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Form 990
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047
2015
Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 07-01-2015, and ending 06-30-2016

B Check if applicable
Address change
Name change
Initial return
Final return/terminated
Amended return
Application pending

C Name of organization PHOENIX ART MUSEUM
Doing business as
Number and street (or P O box if mail is not delivered to street address) Room/suite 1625 N CENTRAL AVENUE
City or town, state or province, country, and ZIP or foreign postal code PHOENIX, AZ 850041685

D Employer identification number 86-0072608
E Telephone number (602) 257-1880

F Name and address of principal officer DAWN OLSEN
1625 N CENTRAL AVENUE
PHOENIX, AZ 850041685

H(a) Is this a group return for subordinates? No Yes
H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)

I Tax-exempt status 501(c)(3) 501(c) () (insert no) 4947(a)(1) or 527

J Website: WWW.PHXART.ORG

H(c) Group exemption number

K Form of organization Corporation Trust Association Other

L Year of formation 1949

M State of legal domicile AZ

Part I Summary

1 Briefly describe the organization's mission or most significant activities
WORLD CLASS MUSEUM, SEE SCHEDULE O, PART III EXPLANATIONS
2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets
3 Number of voting members of the governing body (Part VI, line 1a) 47
4 Number of independent voting members of the governing body (Part VI, line 1b) 47
5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 199
6 Total number of volunteers (estimate if necessary) 2,724
7a Total unrelated business revenue from Part VIII, column (C), line 12 30,388
7b Net unrelated business taxable income from Form 990-T, line 34 -5,802

Table with columns: Revenue, Expenses, Net Assets or Fund Balances. Rows include contributions, program service revenue, investment income, other revenue, total revenue, grants paid, benefits paid, salaries, fundraising fees, other expenses, total expenses, revenue less expenses, total assets, total liabilities, net assets or fund balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here
Signature of officer: *****
Date: 2017-05-12
DAWN OLSEN DEPUTY DIRECTOR OF FINANCE & OP
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name: STEPHEN E LIVINGSTON CPA
Preparer's signature: STEPHEN E LIVINGSTON CPA
Date:
Check if self-employed:
PTIN: P00317845
Firm's name: CLIFTONLARSONALLEN LLP
Firm's EIN: 41-0746749
Firm's address: 20 E THOMAS RD STE 2300 PHOENIX, AZ 85012
Phone no: (602) 266-2248

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No
For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990(2015)

Part III 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

SEE SCHEDULE O FOR THE MISSION STATEMENT

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 574,747 including grants of \$) (Revenue \$ 8,105)

SEE SCHEDULE O FOR DESCRIPTION OF "SACRED AND PROFANE" BY MICHELANGELO

4b (Code) (Expenses \$ 314,506 including grants of \$) (Revenue \$ 35,072)

SEE SCHEDULE O FOR DESCRIPTION OF "THE WHITE SHIRT ACCORDING TO ME" BY GIANFRANCO FERRE

4c (Code) (Expenses \$ 108,312 including grants of \$) (Revenue \$ 0)

SEE SCHEDULE O FOR DESCRIPTION OF "SUPER INDIAN FRITZ SCHOLDER, 1967 - 1980"

See Additional Data

4d Other program services (Describe in Schedule O)

(Expenses \$ 6,245,017 including grants of \$) (Revenue \$ 2,906,037)

4e Total program service expenses ▶ 7,242,582

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)? <i>If "Yes," complete Schedule A</i>	Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
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? <i>If "Yes," complete Schedule C, Part II</i>		No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		No
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? <i>If "Yes," complete Schedule D, Part I</i>		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	Yes	
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? <i>If "Yes," complete Schedule D, Part IV</i>		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	Yes	
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? <i>If "Yes," complete Schedule D, Part VII</i>		No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		No
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? <i>If "Yes," complete Schedule D, Part IX</i>		No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	Yes	
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)? <i>If "Yes," complete Schedule D, Part X</i>		No
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		No
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		No
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		No
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		No
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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)		No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
20b		

Part IV Checklist of Required Schedules (continued)

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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
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? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question number, question text, and Yes/No response boxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited tax shelter transactions, deductible contributions, and health insurance issuers.

Part VI Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 1b Enter the number of voting members... 2 Did any officer, director, trustee... 3 Did the organization delegate control... 4 Did the organization make any significant changes... 5 Did the organization become aware... 6 Did the organization have members... 7a Did the organization have members... 7b Are any governance decisions... 8 Did the organization contemporaneously document... 8a The governing body... 8b Each committee... 9 Is there any officer, director, trustee...

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters... 10b If "Yes," did the organization have written policies... 11a Has the organization provided a complete copy... 11b Describe in Schedule O the process... 12a Did the organization have a written conflict of interest policy... 12b Were officers, directors, or trustees... 12c Did the organization regularly and consistently monitor... 13 Did the organization have a written whistleblower policy... 14 Did the organization have a written document retention... 15 Did the process for determining compensation... 15a The organization's CEO... 15b Other officers or key employees... 16a Did the organization invest in, contribute assets to... 16b If "Yes," did the organization follow a written policy...

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed (AZ) 18 Section 6104 requires an organization to make its Form 1023... 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents... 20 State the name, address, and telephone number of the person who possesses the organization's books and records (SCOTT MCDANIEL 1625 N CENTRAL AVENUE PHOENIX, AZ 850041685 (602) 257-2103)

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns 1a						
	b Membership dues 1b	869,515					
	c Fundraising events 1c	1,194,358					
	d Related organizations 1d	1,174,796					
	e Government grants (contributions) 1e	70,006					
	f All other contributions, gifts, grants, and similar amounts not included above 1f	5,246,385					
	g Noncash contributions included in lines 1a-1f \$	922,578					
	h Total. Add lines 1a-1f ▶		8,555,060				
Program Service Revenue	2a PROGRAM SERVICE REVENUE	Business Code 900099	1,492,891	1,492,891			
	b MEMBERSHIP DUES	900099	1,123,121	1,123,121			
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f ▶		2,616,012				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		6,543			6,543	
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties ▶						
	6a Gross rents	(i) Real	(ii) Personal				
		b Less rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss) ▶					
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less cost or other basis and sales expenses					
		c Gain or (loss)					
		d Net gain or (loss) ▶		50			50
	8a Gross income from fundraising events (not including \$ 1,194,358 of contributions reported on line 1c) See Part IV, line 18	a	655,277				
		b Less direct expenses b	948,515				
		c Net income or (loss) from fundraising events ▶		-293,238			-293,238
	9a Gross income from gaming activities See Part IV, line 19	a					
		b Less direct expenses b					
		c Net income or (loss) from gaming activities ▶					
10a Gross sales of inventory, less returns and allowances	a	718,151					
	b Less cost of goods sold b	384,949					
	c Net income or (loss) from sales of inventory ▶		333,202	333,202			
Miscellaneous Revenue		Business Code					
11a REIMBURSEMENTS	900099	146,194			146,194		
	b CATERING	722320	30,388		30,388		
	c						
	d All other revenue						
e Total. Add lines 11a-11d ▶		176,582					
12 Total revenue. See Instructions ▶		11,394,211	2,949,214	30,388	-140,451		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic 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	934,011	355,902	314,224	263,885
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	3,473,079	2,287,565	1,027,763	157,751
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	295,773	190,546	103,625	1,602
9	Other employee benefits	465,474	338,003	123,015	4,456
10	Payroll taxes	320,439	200,332	89,108	30,999
11	Fees for services (non-employees)				
a	Management				
b	Legal	29,420		29,420	
c	Accounting	36,211		36,211	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	4,810			4,810
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	639,413	210,109	376,333	52,971
12	Advertising and promotion	251,734	240,872	10,598	264
13	Office expenses	1,065,244	593,393	223,102	248,749
14	Information technology	42,328	10,832	31,496	
15	Royalties				
16	Occupancy	782,703	627,744	123,283	31,676
17	Travel	148,311	114,675	19,655	13,981
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	7,897	4,720	998	2,179
20	Interest	18,575		18,575	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	559,256	520,108	16,778	22,370
23	Insurance	136,604	109,647	26,413	544
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	CONTRACTED LABOR	753,414	753,414		
b	OPERATING EXPENSES	718,056	543,342	54,498	120,216
c	REPAIRS AND MAINTENANCE	114,133	56,175	57,958	
d	DUES AND SUBSCRIPTIONS	111,332	85,203	21,659	4,470
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	10,908,217	7,242,582	2,704,712	960,923
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash-non-interest-bearing	690,022	1	757,027
	2 Savings and temporary cash investments	1,814,581	2	2,250,132
	3 Pledges and grants receivable, net	647,554	3	2,202,755
	4 Accounts receivable, net	177,471	4	260,626
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	378,912	8	364,009
	9 Prepaid expenses and deferred charges	299,819	9	166,064
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 15,284,696		
	b Less accumulated depreciation	10b 10,759,857	4,970,626	10c 4,524,839
	11 Investments—publicly traded securities		11	
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	489,380	15	433,018
16 Total assets. Add lines 1 through 15 (must equal line 34)	9,468,365	16	10,958,470	
Liabilities	17 Accounts payable and accrued expenses	1,836,247	17	1,139,238
	18 Grants payable		18	
	19 Deferred revenue	405,061	19	524,414
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	1,064,230	23	2,114,230
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	1,163,758	25	1,946,769
	26 Total liabilities. Add lines 17 through 25	4,469,296	26	5,724,651
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	198,370	27	-594,105
	28 Temporarily restricted net assets	4,800,699	28	5,827,924
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	4,999,069	33	5,233,819	
34 Total liabilities and net assets/fund balances	9,468,365	34	10,958,470	

Part 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	11,394,211
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,908,217
3	Revenue less expenses Subtract line 2 from line 1	3	485,994
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,999,069
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-251,244
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	5,233,819

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? 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 <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:

Software Version:

EIN: 86-0072608

Name: PHOENIX ART MUSEUM

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	68,437	including grants of \$) (Revenue \$	5,664)
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PHOENIX RISING THE VALLEY COLLECTS PHOENIX RISING THE VALLEY COLLECTS BRINGS TOGETHER WORKS FROM ARIZONA'S MOST SIGNIFICANT PRIVATE COLLECTIONS OF AMERICAN, ASIAN, MODERN, CONTEMPORARY, EUROPEAN, FASHION DESIGN, LATIN AMERICAN ART AND PHOTOGRAPHY THESE PRIVATELY OWNED AND RARELY SEEN WORKS WILL BE ON VIEW AT PHOENIX ART MUSEUM, MANY FOR THE FIRST TIME, IN CELEBRATION OF THE ACHIEVEMENTS AND PASSIONS OF THE VALLEY'S ART ENTHUSIASTS THE EXHIBITION WILL INCLUDE WORK FROM MORE THAN 20 PRIVATE COLLECTIONS IN PHOENIX AND THE SURROUNDING AREA IT PRESENTS A DIVERSE AND ECLECTIC SELECTION OF THE FINEST WORKS PRODUCED, FROM THE 19TH CENTURY TO THE PRESENT, AND FEATURES PAINTINGS, SCULPTURE, VIDEO INSTALLATION, WORKS ON PAPER, PHOTOGRAPHY, AND FASHION DESIGN WORKS FROM THE ABSTRACT EXPRESSIONIST PERIOD WILL INCLUDE NEVER BEFORE SEEN WORKS BY HELEN FRANKENTHALER, MORRIS LOUIS, PHILIP GUSTON, ALONG WITH MID-CENTURY MASTER ALEXANDER CALDER, AMONG OTHERS THE EXHIBITION IS ORGANIZED BY PHOENIX ART MUSEUM AND IS MADE POSSIBLE THROUGH THE GENEROSITY OF PETSMART

(Code) (Expenses \$	52,047	including grants of \$) (Revenue \$	0)
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LILIANE TOMASKO IN VISIBLE WORLD THE ARTIST'S PAINTINGS ARE VEILED IN DARKNESS--EVOCATIVE AND EMOTIONALLY CHARGED OVER THE LAST DECADE THE UNDERLYING DRAWINGS BENEATH THE LAYERS OF THICK PAINT HAVE EVOLVED INTO HER "INSIDE OUT" PAINTINGS A REVERSAL OF PROCESS, THE COLORFUL TEXTILES ARE STREWN, STACKED AND COMPOSED--UNDULATING AND TRANSFORMING FROM ABSTRACTION TO MOUNTAIN VISTAS FROM DARKNESS INTO LIGHT, THE VIEWER IS TRANSPORTED TO ANOTHER TIME AND SPACE WITHIN THESE INTIMATE, QUIET AND EDGY INTERIOR SETTINGS EXHIBITION AND CATALOGUE ORGANIZED BY PHOENIX ART MUSEUM

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 41,706 including grants of \$) (Revenue \$ 36,000)

DISCOUNT TIRE FAMILY WEEKENDS JOIN US ON THE SECOND WEEKEND OF EACH MONTH FOR A WHIRLWIND OF GREAT ART AND HANDS-ON ACTIVITIES THROUGH THE GENEROSITY OF DISCOUNT TIRE COMPANY, THE MUSEUM OFFERS FREE GENERAL ADMISSION ON THE SECOND WEEKEND OF EACH MONTH, WITH EXCITING ACTIVITIES, SCAVENGER HUNTS, LIVE PERFORMANCES, STORY TIME, FREE TOURS, AND MORE EACH DISCOUNT TIRE FREE FAMILY WEEKEND FEATURES AN OPPORTUNITY TO LEARN ABOUT AND MAKE ART WITH A FEATURED LOCAL VALLEY ARTIST, FROM MURALISTS TO DANCERS AND MORE OPEN TO THE PUBLIC ON SATURDAY FROM 10 A M - 5 P M AND SUNDAY FROM NOON - 5 P M

(Code) (Expenses \$ 39,120 including grants of \$) (Revenue \$ 2,491)

FROM NEW YORK TO NEW MEXICO MASTERWORKS OF AMERICAN MODERNISM FROM THE VILCHEK FOUNDATION COLLECTION DRAWN FROM THE IMPRESSIVE COLLECTION OF THE VILCEK FOUNDATION IN NEW YORK, THIS EXCITING EXHIBITION PRESENTS RARELY-BEFORE SEEN MASTERWORKS OF AMERICAN MODERNISM WORKS IN THE EXHIBITION DATE FROM THE EARLY 1900S TO THE POST-WAR ERA A WIDE RANGE OF MODERN STYLISTIC APPROACHES IN VARIOUS MEDIA (PAINTINGS, SCULPTURE, AND WORKS ON PAPER) ARE PRESENTED, WITH PARTICULAR EMPHASIS GIVEN TO AMERICAN ARTISTIC RESPONSES TO THE GEOMETRIC COMPOSITIONS OF CUBISM, THE NATURE-BASED ABSTRACTIONS BY ARTISTS OF THE STIEGLITZ CIRCLE, AND THE REGIONALLY-INSPIRED MODERNISM PRODUCED IN THE AMERICAN SOUTHWEST AFTER THE FIRST WORLD WAR TO COMPLEMENT THE VILCEK COLLECTION, PHOENIX ART MUSEUM WILL EXHIBIT 33 EXAMPLES OF MODERNIST AMERICAN ART FROM THE MUSEUM'S OWN SUPERB COLLECTION OF ART FROM THIS ERA THE COMBINED INSTALLATIONS WILL OFFER A THOROUGH REPRESENTATION OF THE MANY WAYS IN WHICH AMERICAN ARTISTS RESPONDED AND CONTRIBUTED TO MODERNIST TRENDS IN THE EARLY TWENTIETH CENTURY THE EXHIBITION IS ORGANIZED BY THE PHILBROOK MUSEUM OF ART, TULSA, OKLAHOMA IN COOPERATION WITH THE VILCEK FOUNDATION, NEW YORK

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 32,994 including grants of \$) (Revenue \$ 0)

AI WEI WEI CIRCLE OF ANIMALS/ZODIAC HEADS RENOWNED CHINESE ARTIST AND ACTIVIST AI WEI WEI (B 1957) TOOK AS HIS INSPIRATION FOR HIS TWELVE CHINESE ZODIAC BRONZE SCULPTURES FROM THOSE THAT ONCE GRACED THE QING DYNASTY FOUNTAIN, IN AN EIGHTEENTH-CENTURY IMPERIAL RETREAT OUTSIDE BEIJING LIKE OTHER ORNATE OBJECTS, THE ORIGINAL PIECES WERE LOOTED BY THE BRITISH AND FRENCH TROOPS IN THE SECOND OPIUM WAR IN 1860 VIEWED AS A SYMBOL OF "CULTURAL THEFT", WEI WEI RE-CREATED THE GOLD-PLATED SCULPTURES IN 2010 AS A SUBVERSIVE COMMENTARY ON THE NATURE OF LOOTING AND REPATRIATION AN ARTIST, ARCHITECTURAL DESIGNER AND SOCIAL ACTIVIST, AI WEI WEI'S WORKS EMPLOY A WIDE RANGE OF MEDIA HE HAS BEEN OPENLY CRITICAL OF THE CHINESE GOVERNMENT'S STANCE ON DEMOCRACY AND RECORD OF HUMAN RIGHTS VIOLATIONS, INVESTIGATED GOVERNMENT CORRUPTION AND COVER-UPS, AND WAS HELD FOR 81 DAYS AT AN UNDISCLOSED LOCATION IN 2011 FOLLOWING HIS FOUR YEARS OF HOUSE ARREST, CHINESE AUTHORITIES RECENTLY RETURNED HIS PASSPORT TO AI WEI WEI, WHEREUPON HE LEFT CHINA FOR GERMANY, WHERE HE IS CURRENTLY STAYING IN ANTICIPATION OF THE OPENING OF A NEW EXHIBITION AI'S SON AND WIFE HAVE BEEN LIVING THERE THE CIRCLE OF ANIMALS/ZODIAC HEADS EXHIBITION WILL ALSO INCLUDE EIGHTEENTH-CENTURY CHINESE BRONZE WORKS FROM PHOENIX ART MUSEUM'S COLLECTION CURATED BY DR JANET BAKER

(Code) (Expenses \$ 31,814 including grants of \$) (Revenue \$ 0)

DEFINING MOMENTS 50 YEARS OF FASHION AT PHOENIX ART MUSEUM FEATURING MORE THAN 50 WORKS DRAWN FROM ACROSS THE HISTORY OF FASHION, THIS EXHIBITION HIGHLIGHTS MASTERWORKS AND MILESTONES OF THE PERMANENT COLLECTION PROVIDING INSIGHT INTO HOW THE TREASURES OF THE COLLECTION WERE ACQUIRED AND FORMED AN INTERNATIONALLY RESPECTED FASHION ARCHIVE, THIS EXHIBITION WILL FEATURE A ROSTER OF WORLD-CLASS DESIGNERS INCLUDING ALEXANDER MCQUEEN, YVES SAINT LAURENT, BALENCIAGA AND CHANEL ALONGSIDE STUNNING HISTORICAL WORKS

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	30,833	including grants of \$) (Revenue \$	50,017)
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THE ULTIMATE COLLECTION ICONIC BASEBALL CARDS FROM THE DIAMONDBACKS COLLECTION THIS SPECIALLY-TICKETED LIMITED-ENGAGEMENT EXHIBITION FEATURES SOME OF THE RAREST AND MOST IMPORTANT BASEBALL CARDS IN THE HISTORY OF THE SPORT DRAWN FROM THE DIAMONDBACKS COLLECTION, CAREFULLY AND PAINSTAKINGLY AMASSED BY KEN KENDRICK, LONGTIME COLLECTOR AND MANAGING GENERAL PARTNER OF THE ARIZONA DIAMONDBACKS, THE ULTIMATE COLLECTION ICONIC BASEBALL CARDS FROM THE DIAMONDBACKS COLLECTION FEATURES 16 OF THE TOP 20 RANKED SPORTS TRADING CARDS IN THE ENTIRE WORLD, ALONG WITH AN ADDITIONAL 25 HIGHLY-VALUED AND PRIZED BASEBALL TRADING CARDS THE EXHIBITION WILL INCLUDE BASEBALL'S RAREST AND MOST FAMOUS COLLECTIBLE A T206 HONUS WAGNER TRADING CARD, ONCE OWNED BY HOCKEY LEGEND WAYNE GRETZKY THE ROSTER OF CARDS THAT COMPOSE THE COLLECTION IS TRULY STAGGERING, INCLUDING 16 OF THE 20 RAREST AND HIGHLY PRIZED TRADING CARDS IN THE HISTORY OF SPORTS THE COLLECTION INCLUDES TOPPS ROOKIE CARDS FOR BASEBALL HALL OF FAME INDUCTEES MICKEY MANTLE, HENRY "HANK" AARON, AND SANDY KOUFAX IT ALSO INCLUDES A RARE BOWMAN 1954 TED WILLIAMS CARD, ALONG WITH CARDS REPRESENTING SOME OF THE MOST LEGENDARY AND ICONIC NAMES IN THE HISTORY OF THE GAME, INCLUDING BABE RUTH, TY COBB, JACKIE ROBINSON, LOU GEHRIG, SATCHEL PAIGE, JOE DIMAGGIO, AND WILLIE MAYS IT ALSO INCLUDES A SINGLE BASKETBALL CARD A 1986 FLEER #57 MICHAEL JORDAN CARD, CONSIDERED BY MANY TO BE THE GREATEST PLAYER IN THE HISTORY OF THE NBA THE ULTIMATE COLLECTION MARKS THE FIRST TIME KENDRICK'S COLLECTION HAS BEEN EXHIBITED WEST OF THE MISSISSIPPI, AND THE FIRST TIME IT HAS BEEN FORMALLY EXHIBITED IN ITS HOME STATE OF ARIZONA PREVIOUSLY, THE EXHIBITION WAS ON VIEW AT THE BASEBALL HALL OF FAME IN COOPERSTOWN, NEW YORK FOR THREE YEARS, BEFORE CLOSING IN 2013 THIS EXHIBITION IS ORGANIZED BY PHOENIX ART MUSEUM AND IS MADE POSSIBLE THROUGH THE GENEROSITY OF KEN KENDRICK AND THE ARIZONA DIAMONDBACKS

(Code) (Expenses \$	25,000	including grants of \$) (Revenue \$	0)
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MASTERWORKS OF SPANISH COLONIAL ART FROM PHOENIX ART MUSEUM'S COLLECTION THIS LANDMARK EXHIBITION FEATURES A SELECTION OF REMARKABLE PAINTINGS AS WELL AS A GROUPING OF RETABLOS (SMALL-SCALE PAINTINGS ON COPPER OR TIN) AND TWO SILVER AND GOLD PLAQUES RECENTLY ACQUIRED BY PHOENIX ART MUSEUM FROM THE ESTATE OF GERRY S. CULPEPPER AND THE DIANE AND BRUCE HALLE FOUNDATION WITH THE EXCEPTION OF ONE EXQUISITE 18TH-CENTURY MEXICAN PAINTING OF THE VIRGIN OF GUADALUPE-ON DISPLAY HERE FOR THE FIRST TIME-THESE PAINTINGS WERE ALL CREATED IN THE 18TH CENTURY IN THE VICEROYALTY OF PERU, A TERRITORY THAT ENCOMPASSED PRESENT-DAY PERU, BOLIVIA, AND ECUADOR, AMONG OTHER MODERN SOUTH AMERICAN NATIONS THE EXHIBITED RETABLOS, ON THE OTHER HAND, WERE PRODUCED IN MEXICO IN THE 19TH CENTURY THE VIRGIN MARY, JESUS CHRIST, THE LAST JUDGMENT, SAINTS, AND ARCHANGELS CONQUERING SATAN ARE AMONG THE MOST PROMINENT SUBJECTS OF THE WORKS ON DISPLAY SOME OF THESE PAINTINGS ARE VERY LARGE AND WOULD HAVE ORIGINALLY FUNCTIONED AS COMPONENTS OF CHURCH ALTARPIECES OTHERS ARE SMALLER IN SCALE, BUT NO LESS COMMANDING, AND WOULD LIKELY HAVE SERVED AS DEVOTIONAL AIDS FOR PRAYER IN CHAPELS, PRIVATE HOME SHRINES, MONASTERIES, OR CONVENTS THIS EXHIBITION AFFORDS THE COMMUNITY THE OPPORTUNITY TO VIEW MASTERWORKS OF SPANISH COLONIAL ART THAT HAVE NEVER BEFORE BEEN EXHIBITED THESE WORKS SHOWCASE THE INVENTIVENESS, ORIGINALITY, AND SKILL OF ARTISTS WORKING IN THE SPANISH VICEROYALTIES DURING THE 18TH CENTURY IN ADDITION, THEY ILLUSTRATE THESE ARTISTS' DIVERSE APPROACHES TO RELIGIOUS IMAGERY AND ITS MULTIFACETED MEANINGS IN THE COLONIAL WORLD A GENEROUS GIFT OF FUNDS FROM SHAWN AND JOE LAMPE ENABLED THE MUSEUM TO UNDERTAKE THE CLEANING AND RESTORATION OF THESE DONATED PAINTINGS THANKS TO THE GENEROSITY OF LEADING MEMBERS OF THE PHOENIX COMMUNITY MILENA AND TONY ASTORGA, PARI AND PETER BANKO, LEE AND MIKE COHN, MARY AND HAROLD DORENBECHER, SUSAN AND CARTER EMERSON, DIANE AND BRUCE HALLE, JANIS AND DENNIS LYON, AND GAIL AND STEVE RINEBERG, WE WERE THEN ABLE TO FRAME THESE RESTORED WORKS OF ART THIS EXHIBITION WILL BE ACCOMPANIED BY A FREE, PUBLIC SYMPOSIUM ON SPANISH COLONIAL ART DEVELOPED IN COLLABORATION WITH SCHOLARS FROM THE HERBERGER SCHOOL FOR ART AND DESIGN AND THE ARIZONA CENTER FOR MEDIEVAL AND RENAISSANCE STUDIES, ARIZONA STATE UNIVERSITY

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ including grants of \$) (Revenue \$ 333,202)

GIFT SHOP AND MUSEUM STORE - DESIGNED TO GIVE VISITORS A MORE IN DEPTH KNOWLEDGE OF THE VISUAL ARTS AND OF THE SUBJECTS DISCUSSED IN THE MUSEUM'S COLLECTIONS AND EXHIBITIONS THE EDUCUATIONAL MERCHANDISE, UNIQUE MEMORABILIA AND EXHIBITION SPECIFIC ITEMS ALLOW FOR THE CONTINUATION OF THE MUSEUM EXPERIENCE AT HOME

(Code) (Expenses \$ 5,923,066 including grants of \$) (Revenue \$ 2,478,663)

REMAINING MEMBERSHIP AND OTHER PROGRAM REVENUES AND EXPENSES OF THE MUSEUM THAT HAVE NOT BEEN ALLOCATED TO A SPECIFIC EXHIBIT

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ANGELA C SINGER TRUSTEE	1 00	X						0	0	0
RYAN BACKLUND TRUSTEE	1 00	X						0	0	0
ALICE BAZLEN TRUSTEE	1 00	X						0	0	0
DENNIS LYON TRUSTEE	1 00	X						0	0	0
ALVAN ADAMS TRUSTEE	1 00	X						0	0	0
DORIS ONG TRUSTEE	1 00	X						0	0	0
DREW BROWN TRUSTEE	1 00	X						0	0	0
ELLEN KATZ TRUSTEE	1 00	X						0	0	0
DEBBIE BERGE TRUSTEE	1 00	X						0	0	0
JOE LAMPE TRUSTEE	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN BOUMA TRUSTEE	1 00	X						0	0	0
KEN KENDRICK TRUSTEE	1 00	X						0	0	0
PAUL GROVES TRUSTEE	1 00	X						0	0	0
RICHARD GOLDSMITH TRUSTEE	1 00	X						0	0	0
STEVE RINEBERG TRUSTEE	1 00	X						0	0	0
MICHAEL BILL TRUSTEE	1 00	X						0	0	0
MATTHEW BOLAND TRUSTEE	1 00	X						0	0	0
AMY CLAGUE TRUSTEE	1 00	X						0	0	0
TONY ASTORGA TRUSTEE-TREASURER	1 00	X						0	0	0
WILLIAM G WAY TRUSTEE	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JO BRANDT TRUSTEE	1 00	X						0	0	0
EILEEN ELLIOTT TRUSTEE	1 00	X						0	0	0
DR MERYL HABER TRUSTEE	1 00	X						0	0	0
MIKE COHN TRUSTEE-CHAIRMAN	1 00	X						0	0	0
MARK FELDMAN TRUSTEE	1 00	X						0	0	0
JAY SCHLOTT TRUSTEE	1 00	X						0	0	0
PETER BANKO TRUSTEE	1 00	X						0	0	0
JOAN CREMIN TRUSTEE	1 00	X						0	0	0
JUDY LINHART TRUSTEE	1 00	X						0	0	0
JACQUIE DORRANCE TRUSTEE	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JIM PATTERSON TRUSTEE	1 00	X						0	0	0
DIANE HALLE TRUSTEE	1 00	X						0	0	0
GARY TOOKER TRUSTEE	1 00	X						0	0	0
NANCY HANLEY TRUSTEE	1 00	X						0	0	0
DONALD BRANDT TRUSTEE	1 00	X						0	0	0
JON HULBURD TRUSTEE	1 00	X						0	0	0
TIM JONES TRUSTEE	1 00	X						0	0	0
DENISE DELGADO TRUSTEE	1 00	X						0	0	0
ERIN GOGOLAK TRUSTEE	1 00	X						0	0	0
ROSELLEN PAPP TRUSTEE-VICE CHAIRMAN	1 00 1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID ROUSSEAU TRUSTEE	1 00	X						0	0	0
SUE SELIG TRUSTEE	1 00	X						0	0	0
ADAM SINGER TRUSTEE-SECRETARY	1 00	X						0	0	0
RAYMOND SLOMSKI TRUSTEE	1 00	X						0	0	0
MICHAEL GREENBAUM TRUSTEE	1 00	X						0	0	0
LILA HARNETT TRUSTEE	1 00	X						0	0	0
PATRICIA NOLAN TRUSTEE	1 00	X						0	0	0
JANE JOZOFF TRUSTEE	1 00	X						0	0	0
ANN SINER TRUSTEE	1 00	X						0	0	0
SHARRON LEWIS TRUSTEE	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
K DAVID LINDER TRUSTEE	1 00	X					0	0	0	
GARRETT MCKNIGHT TRUSTEE	1 00	X					0	0	0	
DEANNA SALAZAR TRUSTEE	1 00	X					0	0	0	
MARK TARBELL TRUSTEE	1 00	X					0	0	0	
MEREDITH VON ARENTSCHILDT TRUSTEE	1 00	X					0	0	0	
JAMES BALLINGER SYBIL HARRINGTON DIRECTOR	2 00			X			320,045	0	27,853	
GARY EGAN DEPUTY DIR-FINANCE & ADMIN	37 50 4 00			X			154,158	0	14,104	
ROBERT CHAMBERLAIN INTERIM DIRECTOR OF DEVELOPMENT	37 50			X			120,554	0	0	
AMANDA CRUZ THE SYBIL HARRINGTON DIRECTOR	37 50			X			260,386	0	11,531	

OMB No 1545-0047
2015
 Open to Public Inspection

**SCHEDULE A
 (Form 990 or
 990EZ)**

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury
 Internal Revenue Service

Name of the organization
 PHOENIX ART MUSEUM

Employer identification number
 86-0072608

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants.)	4,943,370	5,491,850	6,348,004	10,735,711	8,555,060	36,073,995
2 Tax revenues levied for the organization'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	5,070,886	4,693,127	4,892,897	4,712,695	4,636,914	24,006,519
4 Total. Add lines 1 through 3	10,014,256	10,184,977	11,240,901	15,448,406	13,191,974	60,080,514
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)						
6 Public support. Subtract line 5 from line 4						60,080,514

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
7 Amounts from line 4	10,014,256	10,184,977	11,240,901	15,448,406	13,191,974	60,080,514
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,704	7,982	4,777	3,665	6,543	29,671
9 Net income from unrelated business activities, whether or not the business is regularly carried on	31,882	28,053	5,749	438	0	66,122
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	131,082	143,872	161,260	139,746	146,194	722,154
11 Total support. Add lines 7 through 10						60,898,461

12 Gross receipts from related activities, etc. (see instructions) **12** 21,446,179

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) **14** 98.660 %

15 Public support percentage for 2014 Schedule A, Part II, line 14 **15** 98.590 %

16a 33 1/3% support test—2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

b 33 1/3% support test—2014. 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 ▶

17a 10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶

b 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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 performed, 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 business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

b 33 1/3% support tests—2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent 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 in line 7? If "Yes," complete Part II 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 in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9(a)) 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 IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b 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.)		
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		

Part IV Supporting Organizations (continued)**Section B. Type I Supporting Organizations**

- 1** Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2** Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 1** Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 1** Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2** Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s).
- 3** By reason of the relationship described in (2), 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.

	Yes	No
1		
2		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (**see instructions**):
- a** The organization satisfied the Activities Test. Complete **line 2** below.
- b** The organization is the parent of each of its supported organizations. Complete **line 3** below.
- c** The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).
- 2** **Activities Test. Answer (a) and (b) below.**

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

	Yes	No
2a		
2b		
3a		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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

Section A - Adjusted Net Income

	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1	
2 Recoveries of prior-year distributions	2	
3 Other gross income (see instructions)	3	
4 Add lines 1 through 3	4	
5 Depreciation and depletion	5	
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7 Other expenses (see instructions)	7	
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount

	(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a Average monthly value of securities	1a	
b Average monthly cash balances	1b	
c Fair market value of other non-exempt-use assets	1c	
d Total (add lines 1a, 1b, and 1c)	1d	
e Discount claimed for blockage or other factors (explain in detail in Part VI) _____		
2 Acquisition indebtedness applicable to non-exempt use assets	2	
3 Subtract line 2 from line 1d	3	
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6 Multiply line 5 by 0.35	6	
7 Recoveries of prior-year distributions	7	
8 Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount

		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2 Enter 85% of line 1	2	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4 Enter greater of line 2 or line 3	4	
5 Income tax imposed in prior year	5	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) <input type="checkbox"/>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
d From 2013.			
e From 2014.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7			
\$ _____			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013.			
d From 2014.			
e From 2015.			

Part VI Supplemental Information.

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

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	REIMBURSEMENTS

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

OMB No 1545-0047
2015
Open to Public Inspection

Name of the organization
PHOENIX ART MUSEUM
Employer identification number
86-0072608

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
► _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4) (B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

(continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? **Yes** **No**

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	25,022,737	25,422,566	23,739,569	22,949,075	23,172,236
b Contributions	1,592,609	5,259,560	295,894	193,587	1,075,930
c Net investment earnings, gains, and losses	-511,232	31,541	2,777,782	2,028,519	-186,681
d Grants or scholarships	1,124,472	1,268,464	1,324,623	1,350,242	1,044,693
e Other expenditures for facilities and programs		4,400,308			
f Administrative expenses	60,852	22,158	66,056	81,370	67,717
g End of year balance	24,918,790	25,022,737	25,422,566	23,739,569	22,949,075

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a** Board designated or quasi-endowment 0 %
 - b** Permanent endowment 100 000 %
 - c** Temporarily restricted endowment 0 %
- The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)		No
3a(ii)	Yes	
3b	Yes	

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

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		699,253		699,253
b Buildings				
c Leasehold improvements		10,772,652	7,571,805	3,200,847
d Equipment		2,702,018	2,102,972	599,046
e Other		1,110,773	1,085,080	25,693
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				4,524,839

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	

Part XIII Supplemental Information

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

Return Reference	Explanation
PART III, LINE 1A	FINANCIAL STATEMENT FOOTNOTE REGARDING THE FINE ARTS COLLECTION FINE ARTS COLLECTION CONSISTS OF PURCHASED AND DONATED WORKS OF ART THE COLLECTION IS ON DISPLAY TO THE GENERAL PUBLIC THE MUSEUM EMPLOYS PROFESSIONAL STAFF TO ENSURE THAT THE COLLECTION ITEMS ARE PRESERVED AND PROTECTED THE COLLECTION ITEMS ARE NOT CAPITALIZED BY THE MUSEUM COSTS OF PURCHASING COLLECTION ITEMS, DEACCESSIONS OF COLLECTION ITEMS AND PROCEEDS FROM INSURANCE RECOVERIES ARE INCLUDED AS A CHANGE IN THE APPROPRIATE CATEGORY OF NET ASSETS PROCEEDS FROM THE DEACCESSION OF COLLECTION ITEMS ARE RESTRICTED FOR PURCHASES OF ADDITIONAL COLLECTION ITEMS ACQUISITIONS OF FINE ART, INCLUDED AS A DECREASE IN UNRESTRICTED NET ASSETS, TOTALED \$251,244 AND \$283,919 FOR THE YEARS ENDED JUNE 30, 2016 AND 2015, RESPECTIVELY THE AMERICAN ALLIANCE OF MUSEUMS (AAM) WHICH IS THE NATIONAL ACCREDITATION ORGANIZATION FOR MUSEUMS HAS A POLICY RELATED TO MUSEUM COLLECTIONS THEIR POLICY IS THAT MUSEUMS DO NOT HAVE TO LIST THEIR COLLECTION AS AN ASSET ON THEIR FINANCIAL STATEMENTS IF A MUSEUM DOES ELECT TO LIST ITS COLLECTION ON ITS FINANCIAL STATEMENTS, IT MUST BE BASED ON A RECENT APPRAISAL OF THE COLLECTION THE MUSEUM HAS ELECTED TO EXPENSE CONTRIBUTIONS WHEN OBTAINED, AND HAS NOT CAPITALIZED THE COLLECTION

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

**SCHEDULE G
(Form 990 or 990-EZ)**

**Supplemental Information Regarding
Fundraising or Gaming Activities**

OMB No 1545-0047

2015

**Open to Public
Inspection**

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

▶ Attach to Form 990 or Form 990-EZ

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

Department of the Treasury
Internal Revenue Service

Name of the organization
PHOENIX ART MUSEUM

Employer identification number

86-0072608

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.

- a** Mail solicitations
- b** Internet and email solicitations
- c** Phone solicitations
- d** In-person solicitations
- e** Solicitation of non-government grants
- f** Solicitation of government grants
- g** Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
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 or licensing.

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.

		(a)Event #1	(b)Event #2	(c)Other events	(d)
		THE PARTY (event type)	INDEPENDENT WOMENS LUNCHEON (event type)	7 (total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts	501,044	427,145	921,446	1,849,635
	2 Less Contributions	483,194	334,059	377,105	1,194,358
	3 Gross income (line 1 minus line 2)	17,850	93,086	544,341	655,277
Direct Expenses	4 Cash prizes				
	5 Noncash prizes		75,146	477,791	552,937
	6 Rent/facility costs				
	7 Food and beverages	96,996	60,461	141,919	299,376
	8 Entertainment	2,477		50	2,527
	9 Other direct expenses	7,206	12,247	74,222	93,675
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				948,515
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				-293,238

Part III Gaming.

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

		(a)Bingo	(b)Pull tabs/Instant bingo/progressive bingo	(c)Other gaming	(d)
					Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes% <input type="checkbox"/> No	<input type="checkbox"/> Yes% <input type="checkbox"/> No	<input type="checkbox"/> Yes% <input type="checkbox"/> No		
7 Direct expense summary Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary Subtract line 7 from line 1, column (d). ▶					

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in

a	The organization's facility	13a	%
b	An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
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**Schedule J
(Form 990)**

Compensation Information

OMB No 1545-0047

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.

2015
Open to Public Inspection

Department of the Treasury
 Internal Revenue Service

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

Name of the organization
 PHOENIX ART MUSEUM

Employer identification number
 86-0072608

Part I Questions Regarding Compensation

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.

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes in 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.

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment?
 - b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
 - c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 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:

- a** The organization?
 - b** Any related organization?
- 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:

- a** The organization?
 - b** Any related organization?
- 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 non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.

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.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	Yes	
2	Yes	
4a		No
4b	Yes	
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No
9		

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 are not listed on Form 990, Part VII

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JAMES BALLINGER SYBIL HARRINGTON DIRECTOR	(i)	318,119 -----	0 -----	1,926 -----	12,799 -----	15,054 -----	347,898 -----	0 -----
	(ii)	0	0	0	0	0	0	0
2 GARY EGAN DEPUTY DIR-FINANCE & ADMIN	(i)	154,158 -----	0 -----	0 -----	6,181 -----	7,923 -----	168,262 -----	0 -----
	(ii)	0	0	0	0	0	0	0
3 AMANDA CRUZ THE SYBIL HARRINGTON DIRECTOR	(i)	260,386 -----	0 -----	0 -----	0 -----	11,531 -----	271,917 -----	0 -----
	(ii)	0	0	0	0	0	0	0

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.

Return Reference	Explanation
PART I, LINE 1A	MEMBERSHIP IN THE UNIVERSITY CLUB OF PHOENIX FOR ANNUAL DUES OF \$1,200 WAS PROVIDED TO KEY EMPLOYEES FOR THE PURPOSE OF PROVIDING DINING FACILITIES THAT WERE USED BY THEM FOR BUSINESS ENTERTAINMENT USE ON BEHALF OF THE MUSEUM
PART I, LINE 4B	A KEY EMPLOYEE, PURSUANT TO THEIR EMPLOYMENT AGREEMENT, PARTICIPATES IN A SUPPLEMENTAL RETIREMENT PLAN. THE AMOUNT ACCRUED BY THE MUSEUM UNDER THIS EMPLOYMENT AGREEMENT WAS \$375,000 AS OF 6/30/2016.
PART II, LINE 1	THERE WAS AN OVERLAP WITH JAMES BALLINGER AS THE OUTGOING SYBIL HARRINGTON DIRECTOR AND AMANDA CRUZ AS THE INCOMING SYBIL HARRINGTON DIRECTOR. JIM WAS REQUIRED UNDER HIS EMPLOYMENT AGREEMENT TO BE AVAILABLE AS MUCH AS NECESSARY DURING THIS TRANSITION PERIOD THAT OCCURRED DURING HIS FINAL YEAR OF EMPLOYMENT WITH THE MUSEUM. HE WAS PAID HIS FULL SALARY AND BENEFITS DURING THIS FINAL YEAR THAT REPRESENTED HIS VALUE TO THE ORGANIZATION FOR HIS PRIOR YEARS OF WORK EXPERIENCE AND HIS AVAILABILITY DURING THE TRANSITION PERIOD. THE ORGANIZATION HAS ESTIMATED THAT HE WAS ONLY NEEDED APPROXIMATELY 2 HOURS PER WEEK DURING THIS FINAL YEAR AS REPORTED IN THIS FORM 990.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No 1545-0047

2015

Open to Public Inspection

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**
▶ **Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990**

Name of the organization
PHOENIX ART MUSEUM

Employer identification number
86-0072608

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	494		N/A
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X			N/A
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	18	369,641	FMV
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>FR AUCTION ITEMS</u>)	X	307	552,937	FMV
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		No
b If "Yes," describe in Part II		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II Supplemental Information.

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B)	THE NUMBER OF CONTRIBUTIONS ARE LISTED IN COLUMN (B)
PART I, LINE 33	- THE MUSEUM HAS A LARGE COLLECTION OF FINE ART BUT DOES NOT CAPITALIZE OR VALUE ITS COLLECTION, SO GIFTS OF ART ARE NOT INCLUDED IN REVENUE

**SCHEDULE O
(Form 990 or
990-EZ)**

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

2015

**Open to Public
Inspection**

Department of the
Treasury
Internal Revenue
Service

Name of the organization
PHOENIX ART MUSEUM

Employer identification number

86-0072608

Return Reference	Explanation
FORM 990, PART III, LINE 1	PHOENIX ART MUSEUM IS A VIBRANT DESTINATION CONNECTING PEOPLE TO GREAT ART FROM AROUND THE WORLD TO ENRICH THEIR LIVES AND COMMUNITIES THIS VISION IS SUPPORTED BY FOUR STRATEGIC PILLARS WHICH ARE 1 EXCEPTIONAL ART - TO CELEBRATE THE HIGHEST QUALITY VISUAL ART THROUGH OUTSTANDING EXHIBITIONS, ACQUISITIONS AND COLLECTION STEWARDSHIP 2 ENRICHMENT AND LEARNING - TO CREATE A NATIONALLY RECOGNIZED MODEL FOR ENHANCING EXPERIENCE OF THE VISUAL ARTS THROUGH INTERPRETATION, ENGAGED LEARNING, AND ENRICHMENT 3 BROAD AUDIENCE - TO ATTRACT THE BROADEST POSSIBLE AUDIENCE TO THE MUSEUM AS CONSISTENT AND ENTHUSIASTIC PARTICIPANTS 4 FISCAL STABILITY AND ORGANIZATIONAL EXCELLENCE - TO ACHIEVE AND MAINTAIN A STRONG FINANCIAL FOUNDATION

Return Reference	Explanation
FORM 990, PART III, LINE 4A	<p>MICHELANGELO SACRED AND PROFANE TWENTY-SIX RARE DRAWINGS FROM THE RENOWNED COLLECTION OF THE CASA BUONARROTI IN FLORENCE, ITALY, COMPRISE ONE OF THE MOST IMPORTANT MICHELANGELO EXHIBITIONS IN AMERICA IN NEARLY THREE DECADES THE CASA BUONARROTI, ONCE OWNED BY THE ARTIST, IS THE WORLD'S LARGEST REPOSITORY FOR MICHELANGELO'S DRAWINGS, ARCHITECTURAL STUDIES, AND MEMOIRS THE IMAGES IN SACRED AND PROFANE ARE MEMORABLE FIGURATIVE STUDIES AND ARCHITECTURAL DRAWINGS BY THE HAND OF MICHELANGELO INCLUDED IS ONE OF MICHELANGELO'S MOST ADMIRERD AND COMPLETE DRAWINGS, THE LARGE MADONNA AND CHILD ADDITIONAL IMAGES INCLUDE PREPARATORY DRAWINGS FOR LATER PAINTINGS THE HEAD OF THE MADONNA IS A STUDY FOR HIS PAINTING DONI TONDO, AND THE SUBLIME SKETCH OF THE HEAD OF LEDA WAS MADE FOR LEDA AND THE SWAN, A PAINTING NOW LOST AND KNOWN TODAY ONLY THROUGH COPIES A RENOWNED SCULPTOR AND PAINTER IN HIS OWN TIME, MICHELANGELO'S LEGACY AS AN ARCHITECT WAS NO LESS MONUMENTAL HIGHLIGHTED IN THE EXHIBITION ARE SEVERAL OF HIS INNOVATIVE ARCHITECTURAL PLANS AMONG THEM ARE DRAWINGS FOR THE FA ADE OF SAN LORENZO IN FLORENCE, AND HIS INNOVATIVE PLAN FOR THE CHURCH OF SAN GIOVANNI DEI FIORENTINI IN ROME THESE WORKS HELP DEMONSTRATE MICHELANGELO'S LASTING INFLUENCE ON ARCHITECTURE, AND SCHOLAR ADRIANO MARINAZZO CONSIDERS THESE DESIGNS TO BE "AMONG THE MOST FASCINATING ARCHITECTURAL PROJECTS OF THE ENTIRE RENAISSANCE" THIS EXHIBITION IS AN EXCEPTIONAL OPPORTUNITY FOR THE PHOENIX COMMUNITY AND THE STATE OF ARIZONA, AS MICHELANGELO'S WORKS RARELY TRAVEL OUTSIDE OF ITALY SACRED AND PROFANE EXHIBITED IN 2013 AT THE MUSCARELLE MUSEUM OF ART AND THE MUSEUM OF FINE ARTS BOSTON</p>

Return Reference	Explanation
FORM 990, PART III, LINE 4B	<p>THE WHITE SHIRT ACCORDING TO ME, GIANFRANCO FERRE. KNOWN AS THE "ARCHITECT OF FASHION AND THE PURVEYOR OF "POWER DRESSING," ITALIAN FASHION DESIGNER GIANFRANCO FERRE NEVER CEASED TO VIEW THE WHITE SHIRT AS THE ARCHETYPAL EXPRESSION OF HIS APPROACH TO DESIGN AND STYLE. REPEATEDLY RECONSTRUCTED AND REDEFINED IN A CEASELESS QUEST FOR NEW CULTURAL AND FORMAL INTERPRETATIONS, FERRE'S WHITE SHIRT WAS SIMULTANEOUSLY A MAGNIFICENT OBSESSION, A CREATIVE DIVERSION, A SYMBOL OF IDEAL BEAUTY AND A PERSONAL MEANS OF COMMUNICATING THE INFINITE POSSIBILITIES OF FASHION AND DESIGN. A CONSTANT PRESENCE AND MAJOR THEME THROUGHOUT FERRE'S 30-YEAR CAREER, THE WHITE SHIRT BECAME THE DESIGNER'S "HALLMARK OF STYLE AND A "LEXICON OF CONTEMPORARY ELEGANCE." A GRADUATE OF MILAN POLYTECHNIC INSTITUTE IN ARCHITECTURE, FERRE BEGAN HIS OWN LABEL IN 1978 BY LAUNCHING A WOMAN'S PR T- -PORTER COLLECTION AND LATER A MEN'S CLOTHING, A WIDE RANGE OF ACCESSORIES AND HIS OWN ALTA MODA LINE IN ROME. FROM 1989-1997, GIANFRANCO FERRE WAS APPOINTED ARTISTIC DIRECTOR OF CHRISTIAN DIOR. KNOWN FOR HIS CLASSIC BUT POWERFUL CLOTHES CONSTRUCTED IN THE HIGHEST QUALITY MATERIALS, FERRE'S DESIGNS REPRESENT THE ELEGANCE AND CACHE OF "MADE IN ITALY " THE WHITE SHIRT ACCORDING TO ME. GIANFRANCO FERRE INCLUDES A SELECTION OF 27 OF FERR 'S MOST SIGNIFICANT WHITE SHIRTS CREATED OVER THE COURSE OF HIS CAREER (1982-2006) SKETCHES, TECHNICAL DESIGNS, PHOTOGRAPHS AND VIDEOS FROM THE ARCHIVES OF THE GIANFRANCO FERRE FOUNDATION WILL OFFER VISITORS THE CHANCE TO GO BEYOND THE CONFINES OF FASHION AND EXAMINE THE METHODS, TECHNIQUES AND PRECISION FERRE APPLIED TO EACH OF HIS DESIGNS. THIS EXHIBITION IS DESIGNED, PRODUCED AND CURATED BY THE GIANFRANCO FERRE FOUNDATION AND BY THE PRA TO TEXTILE MUSEUM FOUNDATION</p>

Return Reference	Explanation
FORM 990, PART III, LINE 4C	<p>SUPER INDIAN FRITZ SCHOLDER, 1967 - 1980 FRITZ SCHOLDER (AMERICAN, 1937-2005) WAS A COMPLEX ARTIST AND ONE OF THE FIRST NATIVE AMERICANS TO BE RECOGNIZED FOR HIS SIGNIFICANT CONTRIBUTIONS AS A CONTEMPORARY ARTIST A SECOND-GENERATION POP ARTIST, SCHOLDER FIRST CHALLENGED CULTURAL STEREOTYPES OF AMERICAN INDIANS IN THE LATE 1960S HE DEVELOPED A PERSONAL, COLORFULLY ABSTRACT STYLE THAT COMBINES POP ART WITH IDEAS FOUND IN EXPRESSIONISM, AND HIS DEPICTIONS OF MODERN-DAY INDIANS REVOLUTIONIZED ARTISTIC REPRESENTATIONS OF NATIVE PEOPLES THE ARTIST THEODORE WADDELL OBSERVED, SCHOLDER NOT ONLY CHALLENGED ASSUMPTIONS BUT MOVED THE NEEDLE OF UNDERSTANDING " SCHOLDER REGULARLY WORKED ON A LARGE SCALE, AND HIS PAINTINGS, AS WELL AS WORKS ON PAPER ARE BOLD, STRIKINGLY COLORFUL COMPOSITIONS</p> <p>SUPER INDIAN FRITZ SCHOLDER, 1967-1980 IS A GROUNDBREAKING EXHIBITION FEATURING MORE THAN 40 WORKS AND IS THE FIRST TO EXAMINE THE WAYS SCHOLDER ATTACKED STEREOTYPES ABOUT NATIVE AMERICANS INCLUDED IN THE EXHIBITION ARE ITEMS FROM HIS INITIAL AND CONTROVERSIAL INDIAN SERIES, BEGUN IN 1967, WHEN BONANZA WAS STILL THE MOST POPULAR PROGRAM ON TELEVISION THE EXHIBITION CONCLUDES WITH HIS INDIAN LAND PAINTINGS OF 1980</p> <p>SUPER INDIAN DEMONSTRATES HOW, IN LITTLE MORE THAN A DECADE, SCHOLDER WORKED AGAINST TRADITION AND EXPECTATIONS TO CREATE CONTEMPORARY COMPOSITIONS THAT RESHAPED THE ART OF THE AMERICAN WEST</p> <p>ORGANIZED BY THE DENVER ART MUSEUM, SUPER INDIAN FRITZ SCHOLDER, 1967-1980 BRINGS TOGETHER WORKS FROM MULTIPLE PRIVATE AND PUBLIC COLLECTIONS, INCLUDING THE PHOENIX ART MUSEUM THE EXHIBITION IS ACCOMPANIED BY A FULLY-ILLUSTRATED CATALOGUE WITH ESSAYS BY SCHOLARS, ARTISTS AND COLLECTORS</p>

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE MUSEUM HAS A MEMBERSHIP PROGRAM THAT CURRENTLY HAS 11,295 MEMBERS REGULAR MEMBERS AND CIRCLES MEMBERS, EACH GET ONE VOTE

Return Reference**Explanation**

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

MEMBERS OF THE GOVERNING BODY (BOARD OF TRUSTEES) ARE NOMINATED BY THE MUSEUM'S
NOMINATING COMMITTEE AND THEN ARE VOTED UPON BY THE THE MUSEUM MEMBERSHIP

Return Reference**Explanation**

FORM 990, PART VI, SECTION B,
LINE 11

THE RETURN WILL BE PROVIDED TO EACH BOARD MEMBER TO READ AND EACH WILL BE GIVEN THE OPPORTUNITY TO ASK QUESTIONS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE MUSEUM'S GUIDELINES FOR PROFESSIONAL PRACTICES QUESTIONNAIRE AND COMPLIANCE AGREEMENT IS REQUIRED TO BE COMPLETED AND SIGNED BY TRUSTEES, PRESIDENTS OF SUPPORT ORGANIZATIONS, MUSEUM DIRECTOR, DIVISION HEADS, DEPARTMENT HEADS, AND ALL ACCOUNTING STAFF ANNUALLY THIS PROCESS IS DONE EVERY YEAR IN SEPTEMBER THE COMPLETED AND SIGNED AGREEMENTS ARE REVIEWED BY HUMAN RESOURCES MANAGER FOR COMPLETENESS ANY QUESTION THAT ARISES IS DISCUSSED WITH THE INDIVIDUAL SIGNING THE AGREEMENT

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	DATA FROM OTHER MUSEUMS IS USED TO EVALUATE COMPENSATION FOR THE CEO, INCLUDING FROM THE AMERICAN ASSOCIATION OF MUSEUM DIRECTORS THE EXECUTIVE COMMITTEE MAKES THE DECISION FOR DETERMINING THE COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES, COMPARISONS ARE MADE WITH OTHER MUSEUMS DECISIONS MADE DURING BUDGET PROCESS

Return Reference**Explanation**FORM 990, PART VI,
SECTION C, LINE 19THE ORGANIZATION FINANCIAL STATEMENTS ARE AVAILABLE ON THE WEBSITE AND THE ORGANIZATION
MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE UPON REQUEST

Return Reference	Explanation
FORM 990, PART XI, LINE 9	ACQUISITION OF FINE ART -251,244

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE ORGANIZATION HAS NOT CHANGED ITS OVERSIGHT PROCESS FOR THE AUDIT OR ITS SELECTION PROCESS FOR INDEPENDENT AUDITORS DURING THE YEAR

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2015

**Open to Public
Inspection**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
PHOENIX ART MUSEUM

Employer identification number

86-0072608

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) PHOENIX ART MUSEUM ENDOWMENT FUND INC 1625 N CENTRAL AVENUE PHOENIX, AZ 850041685 86-0765761	FINANCIAL SUPPORT OF PHOENIX ART MUSEUM	AZ	501(C)(3)	LINE 11A, I	PHOENIX ART MUSEUM	Yes	

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)

- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)

- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)

- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses

- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1a		No
1b		No
1c	Yes	
1d		No
1e	Yes	
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l	Yes	
1m		No
1n	Yes	
1o	Yes	
1p		No
1q	Yes	
1r	Yes	
1s	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) PHOENIX ART MUSEUM ENDOWMENT FUND	C	1,174,796	FAIR MARKET VALUE

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
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