che	ecked,	
LHA	For Paperwork Reduction Act Notice, see	e the Instru	ctions for Form 99	90.	Schedule	M (Form 990) (2016)

#### SCHEDULE O

Internal Revenue Servi

(Form 990 or 990-EZ)

Department of the Treasury

# 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 Open to Public

Inspection

Name of the organization

COLT DOMEON

Employer identification number

THE PHILLIPS COLLECTION   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 2, NEW PROGRAM SERVICES:
THE MUSEUM JOINED THE TOWN HALL EDUCATION ARTS AND RECREATION CAMPUS
(THEARC) AS A RESIDENT PARTNER. STEMMING DIRECTLY FROM THE MUSEUM'S
MISSION AND STRATEGIC GOALS, THE PHILLIPS@THEARC INITIATIVE PROVIDES

THE PHILLIPS WITH A SUPLEMENTAL EDUCATION SPACE THAT CONNECTS COMMUNITY WELL-BEING TO THE VISUAL ARTS FOR WASHINGTON INDIVIDUAL AND DC, RESIDENTS LIVING EAST OF THE ANACOSTIA RIVER IN 2018 PHILLIPS@THEARC WILL OPEN ITS DOORS WITH ARTS-INTEGRATED PROGRAMS CO-CREATED WITH THEARC PARTNERS IN A NEW INTERDISCIPLINARY WORKSHOP AND DISPLAY SPACE. THE PHILLIPS@THEARC LIVING ROOM GALLERY AND THE WORKSHOP WILL OFFER FREE ARTS-INFUSED SERVICES AND PROGRAMS WHERE RESIDENTS CAN ACTIVELY ENGAGE IN COMMUNITY-BASED ART, HISTORY, AND CULTURE WITH A CREATIVE TWIST.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: THE ACCLAIMED GERMAN ARTIST WHO HELPED CHRONICLE AND SHAPE THE POSTWAR IMAGE OF HIS COUNTRY. THE TOULOUSE-LAUTREC EXHIBITION WAS PRESENTED IN COLLABORATION WITH THE FINE ARTS MUSEUM OF MONTREAL ALL THREE MAJOR LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2016) 632211 08-25-16

EXHIBITIONS INCLUDED CATALOGUE PUBLICATIONS. THE MUSEUM'S INTERSECTION

SERIES FEATURED RENOWNED SCULPTRESS ARLENE SHECHET WITH A SIGNIFICANT

SELECTION OF HER OFF KILTER WORKS. OVER 5,000 K-12 STUDENTS WERE

REACHED DURING THE FISCAL YEAR THROUGH BOTH ONSITE TOURS AND THROUGH

OUR ACTIVITIES WITH AND WITHIN DC PUBLIC SCHOOLS. WE EXPERIENCED A 29%

INCREASE IN USERS FOR OUR PRISM K.12 WEBSITE. OUR CREATIVE AGING

PROGRAM WITH IONA CONTINUES TO PRODUCE EXCELLENT SENIOR EXHIBITIONS AND

WARM FEEDBACK FROM PARTICIPANTS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: PER EVENING AND FEATURED SUCH THEMES AS "NIGHT IN MONTMARTE" AND "MAIFEST." EACH EVENING OFFERS MUSIC, ART ACTIVITIES, VERY POPULAR GALLERY TALKS, AND FILMS, ARTIST PRESENTATIONS, OR OTHER EXPERIENTIAL PROGRAMS IN CONJUNCTION WITH OUR EMBASSY OR VENDOR PARTNERS. THE ANNUAL FAMILY FUN DAYS PRESENTED IN COLLABORATION WITH THE DC JAZZ FESTIVAL WELCOMED OVER 5,200 VISITORS FOR TWO DAYS OF LEARNING INVOLVING MUSIC, ART, STORYTELLING, AND CRAFTS. DURING THE MIGRATION SERIES EXHIBITION, WE LAUNCHED AN "OPEN CONVERSATIONS" SERIES IN THE GALLERIES AS A PLATFORM TO ENGAGE AUDIENCES (BOTH ONSITE AND OFF ON THE BROAD POLITICAL AND SOCIAL MOVEMENTS RELATED TO OUR EXHIBITIONS AND COLLECTION. ANOTHER PROGRAMMING HIGHLIGHT DURING FY17 WAS THE PRESENTATION OF FIVE EXTREMELY COMPELLING ORIGINAL ONE-ACT PLAYS COMMISSIONED FOR THIS PURPOSE AND INSPIRED BY MIGRATION SERIES PANELS. FAMILY FRIENDLY IN-GALLERY ACTIVITIES INCLUDED A "MAKE YOUR OWN POSTER" ACTIVITY IN TOULOUSE-LAUTREC, WHICH GARNERED MORE THAN 400 SUBMISSIONS IN THE FIRST MONTH. PROGRAMMATIC PARTNERSHIPS CONTINUE WITH MANY ARTISTIC ORGANIZATIONS INCLUDING WOLF TRAP, THE FOLGER SHAKESPEARE LIBRARY, AND VARIOUS DEPARTMENTS AT UMD.

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

LIBRARY AND ARCHIVES. THE HIGH QUALITY OF WORKS IN THE COLLECTION

PRESENTS MANY OPPORTUNITIES FOR COLLABORATION WITH OTHER MUSEUMS BOTH

FOR EXHIBITION PARTNERSHIPS AND FOR SHARING WORKS TO ENHANCE

EXHIBITIONS AT OTHER VENUES. THE PHILLIPS ALSO DEVELOPS EXHIBITIONS

WHICH TRAVEL TO OTHER VENUES TO GIVE THOSE LIVING OUTSIDE THE DC AREA

THE OPPORTUNITY TO ENJOY THE TREASURES WE HOLD. DURING FY17, PHILLIPS

COLLECTION EXHIBITIONS TRAVELED TO CALIFORNIA, TEXAS, AND DELAWARE AND

TO THE NEW MUSEUM BARBERINI IN POTSDAM AS THAT VENUE'S SECOND

EXHIBITION AFTER THE COMPLETED RENOVATION. INDIVIDUAL WORKS WERE LOANED

TO VARIOUS EXHIBITIONS AROUND THE WORLD.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: PUBLIC ACTIVITIES AND OUTREACH INCLUDING SPECIAL EVENTS, MEDIA AND MARKETING ACTIVITES, VISITOR AMENITIES, AND COMMUNITY RELATIONS. THE MUSEUM'S RENOWNED CONCERT SERIES CONTINUED WITH OUTSTANDING AND WIDELY-HAILED PERFORMANCES BY: RAHIM ALHAJ, VIRTUOSO OUD PLAYER; NADIA SIROTA AND LIAM BYRNE, WHO PERFORMED A PROGRAM OF CONTEMPORARY MUSIC CONCEIVED ON A LARGE SCALE; COMPOSER ZHOU LONG IN COLLABORATION WITH THE EMBASSY OF THE PEOPLE'S REPUBLIC OF CHINA,; ISABELLE FAUST, WHOSE BACH PERFORMANCE SOARED; STEWART GOODYEAR, WHO RETURNED TO THE PHILLIPS TO PERFORM THE NUTCRACKER; AND JEAN-GUIHAN OUEYRAS, WHO PERFORMED ALL SIX OF BACH'S CELLO SUITES. THE ANNUAL CONCERT SEASON PRESENTS APPROXIMATELY 30 SUCH IMPORTANT ARTISTS EACH YEAR. THE MUSEUM CONTINUES ITS EXTENSIVE LIST OF PARTNERSHIPS THROUGHOUT THE CITY, ADDING TO IT EACH YEAR. EXAMPLES INCLUDE THE CHERRY BLOSSOM FESTIVAL, THE GAY PRIDE FESTIVAL, VARIOUS EMBASSIES, LOCAL BREWMASTERS, ARTISTS, AND FOOD 632212 08-25-16 Schedule O (Form 990 or 990-EZ) (2016) PURVEYORS, THE DUPONT UNDERGROUND, AND BLUE STAR MUSEUMS. THE MUSEUM'S

SHOP AND CAFE CONTINUE AS "MUST DO" ACTIVITIES FOR VISITORS AND OUR

SOCIAL MEDIA PRESENCE GROWS MONTHLY WITH FY17 YEAR-END FOLLOWERS

TOTALING 26,800 FACEBOOK, 28,200 TWITTER, 21,300 INSTAGRAM, AND 500

SNAPCHAT. FY17 ONSITE ATTENDANCE TOTALED NEARLY 160,000, 25,000 ABOVE

BUDGET.

EXPENSES \$ 2,267,099. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,844,157.

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

TONI PAUL AND RONALD PAUL HAVE A FAMILY RELATIONSHIP. ONE HAS EXPERTISE IN THE EDUCATION FIELD AND THE OTHER IN CAMPAIGN FINANCE AND FUNDRAISING.

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

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:

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
632212 08-25-16 Schedule O (Form 990 or 990-EZ) (2016)

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:

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, BUDGET CAPACITY, 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 SUMMER 2017.

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

AL, AR, CA, CT, FL, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OR, PA, RI, SC, UT, VA, WV

WI

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

THE GOVERNING DOCUMENTS, AUDITED FINANCIAL STATEMENTS, AND CONFLICT OF

INTEREST POLICY ARE AVAILABLE BY REQUEST. THE AUDITED FINANCIAL STATEMENTS

ARE ALSO AVAILABLE IN SUMMARY FORM WITHIN THE MUSEUM'S MEMBER MAGAZINE EACH

YEAR. THE MOST RECENT AUDITED FINANCIAL STATEMENTS AND 990 ARE POSTED ON

THE MUSEUM'S WEBSITE.