

** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

<u>A</u> I	or th	e 2021 calendar year, or tax year beginning AUG 1, 2021 and	enaing U	<u>ОГ ЭТ, 202</u>	<u> </u>					
В	Check if applicat	C Name of organization		D Employer ident	ification number					
	Addr									
	Name Chan	pe Doing business as		53-0204620						
	Initia returi	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numl	oer					
	Final	1600 21ST STREET, NW	, ,							
	termi	City or town, state or province, country, and ZIP or foreign postal code		(202)38 G Gross receipts \$	27,986,870.					
Г	Amer	ded WACHTNOMON DC 20000			H(a) Is this a group return					
F	Appli			for subordinat						
	pend	SAME AS C ABOVE		H(b) Are all subordinate						
$\overline{}$	Toy or	empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) c	or 527	1	a list. See instructions					
		te: > WWW.PHILLIPSCOLLECTION.ORG	JI JZ <i>I</i>	H(c) Group exemp						
		forganization: X Corporation Trust Association Other	I Voor		M State of legal domicile: DC					
	art I	Summary	L Year	or formation. 1921	M State of legal doffliche. DC					
•	_	Briefly describe the organization's mission or most significant activities: THE I	DUTT.T.T	DC COLLECT	TON TO THE					
ė	1	OLDEST MUSEUM OF MODERN AND CONTEMPORARY			ION IS THE					
ă										
ērn	2	Check this box if the organization discontinued its operations or dispos		1	I					
Š	3									
<u>«</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)								
es	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)			5 240					
ĭ	6	Total number of volunteers (estimate if necessary)			60					
Activities & Governance	7 a				146,028.					
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	·····							
				Prior Year	Current Year					
<u>o</u>	8	Contributions and grants (Part VIII, line 1h)		11,092,248						
enc	9	Program service revenue (Part VIII, line 2g)		1,191,051						
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		5,351,842						
<u> </u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		118,647 17,753,788						
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	• • • • • • • • • • • • • • • • • • • •							
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0						
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0						
ý	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		7,148,945						
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0	. 23,584.					
<u>B</u>	. b	Total fundraising expenses (Part IX, column (D), line 25) 2,069,02	21.							
û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,911,852						
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		13,060,797						
	19	Revenue less expenses. Subtract line 18 from line 12		4,692,991	-474,212.					
Net Assets or	3		Ве	ginning of Current Yea	r End of Year					
ets	20	Total assets (Part X, line 16)		33,843,436						
Ass	21	Total liabilities (Part X, line 26)		13,534,911						
Net	22	Net assets or fund balances. Subtract line 21 from line 20	1	20,308,525						
Pa	art II	Signature Block	Į.	, ,	, ,					
Und	er pen	alties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of	mv knowledge and belief, it is					
		ct, and complete. Declaration of preparer (other than officer) is based on all information of wh			,					
	,									
Sig	n	Signature of officer		Date						
Her		CHERYL NICHOLS, CHIEF FINANCIAL OFFICE	R							
1101	·	Type or print name and title								
		Print/Type preparer's name Preparer's signature	1	Date Check	PTIN					
Paid	d	RICHARD J. LOCASTRO, CPA Culture for holean	tro	6/15/23 if self-em						
	parer	Firm's name GELMAN, ROSENBERG & FREEDMAN		Firm's EIN						
	Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N		THIH S LIN						
	J,	BETHESDA, MD 20814-2930		Phone no 3	01-951-9090					
Mar	v the	RS discuss this return with the preparer shown above? See instructions		1 Holle Ho. 9	X Yes No					
ivid	,	3.55455 (116) 7544111 WIGH (116 PROPARO) 3110WIT ADOVE! OFF ITISH HOUSEDING			103 100					

Par	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE PHILLIPS COLLECTION IS THE OLDEST MUSEUM OF MODERN AND
	CONTEMPORARY ART IN THE U.S. IN ADDITION TO PRESENTATION OF WORKS FROM
	THE PERMANENT COLLECTION AND SPECIAL EXHIBITIONS, THE MUSEUM MAINTAINS
	ACTIVE EDUCATIONAL, ACADEMIC, (CONTINUED ON SCHEDULE O)
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? No
_	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
4-	revenue, if any, for each program service reported. (Code:) (Expenses \$ 3,227,713 • including grants of \$) (Revenue \$ 385,593 •)
4a	(Code:) (Expenses \$ 3,227,713. including grants of \$) (Revenue \$) (Revenue \$) (Revenue \$
	NEARLY 6,000 WORKS WAS ORIGINALLY CREATED BEGINNING IN 1913 BY DUNCAN
	PHILLIPS AND LATER HIS WIFE MARJORIE PHILLIPS AND OPENED TO THE PUBLIC
	IN 1921 AS THE NATION'S FIRST MUSEUM OF MODERN AND CONTEMPORARY ART.
	OUR NEW ACQUISITIONS REFLECT THE MUSEUM'S EFFORTS TO ENHANCE AND
	DIVERSIFY THE COLLECTION BY EMBRACING WORKS THAT REFLECT A NARRATIVE OF
	MODERN AND CONTEMPORARY ART BEYOND THE TRADITIONAL FOCUS ON EUROPEAN
	AND AMERICAN ART AND SPEAK TO COMMUNITIES WE ARE WORKING TO SERVE.
	ACTIVITIES INCLUDE CONSERVATION, ACQUISITION OF NEW WORKS THROUGH BOTH
	GIFT AND PURCHASE, DIGITAL REPRODUCTION FOR PUBLICATIONS AND FOR
	PRESENTATION ON THE MUSEUM'S WEBSITE, ARTSTOR, GOOGLE ART, AND THE
	MULTI-MUSEUM APP BLOOMBERG CONNECTS. (CONTINUED ON SCHEDULE O)
4b	(Code:) (Expenses \$ 2,837,353. including grants of \$) (Revenue \$ 440,747.
	THE PHILLIPS COLLECTION RETURNED TO ONSITE EVENTS IN EARLY FY22,
	ENGAGING WITH OUR AUDIENCES THROUGH ONSITE, DIGITAL, AND HYBRID
	PROGRAMS INCLUDING MEMBER ART TOURS AND EXHIBITION OPENINGS, SUNDAY
	CONCERTS AND OTHERS. WE CONNECTED WITH BOTH CURRENT AND POTENTIAL
	MEMBERS AND VISITORS THROUGH OUR WEBSITE, SOCIAL MEDIA, E-NEWSLETTERS,
	LOCAL AND REGIONAL MARKETING AND ADVERTISING, AND OUR PARTICIPATION IN
	THE BLOOMBERG CONNECTS APP. 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. WITH THE RELAXATION OF COVID RESTRICTIONS, WE
	WERE AGAIN ABLE TO OFFER OUR MUSEUM AS A (CONTINUED ON SCHEDULE O)
4c	(Code:) (Expenses \$ 4,552,798. including grants of \$) (Revenue \$) (Revenue \$
	FROM THE MUSEUM'S OWN HOLDINGS, LOANS FROM INDIVIDUALS AND OTHER
	INSTITUTIONS, AND COLLABORATIONS WITH OTHER VENUES. HIGHLIGHTS FROM
	FY22 INCLUDED THE CONTINUATION 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; DAVID DRISKELL: ICONS OF NATURE AND HISTORY, OFFERING
	THE FIRST COMPREHENSIVE EXAMINATION OF THE PAINTINGS, COLLAGES, PRINTS,
	AND DRAWINGS OF THE CELEBRATED AMERICAN ARTIST, ART HISTORIAN, AND
	EDUCATOR; ALMA W. THOMAS: EVERYTHING IS BEAUTIFUL, WHICH PROVIDED A
	FRESH PERSPECTIVE ON THE ARTIST'S DYNAMIC LONG LIFE (1891-1978) AND
	MULTIFACETED CAREER THAT WAS DEFINED BY (CONTINUED ON SCHEDULE O)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 1,534,308 • including grants of \$) (Revenue \$ 60,442 •)
4e	Total program service expenses ► 12,152,172.
	- 000

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Form 990 (2021) THE PHILLIPS COLLECTION

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	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		<u>X</u>
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u>X</u>
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		<u>X</u>
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		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		<u>X</u>
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	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u>X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
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	
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		<u>X</u>
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		<u>X</u>
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. See instructions	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		<u>X</u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		X

Form 990 (2021) THE PHILLIPS COLLECTION
Part IV Checklist of Required Schedules (continued)

	(SOMETHORS)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		163	NO
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			1
	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? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	Х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
	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		Х
25a	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		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	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%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	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			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			1
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			1
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
_	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 83			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
12200	1 12 00 21	Eorm	990	(2021)

THE PHILLIPS COLLECTION 53-0204620 Page 5 Form 990 (2021) Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 240 filed for the calendar year ending with or within the year covered by this return Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions. Х **3a** Did the organization have unrelated business gross income of \$1,000 or more during the year? За Х **b** If "Yes," has it filed a Form 990-T for this year? *If* "No" to line 3b, provide an explanation on Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 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? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). Х 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 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7с Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? X Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g 7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. N/A 9a Did the sponsoring organization make any taxable distributions under section 4966? 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 N/A Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders N/A 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 **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? N/A 13a Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Х Did the organization receive any payments for indoor tanning services during the tax year? **b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or Х excess parachute payment(s) during the year? 15 If "Yes," see the instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any

activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? N/A

Form **990** (2021)

If "Yes," complete Form 6069.

THE PHILLIPS COLLECTION 53-0204620 Page 6 Form 990 (2021) 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 29 **1a** Enter the number of voting members of the governing body at the end of the tax year 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. 29 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Х 6 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? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Х 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶SEE SCHEDULE O

18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available
	for public inspection. Indicate how you made these available. Check all that apply.

X Upon request X Own website Another's website Other (explain on Schedule O)

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20	State the name	e, address, an	d telephone	number of the person wh	o posse	sses the organization's books an	d records	▶.	
	CHERYL 1	NICHOLS	- (202	2)387-2151					
	1600 218	ST STRE	ET, NW	, WASHINGTON,	DC	20009			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

Check this box if neither the organization ne	·	orga T	niza			npen	sate	T	,	
(A)	(B)			((Pos	C) ition	,		(D)	(E)	(F)
Name and title	Average		not c	heck i	more than one			Reportable	Reportable	Estimated
	hours per week	box, unless person is both an officer and a director/trustee)					compensation from	compensation from related	amount of other	
	(list any	tor						the	organizations	compensation
	hours for	direc				ъ В		organization	(W-2/1099-MISC/	from the
	related	tee or	ustee			ensati		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al trus	nal tr		loyee	omp		1099-NEC)		and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) DODOWN MOGINANT	line)	ıı	ıı	10	Ş.	:£, £	윤			
(1) DOROTHY KOSINSKI	60.00	1		х				220 042	0	60 704
VRADENBURG DIRECTOR AND CEO (2) KLAUS OTTMANN	45.00			Λ				329,843.	0.	69,704.
	45.00	1			x			104 077	0.	20 007
CHIEF CURATOR & DEPUTY DIRECTOR (3) CHERYL NICHOLS	45.00				Δ			184,877.	0.	28,807.
CFO	45.00	1		х				131,860.	0.	12 000
(4) WENDY PONVERT	45.00			Λ				131,000.	0.	43,098.
DIRECTOR OF DEVELOPMENT	43.00	1				x		135,093.	0.	30,614.
(5) MICHELE WINKLER THOMAS	45.00					^		155,095.	0.	30,014.
DIR. OF SRATEGY & OPERATIONS	±3.00	1				x		150,619.	0.	14,994.
(6) DARCI VANDERHOFF	45.00							130,013.	<u> </u>	14,004.
CHIEF INFORMATION OFFICER	43.00	1				x		110,646.	0.	24,006.
(7) KEITH COSTAS	45.00							220,0201	0.1	
SPECIAL EVENTS DIRECTOR		1				x		104,173.	0.	14,347.
(8) JOHN DESPRES	3.00							,	-	,
TRUSTEE; THEN CHAIR (TRANS. 6/2022)		Х		Х				0.	0.	0.
(9) DANI LEVINAS	3.00									
CHAIR (THROUGH 6/2022)		Х		Х				0.	0.	0.
(10) BARBARA HALL	2.00									
TRUSTEE; THEN V. CHAIR (TRANS. 6/22)		Х		Х				0.	0.	0.
(11) SALA PATTERSON	2.00									
VICE CHAIR		Х		Х				0.	0.	0.
(12) TODD GALAIDA	3.00									
V. CHAIR; THEN TRUSTEE (TRANS. 6/22)		Х		Х				0.	0.	0.
(13) PAMELA GWALTNEY	2.00									
TRUSTEE; THEN SEC. (TRANS. 6/2022)		Х		Х				0.	0.	0.
(14) AMY MEADOWS	3.00									
SEC.; THEN TRUSTEE (TRANS. 6/2022)		Х		Х				0.	0.	0.
(15) B. THOMAS MANSBACH	2.00									
TRUSTEE; THEN TREAS. (TRANS. 6/2022)		Х		Х				0.	0.	0.
(16) KATHLEEN PETITT	3.00	4_							_	_
TREASURER (THROUGH 6/2022)	4 2 2	Х		Х				0.	0.	0.
(17) PATTY ALPER-COHN	1.00									_
TRUSTEE		Х						0.	0.	0.

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	TOO COL	יינעני	1 C T	<u> </u>	TA				33-0204	020 Page 0
Part VII Section A. Officers, Directors, T	rustees, Key Emp	oloy	ees,	and	l Hig	ghes	t Co	ompensated Employee	s (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week	box	Position (do not check more than one pox, unless person is both an officer and a director/trustee)					Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stit utional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) BARBARA BERISH BROWN TRUSTEE	1.00	Х						0.	0.	0.
(19) SUSAN L. BUTLER TRUSTEE	1.00	х						0.	0.	0.
(20) JANE CHU TRUSTEE	1.00	х						0.	0.	0.
(21) ROBERT DRUMHELLER TRUSTEE	1.00	х						0.	0.	0.
(22) NINA CHUNG DWYER TRUSTEE	1.00	х						0.	0.	0.
(23) LINDSAY ELLENBOGEN TRUSTEE	1.00	х						0.	0.	0.
(24) JULIE GARCIA TRUSTEE	1.00	х						0.	0.	0.
(25) BONNIE BURKE HIMMELMAN TRUSTEE	1.00	х						0.	0.	0.
(26) LYNNE N. HORNING TRUSTEE	1.00	х						0.	0.	0.
1b Subtotal c Total from continuation sheets to Par							>	1,147,111.	0.	225,570.
d Total (add lines 1b and 1c)	<u></u>							1,147,111.	0.	225,570.

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

Solid the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
DYSON CAPITAL ADVISORS, 201 NORTH UNION ST	INVESTMENT	
#300, ALEXANDRIA, VA 22314	CONSULTANT	184,360.
OCCASIONS CATERING		
655 TAYLOR ST NE, WASHINGTON, DC 20017	EVENT CATERING	181,511.
CROZIER FINE ARTS, INC.		
P.O. BOX 21089, NEW YORK, NY 10087	ART HANDLING	170,878.
THYSSENKRUPP ELEVATOR		
PO BOX 3796, CAROL STREAM, IL 60132-3796	ELEVATOR CONTRACTOR	149,418.
KOYA LEADERSHIP LLC, 3005 MARKET ST. STE	EXECUTIVE SEARCH	
3300, PHILADELPHIA, PA 19103	FIRM	130,887.
2 Total number of independent contractors (including but not limited to those listed \$100,000 of compensation from the organization.	d above) who received more than	
\$100,000 of compensation from the organization		

SEE PART VII, SECTION A CONTINUATION SHEETS

	LLIPS COL	LE	CT	<u>'IO</u>	N				53-020	4620
Part VII Section A. Officers, Directors,	Trustees, Key Er	nplo	yee	s, aı	nd F	ligh	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	Position			1		Reportable	Reportable	Estimated	
	hours	(cl				арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
	(list any	irecto				em pl		organization	(W-2/1099-MISC)	from the
	hours for related	ord	tee			sated		(W-2/1099-MISC)		organization and related
	organizations	rustee	l trus		99/	n pen				organizations
	below	Individual trustee or director	Institutional trustee	_	Key employee	Highest compensated employee	-E			organizations
	line)	Indivi	Instit	Officer of the or	Key e	Highe	Former			
(27) PAUL KILLIAN	1.00									
TRUSTEE		Х						0.	0.	0.
(28) MICHELINE KLAGSBRUN	1.00									
TRUSTEE		Х						0.	0.	0.
(29) HOWARD KRASS	1.00									
TRUSTEE		Х						0.	0.	0.
(30) A. FENNER MILTON	1.00									
TRUSTEE		Х						0.	0.	0.
(31) JUANITA MOORE	1.00									
TRUSTEE		Х						0.	0.	0.
(32) RONALD A. PAUL	1.00									
TRUSTEE		Х						0.	0.	0.
(33) JUDY POMERANZ	1.00									
TRUSTEE		Х						0.	0.	0.
(34) HARVEY ROSS	1.00									_
TRUSTEE		Х						0.	0.	0.
(35) THOMAS D. RUTHERFOORD, JR	1.00									
TRUSTEE	1 00	Х				_		0.	0.	0.
(36) ALICE PHILLIPS SWISTEL	1.00	.,							0	
TRUSTEE	1 00	Х						0.	0.	0.
(37) ELIZABETH WILLIAMS	1.00	Х						0.	0.	_
TRUSTEE (38) LEO E. ZICKLER	1.00	Λ						0.	0.	0.
TRUSTEE	1.00	Х						0.	0.	0.
TRUSTLE		Λ						0.	0.	0.
		•								
		•								
		L	L	L	L	L				
						L				
			_	_		_	_			
Total to Part VII, Section A, line 1c										

Form 990 (2021) THE PHILLIPS COLLECTION
Part VIII Statement of Revenue

		Check if Schedule O contains a response	e or note to any lin	e in this Part VIII			
				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
					lunction revenue	business revenue	sections 512 - 514
S S	1 a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues 1b	1,276,412.				
جَ ۾		Fundraising events 1c	645,621.				
fts, r A		Related organizations 1d	, -				
ig ig		Government grants (contributions)	2,327,962.				
Sin		All other contributions, gifts, grants, and	_,,				
e ti	•	similar amounts not included above 1f	4,859,349.				
ë₽	_	***	972,810.				
n o	_		372,010.	9,109,344.			
Oa		Total. Add lines 1a-1f	Business Code	3,103,311.			
	•	VISITOR FEES	900099	736,098.	736,098.		
<u>i</u>	2 a		900099	322,807.	322,807.		
er ue	b	EDUCATIONAL PROGRAMS	900099	60,442.	60,442.		
n S	C	·	900099		53,345.		
gra Re	C	FACILITY/EQUIP RENTAL MEMBERSHIP DUES	900099	53,345.	35,087.		
Program Service Revenue	6	<u> </u>		35,087.	35,067.		
ъ.		All other program service revenue		1 007 770			
		Total. Add lines 2a-2f	······	1,207,779.			
	3	Investment income (including dividends, inter	·	1 001 070		146 000	1775040
	other similar amounts) Income from investment of tax-exempt bond pro			1,921,970.		146,028.	1775942.
			proceeds	10.000			10.000
	5	Royalties	(*) D	12,898.			12,898.
		(i) Real	(ii) Personal				
		Gross rents 6a					
		Less: rental expenses 6b					
	C	Rental income or (loss) 6c					
		Net rental income or (loss)					
	7 a	Gross amount from sales of (i) Securities					
		assets other than inventory 7a 14,770,851	•				
	b	Less: cost or other basis					
ne		and sales expenses	_				
ther Revenue	C	Gain or (loss) 7c 3,029,185					
æ	C	Net gain or (loss)	>	3,029,185.			3029185.
her	8 a	Gross income from fundraising events (not					
₽		including \$ 645,621. of					
		contributions reported on line 1c). See					
		Part IV, line 18					
		Less: direct expenses 8	b 210,875.				
		Net income or (loss) from fundraising events		-67,915.			-67,915.
	9 a	Gross income from gaming activities. See					
		Part IV, line 19					
	b	Less: direct expenses 9	b				
	c	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances10	a 806,650.				
	b	Less: cost of goods sold10	b 419,248.				
$\perp \downarrow$	C	Net income or (loss) from sales of inventory	>	387,402.	387,402.		
₁₀			Business Code				
on e	11 a	MISCELLANEOUS	900099	10,418.			10,418.
Miscellaneous Revenue	b	GAIN ON DISPOSAL	900099	4,000.			4,000.
eve	c	;					
Aiš	c	All other revenue					
_	е	Total. Add lines 11a-11d	>	14,418.			
	12	Total revenue. See instructions	>	15,615,081.	1,595,181.	146,028.	4764528.

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Form 990 (2021) THE PHILLIPS COLLECTION Part IX Statement of Functional Expenses

Secti	ion 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othi	er organizations must con	nnlete column (A)	
<u> </u>	Check if Schedule O contains a respon				X
	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		OAP STIESS	general expenses	5/,55/1000
-	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	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	888,438.	656,149.	101,658.	130,631.
6	Compensation not included above to disqualified	•		·	•
_	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	5,433,961.	4,661,685.	13,342.	758,934.
8	Pension plan accruals and contributions (include	.,,	, , , , = , , , , ,	==, -=-	,
•	section 401(k) and 403(b) employer contributions)	206,835.	147,570.	1,052.	58,213.
9	Other employee benefits	648,506.	506,805.	4,472.	137,229.
10	Payroll taxes	537,131.	431,095.	10,459.	95,577.
11	Fees for services (nonemployees):	337,131	101,0300	20,1001	3373111
'' a	Management				
b					
	•	18,375.		18,375.	
	Accounting	39,119.		10,373.	39,119.
	B () () () () ()	23,584.			23,584.
e	- · · · · · · · · · · · · · · · · · · ·	316,303.		316,303.	23,304.
f	Investment management fees	310,303.		310,303.	
g	`	1,623,649.	985,850.	309,482.	328,317.
40	column (A), amount, list line 11g expenses on Sch O.)	273,392.		19,292.	320,317.
12	Advertising and promotion	1,073,587.	819,233.	98,501.	155,853.
13	Office expenses	368,448.		69,684.	36,650.
14	Information technology	34,856.		09,004.	46.
15	Royalties	675,572.		318,381.	13,474.
16	Occupancy	86,193.	67,900.	13,782.	4,511.
17	Travel	00,193.	07,900.	13,702.	4,311.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	435,245.	221 005	90,283.	13,137.
20	Interest	433,445.	331,825.	90,∠83.	13,13/.
21	Payments to affiliates	1 2/2 005	017 215	206 760	20 001
22	Depreciation, depletion, and amortization	1,343,005.	917,315. 423,804.	386,769.	38,921.
23	Insurance	445,256.	423,804.	17,877.	3,575.
24	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 O.)				
а	OTHER EXHIBITION EXP.	1,043,486.	1,037,092.	1,535.	4,859.
b	EVENTS	353,656.		5,085.	223,785.
c	PURCHASES OF ART	147,604.	147,604.	-,	,
d	MISCELLANEOUS	73,092.	-1,282.	71,768.	2,606.
-	All other expenses	,	_,	,	_,
25	Total functional expenses. Add lines 1 through 24e	16,089,293.	12,152,172.	1,868,100.	2,069,021.
26	Joint costs. Complete this line only if the organization		,,,	=,::::,=:::	_, ,
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	11 10110 Willig GOT 30-2 (AGG 300-720)		1		000

Form 990 (2021)
Part X | Balance Sheet

Par	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	572,183.	2	1,283,575.
	3	Pledges and grants receivable, net	8,741,424.	3	6,775,821.
	4	Accounts receivable, net	559,389.	4	155,182.
	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			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ţ2	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	382,938.	8	379,472.
۲	9	Prepaid expenses and deferred charges	315,591.	9	228,081.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 51,011,054.			
	b	Less: accumulated depreciation 10b 21,310,025.	30,669,935.		29,701,029.
	11	Investments - publicly traded securities	57,815,101.		38,397,062.
	12	Investments - other securities. See Part IV, line 11	34,786,875.	12	49,032,503.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	100 040 406	15	105 050 505
	16	Total assets. Add lines 1 through 15 (must equal line 33)	133,843,436.	16	125,952,725.
	17	Accounts payable and accrued expenses	1,175,558.	17	2,122,126.
	18	Grants payable	00 001	18	F0 031
	19	Deferred revenue	88,881.	19	59,931.
	20	Tax-exempt bond liabilities	7,144,829.	20	6,253,457.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
-jak		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties	5,011,326.	23	3,995,134.
	24	Unsecured notes and loans payable to unrelated third parties	3,011,320.	24	3,333,134.
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
			114,317.	25	181,981.
	26	of Schedule D Total liabilities. Add lines 17 through 25	13,534,911.		12,612,629.
	20	Organizations that follow FASB ASC 958, check here	15,551,511.	20	12,012,023.
Se l		and complete lines 27, 28, 32, and 33.			
Š	27	Net assets without donor restrictions	29,422,140.	27	30,355,473.
3ale	28	Net assets with donor restrictions	90,886,385.	28	82,984,623.
<u> </u>		Organizations that do not follow FASB ASC 958, check here			, , , , , , , , , , , , , , , , , , , ,
ᆵ		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
sets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	120,308,525.	32	113,340,096.
_	33	Total liabilities and net assets/fund balances	133,843,436.	33	125,952,725.

Pai	t 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				<u>81.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2				<u>93.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		474	1,2	<u> 12.</u>
4						<u>25.</u>
5	Net unrealized gains (losses) on investments	5	<u>-6,</u>	494	1,2	<u> 17.</u>
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	113,	340	0,0	<u>96.</u>
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			
			_		Yes	No
1	Accounting method used to prepare the Form 990:					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					_X_
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a						
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	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	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit				
	Act and OMB Circular A-133?			За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit				1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		
			,	Form	990	(2021)

132012 12-09-21

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

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

2021

Open to Public Inspection

Name of the organization

THE PHILLIPS COLLECTION Employer identification number 53-0204620

Pa	rt I	Reason for Public (Charity Status. ((All organizations must o	omplete th	nis part.) S	ee instructions.	
he	organ	zation is not a private found	ation because it is: (F	or lines 1 through 12, c	heck only	one box.)		
1	\bigcap	A church, convention of chu	·	- ·	-	-)(A)(i).	
2	Ħ	A school described in secti					7. 7.7	
3	H			·		/h\/1\/	:1	
<u>ح</u>	H	A hospital or a cooperative	•					the heapital's name
4		A medical research organiza	ation operated in cor	ijunction with a nospital	described	III Sectio	n 170(b)(1)(A)(III). Enter	the nospital's name,
		city, and state:						
5		An organization operated for		lege or university owner	or operate	ed by a go	vernmental unit describe	ed in
		section 170(b)(1)(A)(iv). (C	complete Part II.)					
6		A federal, state, or local gov	ernment or governm	nental unit described in	section 17	'0(b)(1)(A)	(v).	
7	X	An organization that normal	lly receives a substar	ntial part of its support f	om a gove	ernmental	unit or from the general p	oublic described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)					
8		A community trust describe	d in section 170(b)(1)(A)(vi). (Complete Par	t II.)			
9	\Box	An agricultural research org				ed in coniu	inction with a land-grant	college
_		or university or a non-land-g				-	-	-
		university:	rant conege of agrici	artare (500 instructions).	Littor tilo i	iarrio, orty	, and state or the conege	, 01
40			lly rossiyos (1) more t	than 22 1/20/ of its ours	ort from o	ontribution	no momborobin foco on	d aroog rooginto from
10		An organization that normal						
		activities related to its exem		· ·			• •	-
		income and unrelated busin		(less section 511 tax) fro	m busines	ses acqui	red by the organization a	after June 30, 1975.
		See section 509(a)(2). (Cor	-					
11	Щ	An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50)9(a)(4).	
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	ne function	ns of, or to carry out the	purposes of one or
		more publicly supported org	ganizations describe	d in section 509(a)(1) d	r section :	509(a)(2).	See section 509(a)(3). (Check the box on
		lines 12a through 12d that of	describes the type of	supporting organization	and com	plete lines	12e, 12f, and 12g.	
а		Type I. A supporting orga	nization operated, su	upervised, or controlled	by its supp	orted org	anization(s), typically by	giving
		the supported organization	on(s) the power to red	gularly appoint or elect a	maiority o	f the direc	tors or trustees of the su	upportina
		organization. You must c			, ,			
h		Type II. A supporting orga	= :		ion with its	s sunnorte	d organization(s) by hav	vina
		control or management of						
					arrie persor	iis iiiai coi	ittoi or manage the supp	oortea
		organization(s). You mus						1 20
С		Type III functionally inte					• •	ea with,
		its supported organization	n(s) (see instructions)	. You must complete	Part IV, Se	ctions A,	D, and E.	
d			integrated. A supp	orting organization oper	ated in cor	nnection w	ith its supported organiz	zation(s)
		that is not functionally into	egrated. The organiz	ation generally must sat	isfy a distr	ibution red	uirement and an attentiv	/eness
		requirement (see instructi	ons). You must con	nplete Part IV, Sections	A and D,	and Part	V.	
е		Check this box if the orga	nization received a v	vritten determination fro	m the IRS	that it is a	Type I, Type II, Type III	
		functionally integrated, or	Type III non-function	nally integrated supporti	ng organiz	ation.		
f	Ente	r the number of supported o	rganizations					
g		ride the following information		d organization(s).				
	() Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed na document?	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)

(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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	7790290.	15584489.	6034132.	11092248.	9109344.	49610503.
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	7790290.	15584489.	6034132.	11092248.	9109344.	49610503.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						8180583.
	Public support. Subtract line 5 from line 4.						41429920.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	7790290.	15584489.	6034132.	11092248.	9109344.	49610503.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	766,963.	1317969.	740,728.	802,034.	1804557.	5432251.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	46,021.	43,968.	24,097.	37,188.	130,311.	281,585.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	876.	1,103.	259.	43.	10,418.	
11	Total support. Add lines 7 through 10						55337038.
12	Gross receipts from related activities,	•	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				,393,964.
13	First 5 years. If the Form 990 is for the						. \square
800	organization, check this box and stop	here					>
	ction C. Computation of Publi			. (5)			74.87 %
14	Public support percentage for 2021 (li					14	
15	Public support percentage from 2020					15	
16a	16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and						
h	stop here. The organization qualifies as a publicly supported organization • X						
D	b 33 1/3% support test - 2020. 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 qualifies as a publicly supported organization						
17^	10% -facts-and-circumstances test	•	•				
17 a	and if the organization meets the facts	-					
	meets the facts-and-circumstances te		•	-		•	. —
h	10% -facts-and-circumstances test	· ·	•			7a and line 15 is	
D	more, and if the organization meets the	-					10 /0 OI
	organization meets the facts-and-circu				-		ightharpoonup
10	· ·						
10	Private foundation. If the organization	ir did not check a	DUX UITIIIIE TO, TO	a, 100, 17a, 01 1/1	, one on this box at	in see ilistructions	·

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.)

Se	ction A. Public Support	, , , , , , , , , , , , , , , , , , , ,					
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
-	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		T	T	Т	T	1
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
"	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
10	regularly carried on Other income. Do not include gain						
12	or loss from the sale of capital						
10	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)		rot opening their	foundly an extra to	l	01(a)(2)	<u> </u>
14	First 5 years. If the Form 990 is for the	· ·		•	•		
Sec	check this box and stop here ction C. Computation of Publi			• • • • • • • • • • • • • • • • • • • •			
	Public support percentage for 2021 (li			column (fl)		15	%
	Public support percentage from 2020	, , , , , , , , , , , , , , , , , , , ,	,			16	%
	ction D. Computation of Inves					1	70
	Investment income percentage for 20			ne 13, column (f))		17	%
	Investment income percentage from 2					18	%
	33 1/3% support tests - 2021. If the						
-	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2020. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 on 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 on 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.)

_		Yes	No
L	1		
L	2		
L	3a		
	3b		
	3c		
	4a		
	4b		
	4-		
	4c		
	5a		
	Ja		
	5b		
	5c		
	6		
L	7		
	8		
	9a		
	9b		
	0.		
	9с		
	10-		
	10a		
	10h		
	10b		

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Par	t IV Supporting Organizations (continued)			
			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 on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	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		
	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,			
Sact	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
3601	tion 6. Type it Supporting Organizations			
	Many and the file and the file of the file		Yes	No
	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	1		
Sect	the supported organization(s). tion D. All Type III Supporting Organizations			l
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	140
	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		
	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		
	By reason of the relationship described on 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		
Sect	tion 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 year (see instruction)	ons).		
а	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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	e instruction		ı
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
	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	0-		
	that these activities constituted substantially all of its activities.	2a		
	Did the activities described on 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	2b		
	these activities but for the organization's involvement. Parent of Supported Organizations. Answer lines 3a and 3h below.	<u> </u>		
	Parent of Supported Organizations. Answer lines 3a and 3b below. 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? <i>If</i> "Yes" or "No" provide details in Part VI.	3a		
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Schedule A (Form 990) 2021

instructions).

Schedule A (Form 990) 2021

e Excess from 2021

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Name of the organization

THE PHILLIPS COLLECTION

53-0204620

Organization type (check one):							
Filers of	:	Section:					
Form 99	0 or 990-EZ	$\overline{\mathbf{X}}$ 501(c)(3) (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 99	0-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
		covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General	Rule						
	ū	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special	Rules						
X	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one 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; line 1. Complete Parts I and II.					
	contributor, during the literary, or education	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.					
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year					
answer "	'No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 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 requirements of Schedule B (Form 990).					

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

Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021) Page **2**

Name of organization Employer identification number

THE PHILLIPS COLLECTION

53-0204620

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$1,399,609.	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		\$	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		\$533,333.	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		\$500,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$373,608.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6</u>	21	\$368,100.	Person X Payroll

Schedule B (Form 990) (2021)

Name of organization Employer identification number

THE PHILLIPS COLLECTION

53-0204620

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ 201,250.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$ <u>197,845.</u>	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZI P + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Page 3

Name of organization Employer identification number

THE PHILLIPS COLLECTION

53-0204620

Part II	Noncash Property (see instructions). Use duplicate copies of Part I	I 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
123/53 11-11.	01		Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021) Page 4 Name of organization **Employer identification number** THE PHILLIPS COLLECTION 53-0204620 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
ŀ			

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

•	● Section 501(c)(4), (5), or (6) organizations: Complete Part III.								
Nan	ne of organization			Emp	loyer identification number				
	THE PHI	LLIPS COLLECTION	1		53-0204620				
Pa	Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.								
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	rures		> \$	s				
Pa	art I-B Complete if the org	janization is exempt und	er section 501(c)(3).					
1	Enter the amount of any excise tax				<u> </u>				
	Enter the amount of any excise tax								
	If the organization incurred a section								
48	a Was a correction made?				Yes No				
<u>k</u>	f "Yes," describe in Part IV.								
_	·	janization is exempt und		<u> </u>	e)(3).				
	Enter the amount directly expended								
2	Enter the amount of the filing organ		•						
_	exempt function activities				·				
3	Total exempt function expenditures		•						
4	line 17b Did the filing organization file Form				Yes No				
4 5	Enter the names, addresses and en								
٥	made payments. For each organiza	• •	•	•	• •				
	contributions received that were pro-	•			•				
	political action committee (PAC). If	additional space is needed, prov	vide information in Part	IV.					
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0				

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

Part II-A Complete if the org	ianization	ie Avar	nnt under section	10 10 501/c)/3) and file		action under
section 501(h)).	jamzation	i is exci	iipt under seetioi		a i omi 0700 (ch	cotion under
				Part IV each affiliated	group member's nam	ie, address, EIN,
expenses, and sha		, ,				
B Check ► if the filing organiza	ation checke	d box A a	nd "limited control" pro	ovisions apply.		1
	its on Lobby ditures" me		nditures unts paid or incurred.))	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public	opinion (grassroots lobbying)			
b Total lobbying expenditures to influ	uence a legis	slative boo	dy (direct lobbying)			
c Total lobbying expenditures (add li	_					
d Other exempt purpose expenditure						
e Total exempt purpose expenditure						
f _Lobbying nontaxable amount. Enter						
If the amount on line 1e, column (a) o			bying nontaxable am			
Not over \$500,000		20% of	the amount on line 1e.			
Over \$500,000 but not over \$1,000	0,000	\$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000	\$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000	\$225,00	00 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000		\$1,000,	,000.			
g Grassroots nontaxable amount (er	nter 25% of li	ine 1f)				
h Subtract line 1g from line 1a. If zer	o or less, en	ter -0-				
i Subtract line 1f from line 1c. If zero	o or less, ent	ter -0				
j If there is an amount other than ze	ero on either	line 1h or	line 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this	year?					Yes No
	4	-Year Av	eraging Period Under	Section 501(h)		
(Some organizations t			• •	•	f the five columns b	elow.
			ate instructions for li			
	Lobby	/ing Expe	nditures During 4-Yea	ar Averaging Period		1
Calendar year (or fiscal year beginning in)	(a) 20	018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
Grassroots nontaxable amount Grassroots ceiling amount						
(150% of line 2d, column (e))						
(
f Grassroots lobbying expenditures						

Schedule C (Form 990) 2021 THE PHILLIPS COLLECTION 53-02046 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(1	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		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
	Media advertisements?		Х		
	Mailings to members, legislators, or the public?		Х		
е	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		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
_	Other activities?	X			455.
	Total. Add lines 1c through 1i			2	9,455.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
	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				
	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	 n	<u> </u>	tion	
Pai	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	11 50 1 (6)(o, or sec	LIOII	
	30 1(c)(o).			Yes	No
	W 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			162	NO
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
9 Par	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section			tion	
· ui	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered		•		3. is
	answered "Yes."		(2)	, ,	c , .c
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).				
а	Current year		2a		
	Carryover from last year		۱ ــ.		
С	Total				
3					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the exceeds the amount on line 3, what portion of the exceeds the	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par	t IV Supplemental Information				
Provi	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 II-	A, lines 1 a	nd 2 (See	
instru	ctions); and Part II-B, line 1. Also, complete this part for any additional information.				
PAF	T II-B, LINE 1, LOBBYING ACTIVITIES:				
THE	PHILLIPS COLLECTION ENGAGES TWO LOBBYISTS WHO REPR	ESENT	THE		
NA'	'IONAL CAPITAL ARTS CONSORTIUM-AN INFORMAL COOPERATI	VE UNI	DERTAK	ING IN	1
WH]	CH THE PHILLIPS COLLECTION PARTICIPATES. THE LOBBYI	STS PI	ROVIDE		
INE	ORMATION ABOUT THE AVAILABILITY AND METHODOLOGY FOR	OBTA	INING	FUNDS	
		_			
FRO	M THE FEDERAL GOVERNMENT, DC GOVERNMENT, INDUSTRIES	, AND			
			Cobodu	le C (Form	000\ 0004

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0047

Inspection

Name of the organization

THE PHILLIPS COLLECTION

Employer identification number 53-0204620

Par	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		Accounts. Complete if the
	organization answered Tes off offi 550, Fart IV, IIIV	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(-)	
2	Aggregate value of contributions to (during year)		_
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advised fu	unds
•	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor ac		
_	for charitable purposes and not for the benefit of the donor or		-
	• •		
Par			
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recreat	tion or education) Preservation of a hi	storically important land area
	Protection of natural habitat	Preservation of a ce	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form of a	conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic stru	ucture included in (a)	
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the orga	anization during the tax
	year ►		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the peri		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, l	handling of violations, and enforcing conserva	tion easements during the year
_	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservation	easements during the year
_	\$		(D) (1)
8	Does each conservation easement reported on line 2(d) above		
•	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation		
9	balance sheet, and include, if applicable, the text of the footn	•	
	organization's accounting for conservation easements.	ote to the organization's illiancial statements	that describes the
Par	rt III Organizations Maintaining Collections of	Art. Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form		
	If the organization elected, as permitted under FASB ASC 956		alance sheet works
	of art, historical treasures, or other similar assets held for pub	•	
	service, provide in Part XIII the text of the footnote to its finan	,	and or public
b	If the organization elected, as permitted under FASB ASC 95		nce sheet works of
	art, historical treasures, or other similar assets held for public	•	
	provide the following amounts relating to these items:	,, , , ,	
	(i) Revenue included on Form 990, Part VIII, line 1		• \$
2	If the organization received or held works of art, historical trea		
	the following amounts required to be reported under FASB A	_	•
а	Revenue included on Form 990, Part VIII, line 1	_	• \$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2021

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

Par	rt III Organizations Maintaining Co	ollections of Art	, Historical Tre	asures, oi	Other	Similar Ass	ets (continued)
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that	make sig	nificant use of	its
	collection items (check all that apply):						
а	X Public exhibition	d	X Loan or excl	nange progra	ım		
b	X Scholarly research	е	Other				
c	X Preservation for future generations	_					
4	Provide a description of the organization's co	llections and explain	how they further th	o organizatio	n'e avam	nt nurnose in E	Part YIII
5	During the year, did the organization solicit or						art Alli.
3							Yes X No
Dar	to be sold to raise funds rather than to be ma						
Fai	reported an amount on Form 990, Par		ete if the organization	n answered "	Yes" on I	-orm 990, Part	IV, line 9, or
1a	Is the organization an agent, trustee, custodia	an or other intermedi	ary for contributions	or other ass	ets not in	ncluded	
	on Form 990, Part X?						Yes No
b	If "Yes," explain the arrangement in Part XIII a	and complete the foll	owing table:				
							Amount
С	Beginning balance					1c	
	Additions during the year					1d	
	Distributions during the year						
f	Ending balance					1f	_
	Did the organization include an amount on Fo						Yes No
	If "Yes," explain the arrangement in Part XIII.		·				
	rt V Endowment Funds. Complete if					ີ າ	
ı uı	Endownient ands: Complete ii	(a) Current year	(b) Prior year	(c) Two year		d) Three years ba	ack (e) Four years back
		• • •				· • • • • • • • • • • • • • • • • • • •	
1a	Beginning of year balance	85,714,181.	64,081,984.	63,985		57,732,23	
b	Contributions	545,805.	4,466,106.		7,524.	7,912,18	
С	Net investment earnings, gains, and losses	-1,389,791.	19,212,794.	3,099	,599.	1,663,22	26. 5,510,933.
d	Grants or scholarships						
е	Other expenditures for facilities						
	and programs	3,044,604.	2,046,703.	3,330	,315.	3,322,47	76. 3,685,453.
f	Administrative expenses						
g	End of year balance	81,825,591.	85,714,181.	64,081	,984.	63,985,17	76. 57,732,238.
2	Provide the estimated percentage of the curre	ent year end balance	(line 1g, column (a)) held as:			
а	Board designated or quasi-endowment		%	,			
b	Permanent endowment ► 73.0600	%					
	Term endowment 16.8300 g						
·	The percentages on lines 2a, 2b, and 2c shou						
20			tion that are hold an	d administar	ad for tha	organization	
Sa	Are there endowment funds not in the posses	ssion of the organiza	tion that are new an	u auriiriistei	eu ioi tile	Giganization	Yes No
	by:						77
	(i) Unrelated organizations						···· ··· ···
_	(ii) Related organizations						
b	If "Yes" on line 3a(ii), are the related organizate						3b
4	Describe in Part XIII the intended uses of the		vment funds.				
Par	rt VI Land, Buildings, and Equipme				_		
	Complete if the organization answered	I "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990	, Part X, li	ne 10.	
	Description of property	(a) Cost or of	ther (b) Cost	or other	(c) Ac	cumulated	(d) Book value
		basis (investm	•	` ′	dep	reciation	
1a	Land			3,240.			833,240.
			46,65	3,733.	19,4	37,928.	27,215,805.
	Leasehold improvements			4,995.	-	6,998.	7,997.
		I		2,924.	1,6	75,628.	1,017,296.
	Other			6,162.		89,471.	626,691.
	I. Add lines 1a through 1e. (Column (d) must ed						29,701,029.

	S COLLECTION	53	-0204620 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			d = 6 d k b
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-ot-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other (A) ALTERNATIVE FUNDS -			
	29,151,739.	END-OF-YEAR MARKET	VAT.IIE
(C) ALTERNATIVE FUNDS -	29,131,139.	END-OF-IEAR MARKET	VALUE
(D) PRIVATE FUNDS	19,880,764.	END-OF-YEAR MARKET	VAT.IIE
	15,000,704.	END OF TEAK MARKET	VALUE
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	49,032,503.		
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	d-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.	
(a)	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) 15.)	>	
Part X Other Liabilities.	E 000 E : "' "		
Complete if the organization answered "Yes"	on ⊦orm 990, Part IV, line 1	1e or 11t. See Form 990, Part X, line 25	

1.	(a) Description of liability	(b) Book value
	1) Federal income taxes	
(2	2) GIFT ANNUITY DEBT	48,371.
(3	3) CAPITAL LEASE OBLIGATION	133,610.
(4	4)	
(5	5)	
(6		
(7	7)	
3)	3)	
(9		
Tota	I. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	181,981.

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

Pa	rt XI	Reconciliation of Revenue per Audited Financial Statement	s With	Revenue per Re	turn.		
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total r	evenue, gains, and other support per audited financial statements			1	13,035,358.	
2	Amou	nts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net ur	realized gains (losses) on investments	2a	-28,605.			
b		ed services and use of facilities	2b	219,242.			
С		eries of prior year grants	2c				
d		(Describe in Part XIII.)	2d	2,945,000.			
е	Add lir	nes 2a through 2d			2e	3,135,637.	
3	Subtra	ct line 2e from line 1			3	9,899,721.	
4		nts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Invest	ment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other	(Describe in Part XIII.)	4b	5,715,360.			
С		nes 4a and 4b			4c	5,715,360.	
5	Total r	evenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	15,615,081.	
Pa	rt XII	Reconciliation of Expenses per Audited Financial Statemen	ts Wit	th Expenses per R	letur	n.	
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total e	expenses and losses per audited financial statements			1	16,612,476.	
2	Amou	nts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donat	ed services and use of facilities	2a	219,242.			
b	Prior y	ear adjustments	2b				
С	Other	losses	2c				
d	Other	(Describe in Part XIII.)	2d	630,123.			
е	Add lir	nes 2a through 2d			2e	849,365.	
3		ct line 2e from line 1			3	15,763,111.	
4	Amou	nts included on Form 990, Part IX, line 25, but not on line 1:					
а	Invest	ment expenses not included on Form 990, Part VIII, line 7b	4a	316,303.			
b	Other	(Describe in Part XIII.)	4b	9,879.			
С	Add lir	nes 4a and 4b			4c	326,182.	
5	Total e	expenses. Add lines 3 and 4c. (This must equal Form 990. Part I, line 18.)			5	16,089,293.	
Pa	rt XIII	Supplemental Information.					
Prov	ide the	descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV,	, lines 1	b and 2b; Part V, line 4	; Part)	X, line 2; Part XI,	
lines	nes 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.

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, 2022 AND 2021.

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:

Part XIII Supplemental Information (continued)	age 3
FOR THE YEARS ENDED JULY 31, 2022 AND 2021, THE COLLECTION HAS DOCUMENTED)
ITS CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANC	E
FOR REPORTING UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT NO	
MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR	
DISCLOSURE IN THE FINANCIAL STATEMENTS.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
ENDOWMENT EARNINGS TRANSFERRED FOR OPERATIONS 2,945,00	
INCLUDED IN REVENUE ON THE FINANCIAL STATEMENTS AND	
EXCLUDED FROM REVENUE ON FORM 990, PART VIII.	
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
REALIZED GAINS, NON-OPERATING, REPORTED AS AN "OTHER ITEM" 4,945,87	4.
ON THE FINANCIAL STATEMENTS AND INCLUDED AS REVENUE ON FORM	
990, PART VIII.	
GALA EXPENSES EXCLUDED FROM REVENUE ON THE FINANCIAL -210,87	
STATEMENTS AND NETTED AGAINST REVENUE ON FORM 990,	
PART VIII.	
SHOP COST OF GOODS SOLD EXCLUDED FROM REVENUE ON -419,24	8.
THE FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE	
ON FORM 990, PART VIII.	
PPP DEBT EXTINGUISHMENT REPORTED AS AN "OTHER ITEM" ON 1,399,60	19.
THE FINANCIAL STATEMENTS AND REPORTED AS REVENUE	
ON FORM 990, PART VIII, LINE 1E.	
TOTAL TO SCHEDULE D, PART XI, LINE 4B 5,715,36	0.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
ONLY EXPENDED THE EXPENDED ON BUE ETHANOTAL 910 07	, _–

36

GALA EXPENSES INCLUDED IN EXPENSES ON THE FINANCIAL

210,875. Schedule D (Form 990) 2021

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

Attach to Form 990.

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

2021
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Employer identification number

Part I General Info Form 990, Part 1 For grantmakers. Does the grantees' eligibility 2 For grantmakers. Des United States. 3 Activities per Region. ((a) Region CENTRAL AMERICA AND THE CARIBBEAN					_ , ,	
THE PHILLIPS CO	LLECTION				53-02046	20
	General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 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 No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of offices in the region (c) Number of employees, agents, and independent contractors in the region (by type) (such as, fundraising, program service, describe specific type of service(s) in the region (by type) (such as, fundraising, program service) of service(s) in the region (by type) (such as, fundraising, program service) of service(s) in the region (by type) (such as, fundraising, program service) of service(s) in the region (by type) (such as, fundraising, program service) of service(s) in the region (by type) (such as, fundraising, program service) of service(s) in the region (by type) (such as, fundraising, program service) of service(s) in the region (by type) (such as, fundraising, program service) of service(s) in the region (by type) (such as, fundraising, program service) of service(s) in the region (by type) (such as, fundraising, program service) of service(s) in the region (by type) (such as, fundraising, program service) of service(s) in the region (by type) (such as, fundraising, program service) of service(s) in the region (by type) (such as, fundraising, program service) of service(s) in the region (by type) (such as, fundraising, program service) of service(s) in the region (by type) (such as, fundraising, program service) of service(s) in the region (by type) (such as, fundraising, program service) of service(s) in the region (by					
		maintain racer	do to authoroptiate the amount of its are	ata and ather	agistanas	
						Yes No
and grainteed engiamity is	5e ge e. e	,		9. 4. 110 0. 400.0		
2 For grantmakers. Desc	ribe in Part V the	e organization's	procedures for monitoring the use of its	grants and ot	ner assistance out	side the
United States.						
						T (0 T) .
(a) Region		èmplovees.				
the grantees' eligibility for 2 For grantmakers. Description United States. 3 Activities per Region. (Trick) (a) Region CENTRAL AMERICA AND THE CARIBBEAN		agents, and independent				I
2 For grantmakers. Description United States. 3 Activities per Region. (Trust) (a) Region CENTRAL AMERICA AND THE CARIBBEAN		contractors		of service	(s) in the region	
		in the region				
CENTRAL AMERICA AND						
THE CARIBBEAN	0	0	INVESTMENTS IN REGION			24,971,634.
Part General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantese deploying for grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 able can be duplicated if additional space is needed.) (a) Region (b) Number of offices in the region offices in the region offices in the region of service(s) in the region of service(s	9,084.					
						<u> </u>
Part I General Information on Activities Outside the United States. Complete if the or Form 990, Part IV, line 14b. 1 For grantmakers. Describe in Part V the organization maintain records to substantiate the amount of its grants and oth the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or as United States. 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of offices in the region offices in the region independent contractors in the region independent contractors in the region of sensitive contractors in the region of sensitive contractors. CENTRAL AMERICA AND THE CARIBBEAN 0 0 INVESTMENTS IN REGION EUROPE 0 0 INVESTMENTS IN REGION 3 a Subtotal 0 0 INVESTMENTS IN REGION 3 a Subtotal 0 0 0 INVESTMENTS IN REGION 5 Total from continuation sheets to Part I 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						
	General Information on Activities Outside the United States. Complete if the organization answered Form 990, Part IV, line 14b. 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? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance out United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in the region in the region in the region of the region in the region of the regio					
		ion on Activities Outside the United States. Complete if the organization answered "Yes" on 144b. The organization maintain records to substantiate the amount of its grants and other assistance, and the selection criteria used to award the grants or assistance?				
CENTRAL AMERICA AND THE CARIBBEAN COntractors in the region recipients located in the region of service(s) in the region in the region O INVESTMENTS IN REGION 24,97						
	eneral Information on Activities Outside the United States. Complete if the organization answered "Yes" on orm 990, Part IV, line 14b. Imakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, ees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?					
						1
3 a Subtotal	0	0				24,980,718.
	_	_				
	0	0				0.
	0	0				24,980,718.

132071 12-20-21

Schedule F (Form 990) 2021

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

1	(b) IRS code section		(d) Purpose of	(e) Amount	(f) Manner of	(g) Amount of	(h) Description	(i) Method of
(a) Name of organization	and EIN (if applicable)	(c) Region	grant			noncash assistance	of noncash assistance	valuation (book, FMV appraisal, other)
			ecognized as charities by th					•
			or counsel has provided a se					

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

				ites. Complete i	f the organization answered "Yes"	on Form 990, Part	IV, line 16.	
F	Part III can be duplicated if a	(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)

Page 4

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)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	X Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X Yes	☐ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2021

Part V | Supplemental Information

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

Employer identification number

53-0204620 THE PHILLIPS COLLECTION Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations Solicitation of non-government grants Internet and email solicitations b Solicitation of government grants Phone solicitations Special fundraising events С In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) DANILLER + COMPANY - 3724 MEMBER ACQUISITION Yes No JEFFERSON STREET, SUITE 302 MAILINGS Х 134,239 23,584 110,655. 134 239 23 584 110 655. Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration AL, AK, AR, CA, CO, CT, DC, FL, GA, IL, KS, KY, ME, MD, MA, MI, MN, MS, NV, NH, NJ, NM, NY, NC, ND OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI

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

SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990) 2021

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

		of fundraising event contributions and gr	oss income on Form 990	EZ, lines 1 and 6b. List e	events with gross receip	ts greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
					NONE	(add col. (a) through
			ANNUAL GALA			col. (c))
4			(event type)	(event type)	(total number)	
Revenue						
eve	1	Gross receipts	788,581.			788,581.
ď						
	2	Less: Contributions	645,621.			645,621.
	3	Gross income (line 1 minus line 2)	142,960.			142,960.
	4	Cash prizes				
	5	Noncash prizes				
es						
SUS	6	Rent/facility costs				
Direct Expenses						
ctE	7	Food and beverages	63,745.			63,745.
Öİ			,			· ·
	8	Entertainment				
	9	Other direct expenses	445 400			147,130.
	10				•	210,875.
	11	Net income summary. Subtract line 10 from I	()		>	-67,915.
Pa	irt I	Gaming. Complete if the organization		990, Part IV, line 19, or	reported more than	•
		\$15,000 on Form 990-EZ, line 6a.				
			(a) Dingo	(b) Pull tabs/instant	(a) Other geming	(d) Total gaming (add
nue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue						
ď	1	Gross revenue				
"	2	Cash prizes				
Direct Expenses						
ber	3	Noncash prizes				
Ă						
J.	4	Rent/facility costs				
ā						
	5	Other direct expenses				
		·	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No		
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		>	
9	En	ter the state(s) in which the organization condu	ucts gaming activities:			
а		the organization licensed to conduct gaming a				Yes No
b	If "	No," explain:				
	_					
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	rminated during the tax	year?	Yes No
b	If "	Yes," explain:				
	_					
	_					

Schedule G (Form 990) 2021

132082 10-21-21

Sch	nedule G (Form 990) 2021	THE PHILLIPS	COLLECTION	53-0204620 Page 3
11	Does the organization conduct of	aming activities with nonme	mbers?	Yes No
12	Is the organization a grantor, be	neficiary or trustee of a trust,	or a member of a partnership or other entity for	med
				Yes No
	Indicate the percentage of gamin			1 1
14	Enter the name and address of t	ne person wno prepares tne	organization's gaming/special events books and	records:
	Name			
	Address >			
15	a Does the organization have a co	ntract with a third party from	whom the organization receives gaming revenu	e? Yes No
	b If "Yes." enter the amount of gar	ming revenue received by the	organization 🕨 \$ and t	the amount
	of gaming revenue retained by the			
	c If "Yes," enter name and addres			
	Name			
	Address >			
16	Gaming manager information:			
	Name			
	Gaming manager compensation	> \$		
	Description of services provided	>		
	Director/officer	Employee	Independent contractor	
17	Mandatory distributions:			
	-	er state law to make charitab	le distributions from the gaming proceeds to	
	retain the state gaming license?			Yes No
ı		•	be distributed to other exempt organizations or	spent in the
D	organization's own exempt activ			
F			anations required by Part I, line 2b, columns (iii) ny additional information. See instructions.	and (v); and Part III, lines 9, 9b, 10b,
SC	HEDULE G, PART I,	LINE 2B, LIST	OF TEN HIGHEST PAID FUN	DRAISERS:
		-		
(I) NAME OF FUNDRAI	SER: DANILLER	+ COMPANY	
(]) ADDRESS OF FUND	RATSER:		
<u>37</u>	24 JEFFERSON STRE	ET, SUITE 302,	AUSTIN, TX 78731	
_				

Schedule G	(Form 990)	THE	PHILLIPS	COLLECTION	53-0204620	Page 4
Part IV	(Form 990) Supplemental Inform	nation	(continued)			
			•			
_						

SCHEDULE J (Form 990)

Compensation Information

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

2021

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

THE PHILLIPS COLLECTION

Employer identification number 53-0204620

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	<u></u>
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	<u> </u>
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	<u>5a</u>		X
b	Any related organization?	5b		<u> </u>
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	1	1

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

Schedule J (Form 990) 2021

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

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

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

	((B) Breakdown of W	/-2 and/or 1099-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) DOROTHY KOSINSKI (i	i)	329,843.	0.	0.	46,500.	23,204.	399,547.	0.
VRADENBURG DIRECTOR AND CEO		0.	0.	0.	0.	0.	0.	0.
(2) KLAUS OTTMANN (i	i)	184,877.	0.	0.	5,603.	23,204.	213,684.	0.
CHIEF CURATOR & DEPUTY DIRECTOR (ii	i)	0.	0.	0.	0.	0.	0.	0.
(3) CHERYL NICHOLS	i) _	131,860.	0.	0.	24,534.	18,564.	174,958.	0.
CFO (ii	i)	0.	0.	0.	0.	0.	0.	0.
(4) WENDY PONVERT	i) _	135,093.	0.	0.	22,040.	8,574.	165,707.	0.
DIRECTOR OF DEVELOPMENT (i	i)	0.	0.	0.	0.	0.	0.	0.
(5) MICHELE WINKLER THOMAS	i)	150,619.	0.	0.	14,994.	0.	165,613.	0.
DIR. OF SRATEGY & OPERATIONS (ii	i)	0.	0.	0.	0.	0.	0.	0.
(i	i) _							
(i	i)							
(i	i) _							
(ii	i)							
(i	i) _							
(i								
(i								
(i	i)							
(i	i) _							
(ii	-							
(i	i) _							
(ii	-							
(i								
(ii	_							
(i								
(ii	_							
(i								
(i)	_							
(i								
(i)	_							
(i								
(ii	i)							(5

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 K (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

Attach to Form 990.

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

OMB No. 1545-0047

2021
Open to Public Inspection

Name of the organization

THE PHILLIPS COLLECTION

Employer identification number 53-0204620

	ID CODDECIT								5 0	404	0 4 0		
Part I Bond Issues S	EE PART VI	FOR COLUM	(F) CON	TINUAT	CONS								
(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issu	ue price	(f) Descrip	otion of purpose	(g) De	efeased	(h) On			
										of is	suer	finan	cing
								Yes	No	Yes	No	Yes	No
							EXPANSION						
A DISTRICT OF COLUMBIA	53-6001131	254839E82	11/01/12	2700	0000.	- DC 30	YEAR BOND		X		Х		Х
_B													
<u>C</u>													
D													
Part II Proceeds													
				l		В	С				D		
1 Amount of bonds retired			20,74	6,543.									
2 Amount of bonds legally defeased				0,000.									
3 Total proceeds of issue													
4 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			27,00	0,000.									
11 Other spent proceeds													
12 Other unspent proceeds													
13 Year of substantial completion			2	006									
			Yes	No	Yes	No	Yes	No		Yes		No	
14 Were the bonds issued as part of a refunding	g issue of tax-exempt b	bonds (or,											
if issued prior to 2018, a current refunding is	sue)?			X									
15 Were the bonds issued as part of a refunding	g issue of taxable bond	ds (or, if											
issued prior to 2018, an advance refunding i	ssue)?			X									
16 Has the final allocation of proceeds been ma	ade?			X									
17 Does the organization maintain adequate bo													
final allocation of proceeds?			X										
I HA For Panerwork Reduction Act Notice see									Scho	dula K	/Eorn	990)	202

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

Schedule K (Form 990) 2021

Par	t III Private Business Use								
		Ą		В		ç		D	
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						<u> </u>
3а	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?								
С	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?								<u></u>
4	Enter the percentage of financed property used in a private business use by entities								
	other than a section 501(c)(3) organization or a state or local government		%		%		%		<u>%</u>
5	1 9 1 1 7 1								
	result of unrelated trade or business activity carried on by your organization,								
	another section 501(c)(3) organization, or a state or local government		%		%		%		<u>%</u>
_6	Total of lines 4 and 5		%		%		<u>%</u>		<u>%</u>
7	Does the bond issue meet the private security or payment test?		Х						
8a	Has there been a sale or disposition of any of the bond-financed property to a non-								
	governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or								
	disposed of		%		%		<u>%</u>		<u>%</u>
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								
	sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all								
	nonqualified bonds of the issue are remediated in accordance with the								
_	requirements under Regulations sections 1.141-12 and 1.145-2?		X						<u> </u>
Par	t IV Arbitrage								
			A		B 1	,	<u> </u>	-	<u> </u>
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		X		1				
	If "No" to line 1, did the following apply?		77				T		
	Rebate not due yet?		X						
	Exception to rebate?	37	Х						
<u>c</u>	No rebate due?	Х							
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
	performed		•				I		
_3	Is the bond issue a variable rate issue?		X						

Part IV Arbitrage (continued)								
	A		В		С		D	
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?		X						
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)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the								
requirements of section 148?		X						
Part V Procedures To Undertake Corrective Action								
		4	E	3			r	D
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?		X						
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	K. See instru	uctions.					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: DISTRICT OF COLUMBIA								
(F) DESCRIPTION OF PURPOSE:								
MUSEUM EXPANSION - DC 30 YEAR BOND ISSUED IN 2003	AND R	EISSUED	IN 201	.2.				

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

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.

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

Name of the organization THE PHILLIPS COLLECTION Employer identification number 53-0204620

Pai	rt I Types of Property		C11011				33-0	201	020	
. u	. Jpcc c operty	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contri amounts report Form 990. Part VII	ed on		(d) ethod of de ash contribu			
1	Art - Works of art	Х	85		0.					
2	Art - Historical treasures									
3	Art - Fractional interests									
4	Books and publications									
5	Clothing and household goods									
6	Cars and other vehicles									
7										
, 8	Boats and planes									_
	Intellectual property	X	30	936	999	TRADE:	CONFI	D M Z	יר ד ח	JQ.
9	Securities - Publicly traded	_ A	30	930	, , , , , , .	IKADE	COMPI	VIIV.	1101	NO
0	Securities - Closely held stock									_
1	Securities - Partnership, LLC, or trust interests									
2	Securities - Miscellaneous									
3	Qualified conservation contribution -									
	Historic structures									
4	Qualified conservation contribution - Other $_{\dots}$									
5	Real estate - Residential									
3	Real estate - Commercial									
7	Real estate - Other									
В	Collectibles									
9	Food inventory									
0	Drugs and medical supplies									_
1	Taxidermy									
2	Historical artifacts									
3	Scientific specimens									
4	Archeological artifacts									_
- 5	Other (FOOD/BEVERAGE)	Х	1	29	683.	DONOR	CONFI	RMA	יוחדיי	<u></u>
6	Other PAINT	X	1				CONFI			
7	,	21	_		, 120.	DOMOR	CO111 11		1 1 01	<u>`</u>
, 8	Other () Other ()									
<u>。 </u>	Number of Forms 8283 received by the organi	Totion during	the tax year for a	antributions						_
Ð	for which the organization completed Form 82	-	•		29				9	
	for which the organization completed Form 62	.00, Fait V, L	Jonee Acknowledge	ement [29				Yes	N
۸-	Division the constitution was in the			antadin Dant Lina	. 4 41				res	N
υa	During the year, did the organization receive b						τ			
	must hold for at least three years from the date									7
	exempt purposes for the entire holding period	?						30a		Σ
	If "Yes," describe the arrangement in Part II.		and the state of			·· C			77	
1	Does the organization have a gift acceptance		•	•		tions?		31	Х	
2a	Does the organization hire or use third parties		S	, · · · · ·						-
	contributions?							32a		Σ
_	If "Yes," describe in Part II.									
3	If the organization didn't report an amount in o	column (c) fo	r a type of property	for which column	(a) is che	cked,				
	describe in Part II.									
ΗA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 990	١_		:	Schedule M	(Forn	n 990)	2

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

Schedule M (Form 990) 2021

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 O (Form 990)

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 Form 990-EZ.

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

2021
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

THE PHILLIPS COLLECTION

Employer identification number 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 FY22 CONTINUED TO BE IMPACTED BY

THE ONGOING WORLDWIDE PANDEMIC, BUT TO A LESSER EXTENT THAN IN FY21.

THE FOCUS CONTINUED TO BE TO CREATE A SAFE AND ENJOYABLE EXPERIENCE FOR

ALL WITH THE MUSEUM RETURNING TO 6 DAY A WEEK OPEN TO THE PUBLIC

SCHEDULE JUST PRIOR TO THE BEGINNING OF FY22. PROCEDURES FOR TIMED

TICKETING, CAPACITY LIMITATIONS, DIRECTIONAL ROUTING, SAFETY PPE

(MASKS, HAND SANITIZER, TEMPERATURE READERS), AND PROOF OF VACCINATION

WERE RELAXED OR ELIMINATED DURING THE FISCAL YEAR.

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

AND FOR SHARING WORKS TO ENHANCE EXHIBITIONS AT OTHER VENUES. THE

PHILLIPS ALSO DEVELOPS EXHIBITIONS WHICH TRAVEL TO OTHER VENUES TO GIVE

THOSE LIVING OUTSIDE THE DC AREA THE OPPORTUNITY TO ENJOY THE TREASURES

WE HOLD. THE PHILLIPS COLLECTION LIBRARY SUPPORTS RESEARCH ON WORKS OF

ART IN THE MUSEUM'S PERMANENT COLLECTION, SPECIAL EXHIBITIONS, AND THE

HISTORY OF THE MUSEUM.

IN COORDINATION WITH THE CELEBRATION OF OUR CENTENNIAL YEAR

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

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021 Page **2**

NON-GALLERY SPACE IN THE MUSEUM AND AT THEARC WAS TRANSFORMED WITH

SITE-SPECIFIC ARTWORKS. VICTOR EKPUK'S BOLD, GRAPHIC INSTALLATION,

STATE OF THE UNION: THINGS HAVE FALLEN APART, CAN THE CENTER STILL

HOLD? WELCOMED VISITORS TO A SENSE OF A SPIRITUAL SACRED SPACE AS THEY

CROSSED THE THRESHOLD. NEKISHA DURRETT'S AIRSHAFT CREATED A SACRED

PLACE WITHIN TWO BRIDGES JOINING THE ORIGINAL PHILLIPS HOUSE AND THE

GOH ANNEX; WESLEY CLARK'S INSTALLATION NEW BEGINNING AT PHILLIPS@THEARC

CHALLENGED VISITORS TO VIEW TRANSFORMATION AS A CONCEPT AS A SERIES OF

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

UNIQUE AND CAPTIVATING LOCATION FOR EXTERNAL EVENTS, WITH SOME

LIMITATIONS. OUR POPULAR 1ST THURSDAY OF THE MONTH PROGRAM, PHILLIPS

AFTER FIVE, REMAINED ON HOLD DURING FY22 DUE TO CAPACITY RESTRICTIONS.

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

CONSTANT CREATIVITY; ONE-ON-ONE: BRIDGET RILEY/PIERRE AUGUST RENOIR, IN

WHICH CELEBRATED BRITISH PAINTER BRIDGET RILEY (B. 1931) SELECTED THREE

OF HER WORKS TO BE DISPLAYED VIS--VIS LUNCHEON OF THE BOATING PARTY

(1880-81) BY PIERRE-AUGUSTE RENOIR; PICASSO: PAINTING THE BLUE PERIOD,

WHICH EXPLORED THE CREATIVE PROCESS OF PABLO PICASSO AT THE OUTSET OF

HIS CAREER; MARTA PEREZ GARCIA'S INTERSECTIONS PROJECT RESTOS-TRACES

WHICH ADDRESSED THE INCREASE IN DOMESTIC VIOLENCE DURING THE PANDEMIC;

PORTRAITS OF RESILIENCE, AN ONGOING PHOTO SERIES BY BRITISH

PHOTOGRAPHER JONATHAN BANKS PRESENTED IN COLLABORATION WITH THE

SURVIVORS AND TORTURE ABOLITION AND SURVIVORS SUPPORT COALITION

INTERNATIONAL; AND LOU STOVALL: THE MUSEUM WORKSHOP, WHICH REEXAMINED

THE HISTORY AND LEGACY OF THE DUPONT CENTER, AN ARTIST'S MUSEUM FOUNDED

Employer identification number

Name of the organization

CREATIVE CHOICES.

Schedule O (Form 990) 2021 Page 2

Name of the organization THE PHILLIPS COLLECTION Employer identification number 53-0204620

IN WASHINGTON, DC, IN 1969.

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.

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

CONNECTING TO THE CORE CURRICULUM, HELD OCTOBER 2021-MARCH, 2022, 18

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 147 TEACHERS THROUGH 4

ADDITIONAL PROFESSIONAL DEVELOPMENT SESSIONS, AND 27 TEACHERS

PARTICIPATED IN A WEEK-LONG SUMMER TEACHER INSTITUTE. WE REACHED 1,012

PK-12 STUDENTS WITHIN THE DC PUBLIC AND CHARTER SCHOOLS, MARYLAND, AND

VIRGINIA DURING THE FISCAL YEAR THROUGH 50 TOURS. THE MUSEUM'S

MULTI-VISIT SCHOOL PARTNERSHIP PROGRAM, ART LINKS, REACHED 322 STUDENTS

FROM 8 SCHOOLS.

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

Schedule O (Form 990) 2021 Page 2

Employer identification number Name of the organization 53-0204620 THE PHILLIPS COLLECTION 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 THE PHILLIPS'S HEAD OF EXPERIENTIAL LEARNING AND GUIDED MEDITATION LED BY THE MUSEUM'S RESIDENT YOGA TEACHER. DESPITE THE PANDEMIC, THE PHILLIPS CONTINUED TO PROVIDE SERVICES IN THE COMMUNITY, ASSEMBLING WELLNESS KITS FOR DISTRIBUTION BY BUILDING BRIDGES ACROSS THE RIVER. THE 2021-22 SEASON OF CONVERSATIONS WITH ARTISTS ENGAGED SEVERAL ARTISTS EXPLORING TOPICS RANGING FROM DIGITAL MEDIA TO RELIGION AND VISUAL CULTURE. EXPENSES \$ 1,534,308. INCLUDING GRANTS OF \$ 0. REVENUE \$ 60,442. 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

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021 Page 2

Name of the organization THE PHILLIPS COLLECTION

Employer identification number 53-0204620

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:

THE DIRECTOR OF THE MUSEUM WAS HIRED WITH THE ASSISTANCE OF A SEARCH FIRM
WITH MAJOR NOT-FOR-PROFIT CLIENTS. ITS SALARY RECOMMENDATION WAS BASED UPON
COMPARABLES FROM THAT FIRM'S EXPERIENCE AS WELL AS ON NATIONAL STATISTICAL
SURVEYS. GOING FORWARD, THE DIRECTOR'S SALARY IS DETERMINED BY THE BOARD'S
CHAIR AND APPROPRIATE COMMITTEE BASED UPON PERFORMANCE RESULTS, BUDGET
CAPACITY, AND COMPARABLES WITH OTHER MUSEUMS. ALL OTHER EMPLOYEES ARE HIRED
IN SALARY RANGES UTILIZING LOCAL AND/OR NATIONAL STATISTICAL SURVEYS.
INCREASES IN COMPENSATION 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 COMPARISON WITH OTHER
INSTITUTIONS BASED UPON STATISTICAL SURVEYS. FOR PROFESSIONAL STAFF, THE
MOST COMMON SURVEY USED IS THE AMERICAN ASSOCIATION OF MUSEUM DIRECTORS

Schedule O (Form 990) 2021

<u>Schedule O (Form 990) 2021</u> Page **2**

Name of the organization **Employer identification number** 53-0204620 THE PHILLIPS COLLECTION ANNUAL SALARY SURVEY. THE LAST SALARY REVIEW TOOK PLACE IN 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, FL, GA, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OR, PA, RI, SC, TN, UT, VA WV,WI FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS, AUDITED FINANCIAL STATEMENTS, AND CONFLICT OF INTEREST POLICY ARE AVAILABLE BY REQUEST. THE AUDITED FINANCIAL STATEMENTS ARE ALSO AVAILABLE IN SUMMARY FORM WITHIN THE MUSEUM'S MEMBER MAGAZINE EACH YEAR. THE LAST 10 YEARS' AUDITED FINANCIAL STATEMENTS AND 990S ARE POSTED ON THE MUSEUM'S WEBSITE. FORM 990, PART IX, LINE 11G, OTHER FEES: OTHER: PROGRAM SERVICE EXPENSES 985,850. 309,482. MANAGEMENT AND GENERAL EXPENSES FUNDRAISING EXPENSES 328,317. TOTAL EXPENSES 1,623,649. TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 1,623,649.