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PUBLIC DISCLOSURE COPY

TAX RETURN FILING INSTRUCTIONS

** FORM 990 PUBLIC DISCLOSURE COPY **

FOR THE YEAR ENDING

JULY 31, 2021

Prepared for	
	THE PHILLIPS COLLECTION 1600 21ST STREET, NW WASHINGTON, DC 20009
Prepared by	GELMAN, ROSENBERG & FREEDMAN 4550 MONTGOMERY AVE SUITE 800N BETHESDA, MD 20814-2930
Amount due or refund	NOT APPLICABLE
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED.

			** PUBLIC DISCLOSURE COPY	* *			
	Ω		Return of Organization Exempt From	m l	ncome Tax		OMB No. 1545-0047
For	m IJ	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code	e (exc	ept private foundat		2020
Depa	rtment	of the Treasury	Do not enter social security numbers on this form as it is	-	-		Open to Public
Interr	nal Reve	enue Service	► Go to www.irs.gov/Form990 for instructions and the I			1	Inspection
		1		g J	· · · · ·		
B c	Check if pplicat	ble: C Name of	organization		D Employer ident	псат	on number
	Addr	ess THE	PHILLIPS COLLECTION				
	Name		siness as		53-0204	620	
	Initial	<u>~</u>	and street (or P.O. box if mail is not delivered to street address) Room	/suite	E Telephone numb	ber	
	Final returr	1600	21ST STREET, NW		(202)38	7-2	151
	termi ated	City or to	wn, state or province, country, and ZIP or foreign postal code		G Gross receipts \$		29,942,592.
	Amer	WASH	INGTON, DC 20009		H(a) Is this a group		
	Appli tion pend		d address of principal officer: DANI LEVINAS				Yes X No
	-	SAME	AS C ABOVE	-	H(b) Are all subordinates		
			X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	527			. See instructions
			PHILLIPSCOLLECTION.ORG	.,	H(c) Group exempt		
_		of organization:	X Corporation Trust Association Other ▶ L	Year	of formation: 1921	M St	ate of legal domicile: DC
Pa	art I						
e	1	Briefly describ	e the organization's mission or most significant activities: THE PHI MUSEUM OF MODERN AND CONTEMPORARY AR	<u></u>	PS COLLECT	TON	IS THE
Jan							
/err	2		if the organization discontinued its operations or disposed of		1		s. 30
ĝ	3		ing members of the governing body (Part VI, line 1a)			_	30
ø	4		ependent voting members of the governing body (Part VI, line 1b)				225
Activities & Governance	5		of individuals employed in calendar year 2020 (Part V, line 2a)			_	120
ţ	6		of volunteers (estimate if necessary)				44,532.
Ac			I business revenue from Part VIII, column (C), line 12				37,188.
		Net unrelated	ousiness taxable income from Form 990-T, Part I, line 11	<u> </u>			Current Year
		Contributions	and grants (Dart) (III line 1h)	-	Prior Year 6,034,132		11,092,248.
Revenue	8		and grants (Part VIII, line 1h)		1,942,366		1,191,051.
ver		•	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d)		2,252,378		5,351,842.
Be	10		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		272,331		118,647.
	12		add lines 8 through 11 (must equal Part VIII, column (A), line 12)		10,501,207		17,753,788.
	13		hilar amounts paid (Part IX, column (A), lines 1-3)	-	0	_	0.
	14		o or for members (Part IX, column (A), line 4)	-	0	-	0.
ß				-	7,229,634		7,148,945.
Expenses	16a	Professional fu	compensation, employee benefits (Part IX, column (A), lines 5-10) indraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) 1,652,071.		0	_	0.
per	b	Total fundraisi	and expenses (Part IX column (D) line 25) \blacktriangleright 1,652,071.		-		-
ш	17	Other expense	s (Part IX, column (A), lines 11a-11d, 11f-24e)		6,704,817	•	5,911,852.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)		13,934,451		13,060,797.
	19		expenses. Subtract line 18 from line 12		-3,433,244	•	4,692,991.
or			· · · · · · · · · · · · · · · · · · ·	_	ginning of Current Yea		End of Year
Net Assets or Fund Balances	20	Total assets (F	art X, line 16)		15,569,748		33,843,436.
ASt d Bő	21		(Part X, line 26)		14,764,313		13,534,911.
Fun	22		und balances. Subtract line 21 from line 20	1	00,805,435	. 1	20,308,525.
Pa	art II						
Und	er pen	alties of perjury, I	declare that I have examined this return, including accompanying schedules and s	tatem	ents, and to the best of	my kn	owledge and belief, it is
true	, corre	ct, and complete.	Declaration of preparer (other than officer) is based on all information of which pre	eparer	has any knowledge.		

Sign Here	Signature of officer CHERYL NICHOLS, CHIEF FINANCIAL OFFICER Type or print name and title	Date						
	Print/Type preparer's name Preparer's signature Date							
Paid	RICHARD J. LOCASTRO, CPA Rectard J. Locastro, 7/15	2022 self-employed P00288314						
Preparer	Firm's name 🕞 GELMAN, ROSENBERG & FREEDMAN	Firm's EIN 52-1392008						
Use Only	Firm's address 💊 4550 MONTGOMERY AVE SUITE 800N							
	BETHESDA, MD 20814-2930	Phone no. (301) 951-9090						
May the IF	May the IRS discuss this return with the preparer shown above? See instructions IV Yes IV No							
032001 12-2	3-20 LHA For Paperwork Reduction Act Notice, see the separate instructions.	Form 990 (2020)						

Check if Schedule Ocontains a response or note to any line in this Part III Direct Schedule Ocontains a response or note to any line in this Part III Direct Schedule Ocontains a response or note to any line in this Part III Direct Schedule Ocontains a response or note to any line in this Part III Direct Schedule Ocontains a response or note to any line in this Part III Direct Schedule Ocontains a response or note to any line in this Part III Direct Schedule Ocontains a response or note to any line in this Part III Direct Schedule Ocontains a response or note to any line in this Part III Direct Schedule Ocontains a response or note to any line in this Part III Direct Schedule Ocontains or Schedule Ocontains or Schedule Ocontains or note to any line in the rest or note of the three danges and response or Schedule Ocontains program services aconglethments for each of its three largest program services, as measured by expenses. Scients Site(Schedule Ocontains program service accomplethment for each of its three largest program services, as measured by expenses. Scients Site(Schedule Ocontains or program service accomplethment for each of its three largest program services are measured by expenses. Scients Site(Schedule Ocontains or service) 2, 724, 402. MandemEnt And Maintremanter Ocontains or service and allocations to others, the total expenses are reserved. Scient Site Contains and the response of th	orm	990 (2020) THE PHILLIPS COLLECTION	53-0204620	Pag
Bindly describe the organization's mission: THE PHILIPS COLLECTION IS THE OLDEST MUSEUM OF MODERN AND CONTEMPORARY ART IN THE U.S. IN ADDITION TO PRESENTATION OF WORKS FKK THE PERMANENT COLLECTION AND SPECIAL EXHIBITIONS, THE MUSEUM MAINTAIN ACTIVE EDUCATIONAL, ACADEMIC, (CONTINUED ON SCHEDULE O) Do the organization indertake any significant program services during the year which were not listed on the prof form 500 of 906/27 If 'Yea, 'dencribe these most services of schedule 0. Describe the organization cases conducting, or make significant changes in how it conducts, any program services, as measured by expense. 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 my, freech program service exported. (ManAceBMENT AND MAINTENANCE OF THE MUSEUM'S PERMANENT COLLECTION OF MEARLY 6, 000 WORKS WAS ORIGINALLY CREATED BEGINNING IN 1913 BY DUNCAN MANACeBMENT AND MAINTENANCE OF THE MUSEUM'S PERMANENT COLLECTION OF NEARLY 6, 000 WORKS WAS ORIGINALLY CREATED BEGINNING IN 1913 BY DUNCAN MANACeBMENT AND MAINTENANCE OF THE MUSEUM'S PERMANENT COLLECTION OF NEARLY 6, 000 WORKS WAS ORIGINALLY CREATED BEGINNING IN 1913 BY DUNCAN MANACEBMENT AND MAINTENANCE OF THE MUSEUM'S PERMANENT COLLECTION OF NEARLY 6, 000 WORKS WAS ORIGINALLY CREATED BEGINNING IN 1913 BY DUNCAN DIVERSIPY THE COLLECTION BEREACT THE MUSEUM'S PERMANENT COLLECTION FOR NEARLY 6, 000 WORKS WAS ORIGINALLY CREATED BEGINNING IN 1913 BY DUNCAN DIVERSIPY THE COLLECTION BEREACT THE MUSEUM'S THAT REFLECT A NARRATIVE MODERN AND CONTEMPORARY ART. ACQUISITION OF NEW WORKS THROUGH BOT GIFT AND PURCHASE, DIGITAL REPRODUCTION FOR PUBLICATIONS AND FOR PRESENTATION ON THE MUSEUM'S WEBSITE, ARTSTOR, GOOGLE ART, AND THE MULTI-MUSEUM APP ELOOMERER (CONNECTS, (CONTINUED ON SCHEDULE O) (CONTINUED ON SCHEDUCY S WEBSITE, ARTSTOR, GOOGLE ART, AND THE MULTI-MUSEUM APPENT AND FRANKING ENGRAGED WITH OUR AUDIENCES, DESPITE CLOSURES AND SCALED BACK VISITATION, THE	Par	t III Statement of Program Service Accomplishments		_
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Define organization inderates any significant program services during the year which were not listed on the prior form 990 or 990-E27 'Yes' (decribe these new services on Schedule 0.) Did the organization sease conducting, or make significant changes in how it conducts, any program services, as measured by expense. Describe the organization service accompletiments for each of its three largest program services, as measured by expense. Section 501(5) and 501(6) organizations are required to report the amount of grants and allocations to others, the total exponses, and revenue, fany, for each program service exponded. (core) functions 1, 7,724, 402. Incodesparence 1) [Newwork 471,55 MANAGEMENT AND MAINTENANCE OF THE MUSEUM'S DERMANENT COLLECTION OF NEARLY 6,000 WORKS WAS ORIGINALLY CREATED BEGINNING IN 1913 BY DUNCAN PHILLIPS AND LATER HIS WITE MARJORIE PHILLIPS AND OPENED TO THE PUBLI IN 1921 AS THE NATION'S FIRST MUSEUM OF MODERN AND CONTEMPORARY ART. OUR NEW ACQUISITIONS REFLECT THE MUSEUM'S EPERATED TO MARRATIVE MODERN AND CONTEMPORARY ART. AND AMERICAN ART AND SPEAK TO COMMUNITIES WE ARE WORKING TO SERVE. ACTIVITIES INCLUDE CONSERVATION, ACQUISITION OF NEW WORKS THEOUGH BOT GIFT AND PURCHASE, DIGITAL REPRODUCTION FOR PUBLICATIONS AND FOR PRESENTATION ON THE MUSEUM'S WEBSITE, ARTSTOR, GOOGLE ART, AND THE MULTI-MUSEUM APP BLOOMERER CONNECTS. (CONTINUED ON SCHEDULE 0) (core) [Newworks 2,844,469. Includespared 1] [Newworks 1124,55] (THE PHILIPS COLLECTION RWEILES CONNECTS. (CONTINUED ON SCHEDULE 0) (core) [Newworks 2,844,469. Includespared 1] [Newworks 1124,55] (THE PHILIPS COLLECTION NEML RESIDE. (CONTINUED ON SCHEDULE 0) (core) [Newworks 2,844,469. Includespared 1] [Newworks 1124,55] (DITI-MUSEUM APP ELCOMBERER CONNECTS. (CONTINUED ON SCHEDULE 0) (core) [Newworks 2,844,469. Includespared 1] [Newworks 1124,55] (DITIENTATIONS PARFLEXENT NO MARCH 2020 WITH OUR ADDIENCE INSPIRE (DISURES AND SCALED BACK VISITATION, THROUGH DIGITAL PROGRAMS AND (CULTURAL ARTS PARTNERSHIP IN MARCH 2020 WITH OU				
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(Expenses \$ 1,481,459.including grants of \$) (Revenue \$ 687.) e Total program service expenses ▶ 9,859,684. 1002 12-23-20 SEE SCHEDULE O FOR CONTINUATION(S) 2				
e Total program service expenses 9,859,684. 002 12-23-20 SEE SCHEDULE O FOR CONTINUATION(S) 2 2	ŧd		607	
Form 990 SEE SCHEDULE O FOR CONTINUATION(S) 2			681.)	
NOD2 12-23-20SEE SCHEDULE O FOR CONTINUATION(S)2	1e	Total program service expenses 9,859,684.		
2				990 (2
-	32002		S)	
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Form 990 (2020)

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	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		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	х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
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	10		
	as applicable.			
2	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a		11a	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a	- 23	<u> </u>
D		11b	х	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		23	
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	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			x
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	v	<u> </u>
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	Х	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37
	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
	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			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	<u> </u>
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			
	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			
	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,			
	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			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	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		Х
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Form	990	(2020)
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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
3	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If</i> " <i>Yes</i> ," <i>answer lines 24b through 24d and complete</i>			
	Schedule K. If "No," go to line 25a	24a	Х	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
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		x
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
5a	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? <i>If "Yes," complete Schedule L, Part I</i>	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			<u></u>
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
7	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			v
8	entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		X
а	instructions, for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?If	00-		x
9	"Yes," complete Schedule L, Part IV	28c 29	Х	
)	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30	x	
1	contributions? If "Yes," complete Schedule M	31		x
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete</i>	32		x
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 02		
-	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
	Part V, line 1	34		X X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		
b	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
Par	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
		-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	х	
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Form 990 (2	2020)	THE	PHILLIPS	COLLECTION	
Part V	Statements	Regard	ing Other IRS	Filings and Tax (Compliance (continued)

			Yes	No			
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 225						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х				
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х				
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)?	4a		X			
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).	_		v			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X X			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b					
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c					
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6a		x			
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ud		- 23			
D		6b					
7	Organizations that may receive deductible contributions under section 170(c).	00					
' 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 7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X X			
f	• • • • • • • • • • • • • • • • • • •						
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?						
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?						
8							
	sponsoring organization have excess business holdings at any time during the year?						
9	Sponsoring organizations maintaining donor advised funds.						
a	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b					
10	Section 501(c)(7) organizations. Enter:						
a ⊾	Initiation fees and capital contributions included on Part VIII, line 12 <u>N/A</u> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b						
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter:						
	Gross income from members or shareholders N/A 11a						
a h	Gross income from members or shareholders <u>N/A</u> <u>11a</u> 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					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state? ${ m N/A}$	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 13b						
	Enter the amount of reserves on hand 13c			37			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	4-		v			
	excess parachute payment(s) during the year?	15		X			
16	If "Yes," see instructions and file Form 4720, Schedule N.	16		x			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	10					

Form **990** (2020)

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Form 990 (2	2020)
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THE PHILLIPS COLLECTION

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 on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI					Σ
Sec	tion A. Governing Body and Management					_
			1	~ ~	Yes	5 N
1a	Enter the number of voting members of the governing body at the end of the tax year	1 a		30		
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			2.0		
b	Enter the number of voting members included on line 1a, above, who are independent	-		30		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	nip with	any other			
	officer, director, trustee, or key employee?			2	<u> </u>	
3	Did the organization delegate control over management duties customarily performed by or under the	he dire	ct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?					
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa	as filed?			
5	Did the organization become aware during the year of a significant diversion of the organization's a	ssets?		5		
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	appoint	one or			
	more members of the governing body?			7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	persons other than the governing body?			7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	ear by th	e following:			
а	The governing body?			8a		
b	Each committee with authority to act on behalf of the governing body?				X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re					
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		
ec	tion B. Policies (This Section B requests information about policies not required by the Internal					
					Yes	
0a	Did the organization have local chapters, branches, or affiliates?			10a	a 🗌	
	If "Yes," did the organization have written policies and procedures governing the activities of such					
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10	s	
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing bo				-	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	-	-			
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12	a X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris					\top
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If					\top
-	in Schedule O how this was done			120	x	
3	Did the organization have a written whistleblower policy?					+
4	Did the organization have a written document retention and destruction policy?					
5	Did the process for determining compensation of the following persons include a review and appro			···		
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision					
2	The organization's CEO, Executive Director, or top management official			15	a x	
	Other officers or key employees of the organization				-	+
IJ	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				·	
6-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang	amont .	vith a			
Jd				16		
F	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu			16a	1	
α			-			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org					
00	exempt status with respect to such arrangements?			161)	
		0				
7	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright SEE SCHEDULE			a)(0)-	h.d. =:	Jul - 1
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990,	ano 990	J-1 (Section 501)	ပ)(၁)S Or	ny) ava	anat
	for public inspection. Indicate how you made these available. Check all that apply.					
-	X Own website Another's website X Upon request Other (explain					
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents,	conflict	of interest policy	, and fin	ancial	
_	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 be $(202) 297 - 2151$	ooks ar	nd records 🕨 _			
	CHERYL NICHOLS - (202)387-2151					
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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensate	ed
	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.

See instructions for the order in which to list the persons above.

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

(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	(do	not c		ition more		one	Reportable	Reportable	Estimated
	hours per	box	, unle cer an	ss pe	rson i	s botl	h an	compensation	compensation	amount of
	week						(00)	from	from related	other
	(list any hours for	directo				-		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	ee or	stee			nsate		(W-2/1099-MISC)		organization
	organizations	Itrust	ial tru		oyee	ompe				and related
	below	Individual trustee or director	Institutional trustee	Ser	Key employee	Highest compensated employee	Former			organizations
	line)	Indi	Inst	Officer	Key	Higlemp	Fori			
(1) DOROTHY KOSINSKI	60.00							224 605	0	
VRADENBURG DIRECTOR AND CEO	45 00			X				324,685.	0.	68,620.
(2) KLAUS OTTMANN	45.00							186 530	0	00 400
CHIEF CURATOR & DEPUTY DIRECTOR	45 00				Х			176,532.	0.	28,482.
(3) WENDY PONVERT	45.00							100 000	0	
DIRECTOR OF DEVELOPMENT	45 00					Х		126,626.	0.	25,906.
(4) CHERYL NICHOLS	45.00							110 000		20.265
CFO	45 00			X				119,988.	0.	30,365.
(5) MICHELE WINKLER THOMAS	45.00							100 640		F 010
DIR. OF SRATEGY & OPERATIONS	45 00					X		130,642.	0.	5,210.
(6) DARCI VANDERHOFF	45.00							100 000	0	00 01 7
CHIEF INFORMATION OFFICER	45 00					X		100,986.	0.	22,917.
(7) MAKEBA CLAY-BARNOR	45.00							100 000	0	10 245
CHIEF DIVERSITY OFFICER	45 00					X		100,286.	0.	19,345.
(8) KEITH COSTAS	45.00							100 000	0	10 000
SPECIAL EVENTS DIRECTOR	2 00					X		100,026.	0.	13,776.
(9) DANI LEVINAS	3.00							0	0	0
CHAIR	1 00	X		X				0.	0.	0.
(10) TODD GALAIDA	1.00	37						0	0	0
VICE CHAIR	1 00	X		X				0.	0.	0.
(11) SALA PATTERSON	1.00	37						0	0	0
VICE CHAIR	1.00	Х		X				0.	0.	0.
(12) AMY MEADOWS	1.00	x		x				0.	0.	0
SECRETARY	2.00	^		^				0.	0.	0.
(13) KATHLEEN PETITT	2.00	x		x				0.	0.	0.
TREASURER	1.00	^		<u>^</u>				0.	0.	0.
(14) PATTY ALPER-COHN	1.00	x						0.	0.	0.
TRUSTEE (15) BARBARA BERISH BROWN	1.00	^						0.	0.	0.
	1.00	x						0.	0.	0.
TRUSTEE	1.00	Δ						0.	0.	0.
(16) SUSAN L. BUTLER	1.00	x						0.	0.	0.
TRUSTEE (17) JANE CHU	1.00	^						0.	0.	U •
	1.00	x						0.	0.	0.
TRUSTEE		Δ		L				0.	0.	
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Part VII Section A. Officers, Directors, Trus		ploy	ees			ighe	st C	Compensated Employe	es (continued)			
(A)	(B)			•	C)			(D)	(E)		(F)	
Name and title	Average	(do				1 e than	one	Reportable	Reportable		Estimate	эd
	hours per	box	, unle	ss pe	erson	is bot	h an	compensation	compensation		amount	of
	week	<u> </u>	cer an	id a d	irecto	or/trus	itee)	from	from related		other	
	(list any	ector						the	organizations		compensa	
	hours for related	or di	e,			ated		organization	(W-2/1099-MISC)	from th	
	organizations	ustee	truste		e	pens		(W-2/1099-MISC)			organizat	
	below	ual tri	onal		ploye	tcom					and relat organizati	
	line)	ndividual trustee or director	nstitutional trustee	Officer	ƙey employee	Highest compensated employee	Former				organizati	0115
(18) JOHN DESPRES	2.00	<u> </u>	<u> </u>	ò	l ₹	포뇽	Ē			_		
TRUSTEE	2.00	x						0.		0.		0.
(19) ROBERT DRUMHELLER	1.00									<u> </u>		<u> </u>
TRUSTEE	1.00	x						0.		0.		0.
(20) NINA CHUNG DWYER	1.00									<u> </u>		
TRUSTEE	1.00	x						0.		0.		0.
(21) LINDSAY ELLENBOGEN	1.00									<u> </u>		
TRUSTEE	1.00	x						0.		0.		0.
(22) JULIE GARCIA	1.00									<u> </u>		<u> </u>
TRUSTEE	1.00	x						0.		0.		0.
(23) PAMELA GWALTNEY	1.00									<u> </u>		<u> </u>
TRUSTEE	1.00	x						0.		0.		0.
(24) BARBARA HALL	1.00				-	+				<u></u>		
TRUSTEE	1.00	x						0.		0.		0.
(25) BONNIE BURKE HIMMELMAN	1.00									<u> </u>		<u> </u>
TRUSTEE	1.00	x						0.		0.		0.
(26) LYNNE N. HORNING	1.00									<u> </u>		<u> </u>
TRUSTEE	1.00	x						0.		0.		0.
								1,179,771.			214,6	
1b Subtotal								0.		0.	214,0	$\frac{21}{0}$
c Total from continuation sheets to Part VI								1,179,771.		-	214,6	
d Total (add lines 1b and 1c)										J•	214,0	<u> </u>
2 Total number of individuals (including but n	ot limited to tr	lose	liste	ed a	bov	e) wi	no r	eceived more than \$100	,000 of reportable			0
compensation from the organization											Yes	8 No
											Tes	NO
3 Did the organization list any former officer,	,				,		-		,			x
line 1a? If "Yes," complete Schedule J for s										-	3	
4 For any individual listed on line 1a, is the su								•	•		4 X	
and related organizations greater than \$150										⊨	4 X	<u> </u>
5 Did any person listed on line 1a receive or a	•							•			-	x
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedul	eJf	or si	JCh	pers	son .					5	Δ
•									<u></u>			
1 Complete this table for your five highest co										ensat	tion from	
the organization. Report compensation for	the calendar y	ear	enai	ng v	Nith	or w	π I		/ear.		(0)	
(A) Name and business	address							(B) Description of s	ervices	Co	(C) mpensatio	n
CROZIER FINE ARTS, INC.							_				mperiodilo	
P.O. BOX 21089, NEW YORK	NV 100	ายา	7					ART HANDLING			272,3	81
CARRIER CORPORATION	, 11 100		/				-1	AKI HANDIING			212,3	01.
P.O. BOX 93844, CHICAGO,	TT. 606'	73						HVAC CONTRAC			188,3	00
DYSON CAPITAL ADVISORS, 2			TTN	<u></u>		qr		INVESTMENT	11109		100,5	00.
#300, ALEXANDRIA, VA 223			01	ч т (514	р.		CONSULTANT			166,4	91
BYT MEDIA, INC.							MEDIA STRATE	CV L		100,4	<u> </u>	
								143,5	75			
R&V CONTRACTORS		N /	<u> </u>		20	0.51	-				145,5	15.
3244 HOLLY BERRY CT, FALL	LS CHUR	СН	, τ	7A	2	204	12	GENERAL CONT	RACTOR		120,7	00.
2 Total number of independent contractors (i												
\$100,000 of compensation from the organi						7	~					
SEE PART VII, SECTION	N A CON	L T J	NUZ	ΥT.	TOI	N S	SH.	EETS		F	orm 990 (;	2020)
032008 12-23-20						8						
						0						

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Form 990 THE PHIL	LIPS CO	LL	ECI		ON				53-020	4620
Part VII Section A. Officers, Directors, Tr	ustees, Key Ei	nplo	nployees, and Highest					Compensated Employ	ees (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(cl	neck	all	that	app	ly)	compensation	compensation	amount of
	per					a.		from	from related	other
	week (list any	j.				ploye		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direct				d em		(W-2/1099-MISC)	(1033-10100)	organization
	related	ee or	Istee			en sate				and related
	organizations	l trus	nal tru		oyee	0 mb				organizations
	below	Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	Former			
	line)	Ind	Inst	Officer	Key	Hig	For			
(27) PAUL KILLIAN	1.00								0	0
TRUSTEE	1 00	X						0.	0.	0.
(28) MICHELINE KLAGSBRUN	1.00	x						0.	0.	0.
TRUSTEE (29) HOWARD KRASS	1.00	<u> </u>						0.	υ.	0.
(29) HOWARD KRASS TRUSTEE	1.00	x						0.	0.	0.
(30) B. THOMAS MANSBACH	1.00	^						0.	0.	0.
TRUSTEE	1.00	x						0.	0.	0.
(31) A. FENNER MILTON	1.00								0.	0.
TRUSTEE	1.00	x						0.	0.	0.
(32) JUANITA MOORE	1.00							•••	•••	•••
TRUSTEE		x						0.	0.	0.
(33) RONALD A. PAUL	1.00									
TRUSTEE		x						0.	0.	0.
(34) HARVEY ROSS	2.00									
TRUSTEE		X						0.	Ο.	0.
(35) THOMAS D. RUTHERFOORD, JR	1.00									
TRUSTEE		Х						0.	0.	0.
(36) ALICE PHILLIPS SWISTEL	1.00									
TRUSTEE		X						0.	0.	0.
(37) ELIZABETH WILLIAMS	1.00								0	0
TRUSTEE		X						0.	0.	0.
(38) LEO E. ZICKLER	2.00								0	0
TRUSTEE		X						0.	0.	0.
		<u> </u>								
		1								
Total to Part VII, Section A, line 1c										

032201 04-01-20

			Check if Schedule O d	cont	ains a res	ponse	or note to any lin	e in this Part VIII		<u></u>	
								(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated	(D) Revenue excluded
its its	1	а	Federated campaigns		1a						
Contributions, Gifts, Grants and Other Similar Amounts	-		Membership dues			-	514,068.				
Ang Ba			Fundraising events			:	285,117.				
Sift: ar /			Related organizations			I					
inil,			Government grants (contr				2,238,756.				
tion S		f	All other contributions, gifts,	gran	ts, and						
the			similar amounts not included	abo	ve 1f		8,054,307.				
d off		g	Noncash contributions included in	lines	1a-1f 10	\$	1,091,662.				
au		h	Total. Add lines 1a-1f				►	11,092,248.			
							Business Code				
e	2	а	MEMBERSHIP DUES				900099	789,607.	789,607.		
Program Service Revenue		b	FEES FROM EXHIBITION	NS/	LOANED	ART	900099	242,357.	242,357.		
n Se		С	VISITOR FEES				900099	153,522.	153,522.		
ran Rev		d	FACILITY/EQUIP RENT				900099	4,878.	4,878.		
Log F		е	EDUCATIONAL PROGRAM				900099	687.	687.		
<u>م</u>		f	All other program service	reve	enue						
		g						1,191,051.			
	3 Investment income (including dividends, interest, and										
			other similar amounts)					830,955.		44,532.	786,423
	4		Income from investment of				F				
	5		Royalties					15,611.			15,611
	_		_		(i) R	eal	(ii) Personal				
	6		Gross rents	6a							
			Less: rental expenses	6b							
			Rental income or (loss)	6c							
	-		Net rental income or (loss)) <u></u>	(i) Secu		(ii) Other				
	'	а	Gross amount from sales of assets other than inventory	7-	16,527						
		h	Less: cost or other basis	78	10,521	,055.	, 				
ē		D	and sales expenses	76	12,006	746					
ther Revenue		~			4,520						
Jev			Net gain or (loss)					4,520,887.			4,520,887
er	0		Gross income from fundraisir			····	·····	1,520,007.			1,520,007
f	0	a	including \$								
Ŭ			contributions reported on								
			Part IV, line 18		,	8a	25,000.				
		h	Less: direct expenses				<u> </u>				
			Net income or (loss) from				, · ·	-16,651.			-16,651
	9		Gross income from gamin		-			,			,
	-		Part IV, line 19	-							
		b	Less: direct expenses								
			Net income or (loss) from								
	10		Gross sales of inventory, I								
			and allowances			10a	260,051.				
		b	Less: cost of goods sold				140,407.				
		с	Net income or (loss) from	sale	s of inver	tory	►	119,644.	119,644.		
s							Business Code				
Miscellaneous Revenue	11	а	MISCELLANEOUS				900099	43.			43
enu		b									
se le		с									
Mis			All other revenue								
		е	Total. Add lines 11a-11d				►	43.			
	12		Total revenue. See instructio	ns			►	17,753,788.	1,310,695.	44,532.	5,306,313
03200	a 12	- 22	-20								Form 990 (2020

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10 2020.05095 THE PHILLIPS COLLECTION

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THE PHILLIPS COLLECTION

Form 990 (2020) THE PHI Part VIII Statement of Revenue THE PHILLIPS COLLECTION

iecti	on 501(c)(3) and 501(c)(4) organizations must comp		-		
	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
2	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
•	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
-	trustees, and key employees	886,706.	638,770.	111,272.	136,66
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	4,866,647.	3,887,702.	171,679.	807,26
8	Pension plan accruals and contributions (include				
-	section 401(k) and 403(b) employer contributions)	213,203.	147,237.	11,638.	54,32
9	Other employee benefits	666,509.	502,776.	20,899.	142,83
0	Payroll taxes	515,880.	385,149.	28,837.	101,89
1	Fees for services (nonemployees):				
а	Management				
	Legal				
	Accounting	20,958.		20,958.	
	Lobbying	18,117.		_	18,11
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	202,390.		202,390.	
g	Other. (If line 11g amount exceeds 10% of line 25,			_	
Ű	column (A) amount, list line 11g expenses on Sch O.)	778,361.	602,098.	29,494.	146,76
2	Advertising and promotion	264,750.	255,026.	9,724.	
3	Office expenses	767,179.	612,329.	54,865.	99,98
4	Information technology	367,772.	272,212.	61,487.	34,07
5	Royalties	408.	408.	_	
6	Occupancy	605,227.	261,107.	334,975.	9,14
7	Travel	33,598.	25,726.	7,590.	28
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
0	Interest	460,421.	345,484.	101,259.	13,67
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	1,277,311.	883,210.	359,134.	34,96
3	Insurance	273,369.	253,174.	17,038.	3,15
1	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	OTHER EXHIBITION EXP.	574,475.	568,998.	1,232.	4,24
b	PURCHASES OF ART	199,583.	199,583.		-
с	EVENTS	67,301.	20,099.	2,535.	44,66
d	MISCELLANEOUS	632.	-1,404.	2,036.	
е	All other expenses				
	Total functional expanses Add lines 1 through 24a	13 060 797	9 859 684	1 5/9 0/2	1 652 07

13,060,797. Total functional expenses. Add lines 1 through 24e 25 $\ensuremath{\textit{Joint costs}}$. Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here _____ if following SOP 98-2 (ASC 958-720)

032010 12-23-20

18180622 745960 25457

11 2020.05095 THE PHILLIPS COLLECTION

9,859,684.

1,549,042.

Form **990** (2020)

1,652,071.

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18180622 745960 25457

33

Total liabilities and net assets/fund balances

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

THE PHILLIPS COLLECTION

	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	1,303,405.	2	572,183.
	3	Pledges and grants receivable, net	8,746,944.	3	8,741,424.
	4	Accounts receivable, net	148,494.	4	559,389.
	5	Loans and other receivables from any current or former officer, director,			
	-	trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined		Ū	
	Ŭ	1000000000000000000000000000000000000		6	
6	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	354,781.	8	382,938.
As	9	Prepaid expenses and deferred charges	320,998.	9	315,591.
		Land, buildings, and equipment: cost or other	52075501	3	515,5511
	10a	basis Complete Part VI of Schedule D 50 637 785.			
	h	basis. Complete Part VI of Schedule D10a50,637,785.Less: accumulated depreciation10b19,967,850.	31,560,973.	10c	30,669,935.
	11		36,868,103.	11	57,815,101.
	12	Investments - publicly traded securities	36,266,050.	12	34,786,875.
	13	Investments - program-related. See Part IV, line 11	50,200,050.	13	54,700,0750
	14			14	
		Intangible assets		14	
	15	Other assets. See Part IV, line 11	115,569,748.	15	133,843,436.
	16 17	Total assets. Add lines 1 through 15 (must equal line 33)	1,083,179.	17	1,175,558.
	18	Accounts payable and accrued expenses	1,000,179.	18	1,1,5,550.
	19	Grants payable	332,711.	19	88,881.
	20	Deferred revenue	7,969,202.	20	7,144,829.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	21	,,,
(0	22	Loans and other payables to any current or former officer, director,		21	
itie	~~	trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities				22	
Lia	23	controlled entity or family member of any of these persons		22	
	23 24	Unsecured notes and loans payable to unrelated third parties	5,206,586.	23	5,011,326.
	25	Other liabilities (including federal income tax, payables to related third	5,200,0000	27	0,011,0100
	25	parties, and other liabilities not included on lines 17-24). Complete Part X			
			172,635.	25	114,317.
	26	of Schedule D Total liabilities. Add lines 17 through 25	14,764,313.	26	13,534,911.
	20	Organizations that follow FASB ASC 958, check here \blacktriangleright X		20	
sec		and complete lines 27, 28, 32, and 33.			
ances	27	Net assets without donor restrictions	27,820,833.	27	29,422,140.
	28	Net assets with donor restrictions	72,984,602.	28	90,886,385.
pu	_0	Organizations that do not follow FASB ASC 958, check here	, ,		
μĽ		and complete lines 29 through 33.			
Net Assets or Fund Bal	29	Capital stock or trust principal, or current funds		29	
sets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ast	31	Retained earnings, endowment, accumulated income, or other funds		31	
Vet	32	Total net assets or fund balances	100,805,435.	32	120,308,525.
~			115 560 7/9		122 012 126

1

(A) Beginning of year **(B)** End of year

Form 990 (2020)

1

Part X Balance Sheet

133,843,436.

Form 990 (2020)

33

115,569,748.

Form	990 (2020) THE PHILLIPS COLLECTION	53	-02046	520	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
	· · ·					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	17	,753	3,7	88.
2	Total expenses (must equal Part IX, column (A), line 25)	2	13	,060),7	97.
3	Revenue less expenses. Subtract line 2 from line 1	3	4	,692	2,9	91.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	100	,80!	5,4	35.
5	Net unrealized gains (losses) on investments	5	14	,810),0	99.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	120	,308	3,5	25.
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	в,			
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audi	,		x	
	review, or compilation of its financial statements and selection of an independent accountant?					
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule	O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	udit			ĺ
	Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	ıdit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2020)

032012 12-23-20

SCHEDULE A

Department of the Treasury

Internal Revenue Service

L

(Form	990	or	990-EZ)	
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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

►	Go to www.irs.gov/Form990 for instructions and the latest information.

	OMB No. 1545-0047
1	2020
	Open to Public Inspection
Employer	identification number

Name of the organization

			THE	PHILLIPS C	OLLECTION				5	3-0204620
Pa	rt		Reason for Public			omplete ti	his part.) S	See instruction		
The	org	aniz	zation is not a private found	lation because it is: (For lines 1 through 12, c	heck only	one box.)			
1	Ľ		A church, convention of ch		•		,			
2			A school described in sect i					~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
3			A hospital or a cooperative					ii).		
4			A medical research organiz					-	.)(iii). Enter	the hospital's name,
			city, and state:	·						
5			An organization operated for	or the benefit of a co	llege or university owned	d or opera	ted by a g	overnmental	unit describ	oed in
			section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6			A federal, state, or local gov	vernment or governn	nental unit described in :	section 17	70(b)(1)(A)	(v).		
7	X	[An organization that norma	Ily receives a substa	Intial part of its support f	rom a gov	ernmental	unit or from t	the general	public described in
			section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8			A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9			An agricultural research org				ed in conju	unction with a	land-grant	college
			or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, cit	y, and state o	f the colleg	je or
			university:							
10			An organization that norma	Ily 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 exen	npt functions, subjec	ct to certain exceptions;	and (2) no	more that	n 33 1/3% of	its support	from gross investmen
			income and unrelated busir	ness taxable income	(less section 511 tax) fr	om busine	esses acqu	ired by the o	rganization	after June 30, 1975.
			See section 509(a)(2). (Cor	mplete Part III.)						
11			An organization organized a	and operated exclusi	ively to test for public sa	afety. See	section 50	09(a)(4) .		
12			An organization organized a	and operated exclusi	ively for the benefit of, to	perform	the function	ons of, or to c	arry out the	e purposes of one or
			more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section	509(a)(3). 🤇	Check the box in
	-		lines 12a through 12d that	describes the type o	of supporting organizatio	n and con	nplete line:	s 12e, 12f, an	d 12g.	
а	L		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its sup	ported or	ganization(s),	typically by	/ giving
			the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or truste	ees of the s	supporting
	Г		organization. You must o	complete Part IV, Se	ections A and B.					
b	L		Type II. A supporting org	anization supervised	l or controlled in connec	tion with it	ts support	ed organizatio	on(s), by ha	aving
			control or management o			ame perso	ons that co	ontrol or mana	age the sup	pported
	г		organization(s). You mus							
С	L		Type III functionally inte						ally integrate	ed with,
_	г		its supported organizatio							
d	L		Type III non-functionally						· ·	. ,
			that is not functionally int	с С	c			•	d an attent	iveness
	Г		requirement (see instruct	•	•					
е	L		Check this box if the orga					а туре ї, турє	e II, Type III	
£	Б	nto	functionally integrated, or the number of supported of		many integrated support	ing organi.	zation.			
י מ			de the following information	•	d organization(s)					
9	<u> </u>		Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	inization listed	(v) Amount o	f monetary	(vi) Amount of other
		.,	organization		(described on lines 1-10 above (see instructions))	Yes	ng document?	support (see in	nstructions)	support (see instructions
Fota	al									

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2020.05095 THE PHILLIPS COLLECTION

Schedule A (Form 990 or 990-EZ) 2020 THE PHILLIPS COLLECTION

53-0204620 Page 2

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	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	8,922,034.	7,790,290.	15,584,489.	6,034,132.	11,092,248.	49,423,193.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	8,922,034.	7,790,290.	15,584,489.	6,034,132.	11,092,248.	49,423,193.	
	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)						7,811,700.	
6	Public support. Subtract line 5 from line 4.						41,611,493.	
	ction B. Total Support						41,011,493.	
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 0017	(a) 2019	(4) 2010	(a) 2020	(f) Total	
	Amounts from line 4	(a) 2016 8,922,034.	(b) 2017 7,790,290.	(c)2018	(d) 2019 6,034,132.	(e) 2020 11,092,248.	49,423,193.	
		0,522,054.	7,750,250.	13,304,403.	0,034,132.	11,052,240.	47,423,193.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,	544,680.	766,963.	1,317,969.	740,728.	802,034.	1 1 7 2 7 1	
•	and income from similar sources	544,000.	700,905.	1,317,909.	740,720.	002,054.	4,172,374.	
9	Net income from unrelated business							
	activities, whether or not the	13,874.	46,021.	43,968.	24,097.	37,188.	165,148.	
	business is regularly carried on	13,0/4.	40,021.	43,900.	24,097.	57,100.	105,140.	
10	Other income. Do not include gain							
	or loss from the sale of capital	736.	876.	1,103.	259.	43.	3,017.	
	assets (Explain in Part VI.)	130.	070.	1,103.	259.	43.		
	Total support. Add lines 7 through 10		,			15	53,763,732. ,830,480.	
12							,030,400.	
13	First 5 years. If the Form 990 is for th		rst, second, third, t	fourth, or fifth tax	year as a section 5	501(c)(3)		
<u> </u>	organization, check this box and stor							
	ction C. Computation of Publ						77.40 %	
	Public support percentage for 2020 (•			14	<u> </u>	
	15 Public support percentage from 2019 Schedule A, Part II, line 14 15 64.97 %							
16a	16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and							
	stop here. The organization qualifies as a publicly supported organization							
b	b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box							
	and stop here. The organization qual						▶∟	
17a	10% -facts-and-circumstances tes	t - 2020. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,	
	and if the organization meets the fact			-	-	VI how the organiz	ation	
	meets the facts-and-circumstances te	•		• • • •	•			
b	10% -facts-and-circumstances tes	t - 2019. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or ⁻	17a, and line 15 is	10% or	
	more, and if the organization meets the	ne facts-and-circun	nstances test, che	ck this box and st	op here. Explain ir	n Part VI how the	·	
	organization meets the facts-and-circ	umstances test. Th	ne organization qu	alifies as a publicly	y supported organ	ization	▶∟	
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17t				
					0.1.	dulo A (Earm 990	000 571 0000	

Schedule A (Form 990 or 990-EZ) 2020

032022 01-25-21

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Schedule A (Form 990 or 990 EZ) 2020 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 qualify under the tests listed below, please complete Part II.)

Calendar year (or fiscal year beginr	ing in) ▶ (a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 202	0 (f) Total
1 Gifts, grants, contributions,		1				,
membership fees received.						
include any "unusual grants						
2 Gross receipts from admiss						
merchandise sold or service						
formed, or facilities furnishe						
any activity that is related to organization's tax-exempt p						
3 Gross receipts from activitie						
are not an unrelated trade of						
iness under section 513						
4 Tax revenues levied for the	organ-					
ization's benefit and either	-					
ar avpanded on its babalf						
5 The value of services or fac						
furnished by a governmenta						
the organization without cha						
6 Total. Add lines 1 through 5		+				
7a Amounts included on lines		+				
3 received from disqualified						
b Amounts included on lines 2 and 3 re	•	+				
from other than disqualified persons	that					
exceed the greater of \$5,000 or 1% c amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c fr						
Section B. Total Support						
alendar year (or fiscal year beginr		(b) 2017	(c) 2018	(d) 2019	(e) 202	0 (f) Total
9 Amounts from line 6			(0, 2010	(0) = 0 + 0	(0, _0_	
10a Gross income from interest, dividends, payments receiv securities loans, rents, roya and income from similar sou	ed on ties,					
b Unrelated business taxable inco						
(less section 511 taxes) from b						
, acquired offer Jupe 20 107E						
c Add lines 10a and 10b						
 Net income from unrelated activities not included in line whether or not the business regularly carried on 	ousiness e 10b,					
12 Other income. Do not includ		1				
or loss from the sale of capi assets (Explain in Part VI.)						
I3 Total support. (Add lines 9, 10c, 1		1				
14 First 5 years. If the Form 99		first. second. third.	fourth. or fifth tax	vear as a section	501(c)(3) ora	anization.
check this box and stop he	•			•)
Section C. Computation	of Public Support Po	ercentage				
15 Public support percentage	or 2020 (line 8, column (f),	divided by line 13,	column (f))		15	(
16 Public support percentage	rom 2019 Schedule A, Pa	rt III, line 15			16	ç
Section D. Computation						
	age for 2020 (line 10c, colu	umn (f), divided by I	ine 13, column (f))		17	(
17 Investment income percent					18	(
18 Investment income percent		not check the box	on mo 14, and mit		,	
19a 33 1/3% support tests - 20	20. If the organization did			upported organiza	ation	
 Investment income percent 19a 33 1/3% support tests - 20 more than 33 1/3%, check 	20. If the organization did this box and stop here. The	e organization qual	fies as a publicly s			►
 18 Investment income percent 19a 33 1/3% support tests - 20 more than 33 1/3%, check to b 33 1/3% support tests - 20 	220. If the organization did this box and stop here. The D19. If the organization did	e organization quali not check a box or	fies as a publicly s n line 14 or line 19a	a, and line 16 is m	ore than 33 1	/3%, and
 18 Investment income percent 19a 33 1/3% support tests - 20 more than 33 1/3%, check is b 33 1/3% support tests - 20 line 18 is not more than 33 	20. If the organization did this box and stop here. The D19. If the organization did 1/3%, check this box and s	e organization quali not check a box or stop here. The orga	fies as a publicly s n line 14 or line 19a nization qualifies a	a, and line 16 is mo is a publicly suppo	ore than 33 1 orted organiz	/3%, and ation ▶
 18 Investment income percent 19a 33 1/3% support tests - 20 more than 33 1/3%, check is b 33 1/3% support tests - 20 line 18 is not more than 33 20 Private foundation. If the operation of the support test is th	20. If the organization did this box and stop here. The D19. If the organization did 1/3%, check this box and s	e organization quali not check a box or stop here. The orga	fies as a publicly s n line 14 or line 19a nization qualifies a	a, and line 16 is ma as a publicly suppo nis box and see in	ore than 33 1 orted organiz structions	//3% , and ation ▶ ▶
 18 Investment income percent 19a 33 1/3% support tests - 20 more than 33 1/3%, check is b 33 1/3% support tests - 20 line 18 is not more than 33 	20. If the organization did this box and stop here. The D19. If the organization did 1/3%, check this box and s	e organization quali not check a box or stop here. The orga	fies as a publicly s n line 14 or line 19a nization qualifies a	a, and line 16 is ma as a publicly suppo nis box and see in	ore than 33 1 orted organiz structions	/3%, and ation ▶

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3a

3b

3c

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5c

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9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2020

Yes No

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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?
- 6 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 (as 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 line 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.)

032024 01-25-21

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17

Schedule A (Form 990 or 990-EZ) 2020 THE PHILLIPS COLLECTION

Part IV Supporting Organizations (continued)

2

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
с	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1
2	Did the organization operate for the benefit of any supported organization other than the supported	

organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C.	Type II	Supporting	Organizations	

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

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- c _____ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If* "Yes," *then in* **Part VI identify those supported organizations and explain** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*
- b Did the activities described in line 2a, above, 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 lines 3a and 3b 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? *If* "Yes" or "*No*" 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.*

032025 01-25-21

18180622 745960 25457

Schedule A (Form 990 or 990-EZ) 2020

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2b

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3b

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Yes No

^{2020.05095} THE PHILLIPS COLLECTION

Schedule A (Form 990 or 990-EZ) 2020 THE PHILLIPS COLLECTION Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in* **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section	A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Ne	t short-term capital gain	1		
2 Re	coveries of prior-year distributions	2		
3 Ot	her gross income (see instructions)	3		
4 Ad	ld lines 1 through 3.	4		
5 De	preciation and depletion	5		
6 Po	rtion of operating expenses paid or incurred for production or			
со	llection of gross income or for management, conservation, or			
ma	aintenance of property held for production of income (see instructions)	6		
7 Ot	her expenses (see instructions)	7		
8 Ad	ijusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section	B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Ag	gregate fair market value of all non-exempt-use assets (see			
ins	tructions for short tax year or assets held for part of year):			
a Av	erage monthly value of securities	1 a		
b Av	erage monthly cash balances	1b		
c Fa	ir market value of other non-exempt-use assets	1c		
d To	tal (add lines 1a, 1b, and 1c)	1d		
e Di	scount claimed for blockage or other factors			
(ex	plain in detail in Part VI):			
2 Ac	quisition indebtedness applicable to non-exempt-use assets	2		
3 Su	btract line 2 from line 1d.	3		
4 Ca	sh deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
se	e instructions).	4		
5 Ne	t value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Mu	Itiply line 5 by 0.035.	6		
7 Re	coveries of prior-year distributions	7		
8 Mi	nimum Asset Amount (add line 7 to line 6)	8		
Section	C - Distributable Amount			Current Year
1 Ad	justed net income for prior year (from Section A, line 8, column A)	1		
2 En	ter 0.85 of line 1.	2		
3 Mi	nimum asset amount for prior year (from Section B, line 8, column A)	3		
4 En	ter greater of line 2 or line 3.	4		
5 Inc	come tax imposed in prior year	5		
6 Di	stributable Amount. Subtract line 5 from line 4, unless subject to			
en	nergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrate	ed Type III supporting or	panization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2020

032026 01-25-21

Schedule A (Form 990 or 990 EZ) 2020 THE PHILLIPS COLLECTION

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _{(continu}	ed)	
Secti	on D - Distributions				Current Year
_1	Amounts paid to supported organizations to accomplish exe				
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	e		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	s	(iii) Distributable Amount for 2020
_1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
c	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
-	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
e	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

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Schedule A (Form 990 or 990-EZ) 2020	THE	PHILLIPS	COLLECTION

Section D, lines 5, 6, and (See instructions.)	rmation. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V I 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
	Schedule A (Form 990 or 990-EZ

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Employer identification number

5	3	_	0	2	0	4	6	2	0	
-	-		•	_	•	_	-	_	•	

THE	PHILLIPS	COLLECTION

Organization type (check one):			
Filers of:	Section:		
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private foundation		
	527 political organization		
Form 990-PF	501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private foundation		
	501(c)(3) taxable private foundation		

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

General Rule

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

Special Rules

X 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 (entering "N/A" in column (b) instead of the contributor name and address), 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 $\dots \longrightarrow$

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.

Name of organization

53-0204620

THE PHILLIPS COLLECTION

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		- \$ <u>325,000.</u>	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
2		- \$ <u>662,814.</u> -	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		- \$ <u>250,000.</u>	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
4		- \$ <u>2,060,000.</u>	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
5		- \$250,000. -	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
6		\$224,210.	Person X Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2020)
020402 11-20		Schedule D (Form	330, 330-EZ, 01 390-PF) (2020)

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23 2020.05095 THE PHILLIPS COLLECTION

18180622 745960 25457

Name of organization

53-0204620

THE PHILLIPS COLLECTION

Part I	Contributors (see instructions). Use duplicate copies of Part I if	f additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$1,391,969.	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 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
023452 11-25		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

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24 2020.05095 THE PHILLIPS COLLECTION Name of organization

Employer identification number

53-0204620

THE PHILLIPS COLLECTION

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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

18180622 745960 25457

2020.05095 THE PHILLIPS COLLECTION

Page 4

ידעם שנ	LIPS COLLECTION		53-0204620	
art III Exe fro com		 through (e) and the following line e charitable, etc., contributions of \$1,000 c 	n section 501(c)(7), (8), or (10) that total more than \$1,000 entry. For organizations) for
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	ld
_		(e) Transfer of g		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
a) No. from	(h) Dumpers of sift		(a) Department of how sift is he	
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	
	Transferee's name, address, a	(e) Transfer of g	gift Relationship of transferor to transferee	
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	ld
		(e) Transfer of g	gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
a) No				
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	ld
		(e) Transfer of g		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	

SCHEDULE C	CHEDULE C Political Campaign and Lobbying Activities							
(Form 990 or 990-EZ) For Organizations Exempt From Income Tax Under section 501(c) and section 527						2020		
		if the organization is describe				Open to Public		
Department of the Treasury Internal Revenue Service	y Go to www.irs.gov/Form990 for instructions and the latest information.							
 Section 501(c)(3) or Section 501(c) (othe Section 527 organiz 	ganizations: Con r than section 5 ations: Complet	n Form 990, Part IV, line 3, or F nplete Parts I-A and B. Do not co 01(c)(3)) organizations: Complete e Part I-A only. n Form 990, Part IV, line 4, or F	omplete Part I-C. e Parts I-A and C below	v. Do not complete Part	: I-B.			
		have filed Form 5768 (election u have NOT filed Form 5768 (elect	())	•	•			
	5	n Form 990, Part IV, line 5 (Prox				•		
Tax) (See separate inst								
), or (6) organiza	tions: Complete Part III.						
Name of organization				E		identification number		
		LLIPS COLLECTION		aria a costion 50		3-0204620		
Part I-A Compl		ganization is exempt und	ier section 501(c)	or is a section 52	ar organ			
1 Provide a descripti	on of the organiz	zation's direct and indirect politic	al campaign activities	in Part IV				
2 Political campaign					▶\$			
	• •	ign activities						
		ganization is exempt und			<u> </u>			
		incurred by the organization und			►\$			
		incurred by organization manag						
		on 4955 tax, did it file Form 4720				Yes No		
b If "Yes," describe in								
		ganization is exempt und	ler section 501(c)	, except section 5	501(c)(3)			
-		d by the filing organization for se	. ,		► \$			
		nization's funds contributed to ot						
exempt function ac	tivities				▶\$			
3 Total exempt funct	ion expenditures	s. Add lines 1 and 2. Enter here a	and on Form 1120-POL	-,				
					►\$			
		1120-POL for this year?				Yes No		
made payments. F contributions recei	or each organiza ved that were pr	nployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	d from the filing organi a separate political org vide information in Part	zation's funds. Also ent ganization, such as a se	ter the am	ount of political		
(a) Namo	9	(b) Address	(c) EIN	(d) Amount paid fro filing organization funds. If none, enter	's con r-0 p de	e) Amount of political tributions received and promptly and directly elivered 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) 2020

032041 12-02-20

2020.05095 THE PHILLIPS COLLECTION

27

Schedule C (Form 990 or 990-EZ) 2020	THE	PHILLIPS	COLLECTION
		All and the second second	A server of a second second base

Part II-A Complete if the org section 501(h)).	anization is exe	mpt under sectio	on 501(c)(3) and fil	ed Form 5768 (e	lection under
	ion belongs to an aff	iliated group (and list i	n Part IV each affiliated	group member's nan	ne address FIN
	e of excess lobbying			group monibor o nam	
	, ,	nd "limited control" pr	ovisions apply.		
	s on Lobbying Expe itures" means amou	nditures unts paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence public opinion (grassroots lobbying)			
b Total lobbying expenditures to influ	ence a legislative bo	dy (direct lobbying)			
c Total lobbying expenditures (add li	nes 1a and 1b)				
d Other exempt purpose expenditure	S				
e Total exempt purpose expenditure	s (add lines 1c and 10	d)			
f Lobbying nontaxable amount. Ente	r the amount from th	e following table in bo	th columns.		
If the amount on line 1e, column (a) o	r (b) is: The lob	bying nontaxable am	nount is:		
Not over \$500,000	20% of	the amount on line 1e			
Over \$500,000 but not over \$1,000	,000 \$100,00	00 plus 15% of the exe	cess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000 \$175,00	00 plus 10% of the exe	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	000,000 \$225,00	00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.			
g Grassroots nontaxable amount (en	ter 25% of line 1f)				
h Subtract line 1g from line 1a. If zero	o or less, enter -0-				
	i Subtract line 1f from line 1c. If zero or less, enter -0-				
j If there is an amount other than zer	o on either line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this					Yes No
(Some organizations th	at made a section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all	of the five columns I	pelow.
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2020

032042 12-02-20

Schedule C (Form 990 or 990-EZ) 2020 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)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
	e 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:				
а	Volunteers?		X		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? \dots		X		
С	Media advertisements?		X		
	Mailings to members, legislators, or the public?		X X		
	Publications, or published or broadcast statements?		X		
	Grants to other organizations for lobbying purposes?		X		
	Direct contact with legislators, their staffs, government officials, or a legislative body?		X		
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	x			9,955.
	Other activities?				9,955.
	Total. Add lines 1c through 1i		X		.,,,,,,
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
Dar	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5) or se	oction	
Fai	501(c)(6).	501(0)	(J), UI 30	CUON	
	301(0)(0).			Yes	No
4	Were substantially all (90% or more) dues received nondeductible by members?		1		
1 2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
2	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
_	t III-B Complete if the organization is exempt under section 501(c)(4), section			ection	
I ui	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				e 3. is
	answered "Yes."		· () · · ai ·		
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
-	expenses for which the section 527(f) tax was paid).	541			
а	Current year		2a		
	Carryover from last year				
	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line $2c$ exceeds the amount on line 3, what portion of the exc				
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (See instructions)		5		
	t IV Supplemental Information				
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list): Part I	I-A, lines 1 ;	and 2 (See	
	ictions); and Part II-B, line 1. Also, complete this part for any additional information.	,,			
	RT II-B, LINE 1, LOBBYING ACTIVITIES:				
THE	E PHILLIPS COLLECTION ENGAGES TWO LOBBYISTS WHO REP	RESEN	r the		
NAT	TIONAL CAPITAL ARTS CONSORTIUM-AN INFORMAL COOPERAT	IVE UN	NDERTA	KING 3	IN
WH	ICH THE PHILLIPS COLLECTION PARTICIPATES. THE LOBBY	ISTS 1	PROVID	E	
INF	FORMATION ABOUT THE AVAILABILITY AND METHODOLOGY FO	R OBTZ	AINING	FUND	5
FRO	OM THE FEDERAL GOVERNMENT, DC GOVERNMENT, INDUSTRIE	<u>S,</u> ANI	D		
		Schedu	le C (Form	990 or 99	0-EZ) 2020
03204	3 12-02-20		-		-

FOUNDATIONS, AND EDUCATE LAWMAKERS ON THE NECESSITY FOR SUCH FUNDS AS

WASHINGTON, DC HAS NO STATE ARTS ORGANIZATION.

Schedule C (Form 990 or 990-EZ) 2020

032044 12-02-20

30 2020.05095 THE PHILLIPS COLLECTION 25457_1

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SCHEDULE D

(Form 990)

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.

Go to www.irs.gov/Form990 for instructions and the latest information.



Department of the Treasury Internal Revenue Service Name of the organization

THE PHILLIPS COLLECTION

Employer identification number 53-0204620

	rganizations Maintaining Donor Advi ganization answered "Yes" on Form 990, Part IV		ACCOUNTS. Complete if the
0	ganization answered Tes Unit Unit 330, Fall IV	(a) Donor advised funds	(b) Funds and other accounts
1 Total nur	nber at end of year		
	te value of contributions to (during year)		
	te value of grants from (during year)		
	te value at end of year		
	organization inform all donors and donor advisors		funds
	rganization's property, subject to the organization	-	
	organization inform all grantees, donors, and dono		
for charit	able purposes and not for the benefit of the done	or or donor advisor, or for any other purpose co	nferring
	conservation Easements. Complete if the	-	t IV, line 7.
	(s) of conservation easements held by the organiz	· · · · · · · · · · · · · · · · · · ·	
	eservation of land for public use (for example, rec		historically important land area
	otection of natural habitat	Preservation of a c	ertified historic structure
	eservation of open space		
	e lines 2a through 2d if the organization held a qu	ialified conservation contribution in the form of a	
•	e tax year.		Held at the End of the Tax
	nber of conservation easements		
		etructure included in (a)	
	of conservation easements on a certified historic		
	of conservation easements included in (c) acquire		2d
	the National Register		
year	or conservation easements modified, transferred,	, released, extinguished, or terminated by the or	ganization during the tax
-	of states where property subject to conservation		
	organization have a written policy regarding the		
	s, and enforcement of the conservation easement		Yes
	l volunteer hours devoted to monitoring, inspecti		
			valion easements during the year
7 Amount of	of expenses incurred in monitoring, inspecting, h	andling of violations, and enforcing conservation	a easements during the year
► \$			reasonnente dannig the year
	ch conservation easement reported on line 2(d) a	bove satisfy the requirements of section 170(h)((4)(B)(i)
	ion 170(h)(4)(B)(ii)?		
	III, describe how the organization reports conserv		
	sheet, and include, if applicable, the text of the fo		
	tion's accounting for conservation easements.	· · · · · · · · · · · · · · · · · · ·	
	Prganizations Maintaining Collections	of Art, Historical Treasures, or Oth	er Similar Assets.
C(omplete if the organization answered "Yes" on Fo	orm 990, Part IV, line 8.	
1a If the org	anization elected, as permitted under FASB ASC	958, not to report in its revenue statement and	balance sheet works
of art, his	storical treasures, or other similar assets held for	public exhibition, education, or research in furth	erance of public
service, p	provide in Part XIII the text of the footnote to its fi	nancial statements that describes these items.	
b If the org	anization elected, as permitted under FASB ASC	958, to report in its revenue statement and bal	ance sheet works of
art, histo	rical treasures, or other similar assets held for pu	blic exhibition, education, or research in further	ance of public service,
provide t	he following amounts relating to these items:		
(i) Reve	nue included on Form 990, Part VIII, line 1		
(ii) Asse	ts included in Form 990, Part X		• •
2 If the org	anization received or held works of art, historical		
the follov	ving amounts required to be reported under FAS	B ASC 958 relating to these items:	
a Revenue	included on Form 990, Part VIII, line 1		► \$
b Assets in	ncluded in Form 990, Part X		> \$
HA For Pape	erwork Reduction Act Notice, see the Instructi	ons for Form 990.	Schedule D (Form 990)
2051 12-01-20		21	
		31	
30622 7	45960 25457 2020	.05095 THE PHILLIPS COLL	ECTION 25457_

Sche	chedule D (Form 990) 2020 THE PHILLIPS COLLECTION 53-0204620 Page 2								
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or C	ther S				ž
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that ma	ke signi	ficant use c	of its		
	collection items (check all that apply):								
а	X Public exhibition	d	X Loan or exc	hange program					
b	X Scholarly research	е	Other						
с	X Preservation for future generations								
4									
5									
	to be sold to raise funds rather than to be ma						Yes	X	No
Par	t IV Escrow and Custodial Arran						t IV, line 9, oi		
	reported an amount on Form 990, Pa	rt X, line 21.							
1a	Is the organization an agent, trustee, custod	ian or other intermed	iary for contributior	is or other assets	not incl	luded			
	on Form 990, Part X?		•				Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:						
			C		Γ		Amoun	t	
с	Beginning balance				ſ	1c			
	Additions during the year					1d			
	Distributions during the year					1e			
	Ending balance					1f			
	Did the organization include an amount on F						Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided on Part	XIII				
Par									
		(a) Current year	(b) Prior year	(c) Two years bad	ck (d)	Three years b	oack (e) Four	r years l	back
1a	Beginning of year balance	64,081,984.	63,985,176.	57,732,23	8.	54,076,4	94. 47	,198,	375.
b	Contributions	4,466,106.	327,524.	7,912,18	8.	1,830,2	64. 2	,817,	060.
	Net investment earnings, gains, and losses	19,212,794.	3,099,599.	1,663,22	26.	5,510,9	33. 6	,755,	526.
	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	2,046,703.	3,330,315.	3,322,47	6.	3,685,4	53. 2	,694,	467.
f	Administrative expenses								
	End of year balance	85,714,181.	64,081,984.	63,985,17	6.	57,732,2	38. 54	,076,	494.
2	Provide the estimated percentage of the cur	rent year end balance	e (line 1g, column (a	a)) held as:					
а	Board designated or quasi-endowment	7.1800	%						
b	Permanent endowment > 70.3100	%	_						
с	Term endowment ► 22.5100	%							
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
3a	Are there endowment funds not in the posse	ession of the organiza	tion that are held a	nd administered	for the c	organization			
	by:							Yes	No
	(i) Unrelated organizations						3a(i)		Х
	(ii) Related organizations								Х
b	If "Yes" on line 3a(ii), are the related organization	tions listed as requir	ed on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.						
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answere	d "Yes" on Form 990	, Part IV, line 11a. S	See Form 990, Pa	rt X, line	e 10.			
	Description of property	(a) Cost or ot	her (b) Cost	or other (c) Accui	mulated	(d) Boo	k value	3
		basis (investm	nent) basis	(other)	depred	iation			
1a	Land		83	3,240.			83	3,24	40.
	Buildings				3,26	6,391.	28,37		
	Leasehold improvements		1	4,995.		5,497.		9,49	
	Equipment		2,57	6,813.		8,498.	1,07		
	Other			2,217.		7,464.	37	4,75	53.
	. Add lines 1a through 1e. (Column (d) must e		X, column (B), line 1	0c.)		►	30,66		
						Sche	dule D (Forn		
							•	,	

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Schedule D (Form 990) 2020	THE	PHILLIPS	COLLECTION
Part VII Investments - C	ther Se	ecurities.	

Complete if the organization answered "Yes"	on Form 000 Part IV line 1	1b Soc Form 000 Bort V line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-vear market value
(1) Financial derivatives	(0) 20011 10100		
(2) Closely held equity interests			
(A) ALTERNATIVE FUNDS	34,786,875.	END-OF-YEAR MARKET	VALUE
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►	34,786,875.		
Part VIII Investments - Program Related.	, . , ,		
Complete if the organization answered "Yes"	on Form 990 Part IV line 1	1c. See Form 990. Part X line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1)	. ,		,
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
	Description	, , ,	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	9 15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1e 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			60,613.
(3) CAPITAL LEASE OBLIGATION			53,704.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)		114,317.
2. Liability for uncertain tax positions. In Part XIII, provide			
		re if the text of the footnote has been pr	

032053 12-01-20

Sche	dule D (Form 990) 2020 THE PHILLIPS COLLECTION			53-	0204620 P	age 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	ents Wi				<u> </u>
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	l .				
1	Total revenue, gains, and other support per audited financial statements			1	13,622,7	36.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	_ 2a	-9.			
b	Donated services and use of facilities	2b	840,624.			
с	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d	1,570,000.			
е	Add lines 2a through 2d			2e	2,410,6	15.
3	Subtract line 2e from line 1			3	11,212,1	21.
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	6,541,667.			
С	Add lines 4a and 4b			4c	6,541,6	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	17,753,7	88.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	nents W		Retu	ırn.	
	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			60
1	T XII Reconciliation of Expenses per Audited Financial Statem 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 1	irn. 13,895,6	60.
	T XII Reconciliation of Expenses per Audited Financial Statem 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			60.
1 2 a	TXII Reconciliation of Expenses per Audited Financial Statem 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	nents W	ith Expenses per			60.
1 2 a	TXII Reconciliation of Expenses per Audited Financial Statem 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	2a 2b	ith Expenses per			60.
1 2 a	TXII Reconciliation of Expenses per Audited Financial Statem 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			60.
1 2 b c d	T XII Reconciliation of Expenses per Audited Financial Statem 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	7ith Expenses per 840,624. 197,059.	1	13,895,6	
1 2 b c d	TXII Reconciliation of Expenses per Audited Financial Statem 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	7ith Expenses per 840,624. 197,059.		13,895,6	83.
1 2 b c d	t XII Reconciliation of Expenses per Audited Financial Statem 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	7ith Expenses per 840,624. 197,059.	1	13,895,6	83.
1 2 b c d e	T XII Reconciliation of Expenses per Audited Financial Statem 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	7ith Expenses per 840,624. 197,059.	1	13,895,6	83.
1 2 a b c d e 3 4 a	T XII Reconciliation of Expenses per Audited Financial Statem 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 losses Other losses Other statement 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	7 ith Expenses per 840,624. 197,059. 202,390.	1	13,895,6	83.
1 2 b c d e 3 4 a b	T XII Reconciliation of Expenses per Audited Financial Statem 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 Other (Describe in Part XIII.)	2a 2b 2c 2d 4a	7ith Expenses per 840,624. 197,059.	1 2e 3	13,895,6 1,037,6 12,857,9	83.
1 2 b c d e 3 4 a b	T XII Reconciliation of Expenses per Audited Financial Statem 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 Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	7ith Expenses per 840,624. 197,059. 202,390. 430.	1 2e 3 4c	13,895,6 1,037,6 12,857,9 202,8	83.
1 2 a b c d e 3 4 a b c 5	T XII Reconciliation of Expenses per Audited Financial Statem 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 Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	7ith Expenses per 840,624. 197,059. 202,390. 430.	1 2e 3	13,895,6 1,037,6 12,857,9	83.

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:

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 NET ASSETS WITHOUT DONOR RESTRICTIONS IF PURCHASED WITH
ASSETS WITHOUT DONOR RESTRICTIONS AND ARE RECORDED AS DECREASES IN NET
ASSETS WITH DONOR RESTRICTIONS 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 NET ASSETS WITH DONOR RESTRICTIONS IF A DONOR
MAKES A CONTRIBUTION INTENDED TO FUND THE SUBSEQUENT PURCHASE OF ART.

032054 12-01-20

34

Part XIII Supplemental Information (continued)

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 EXISTENCE AND NATURE OF DONOR-IMPOSED RESTRICTIONS. THERE WERE NO DEACCESSIONS OR SALES DURING EACH OF THE YEARS ENDED JULY 31, 2021 AND 2020.

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 V, COLUMN (B) PRIOR YEAR:

THE ENDOWMENT INFORMATION FOR FY19 WAS UPDATED FROM PRIOR YEAR TO INCLUDE

THE QUASI-ENDOWMENT.

PART X, LINE 2:

032055 12-01-20

Schedule D (Form 990) 2020

35

Schedule D (Form 990) 2020 THE PHILLIPS COLLECTION 5	3-0204620 Page 5
Part XIII Supplemental Information (continued)	
FOR THE YEARS ENDED JULY 31, 2021 AND 2020, THE COLLECTION HA	S DOCUMENTED
ITS CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROV	IDES GUIDANCE
FOR REPORTING UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED	THAT NO
MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION	ON OR
DISCLOSURE IN THE FINANCIAL STATEMENTS.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
ENDOWMENT EARNINGS TRANSFERRED FOR OPERATIONS	1,570,000.
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	825,870.
ITEM" ON THE FINANCIAL STATEMENTS AND INCLUDED AS REVENUE ON	
FORM 990, PART VIII.	
EXHIBITION PARTICIPATION PASS THROUGH COSTS EXCLUDED	-15,000.
FROM REVENUE ON THE FINANCIAL STATEMENTS AND NETTED	
AGAINST REVENUE ON FORM 990, PART VIII.	
REALIZED GAINS, NON-OPERATING, REPORTED AS AN "OTHER ITEM"	4,520,887.
ON THE FINANCIAL STATEMENTS AND INCLUDED AS REVENUE ON FORM	
990, PART VIII.	
GALA EXPENSES EXCLUDED FROM REVENUE ON THE FINANCIAL	-41,652.
STATEMENTS AND NETTED AGAINST REVENUE ON FORM 990,	
PART VIII.	
SHOP COST OF GOODS SOLD EXCLUDED FROM REVENUE ON	-140,407.
THE FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE	
ON FORM 990, PART VIII.	
PPP DEBT EXTINGUISHMENT REPORTED AS AN "OTHER ITEM" ON	1,391,969.
032055 12-01-20	chedule D (Form 990) 2020
36	

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 THE PHILLIPS
 COLLECTION
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Schedule D (Form 990) 2020 THE PHILLIPS COLLECTION Part XIII Supplemental Information (continued)	53-0204620 Page 5
THE FINANCIAL STATEMENTS AND REPORTED AS REVENUE	
ON FORM 990, PART VIII, LINE 1E.	
TOTAL TO SCHEDULE D, PART XI, LINE 4B	6,541,667.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
TRAVELING EXHIBITION PARTICIPATION PASS THROUGH COSTS	15,000.
INCLUDED IN EXPENSES ON THE FINANCIAL STATEMENTS AND	
NETTED AGAINST REVENUE ON FORM 990, PART VIII.	
GALA EXPENSES INCLUDED IN EXPENSES ON THE FINANCIAL	41,652.
STATEMENTS AND NETTED AGAINST REVENUE ON FORM 990, PART VII	I
SHOP COST OF GOODS SOLD INCLUDED IN EXPENSES ON THE	140,407.
FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON FORM	
990, PART VIII.	
TOTAL TO SCHEDULE D, PART XII, LINE 2D	197,059.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
UBIT TAX EXPENSE REPORTED AS AN "OTHER ITEM" ON THE	430.
FINANCIAL STATEMENTS AND INCLUDED AS AN EXPENSE ON FORM	
990, PART IX.	

Schedule D (Form 990) 2020

032055 12-01-20

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Department of the Treasury			Attach to Form 990.		C	pen to Public
Internal Revenue Service	Go to	www.irs.gov/Fo	orm990 for instructions and the latest	information.		
Name of the organization	ſ				Employer ide	entification number
THE PHILLIPS	COLLECTION	Г			53-0204	620
ame of the organization Employer identification number THE PHILLIPS COLLECTION 53-0204620 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. No 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) is a program service, describe specific type of and independent contractors in the region (f) Total expenditures for and independent contractors in the region ENTRAL AMERICA AND ENTRAL AMERICA AND ENTRAL AMERICA AND ENTRAL AMERICA AND						
		n maintain recor	ds to substantiate the amount of its gra	ants and other	assistance,	
the grantees' eligit	pility for the grants or a	assistance, and	the selection criteria used to award the	grants or ass	istance?	Yes No
-	Describe in Part V the	e organization's	procedures for monitoring the use of its	s grants and o	ther assistance	outside the
						(0 T))
(a) Region	offices	employees, agents, and independent contractors	(by type) (such as, fundraising, pro- gram services, investments, grants to	is a pro describe	gram service, e specific type	expenditures for and investments
CENTRAL AMERICA AND THE CARIBBEAN		0	INVESTMENTS IN REGION			24,108,053.
FIDODE	0		TNUESTMENTS IN DECION			7 662
EOROFE		0	INVESTMENTS IN REGION			7,002.
3 a Subtotal	C) (24,115,715.
b Total from continu sheets to Part I	ation)				0.
c Totals (add lines 3						
and 3h)	n) (24 115 715

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

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

Schedule F (Form 990) 2020

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OMB No. 1545-0047

2020

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SCHEDULE F (Form 990) Schedule F (Form 990) 2020

THE PHILLIPS COLLECTION

Page 2

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			recognized as charities by the					<u> </u>
exempt 501(c)(3) orga 3 Enter total number of	nization by the IRS, o other organizations of	or for which the grantee or entities	or counsel has provided a sec	ction 501(c)(3) eo	quivalency letter	>		

Schedule F (Form 990) 2020

Schedule F (Form 990) 2020	THE	PHILLIPS	COLLECTION

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.

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Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2020

53-0204620

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Schedule F				PHILLIPS	COLLECTION
Part IV	Foreiar	Forms	5		

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; don't file with Form 990)		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; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2020

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

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SCHEDULE G	Suppleme	ental Information Regarding	Fun	drais	ing or Gaming	Acti	vities	OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete if the	, or if the	2020					
Department of the Treasury	· · · ·		Open to Public					
Internal Revenue Service		o to www.irs.gov/Form990 for instr	uction	s and	the latest informat	ion.		Inspection
Name of the organization		LLIPS COLLECTION					Employer ide	entification number
Part I Fundrais		Complete if the organization answe	ered "Y	'es" o	n Form 990, Part IV,	line 1		
· · ·	complete this par							
a Mail solicitat	-	sed funds through any of the followir e Solicitat	-		overnment grants			
b Internet and	email solicitations	s f Solicitat	tion of	gover	nment grants			
c Phone solici		g 🛄 Special	fundra	aising	events			
d In-person so 2 a Did the organization		or oral agreement with any individual	(inclu	ding o	fficers, directors, tru	stees	s, or	
		Part VII) or entity in connection with p			•		Yes	
b If "Yes," list the 10 compensated at le		viduals or entities (fundraisers) pursu e organization.	uant to	agree	ements under which	the fu	undraiser is to I	De
			()			60	Amount paid	I
(i) Name and addres or entity (func		(ii) Activity	(iii) fundr have c or cor contrib	trol of	(iv) Gross receipts from activity	tò (a	fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No	-			
								<u> </u>
Total								
	ch the organizatio	on is registered or licensed to solicit	contrib	oution	s or has been notifie	d it is	exempt from r	egistration
or licensing.								
LHA For Paperwork Re	eduction Act Not	ice, see the Instructions for Form	990 or	990-	EZ.	Sche	dule G (Form 9	990 or 990-EZ) 2020
		,					- (,_,_

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Schedule G (Form 990 or 990-EZ) 2020 THE PHILLIPS COLLECTION

53-0204620 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraicing event contributions and gross income on Form 990 F7 lines 1 and 6b List events with gross receipts greater than \$5,000

		of fundraising event contributions and gr				pts greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			ANNUAL GALA			col. (c))
an			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	310,117.			310,117.
	2	Less: Contributions	285,117.			285,117.
	3	Gross income (line 1 minus line 2)	25,000.			25,000.
	4	Cash prizes				
es	5	Noncash prizes				
xbens	6	Rent/facility costs				
Direct Expenses	7	Food and beverages	37,499.			37,499.
-	8	Entertainment				
	9	Other direct expenses	4,152.			4,152.
	10	Direct expense summary. Add lines 4 throug	h 9 in column (d)		►	41,651
		Net income summary. Subtract line 10 from I				-16,651
² a	rt I		answered "Yes" on Form	n 990, Part IV, line 19, or	reported more than	
-1		\$15,000 on Form 990-EZ, line 6a.		(b) Pull tabs/instant		(d) Total caming (add
Hevenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
D						
ב	1	Gross revenue				
	•					
<u>s</u>	2	Cash prizes				
e ko	3	Noncash prizes				
Ulrect Expenses	4	Rent/facility costs				
	5	Other direct expenses				
┫	<u> </u>		Yes %	Yes %	Yes %	
	6	Volunteer labor				
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	7 from line 1, column (d)		►	
_						
		er the state(s) in which the organization cond				
		he organization licensed to conduct gaming a				L Yes L No
D		No," explain:				
0a	We	ere any of the organization's gaming licenses r	evoked, suspended, or te	erminated during the tax	vear?	Yes No
		Yes," explain:			,	
		· · · · · · · · · · · · · · · · · · ·				
	0 11	1.25.20			Schodula G (Ea	rm 990 or 990-EZ) 202
200	11	I-25-20			Schedule G (FO	111 330 01 330-LZJ 202

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<u>S</u> ch	edule G (Form 990 or 990-EZ) 2020 THE PHILLIPS COLLECTION	53-0	204620	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	🗌 No
13	Indicate the percentage of gaming activity conducted in:			
	The organization's facility		13a	%
	An outside facility		13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and record			
	Name			
	Address ►			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	🗌 No
b	If "Yes," enter the amount of gaming revenue received by the organization \blacktriangleright \$ and the amount	unt		
	of gaming revenue retained by the third party $ ightarrow$ \$			
c	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name 🕨			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	🗌 No
h	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent i			
~	organization's own exempt activities during the tax year > \$	in the		
Ра	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v);	and Par	t III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
0320		G (Form	990 or 990)-EZ) 2020
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90 or 990-1
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sc	HEDULE J	Compensation Information	1	OMB No. 1	1545-00	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest	F	20	20	
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		LU	ZU	
Depa	tment of the Treasury	Attach to Form 990.		Open to		
Intern	al Revenue Service	► Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Nan	ne of the organization			identificatio		mber
D	while Our actions	THE PHILLIPS COLLECTION	53-0	020462	0	
Pa	rt I Question	s Regarding Compensation				
4-					Yes	No
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	1990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c	, i i i i i i i i i i i i i i i i i i i				
		ation and gross-up payments X Health or social club dues or initiation fee				
	Inscretionary spending account Personal services (such as maid, chauffeur, chef)					
			ar, crier <i>j</i>			
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
~	•	provision of all of the expenses described above? If "No," complete Part III to explain		1b	х	
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	-	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2	х	
3	Indicate which, if a	ny, of the following the organization used to establish the compensation of the organization?	S			
	CEO/Executive Dire	ector. Check all that apply. Do not check any boxes for methods used by a related organizat	ion to			
	establish compens	ation of the CEO/Executive Director, but explain in Part III.				
	X Compensation	n committee Written employment contract				
	X Independent	compensation consultant III Compensation survey or study				
	X Form 990 of o	ther organizations X Approval by the board or compensation of	ommittee			
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 re					37
a		e payment or change-of-control payment?				X X
b		eive payment from a supplemental nonqualified retirement plan?				A X
С		eive payment from an equity-based compensation arrangement?		4c		
	If "Yes" to any of lir	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only castion 501/	:)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	on			
5	contingent on the r					
а	•			5a		x
b	Any related organiz	ation?		5u 5b		X
		or 5b, describe in Part III.				
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on			
	contingent on the r					
а	The organization?	-		6a		Х
b	Any related organiz	ation?		6b		Х
		or 6b, describe in Part III.				
7	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment	s			
		nes 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 t	the			
		ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X
9		id the organization also follow the rebuttable presumption procedure described in				
		n 53.4958-6(c)?				
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Sched	dule J (Forn	n 990) 2020

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53-0204620

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(i)-(D)	reported as deferred on prior Form 990
(1) DOROTHY KOSINSKI	(i)	324,685.	0.	0.	45,500.	23,120.	393,305.	
VRADENBURG DIRECTOR AND CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) KLAUS OTTMANN	(i)	176,532.	0.	0.	5,362.	23,120.	205,014.	0.
CHIEF CURATOR & DEPUTY DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) WENDY PONVERT	(i)	126,626.	0.	0.	11,530.	14,376.		0.
DIRECTOR OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) CHERYL NICHOLS	(i)	119,988.	0.	0.	12,524.	17,841.	150,353.	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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.

Schedule J (Form 990) 2020

(Form Departn	CHEDULE K form 990) partment of the Treasury ternal Revenue Service								OMB No. 1545-0047 2020 Open to Public Inspection					
		PS COLLECTI										dentification number 204620		
Part	I Bond Issues S	EE PART VI	FOR COLUM	N (F) CONI	TINUAT	IONS	1							
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issu	e price	(f) Descri	ption of purpose	(g) De	efeased	(h) On		(i) Po	
										1	of is:		finan	
									Yes	No	Yes	No	Yes	No
A D	ISTRICT OF COLUMBIA	53-6001131	254839E82	11/01/12	27,0	00,000.		EXPANSION YEAR BONI	5	x		х		х
в														
С														
D														
Part	II Proceeds	•												
				Α			В	С				D		
_1	Amount of bonds retired			20,818	3,125.									
2	Amount of bonds legally defeased													
	Total proceeds of issue),000.									
	Gross proceeds in reserve funds													
5	Capitalized interest from proceeds													
6	Proceeds in refunding escrows													
7	Issuance costs from proceeds													
8	Credit enhancement from proceeds													
9	Working capital expenditures from proceeds													
10	Capital expenditures from proceeds			27,000),000.									
	Other spent proceeds													
12	Other unspent proceeds													
13	Year of substantial completion			20	06									
				Yes	No	Yes	No	Yes	No		Yes		No	
14	Were the bonds issued as part of a refunding	g issue of tax-exempt	bonds (or,											
	if issued prior to 2018, a current refunding is	sue)?			X									
	Were the bonds issued as part of a refunding	-												
-	issued prior to 2018, an advance refunding is				X									
16	Has the final allocation of proceeds been ma	de?			Х									
	Does the organization maintain adequate bo													
	final allocation of proceeds?			X										

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

Schedule K (Form 990) 2020

Schedule K (Form 990) 2020 THE PHILLIPS COLLECTION

53 - 0204620

Page **2**

			22-0	0204020				Page
Part III Private Business Use								
	/	4	I	B		ç		<u>,</u>
1 Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
which owned property financed by tax-exempt bonds?		X						
2 Are there any lease arrangements that may result in private business use of								
bond-financed property?		X						
3a Are there any management or service contracts that may result in private								
business use of bond-financed property?		X						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of								
bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other								
outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities		1		1				<u>.</u>
other than a section 501(c)(3) organization or a state or local government		%		%		%		9
 Enter the percentage of financed property used in a private business use as a 		/0		,,,		,,,		
result of unrelated trade or business activity carried on by your organization,								
another section 501(c)(3) organization, or a state or local government		%		%		%		9
6 Total of lines 4 and 5		%		%		%		9
7 Does the bond issue meet the private security or payment test?		X		/0		/0		/
8a Has there been a sale or disposition of any of the bond-financed property to a non-								
governmental person other than a 501(c)(3) organization since the bonds were issued?		x						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or				1		1		L
disposed of		%		%		%		9
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations		/0		/0		/0		<i>′</i>
sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all								
nonqualified bonds of the issue are remediated in accordance with the								
•		x						
requirements under Regulations sections 1.141-12 and 1.145-2?		21						<u> </u>
Faitiv Aibiliage		<u>م</u>		в		c)
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	A No	Yes	B No	Yes	No No	L Yes	No
	165	X	162		162		162	INU
Penalty in Lieu of Arbitrage Rebate?				1		<u> </u>		L
2 If "No" to line 1, did the following apply?		X		1				
a Rebate not due yet?		X						l
b Exception to rebate?	X	A						
c No rebate due?	A					1		L
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
performed		X		,		,		
3 Is the bond issue a variable rate issue?		Δ						í

Schedule K (Form 990) 2020 THE PHILLIPS COLLECTION

- - 1

53-0204620

Part IV Arbitrage (continued)				_	1	_		
	A			3		2	C	
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		Х						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х						
7 Has the organization established written procedures to monitor the								
requirements of section 148?		Х						
Part V Procedures To Undertake Corrective Action								
	A		L I	3		2	C)
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?		Х						
Part VI Supplemental Information. Provide additional information for responses to questions	s on Schedule	e K. See instr	ructions.					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: DISTRICT OF COLUMBIA								
(F) DESCRIPTION OF PURPOSE:								
MUSEUM EXPANSION - DC 30 YEAR BOND ISSUED IN 200	3 AND F	REISSUE	D IN 20	012.				

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury	
Internal Revenue Service	

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

Open to Public Inspection

Employer identification number 53 - 0204620

Name	of the	organization

► Go to www.irs.gov/Form990 for instructions and the latest information.

Part I	Types of F	Propert	y	
			PHILLIPS	С
Name of th	ne organization			

JIPS COLLECTION

			(a) Check if	(b) Number of	(c) Noncash contr		M	(d) ethod of de	etermin	ing	
			applicable	contributions or items contributed	amounts repor		nonca	sh contribu	ition ai	mount	S
1	Art - Works of a	art	X	98		<u>0.</u>					
2	Art - Historical										
3		interests									
4		plications									
5		ousehold goods									
6		r vehicles									
7		nes									
8		perty									
9		blicly traded		33	1,038	.908.	TRADE	CONFI	RMA	TIO	NS
10		osely held stock			_,	10000					
11		rtnership, LLC, or									
••	trust interests										
12		scellaneous									
13		ervation contribution -									
10		ures									
14		ervation contribution - Other									
15		esidential									
16		ommercial									
17		ther									
18											
19		·									
20		dical supplies									
21											
22		icts									
23		imens									
24	Archeological										
25	•	FOOD/BEVERAGE)	X	1	22	,241.	DONOR	CONFI	RMA	TIO	N
26		PAINT	X	1			DONOR				
27		FURNITURE	X	1			DONOR				
28	Other ► (MISC.	X	2			DONOR				
29		ms 8283 received by the organ	ization durin	a the tax vear for c							
		rganization completed Form 82				29				8	
										Yes	No
30a	During the yea	r, did the organization receive I	oy contributio	on any property rep	ported in Part I, line	es 1 throu	gh 28, that	it			
		at least three years from the da									
		ses for the entire holding period							30a		Х
b	If "Yes," descr	ibe the arrangement in Part II.									
31	Does the organ	nization have a gift acceptance	policy that r	equires the review	of any nonstandar	d contribu	utions?		31	Х	
32a		nization hire or use third parties									
	contributions?	·		•					32a		х
b	If "Yes," descr										
33	•	tion didn't report an amount in	column (c) fo	r a type of propert	y for which columr	n (a) is che	ecked,				
	describe in Pa				-						
LHA	For Paperwo	ork Reduction Act Notice, see	e the Instruc	tions for Form 99	0.			Schedule N	l (Forr	n 990)	2020

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Schedule M (Form 990) 2020	\mathbf{THE}	PHILLIPS	COLLECTION
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Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

FOR WORKS OF ART DONATIONS, THIS COLUMN REPRESENTS THE NUMBER OF ITEMS

CONTRIBUTED. FOR STOCK DONATIONS AND FOOD AND BEVERAGE DONATIONS, THE

NUMBER REFLECTED IS THE NUMBER OF DONATIONS RECEIVED.

SCHEDULE M, LINE 33:

THE ORGANIZATION DOES NOT REPORT THE VALUE OF ART HOLDINGS ON ITS

FINANCIAL STATEMENT.

Schedule M (Form 990) 2020

25457__1

53-0204620

Page **2**

032142 11-23-20

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization 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. Go to www.irs.gov/Form990 for the latest information.



THE PHILLIPS COLLECTION

53-0204620

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

AND PUBLIC PROGRAMS, 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 3, CHANGES IN PROGRAM SERVICES: THE PHILLIPS COLLECTION OPERATIONS IN FY21 WERE IMPACTED CONSIDERABLY DUE TO THE ONGOING WORLDWIDE PANDEMIC. AS WE WELCOMED BACK VISITORS INTO THE MUSEUM IN OCTOBER 2020, THE FOCUS WAS TO CREATE A SAFE AND ENJOYABLE EXPERIENCE FOR ALL. TIMED TICKETING, CAPACITY LIMITATIONS, DIRECTIONAL ROUTING, NEW VIDEO WALL DIGITAL INFORMATION SCREENS, AND SAFETY PPE (MASKS, HAND SANITIZER, TEMPERATURE READERS) FOR STAFF AND VISITORS, AND LATER PROOF OF VACCINATION FOR ALL, ENSURED AN EXCELLENT VISITOR EXPERIENCE. THE MUSEUM REOPENED IN A PHASED CAPACITY, WITH NEW HOURS 11-6 AND LIMITED DAYS OF THURSDAY THROUGH SUNDAY. OVER MONTHS, CAPACITY INCREASED AS DID OPERATING DAYS, AND BY JUNE 2021, THE MUSEUM WAS FULLY REOPENED SIX DAYS PER WEEK. THIS, DESPITE, A TEMPORARY CLOSURE FROM DECEMBER 23, 2020 TO MARCH 2021 DUE TO CITY-WIDE MANDATE AS WELL AS INSTALLATION REQUIREMENTS FOR THE EXHIBITION SEEING DIFFERENTLY: THE PHILLIPS COLLECTS FOR A NEW CENTURY WHICH ENCOMPASSED THE ENTIRE CAMPUS.

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

 THE HIGH QUALITY OF WORKS IN THE COLLECTION PRESENTS MANY OPPORTUNITIES

 FOR COLLABORATION WITH OTHER MUSEUMS BOTH FOR EXHIBITION PARTNERSHIPS

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

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 55

2020.05095 THE PHILLIPS COLLECTION

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization THE PHILLIPS COLLECTION	Employer identification number $53 - 0204620$
AND FOR SHARING WORKS TO ENHANCE EXHIBITIONS AT OTHER VEN	UES. 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. OUR TRAVELING EXHIBITIONS WERE PUT ON HOLD DURIN	G 2021 FOR OUR
CENTENNIAL YEAR CELEBRATIONS AND INSTALLATIONS. THE PHILL	IPS COLLECTION
LIBRARY SUPPORTS RESEARCH ON WORKS OF ART IN THE MUSEUM'S	PERMANENT
COLLECTION, SPECIAL EXHIBITIONS, AND THE HISTORY OF THE M	USEUM.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: THE SEASON ALSO INCLUDED FOUR WORLD PREMIERE PERFORMANCES OF NEW WORKS COMMISSIONED BY THE PHILLIPS FOR THE CENTENNIAL YEAR.

FOR OUR ONSITE VISITORS, THE MUSEUM TRANSFORMED THE EXTERIOR LANDSCAPING TO CREATE A MORE VISIBLE, INNOVATIVE, AND WELCOMING SPACE AS GUESTS APPROACHED OUR DYNAMIC MUSEUM OF MODERN ART. ONCE INSIDE THE MUSEUM LOBBY, IN JUNE 2021, THE CENTENNIAL INSTALLATION OF VICTOR EKPUK'S ARTIST COMMISSION IN THE LOBBY CONTINUED THIS OPEN DIALOGUE AND GREETING TO ALL WHO ENTERED AND CROSSED THE THRESHOLD. WHILE OUR CAF REMAINED CLOSED IN THE INTERESTS OF ENSURING A SAFE ENVIRONMENT FOR OUR VISITORS DUE TO ITS INTIMATE SIZE AND LIMITED ABILITY FOR SOCIAL DISTANCING, WE RE-IMAGINED AND UTILIZED THE SPACE AS A POP UP TO EXTEND THE OFFERINGS OF OUR POPULAR MUSEUM GIFT SHOP. VOLUNTEERS ENGAGED VIRTUALLY WITH THE MUSEUM, LENDING THEIR SKILLS AND TIME IN A REMOTE CAPACITY.

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

INTERSECTIONS: MARLEY DAWSON SHOWCASED TWO KINETIC SCULPTURES THAT

	RESPONDED	то	THE	DYNAMIC	ARCHITECTURE	OF	THE	PHILLI	PS'	S	GOH	ANNEX		
	032212 11-20-20									Sc	hedule	O (Form 99	90 or 990-EZ)	2020
						50	5							
18	180622 745	960	254	57	2020.05095	TH	E PH	ILLIPS	CO	ւս	ECTI	ON	25457	1

 Schedule O (Form 990 or 990-EZ) 2020
 Page 2

 Name of the organization
 Employer identification number 53-0204620

 SPIRAL STAIRWELL; JACOB LAWRENCE: THE AMERICAN STRUGGLE FEATURED 25

 PANELS FROM THE ARTIST'S STRUGGLE SERIES TOGETHER WITH WORKS BY

 CONTEMPORARY ARTISTS DERRICK ADAMS, BETHANY COLLINS, AND HANK WILLIS

 THOMAS; AND THE FISCAL YEAR ENDED WITH THE OPENING OF INSIDE OUTSIDE,

 UPSIDE DOWN, A JURIED INVITATIONAL COMPRISING WORKS ACROSS MEDIA BY 64

 ARTISTS OF THE GREATER DC REGION THAT RESPONDED TO THE GLOBAL COVID-19

 PANDEMIC AND RECENT SOCIAL UPHEAVALS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: THE PHILLIPS PRESENTED A BROAD RANGE OF PROGRAMMING DESIGNED TO APPEAL TO THE MUSEUM'S EXPANDING VISITOR DEMOGRAPHIC. WE WORKED WITH UNIVERSITY OF MARYLAND TO VIRTUALLY PRESENT OUR ANNUAL ARTISTS OF CONSCIENCE FORUM IN SEPTEMBER 2020, "WOMEN, RACE, REPRESENTATION" WHICH ADDRESSED THE SIGNIFICANCE OF THE WOMEN'S SUFFRAGE MOVEMENT IN THE U.S. AND CELEBRATED WOMEN'S ACCOMPLISHMENTS RELATED TO ISSUES OF SOCIAL JUSTICE, WHILE ACKNOWLEDGING THE CONTINUED STRUGGLE FOR EQUALITY AND INCLUSION IN ALL FACETS OF LIFE, INCLUDING EDUCATION, ARTISTIC PRACTICE, AND PHILANTHROPY.

 THROUGH THE MUSEUM'S 12-WEEK ARTS INTEGRATION COURSE, PRISM.K12:

 CONNECTING TO THE CORE CURRICULUM, HELD SEPTEMBER 2020-FEBRUARY 2021,

 25 EDUCATORS OF DIFFERENT SUBJECTS AND GRADE LEVELS HAD THE OPPORTUNITY

 TO BLEND THE VISUAL ARTS SEAMLESSLY INTO THEIR CORE CURRICULUMS, USING

 THE PHILLIPS'S PRISM.K12 ARTS INTEGRATION STRATEGIES AND RESOURCES.

 ADDITIONALLY, THE MUSEUM EXPANDED ITS MODEL FOR ARTS INTEGRATION TO

 CREATE A MODEL FOR CULTURALLY RESPONSIVE TEACHING

 (HTTPS://WWW.PHILLIPSCOLLECTION.ORG/PRISMK12-STRATEGIES) AND ADDED 25

 NEW LESSON PLANS TO THE WEBSITE. WE REACHED 115 TEACHERS THROUGH 7

 57

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Schedule O (Form 990 or 990-EZ) 2020	Page 2					
Name of the organization THE PHILLIPS COLLECTION	Employer identification number 53-0204620					
ADDITIONAL PROFESSIONAL DEVELOPMENT SESSIONS, AND 25 TEACHERS						
PARTICIPATED IN A WEEK-LONG SUMMER TEACHER INSTITUTE. WE REACHED 582						
PK-12 STUDENTS WITHIN THE DC PUBLIC AND CHARTER SCHOOLS DURING THE						
FISCAL YEAR THROUGH VIRTUAL TOURS AND THE MUSEUM'S MULTI-	VISIT SCHOOL					
PARTNERSHIP PROGRAM, ART LINKS.						

THE PHILLIPS COLLECTION'S WORKSHOP AND GALLERY AT THE TOWN HALL EDUCATION ARTS RECREATION CAMPUS (THEARC) PROVIDES A SPACE TO VIEW, DISCUSS, MAKE, AND EXHIBIT ART. OUR PROGRAMS ARE CO-CREATED WITH OUR PARTNERS AND PARTICIPANTS TO ENCOURAGE AUTHENTIC COMMUNITY DIALOGUE, COMMUNITY PLANNING, AND COMMUNITY ACTION. FROM ITS VERY INCEPTION, THE PHILLIPS HAS FOCUSED ON THE HEALING POWER OF ART. OUR CREATIVE AGING PARTNERSHIP WITH IONA SENIOR SERVICES AND ARTS FOR THE AGING (AFTA) TRANSITIONED TO VIRTUAL EVENTS IN APRIL 2020. IONA'S NEW CAMPUS NEAR THEARC ALLOWS THE PHILLIPS TO SERVE MORE OLDER ADULTS IN WARDS 7 AND 8. OUR MOST POPULAR VIRTUAL OFFERING WITH AN AVERAGE OF 70 PARTICIPANTS EACH WEEK IS OUR ART-BASED MEDITATION PROGRAM, CONSISTING OF AN ART DISCUSSION LED BY PHILLIPS'S EDUCATOR DONNA JONTE AND GUIDED MEDITATION LED BY THE MUSEUM'S RESIDENT YOGA TEACHER APARNA SADANANDA. DESPITE THE PANDEMIC, THE PHILLIPS CONTINUED TO PROVIDE SERVICES IN THE COMMUNITY, ASSEMBLING WELLNESS KITS FOR DISTRIBUTION BY BUILDING BRIDGES ACROSS THE RIVER.

EXPENSES \$ 1,481,459. INCLUDING GRANTS OF \$ 0. REVENUE \$ 687.

FORM 990, PART VI, SECTION A, LINE 2:									
TONI PAUL AND RONALD PAUL HAVE A FAMILY RELATIONSHIP. O	NE HAS EXPERTISE IN								
THE EDUCATION FIELD AND THE OTHER IN CAMPAIGN FINANCE A	ND FUNDRAISING.								

58

032212 11-20-20

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANIZATION HAS ONE CLASS OF MEMBERSHIP. THE CLASS SHALL INCLUDE, WHEN

POSSIBLE, ONE OR MORE MEMBERS OF THE FAMILY OF THE FOUNDER, DUNCAN

PHILLIPS.

FORM 990, PART VI, SECTION A, LINE 7A:

THE CHAIR OF THE GOVERNING BOARD SHALL BE DETERMINED BY THE VOTE OF THE MEMBERS.

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

THE FINANCIAL STATEMENTS WERE PREPARED BY MANAGEMENT AND AUDITED BY THE MUSEUM'S INDEPENDENT AUDITORS. THE FORM 990 WAS PREPARED BY MANAGEMENT AND REVIEWED BY THE MUSEUM'S EXTERNAL TAX ACCOUNTANTS. THE AUDIT COMMITTEE OF THE BOARD IS CHARGED WITH REVIEWING THE AUDITED FINANCIALS AND THE ANNUAL 990 FILING. THESE DOCUMENTS ARE 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. LETTERS REITERATING THE POLICY FOR BOARD MEMBERS ARE SENT PERIODICALLY TO EACH BOARD MEMBER AS PART OF THE ANNUAL AUDIT PROCESS. EACH BOARD MEMBER IS REQUIRED TO SEND A WRITTEN RESPONSE INDICATING HIS/HER COMPLIANCE. IF A CONFLICT WERE TO ARISE, IT WOULD BE RESOLVED BY DISCUSSION WITH THE BOARD CHAIR AND AUDIT CHAIR, LEGAL COUNSEL, AND THE BOARD MEMBER AS TO THE APPROPRIATE RESOLUTION.

FORM 990, PART VI,	SECTION B, LINE 15A:	
032212 11-20-20	50	Schedule O (Form 990 or 990-EZ) 2020

2020.05095 THE PHILLIPS COLLECTION

Schedule O (Form 990 or 990-EZ) 2020	Page 2				
Name of the organization THE PHILLIPS COLLECTION	Employer identification number 53-0204620				
THE DIRECTOR OF THE MUSEUM WAS HIRED WITH THE ASSISTANCE	OF A SEARCH FIRM				
WITH MAJOR NOT-FOR-PROFIT CLIENTS. ITS SALARY RECOMMENDAT	ION 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 APPROPRIATE COMMITTEE BASED UPON PERFORMANCE RESULTS, BUDGET					
CAPACITY, AND COMPARABLES WITH OTHER MUSEUMS. ALL OTHER E	MPLOYEES ARE HIRED				
IN SALARY RANGES UTILIZING LOCAL AND/OR NATIONAL STATISTICAL SURVEYS.					
INCREASES IN COMPENSATION OUTSIDE OF DC MINIMUM WAGE REQUIREMENTS ARE					
DETERMINED BY THE DIRECTOR IN CONSULTATION WITH H.R. AND/OR SENIOR					
LEADERSHIP BASED UPON PERFORMANCE RESULTS AND IN COMPARIS	ON WITH OTHER				
INSTITUTIONS BASED UPON STATISTICAL SURVEYS. FOR PROFESSI	ONAL STAFF, THE				
MOST COMMON SURVEY USED IS THE AMERICAN ASSOCIATION OF MU	SEUM DIRECTORS				
ANNUAL SALARY SURVEY. THE LAST SALARY REVIEW TOOK PLACE I	N SUMMER 2021				
USING GENERAL DC MARKET DATA AND A 2021 SALARY SURVEY.					

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL, AR, CA, CT, FL, IL, KS, KY, MA, MD, MI, MN, MS, NC, NH, NJ, NM, NY, OR, PA, RI, SC, UT, VA, WV

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 LAST 10 YEARS' AUDITED FINANCIAL STATEMENTS AND 990S ARE POSTED ON THE MUSEUM'S WEBSITE.

60

032212 11-20-20

Schedule O (Form 990 or 990-EZ) 2020