For Paperwork Reduction Act Notice, see the separate instructions.

Return of Organization Exempt From Income Tax

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

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

2019

DLN: 93493133057341 OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service To to www.irs.gov/Form990 for instructions and the latest information.									Open to Public Inspection		
A F	or th	ne 2019 d		inning 07-01-2019 , and endin	ıg 06-30	-2020	1				
		applicable:	C Name of organization TRUSTEES OF PHILLIPS ACADEMY				D Employ	er identif	fication number		
		change	% LINDA DENNISON				04-210	3579			
	itial re	hange eturn	Doing business as								
		rn/terminated	1								
		d return	100 MAIN CEREET	mail is not delivered to street address)	Room/suite	9	E Telephor	ie numbei			
□ Ap	plicat	ion pending					(978) 7	49-4000	l 		
			City or town, state or province, co ANDOVER, MA 018104161	untry, and ZIP or foreign postal code							
				l cc			J		98,326,629		
			F Name and address of princip JAMES F VENTRE	oal officer:		H(a) Is this	• .	turn for			
			180 MAIN STREET			subor H(b) Are a	dinates?	-05	☐Yes ☑No		
			ANDOVER, MA 018104161		_	includ		.65	☐ Yes ☐No		
I ⊺a	x-exe	mpt status	501(c)(3) ☐ 501(c)()	《 (insert no.) ☐ 4947(a)(1) or ☐	527		•	•	instructions)		
J W	ebsi	te:► W\	WW.ANDOVER.EDU			H(c) Group	exemption	number	>		
K For	m of c	organization	n: 🗹 Corporation 🗌 Trust 🗌 As	sociation Other ►		L Year of form	ation: 1778	M State	of legal domicile:		
								INA			
P	art I		nmary								
		Briefly de SEE SCHE	scribe the organization's mission	or most significant activities:							
ce											
Jar											
Governance	١.		🗆								
Ĝ				liscontinued its operations or dispo ing body (Part VI, line 1a)			of its net a	ssets.	23		
	1		· ·	of the governing body (Part VI, line				4	22		
Activities &	1			calendar year 2019 (Part V, line 2a)			•	5	1,139		
Ĭ	6		mber of volunteers (estimate if n		•	6	2,892				
ACT.	1		related business revenue from Pa			•	7a	1,607,442			
	1		7a 7b	1,007,442							
	"	ivet unite	elated business taxable income in	om Form 990-T, line 39		Dri	or Year	1,0	Current Year		
		Contribu	tions and grants (Bort VIII line 11	2)		Pil		752	50,706,945		
₹	8		tions and grants (Part VIII, line 11 service revenue (Part VIII, line 2		•		47,674,1 72,474,1		69,831,252		
Ravenue	1	-	•		•						
æ	1			, lines 3, 4, and 7d)	•		92,380,		112,710,739		
	1		venue (Part VIII, column (A), line		45)		68,: 212,597,!		106,304 233,355,240		
	+			nust equal Part VIII, column (A), line	e 12)						
	1		and similar amounts paid (Part IX,				23,355,4		22,598,852		
	1		paid to or for members (Part IX,	, ,,			62.762	0	0		
Expenses	1		, , , ,	penefits (Part IX, column (A), lines	5-10)		62,763,		63,286,355		
£	1		onal fundraising fees (Part IX, col	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•		29,0	194	20,449		
ភ្ន	1		Iraising expenses (Part IX, column (D)	· - · - · - · - · - · - · - · - · - · -			50.011		45.766.057		
	1		. , , , , , , , , , , , , , , , , , , ,	s 11a–11d, 11f–24e)	•		52,014,2		45,766,857		
	1		penses. Add lines 13–17 (must ed				138,162,		131,672,513		
	19	Revenue	e less expenses. Subtract line 18 i	from line 12	•	 	74,434,9		101,682,727		
Net Assets or Fund Balances						Beginning	of Current Y	ear	End of Year		
Set	20	Total ass	sets (Part X, line 16)				1,623,486,4	435	1,634,666,152		
AB B	1		bilities (Part X, line 26)				211,177,		205,022,683		
ΣĒ	1		ets or fund balances. Subtract line				1,412,308,		1,429,643,469		
	art II		nature Block				1,112,000,		1,123,010,103		
				mined this return, including accomp	panying s	chedules and	statements	s, and to	the best of my		
			ef, it is true, correct, and complet	te. Declaration of preparer (other t	han office	r) is based o	n all inform	ation of	which preparer has		
ally K	HOWI	edge.									
							1-05-13				
Sign	1	Signat	ture of officer			Dat	е				
Here			A PM DENNISON DIRECTOR OF FINANC	CE & COMPTROLLER							
		Туре	or print name and title								
			Print/Type preparer's name	Preparer's signature	Dat	te		PTI N P0064146	3		
Pai	d	L				self	-employed	- 0004146			
Pre	par	er	Firm's name PricewaterhouseCoop	n's EIN ►							
Use	Or	nly 📙	Firm's address ► 101 SEAPORT BLVD S	SUITE 500		Pho	ne no. (617)	530-5000			
			BOSTON, MA 02210				· /				
May t	he II	SS discuss	s this return with the preparer sh					▽	Yes □ No		

Cat. No. 11282Y

Form **990** (2019)

	of Program Servi	ce Accomplis										
Check if Sched		ce Accompnis	nments									
	lule O contains a resp	onse or note to a	any line in this Part III		🗹							
Briefly describe the o	rganization's mission:		•									
CHEDULE O												
Did the organization (undertake any signific	ant program ser	vices during the year wh	ich were not listed on								
the prior Form 990 or	990-EZ?				🗌 Yes 🗹 No							
If "Yes," describe the	se new services on Sc	hedule O.										
Did the organization cease conducting, or make significant changes in how it conducts, any program												
services?												
If "Yes," describe the	se changes on Schedu	ile O.										
Section 501(c)(3) and	d 501(c)(4) organizati	ons are required	to report the amount of	argest program services, as me f grants and allocations to othe	easured by expenses. rs, the total							
(Code:) (Expenses \$	99,925,159	including grants of \$	21,771,757) (Revenue \$	64,715,970)							
See Additional Data												
(Code:) (Expenses \$	3,763,438	including grants of \$	331,587) (Revenue \$	5,146,987)							
See Additional Data												
(Code:) (Expenses \$	778,726	including grants of \$	7,152) (Revenue \$	0)							
See Additional Data												
Other program servic	es (Describe in Sched	ule O.)										
(Expenses \$	1,338,710 inc	luding grants of	\$ 488,35	56) (Revenue \$	82,020)							
Total program serv	ice expenses ▶	105,806,0	33									
	Did the organization of the prior Form 990 or If "Yes," describe the Did the organization of Services?	Did the organization undertake any signific the prior Form 990 or 990-EZ? If "Yes," describe these new services on Sc Did the organization cease conducting, or reservices?	Did the organization undertake any significant program servithe prior Form 990 or 990-EZ?	Did the organization undertake any significant program services during the year when the prior Form 990 or 990-EZ?	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?							

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Par	Checklist of Required Schedules		Voc	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	162	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? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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</i> ,Part 2	6		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? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	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? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	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.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
a	in Part X, line 16? If "Yes," complete Schedule D, Part IX 🕏	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🥦	11e	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)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		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? If "Yes," complete Schedule F, Parts III and IV	16		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? If "Yes," complete Schedule G, Part I(see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	

OIIII :	990 (2019)			Page 4				
Part	Checklist of Required Schedules (continued)							
			Yes	No				
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes					
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes					
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes					
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No				
	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		No				
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No				
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part	25a		No				
	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				
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II							
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,Part III	27		No				
	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 current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No				
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No				
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No				
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M \ref{Matter}	29	Yes					
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No				
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No				
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No				
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes					
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes					
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No				
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part VI	37		No				
	· · · · · · · · · · · · · · · · · · ·	\vdash						

Yes

1c

Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	1,139						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes					
3a	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	. 3b	Yes					
	a At any time during the calendar year, did the organization have an interest in, or a signature or other authorit financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:			No				
U	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (I	FBAR).						
5a	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5а		No				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No				
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organic solicit any contributions that were not tax deductible as charitable contributions?	ization 6a		No				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gi not tax deductible?	fts were 6b						
7	Organizations that may receive deductible contributions under section 170(c).							
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods an provided to the payor?	d services 7a		No				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7b						
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was require form 8282?	ed to file 7c		No				
d	If "Yes," indicate the number of Forms 8282 filed during the year							
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	. 7f		No				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 required?	9 as 7g						
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?							
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?	. 9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12 10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities							
11	Section 501(c)(12) organizations. Enter:							
a								
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 104	1? 12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	· · 13a						
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans							
	150			NI -				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No				
ь 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O							
	parachute payment(s) during the year?	15		No				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income If "Yes," complete Form 4720, Schedule O.	? · · 16		No				

orm	990 (2019)			Page 6
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 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	" respo	onse to	lines
Se	ction A. Governing Body and Management			
			Yes	No
la	Enter the number of voting members of the governing body at the end of the tax year 23			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 22			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Sei	ction C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed▶			
	ME , MA , NY			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain in Schedule O)			
	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: LINDA DENNISON 180 MAIN STREET ANDOVER, MA 018104161 (978) 749-4000			n (2019)

(A)

Name and title

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

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

✓

(F)

Estimated

amount of other

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000

of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

(C)

Position (do not check more

than one box, unless person

(D)

Reportable

compensation

(E)

Reportable

compensation

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

(B)

Average

hours per

week (list is both an officer and a from the from related compensation director/trustee) any hours organization organizations from the for related (W-2/1099-(W-2/1099organization and Individual trustee or director Highest compensatemployee Former organizations MISC) MISC) related Institutional Trustee below dotted organizations employee line) Ē See Additional Data Table

Name and title

Part VII

350,000

294,498

243,535

198,498

Estimated

		week (list is both an officer and a from the any hours director/trustee) organization organization organization (W-2/1009								from related organizations	d compen s from		sation the	
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		(1099- (SC)	(W-2/1099- MISC)		relat relat organiza	ed
See	Additional Data Table													
												_		
												_		
												+		
												\top		
												\perp		
	Sub-Total Fotal from continuation sheets to P	 art VII, Section	 А.				▶							
<u>d 1</u>	Total (add lines 1b and 1c)			<u></u>			▶		3,7	716,845		0		962,911
2	Total number of individuals (including of reportable compensation from the			e liste	ed a	bove	e) who	rece	eived mo	re than \$	100,000			
													Yes	No
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i> .			ee, k			oyee,		ghest cor	npensate	ed employee on	3	Yes	
4	For any individual listed on line 1a, is organization and related organization individual										om the	4	Vaa	
5	Did any person listed on line 1a recei										dividual for	-	Yes	
	services rendered to the organization		ete Sch	edule	J fc	or su	ich pei	rson				5		No
	ection B. Independent Contract		- ملمد: الم	d - :	-4			41 <i>t</i> -			#100 000 af			
1	Complete this table for your five high from the organization. Report compe											mpens	ation	
		(A)									(B)		(C)

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (C)

Position (do not check more

(D)

Reportable

Reportable

(B)

Average

(A)
Name and business address Description of services

ARCHITECTURE

STANMAR INC,

Compensation 3,023,819

321 COMMONWEALTH ROAD 201

WAYLAND, MA 01778 MONTICELLO ASSOCIATES, INVESTMENT ADVISORY

1800 LARIMER ST DENVER, CO 80202

CONSTRUCTION MGMT

GALANIS CONSULTING INC, ONE LILLIAN DRIVE

ATTORNEYS

IPSWICH, MA 01938 MITCHELL SILBERBERG KNUPP LLP,

2049 CENTURY PARK EAST 18TH FLOOR LOS ANGELES, CA 90067

EAGLE CAPITAL MANAGEMENT LLC, ASSET MANAGERS 499 PARK AVENUE

NEW YORK, NY 10022 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization ▶ 13 Form 990 (2019)

Part										Page 9
		Check if Sche	dule	O contains a	respo	onse or note to any	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a	Federated campa	aigns		1a		l	revenue		512 - 514
ants	b Membership dues 1b									
ي وزر		: Fundraising ever	nts .	. [1 c					
ifts, ar A		d Related organiza	tions	; <u> </u>	1 d					
, E	•	Government grants	(con	tributions)	1e					
Contributions, Gifts, Grants and Other Similar Amounts	f All other contributions, gifts, grants, and similar amounts not included above q Noncash contributions included in					50,706,945				
et in the second	g	Noncash contribution lines 1a - 1f:\$	ons in	cluded in	1 g	6,236,138				
and and	ı	h Total. Add lines	1a-1	f		>	50,706,945			
						Business Code				
	2a	TUITION AND FEES				900099	65,581,758	65,581,758		
Program Service Revenue	b	HOCKEY RINK				713940	1,224,574	886,858	337,716	
ice Re	c	COURSE PROGRAM 8	k MAT	ERIALS		900099	1,162,159	1,162,159		
Serv	d	EXHIBITION REVENU	IE			900099	2,700	2,700		
ogran	е	ALUMNI EVENTS				900099	2,039	2,039		
₹	f	All other program	serv	ice revenue.			1,858,022	1,858,022		
		Total. Add lines 2			>	69,831,252				
						interest, and other		4	-410,408	5,267,732
		imilar amounts) . Income from invest		 It of tax-exer		ond proceeds		0	120,100	5,257,755
							>	o o		
				(i) Rea	l	(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental	64							
	_	expenses Rental income	6b				4			
		or (loss)	6с		(o l	0			
	d	Net rental income	e or i				(
	7-	Gross amount		(i) Securi	ties	(ii) Other	_			
	/a	7a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 7b 164,963,969				4				
	b					9				
	С	Gain or (loss)	7с	107,8	53,41!	5				
	d	Net gain or (loss)				· · · •	107,853,41	5	1,572,612	106,280,80
Other Revenue		Gross income from for (not including \$ contributions reporte		of						
eve		See Part IV, line 18	•		8a	C)			
۳		Less: direct exper			8b	(
the	С	Net income or (los	ss) fr	om fundraisi	ng ev	ents •		0		
		Gross income from See Part IV, line 19			9a	C				
		Less: direct exper			9b	C				
	С	Net income or (los	ss) fr	om gaming a	ctivit	ies				
,	10a	Gross sales of inverse returns and allowa			10a	5,743	3			
	b	Less: cost of good	ls so	ld	10b	,				
	С	Net income or (los	ss) fr	om sales of	nvent	tory	-1,67	-1,218	-459	
	14	Miscellaneo		evenue		Business Code 62441	0 00.04	2	CO C 45	
	11	aCHILD CARE CEN	TER			62441	0 69,648	3	69,648	
	b	COURTS & CAGES	5			71394	0 38,333	3	38,333	
	C	с								
	Iم	All other revenue	_							
		Total. Add lines 1				•				
		Total revenue. S					107,98			
			- "				233,355,240	69,492,318	1,607,442	111,548,535 Form 990 (2019)

Form 990 (2019)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must c		_		mn (A).
Check if Schedule O contains a response or note to an	y line in this Part IX	(B)	(C)	□ (D)
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	449,956	449,956		
Grants and other assistance to domestic individuals. See Part IV, line 22	22,148,896	22,148,896		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	2,861,977	206,952	2,045,092	609,933
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	45,361,105	37,210,949	2,757,214	5,392,942
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	4,019,829	3,162,719	315,913	541,197
9 Other employee benefits	7,626,159	6,305,001	588,661	732,497
10 Payroll taxes	3,417,285	2,600,316	337,875	479,094
11 Fees for services (non-employees):				
a Management	19,700	19,700		
b Legal	392,791		392,791	
c Accounting	241,816		241,816	
d Lobbying	7,460	7,460		
e Professional fundraising services. See Part IV, line 17	20,449			20,449
f Investment management fees	693,842		693,842	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)	710,831	381,791	209,711	119,329
12 Advertising and promotion	180,577	147,806	25,950	6,821
13 Office expenses	5,313,899	2,569,542	2,151,776	592,581
14 Information technology	1,151,971	721,630	311,830	118,511
15 Royalties	30,132	27,342	2,790	
16 Occupancy	3,579,094	3,154,367	406,162	18,565
17 Travel	860,734	477,219	180,122	203,393
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
19 Conferences, conventions, and meetings	474,360	205,773	36,976	231,611
20 Interest	6,122,563	4,335,697	1,058,529	728,337
21 Payments to affiliates	0	. ,		· ·
22 Depreciation, depletion, and amortization	9,411,144	7,204,832	1,978,795	227,517
23 Insurance	1,004,961	877,030	79,929	48,002
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 FOOD SERVICE	4,574,733	4,574,733	0	0
b OFFICE OF PHYSICAL PLANT	4,724,119	4,724,119		
c SUMMER SCHOOL	1,074,827	1,074,827		
d INSTRUCTION	836,336	836,336		
e All other expenses	4,360,967	2,381,040	1,283,546	696,381
25 Total functional expenses. Add lines 1 through 24e	131,672,513	105,806,033	15,099,320	10,767,160
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

Form 990 (2019)

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Liabilities 22

Fund Balances

ō 29

Assets 30

27

28

31

32

33

75,527,719

82,972,001

1.055.938

48.336

644,868

5,035,839

323,098,323

222,408,216

919.817.182

3,952,341

11,790,948

11,996,202

112.425.831

30,072,234

38,737,468

205.022.683

434,567,970

995,075,499

1,429,643,469

1,634,666,152

Form 990 (2019)

1,634,666,152

0

0

105,389

(B) End of year

Beginning of year

20,660,312

42,090,187

78,270,218

1,569,525

0 5

0 6

72.189

662,602

3,742,759

318,032,482

240,654,470

914.023.962

3,707,729

18,002,463

17,419,972

112,498,401

30,062,828

33,194,036

211.177.700

431,648,496

980.660.239

1,412,308,735

1,623,486,435

1,623,486,435

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0 22 23 Page **11**

Cash-non-interest-bearing Savings and temporary cash investments . . .

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

Pledges and grants receivable, net . . .

Accounts receivable, net section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled Loans and other receivables from other disqualified persons (as defined under

Notes and loans receivable, net . . .

Inventories for sale or use . .

Prepaid expenses and deferred charges .

10a 10b

10a Land, buildings, and equipment: cost or other 463,475,804 basis. Complete Part VI of Schedule D 140,377,481 Less: accumulated depreciation 11 Investments—publicly traded securities . 12 Investments—other securities. See Part IV, line 11 . . .

Assets

13 Investments—program-related. See Part IV, line 11 . 14 Intangible assets . 15 Other assets. See Part IV, line 11 . . . 16

Total assets. Add lines 1 through 15 (must equal line 34) . Accounts payable and accrued expenses . Grants payable . Deferred revenue . . . Tax-exempt bond liabilities . . .

Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Secured mortgages and notes payable to unrelated third parties . . .

and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D 26

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

24 Unsecured notes and loans payable to unrelated third parties . 25 Other liabilities (including federal income tax, payables to related third parties,

Total liabilities. Add lines 17 through 25 . . Organizations that follow FASB ASC 958, check here <a> \square and

Organizations that do not follow FASB ASC 958, check here > \(\begin{align*} \text{and} \\ \text{and} \end{align*}

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a

3h

No

Form 990 (2019)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b 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.

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

EIN: 04-2103579

Name: TRUSTEES OF PHILLIPS ACADEMY

Form 990 (2019)

Form 990, Part III, Line 4a:

EDUCATION, 1,186 STUDENTS - REGULAR SESSION GRADES 9 - 12: PHILLIPS ACADEMY IS A RESIDENTIAL SECONDARY SCHOOL WHICH SEEKS STUDENTS OF INTELLIGENCE AND INTEGRITY FROM DIVERSE CULTURAL, RACIAL, SOCIOECONOMIC AND GEOGRAPHIC BACKGROUNDS. THE SCHOOL'S RESIDENTIAL STRUCTURE ENABLES FACULTY TO SUPPORT STUDENTS IN THEIR PERSONAL, SOCIAL AND INTELLECTUAL DEVELOPMENT. THE ACADEMIC PROGRAM FOSTERS EXCELLENCE IN ALL DISCIPLINES WITHIN THE LIBERAL ARTS TRADITION. FACULTY MEMBERS GUIDE STUDENTS IN MASTERING SKILLS, ACQUIRING KNOWLEDGE AND THINKING CRITICALLY, CREATIVELY AND INDEPENDENTLY. THE SCHOOL STRIVES TO HELP YOUNG PEOPLE ACHIEVE THEIR POTENTIAL NOT ONLY INTELLECTUALLY, BUT ALSO ARTISTICALLY. ATHLETICALLY AND MORALLY, SO THAT THEY MAY LEAD RESPONSIBLE AND FULFILLING LIVES. THE ACADEMY IS COMMITTED TO ESTABLISHING AN ENVIRONMENT THAT

ENCOURAGES PEOPLE OF DIVERSE BACKGROUNDS AND BELIEFS TO UNDERSTAND AND RESPECT ONE ANOTHER AND TO BE SENSITIVE TO THE DIFFERENCES OF GENDER, ETHNICITY, CLASS AND SEXUAL ORIENTATION, IN ITS PROGRAMS THE SCHOOL SEEKS TO PROMOTE A BALANCE OF LEADERSHIP, COOPERATION AND SERVICE. TOGETHER WITH A DEEPER AWARENESS OF THE GLOBAL COMMUNITY AND NATURAL WORLD. ANDOVER'S 1778 CONSTITUTION CHARGES THE ACADEMY TO PREPARE "YOUTH FROM EVERY QUARTER" TO ASPIRE EQUALLY TO KNOWLEDGE AND GOODNESS. THIS OBLIGATION CHALLENGES STUDENTS IN MIND, BODY AND SPIRIT TO SEE BEYOND THEMSELVES AND TO GO BEYOND THE FAMILIAR; TO REMAIN COMMITTED TO DEVELOPING WHAT IS FINEST IN THEMSELVES AND OTHERS, FOR OTHERS AND THEMSELVES.

Form 990, Part III, Line 4b: EDUCATION, 558 STUDENTS - SUMMER SESSION: THE SUMMER SESSION OFFERS ITS STUDENTS FIVE WEEKS OF INTENSIVE ACADEMIC AND PERSONAL GROWTH. IT ENCOMPASSES DEMANDING CLASSES, RECREATIONAL AFTERNOON ACTIVITIES, SOCIAL EVENTS, CULTURAL OPPORTUNITIES, AND WELCOMING DORMITORIES THAT

ADDITION, SUMMER SESSION OFFERS COMPREHENSIVE SECONDARY SCHOOL AND COLLEGE PROGRAMMING INCLUDING VISITS TO LOCAL COLLEGES AND UNIVERSITIES. A WORKSHOP AND SPEAKER SERIES DESIGNED TO PREPARE STUDENTS FOR THE SECONDARY SCHOOL OR COLLEGE APPLICATION PROCESS, AND TWO EDUCATION FAIRS; ONE FOR COLLEGES, ONE FOR INDEPENDENT SCHOOLS, BOTH WITH REPRENSENTATIVES FROM OVER 70 PRESTIGIOUS INSTITUTIONS. IN KEEPING WITH ONE OF

PREPARE STUDENTS IN GRADES 7 - 12 FOR SECONDARY SCHOOL AND COLLEGIATE RESIDENTIAL LIFE IN AN ENVIRONMENT DESIGNED FOR THEIR AGE GROUP. IN

THE ACADEMY'S IDEALS "TO BE A PRIVATE SCHOOL WITH A PUBLIC PURPOSE," SUMMER SESSION STRIVES YEARLY TO USE ITS FINANCIAL AID BUDGET IN ORDER TO

OFFER THE EXPERIENCE TO AS MANY QUALIFIED AND DESERVING APPLICANTS AS POSSIBLE. SUMMER SESSION WORKS COOPERATIVELY WITH OTHER PROGRAMS SUCH AS MINDS MATTER, THE EOS FOUNDATION, REACH MEMPHIS, THE WIGHT FOUNDATION, AND OTHERS TO IDENTIFY SCHOLARS "FROM EVERY QUARTER" TO SPONSOR

FOR THIS SUMMER OPPORTUNITY. FINALLY, SUMMER SESSION SERVES AS THE UMBRELLA FOR THE OTHER OUTREACH PROGRAMS THAT POPULATE THE CAMPUS DURING

THE SUMMER, MAKING SURE THAT THEIR PHYSICAL AND RESIDENTIAL NEEDS ARE MET.

EDUCATION, 111 STUDENTS - MATH AND SCIENCE FOR MINORITY STUDENTS (MS) 2: (MS) 2, FOUNDED IN 1977, OFFERS AFRICAN AMERICAN, LATINO AND NATIVE AMERICAN PUBLIC SCHOOL STUDENTS FROM TARGETED REGIONS ACROSS THE UNITED STATES THE OPPORTUNITY TO IMMERSE THEMSELVES IN THE STUDY OF

TO AND FROM ANDOVER. STUDENTS BEGIN THE PROGRAM THE SUMMER FOLLOWING 9TH GRADE; THEREFORE, THEY MUST BE IN 9TH GRADE WHEN THEY APPLY. THE PROGRAM PROVIDES THE SCHOLARS WITH RIGOROUS CHALLENGES IN ORDER TO PREPARE THEM BETTER FOR COLLEGE AND CAREERS IN ENGINEERING, SCIENCE, MEDICINE, COMPUTERS AND OTHER TECHNICAL FIELDS.

MATHEMATICS AND SCIENCE FOR THREE CONSECUTIVE SUMMERS AT PHILLIPS ACADEMY. THE PROGRAM IS FREE TO ALL STUDENTS ACCEPTED AND INCLUDES TRAVEL

Form 990, Part III, Line 4c:

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

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

	1 6 ' 1 '	1			,	,	,	1 (1) 2 (1000)	1 (1) 2/4000 '	1
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
KIRSTEN A GLANTZ CHIEF INVEST. OFFICER	55.0				Х			780,514	0	47,809
JOHN G PALFREY HD OF SCHOOL/TRUSTEE(END 8/19)	55.0	х		х				563,949	0	190,163
THOMAS P LOCKERBY SECRETARY OF THE ACADEMY	55.0				Х			380,598	0	69,840
JAMES F VENTRE INTERIM HEAD OF SCHOOL/TRUSTEE	55.0	Х		х				251,356	0	118,318
FERNANDO R ALONSO	55.0						\Box		1	

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274,720

200,399

200,843

143,660

199,523

198,836

0

0

0

0

0

0

91,746

126,508

112,338

97,667

32,090

20,271

JAMES F VENTRE
INTERIM HEAD OF SCHOOL/TRUSTEE
FERNANDO R ALONSO
ASST HEAD OF SCHOOL, CFO
LINDA CARTER GRIFFITH

ASSOC HEAD OF SCHOOL

FORMER DEAN OF FACULTY

DIRECTOR, ADDISON GALLERY

.......

MEDICAL DIRECTOR

PATRICK J FARRELL

JUDITH F DOLKART

INVESTMENT ANALYST

AMY PATEL

XIAOHE LI

and Independent Contractors

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation from the

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

and Independent Contractors

TRUSTEE

TRUSTEE

TRUSTEE

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TRUSTEE

GIL CAFFRAY

ROBERT J CAMPBELL

DAVID J CORKINS

PETER L S CURRIE

LOUIS G ELSON

TRUSTEE/PRESIDENT

......

	any hours	and	a dir	ecto	r/tr	ustee))	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
JESSICA HERBSTER GENERAL COUNSEL	55.0					х		204,236	0	14,070
J LAWRENCE MUENCH DIRECTOR OF FACILITIES	55.0				x			185,383	0	23,275
ANDREA T H NIX FORMER CFO	55.0						х	132,828	0	18,816
TORMER CLO	0.0			<u> </u>						

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DIRECTOR OF FACILITIES	0.0						
ANDREA T H NIX	55.0						
					Х	132,828	
FORMER CFO	0.0						
CHRISTOPHER S AUGUSTE	3.0						
OTHER OTHER OTHER		X				0	
TRUSTEE	0.0						
JOSEPH Y BAE	3.0						

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(A) Name and Title (D) (E) (B) (C) (F) Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation compensation amount of other hours per person is both an officer week (list from related compensation from the

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

and Independent Contractors

TRUSTEE

TRUSTEE

TRUSTEE

YICHEN ZHANG

ERIC L ZINTERHOFER

PATRICIA M DOYKOS

ALUMNI TRUSTEE

	any hours	and	l a dir	recto	or/tr	ustee)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
AMY C FALLS TRUSTEE/TREASURER	3.0	Х		х				0	0	(
STEFAN L KALUZNY TRUSTEE	3.0	Х						0	0	(

TROSTEL/TREASORER	0.0						
STEFAN L KALUZNY	3.0	X			0	0	
TRUSTEE	0.0				0	3	
CHIEN LEE	3.0	v			0	0	
TRUSTEE	0.0	^			0	0	
GARY LEE	3.0						
		X			0	0	

CHIEN LEE	3.0	X			,	0	0
TRUSTEE	0.0	,			,	3	
GARY LEE	3.0	X			0	0	0
TRUSTEE	0.0	^			_	Ū	
TRISTIN MANNION	3.0			·			

TRUSTEE		Х			0	0	0
THOSTEE TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE	0.0						
GARY LEE	3.0						
		X			0	0	0
TRUSTEE	0.0						
TRISTIN MANNION	3.0						
114512111		Х			l 0	0	0
TRUSTEE	0.0					-	_

GARY LEE	3.0	×			0	0	n
TRUSTEE	0.0	Λ				0	
TRISTIN MANNION	3.0	×			0	C	0
TRUSTEE	0.0	,			J	,	
TAMMY SNYDER MURPHY	3.0	Y			0	0	0

TRISTIN MANNION	3.0	×			,	0	
TRUSTEE	0.0	^				3	
TAMMY SNYDER MURPHY	3.0	×			0	C	0
TRUSTEE	0.0	^				0	Ĭ

TAMMY SNYDER MURPHY	3.0	¥			,	0	,	
TRUSTEE	0.0	,				9		_
TAMARA E ROGERS	3.0	x			0	0	0	

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(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other week (list person is both an officer from the from related compensation and a director/trustee) organizations from the

organization

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

and Independent Contractors

STEFANIE SCHEER YOUNG

ALUMNI TRUSTEE

	for related				_			(W- 2/1099-	(W- 2/1099-	organization and
	organizations below dotted line)		Institutional Trustee	101	Key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
DANIEL A LASMAN	3.0							0	0	
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	m 99			rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) empt charitable	organization or trust.		2019
		the Treasury	► Go to <u>www.irs</u>	.gov/Form990 for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
Nam	e of th	nie Service he organiza F PHILLIPS ACA					Employer identific	<u> </u>
IKUSI	EES OF	- PHILLIPS ACE	ADEMIT				04-2103579	
	rt I		for Public Charity State				See instructions.	
	rganız		a private foundation because	•			(4)()	
1		,	onvention of churches, or as				. , . ,	
2	✓		scribed in section 170(b)(,			
3		·	or a cooperative hospital serv	-			-	
4		A medical r name, city,	esearch organization operate and state:	ed in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's
5			ation operated for the benefi (iv). (Complete Part II.)	t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).	
7			ation that normally receives (' 0(b)(1)(A)(vi). (Complete		s support from a	governmental u	init or from the genera	al public described in
8		A communi	ty trust described in sectior	170(b)(1)(A)(vi).	(Complete Part I	I.)		
9			ural research organization de rant college of agriculture. S					ege or university or a
10		from activit investment	ation that normally receives: ties related to its exempt fun income and unrelated busin See section 509(a)(2). (Co	ections—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross
11		An organiza	ation organized and operated	d exclusively to test fo	r public safety. S	ee section 509	(a)(4).	
12		more public	ation organized and operated cly supported organizations of through 12d that describes	described in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a	
a		Type I. A so	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B.	ated, supervised, or composite or elect a major	ontrolled by its s	upported organiz	zation(s), typically by	
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ervised or controlled i ation vested in the sar				
c		Type III f	unctionally integrated. A sorganization(s) (see instruction)	supporting organizatio				ted with, its
d		Type III n	on-functionally integrated integrated integrated. The organization in You must complete Par	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar	
e		Check this	box if the organization receiver Type III non-functionally	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally
f	Enter				-		<u> </u>	
g	Provi	de the follow	ing information about the su	pported organization(т'			
(i) Name of supported organization			(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
					Yes	No		
			<u> </u>					
Tota			tion Act Notice, see the Ir		Cat. No. 11285		 Schedule A (Form 9	

P	Support Schedule for (Complete only if you ch						
	If the organization failed						
	Section A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")	55,935,894	46,448,726	68,404,008	47,674,752	50,706,945	269,170,325
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to						0
,	the organization without charge Total. Add lines 1 through 3	55,935,894	46,448,726	68,404,008	47,674,752	50,706,945	269,170,325
4 5	The portion of total contributions by	33,933,694	40,448,720	08,404,008	47,074,732	30,700,943	209,170,323
-	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).						29,056,968
6	Public support. Subtract line 5 from line 4.						240,113,357
	Section B. Total Support			L			
	Calendar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
_	(or fiscal year beginning in) ►	. ,	` '	68,404,008	47,674,752	50,706,945	269,170,325
7 8	Amounts from line 4 Gross income from interest,	55,935,894	46,448,726	66,404,006	47,674,732	30,706,943	269,170,323
Ū	dividends, payments received on securities loans, rents, royalties and income from similar sources	5,320,520	7,316,965	5,960,729	5,238,901	4,857,324	28,694,439
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0
11	Total support. Add lines 7 through						297,864,764
12	10 Gross receipts from related activities,	etc. (see instruction	ns)			12	335,414,088
	First five years. If the Form 990 is f				tay year as a sect		
	check this box and stop here						inzacion,
	Section C. Computation of Publi						
	Public support percentage for 2019 (li			column (f))		14	80.612 %
	Public support percentage for 2018 Se					15	79.830 %
	33 1/3% support test—2019. If the				e 14 is 33 1/3% or		
	and stop here. The organization qua 33 1/3% support test—2018. If the	lifies as a publicly s	supported organiza	tion			. ▶ ☑
17 a	box and stop here. The organization 10%-facts-and-circumstances tes is 10% or more, and if the organization in Part VI how the organization meets	t— 2019. If the orgon meets the "facts	ganization did not s-and-circumstance	check a box on line es" test, check this	e 13, 16a, or 16b, box and stop he i	and line 14 r e. Explain	. ▶□
b	organization	st—2018. If the orzation meets the "i	rganization did not facts-and-circumst	check a box on lir ances" test, check	ne 13, 16a, 16b, o this box and stop	r 17a, and line here.	▶□
18	supported organization Private foundation. If the organizat						▶□
	instructions						▶ 🗆

Р	art III Support Schedule for						
	(Complete only if you cl						er Part II. If
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)		
30	Calendar year	() 2015	(1) 2016	() 2247	(1) 2010	() 2010	(O.T.)
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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						
4	under section 513 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						
L	3 received from disqualified persons Amounts included on lines 2 and 3						
D	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.)						
Se	ection B. Total Support		1				Г
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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.						
С	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						
12	(Explain in Part VI.) Total support. (Add lines 9, 10c,						
13	11, and 12.).						
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>
	check this box and stop here						▶ ⊔
	ection C. Computation of Public S			! (6))		1 1	
15	Public support percentage for 2019 (lin		•			15	
16	Public support percentage from 2018 S	-	<u> </u>			16	
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17	
17 10	Investment income percentage for 201	-		-		17	
18 10-	331/3% support tests—2019. If the		•			18 33 1/3% and lin	e 17 is not
	more than 33 1/3%, check this box and s						
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the						
ט	not more than 33 1/3%, check this box	-			•		_
20	Private foundation. If the organization	-	-				
	Frivate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCGONS	. 📂 📖

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

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the organization had excess business holdings).

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.	1

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). 2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.

3a 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. 3b

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.

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a 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 4b supervised by or in connection with its supported organizations. 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

3с

10b

Schedule A (Form 990 or 990-EZ) 2019

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and 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

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported 5a amendment to the organizing document). 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? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control?

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

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

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.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

9b Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9c

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. 10a

	edule A (101111 550 01 550 E2) 2015			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
		11a		
	A family member of a person described in (a) above?	11b		
	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 .	11c		
S	ection B. Type I Supporting Organizations			
			Yes	No
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.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
2	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	2		
	organization.			
S	ection C. Type II Supporting Organizations			
_			Yes	No
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	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations		v	
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in (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.	3		
S	ection 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 instruct	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
•	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.	2a		
ı	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.	2b		
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? <i>Provide details in Part VI</i> .	3a		
	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.	3h		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (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 Yea (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		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
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 .035	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		

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.	

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 2019 from Section C, line 6						
10	LO Line 8 amount divided by Line 9 amount						
	Section E - Distribution Allocations	(i)	(ii) Underdistributions	(iii) Distributable			

8	Distributions to attentive supported organizations to wh details in $\bf Part\ VI)$. See instructions	sive (provide		
9	Distributable amount for 2019 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-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019:			_

9 Distributable amount for 2019 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-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
b From 2015			
c From 2016			
d From 2017			

f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2019 distributable amount		
i Carryover from 2014 not applied (see instructions)		
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4 Distributions for 2019 from Section D, line 7:		
<u></u> \$		
Applied to underdistributions of prior years		
b Applied to 2019 distributable amount		
c Remainder. Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to		

e From 2018.

d Excess from 2018. e Excess from 2019.

j Remainder. Subtract lines 39, 31, and 31 from 31.		
4 Distributions for 2019 from Section D, line 7:		
<u> \$ </u>		
Applied to underdistributions of prior years		
b Applied to 2019 distributable amount		
c Remainder. Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.		
7 Excess distributions carryover to 2020. Add lines 3j and 4c.		

	See instructions.		
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.		
7	Excess distributions carryover to 2020. Add lines 3j and 4c.		
8	Breakdown of line 7:		
а	Excess from 2015		
b	Excess from 2016		
С	Excess from 2017		

Schedule A (Form 990 or 990-EZ) (2019)

Additional Data

Software ID:

Software Version: EIN: 04-2103579

Name: TRUSTEES OF PHILLIPS ACADEMY

Page 8

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).

instructions).

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

DLN: 93493133057341

Done to Public

EZ)

SCHEDULE C (Form 990 or 990-

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

		npiete Parts i-A and B. Do not complete 501(c)(3)) organizations: Complete Part		Do not complete Part I-R			
• 5	Section 527 organizations: Complet	te Part I-A only.		·			
		n Form 990, Part IV, Line 4, or Form 9					
		t have filed Form 5768 (election under s t have NOT filed Form 5768 (election u					
		n Form 990, Part IV, Line 5 (Proxy Ta					
	xy Tax) (see separate instruction			·			
	Section 501(c)(4), (5), or (6) organized me of the organized in the organization.	zations: Complete Part III.		Employer ide	ntification number		
	JSTEES OF PHILLIPS ACADEMY			Employer idei	itilication number		
				04-2103579			
Par	t I-A Complete if the orga	nization is exempt under section	on 501(c) or is	a section 527 organi	zation.		
1	Provide a description of the organ "political campaign activities")	nization's direct and indirect political car	mpaign activities in	Part IV (see instructions	for definition of		
2	Political campaign activity expend	litures (see instructions)		>	\$		
3	·	paign activities (see instructions)					
Par	t I-B Complete if the orga	nization is exempt under section	on 501(c)(3).				
1	Enter the amount of any excise ta	ax incurred by the organization under s	ection 4955	>	\$		
2	Enter the amount of any excise to	ax incurred by organization managers u	nder section 4955	>	\$		
3	•	tion 4955 tax, did it file Form 4720 for	•		☐ Yes ☐ No		
4a					☐ Yes ☐ No		
b Par	If "Yes," describe in Part IV. t I-C Complete if the orga	nization is exempt under section	on 501(c), exce	ept section 501(c)(3)).		
1	Enter the amount directly expend	led by the filing organization for section	527 exempt funct	ion activities 🕨	\$		
2	2 2	anization's funds contributed to other o	-	•	\$		
3	Total exempt function expenditure	es. Add lines 1 and 2. Enter here and o	n Form 1120-POL,	line 17b ▶	\$		
4	Did the filing organization file For	m 1120-POL for this year?			☐ Yes ☐ No		
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.						
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0		
1							
2							
3							
4							
5							

Par	Complete if the organization is exempt under section 501(c)(3) and has NOT file Form 5768 (election under section 501(h)).	ed				
For ea	ch "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)		(b)	
activit	, , , , , , , , , , , , , , , , , , , ,	Yes	No	/	Amoun	ıt
	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?		No			
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No			
	Media advertisements?		No			
	Mailings to members, legislators, or the public?		No			
e	Publications, or published or broadcast statements?		No			
f	Grants to other organizations for lobbying purposes?		No			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		No			
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No			
	Other activities?	Yes				7,460
-	Total. Add lines 1c through 1i					7,460
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No			
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6).	(5), o	r sect	ion		
					Yes	No
	Were substantially all (90% or more) dues received nondeductible by members?		Į	1		
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Part	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part I answered "Yes."				i01(c)(6)
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	Current year	2a				
b	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues .	3				
	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?					
	Taxable amount of lobbying and political expenditures (see instructions)	<u>4</u> 5				
	, 3 1 1 1					
	• • • • • • • • • • • • • • • • • • • •					
	ide the descriptions required for Part l-A, line 1; Part l-B, line 4; Part l-C, line 5; Part II-A (affiliated group list); F uctions), and Part ll-B, line 1. Also, complete this part for any additional information.	Part II-	·A, line:	s 1 an	d 2 (se	e
	Return Reference Explanation					
SCHE	DULE C, PART II-B, LINE 1I: THE ACADEMY PAYS MEMBERSHIP DUES TOTALING \$7,460 TO AN ORGANIZATION	TION V	VHICH	MAY E	NGAGI	IN.

LOBBYING ACTIVITIES. THEREFORE, A PORTION OF THE DUES MAY BE ATTRIBUTABLE TO LOBBYING

ACTIVITIES.

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -SCHEDULE D

following amounts relating to these items:

DLN: 93493133057341

OMB No. 1545-0047

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization **Employer identification number** TRUSTEES OF PHILLIPS ACADEMY 04-2103579 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) Aggregate value of grants from (during year) 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? ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible ☐ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 2b Number of conservation easements on a certified historic structure included in (a) 20 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year 🟲 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? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 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) ☐ Yes 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 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. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art,

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

 $\boldsymbol{c} \ \ \text{Leasehold improvements}$ \boldsymbol{d} Equipment

e Other . .

	edule D (Form 990) 2019			_					Page 2
	t III Organizations Maintaining Co								
3	Using the organization's acquisition, accession items (check all that apply):	n, and other records, cl		f the fo	llowing th	nat are a	significant u	se of its o	collection
a	✓ Public exhibition		d 🗸	Loan	or excha	nge prog	rams		
b	Scholarly research		е 🗌	Other	r				
С	Preservation for future generations								
4	Provide a description of the organization's co Part XIII.	llections and explain ho	w they fur	ther the	e organiza	ation's ex	empt purpo:	se in	
5	During the year, did the organization solicit cassets to be sold to raise funds rather than t							☐ Yes	☑ No
Pai	rt IV Escrow and Custodial Arrange Complete if the organization ans X, line 21.		990, Pai	t IV, li	ne 9, or	reporte	d an amou	nt on Fo	rm 990, Part
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other intermediar	ry for cont	ribution:	s or othe	r assets r	not 	Yes	□ No
b	If "Yes," explain the arrangement in Part XII	I and complete the folic	wing table	ı:	Γ		Aı	nount	
c	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year				. [1e			
f	Ending balance					1f			
2a	Did the organization include an amount on F	orm 990. Part X. line 21	for escro	w or cu	stodial ad	count lia	bilitv?	☐ Yes	
	If "Yes," explain the arrangement in Part XII						•	_	
	irt V Endowment Funds.	1. Check here if the exp	Tarracion in	J DCCII	provided	m rare /			
	Complete if the organization ans	wered "Yes" on Form	990, Pai	t IV, li	ne 10.				
	· · · · · · · · · · · · · · · · · · ·	(a) Current year	(b) Prior y	ear ((c) Two ye	ars back	(d) Three yea	rs back (e	e) Four years back
1 a	Beginning of year balance	1,134,918,251	1,113,1	51,218	1,057	7,071,540	978,	81,072	1,015,875,027
b	Contributions	13,611,849	· ·	43,241		4,120,256	<u> </u>	72,154	20,924,556
С	Net investment earnings, gains, and losses	33,923,331	60,3	17,726	92	2,908,617	115,6	87,460	-18,216,738
d	Grants or scholarships	14,580,695	16,6	38,637	17	7,450,226	16,2	284,474	11,566,067
е	Other expenditures for facilities and programs	43,973,040	37,8	55,297	33	3,498,969	36,0	084,672	28,435,706
f	Administrative expenses								
g	End of year balance	1,123,899,696	1,134,9	18,251	1,113	3,151,218	1,057,0	71,540	978,581,072
2 a	Provide the estimated percentage of the curr Board designated or quasi-endowment >	rent year end balance (li 24.850 %	ine 1g, col	umn (a))) held as	5 :			
b	Permanent endowment ► 75.150 %								
С	Temporarily restricted endowment ►								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
3а	Are there endowment funds not in the posse organization by:	ssion of the organization	n that are	held and	d adminis	stered for	the		Yes No
	(i) unrelated organizations							3a(i) Yes
	(ii) related organizations							3a(-
b	If "Yes" on 3a(ii), are the related organization	· ·						3 b	<u> </u>
4	Describe in Part XIII the intended uses of the		nent funds	•					
Pa	rt VI Land, Buildings, and Equipme Complete if the organization ans		990 Pai	t IV Jii	ne 11a	See For	m 990 Pai	+ X. lin≏	10.
	Description of property (a) Cost or of (investm	ther basis (b) Cost or	other basis				epreciation) Book value
1.2	Land		7	593,005					2,593,005
	Buildings		•	101,938		1	.19,923,702		2,393,003

18,594,434

35,186,427

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

11,414,470

21,912,612

7,179,964

13,273,815

	(a) Description of security or category (including name of security)	(b) Book value	(c) Method Cost or end-of-v	of valuation: ear market value
(1) Financia	derivatives		Cost of end-of-y	car market value
(3) Other	neld equity interests			
(A) PRIV REA	AL ASSTS/ABSLT RTN/OTHR	103,367,285		F
(B) DOMEST	IC EQUITIES	36,605,571		=
(C) INTERNA	TIONAL EQUITIES	171,817,899	J	F
(D) HEDGE F	UNDS	277,079,904		F
(E) PRIVATE	EQTY & VENTURE CAPITAL	281,764,387		F
(F) REAL EST	TATE	34,104,806		F
(G) DOMEST (H)	IC FIXED INCOME	15,077,330	l	=
	n (b) must equal Form 990, Part X, col. (B) line 12.)	919,817,182		
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on I (a) Description of investment	Form 990, Part IV, line 1	(b) Book value	art X, line 13. (c) Method of valuation: Cost or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Columi	n (b) must equal Form 990, Part X, col.(B) line 13.)		•	
Total. (Columi Part IX	Other Assets. Complete if the organization answered 'Yes' on F (a) Descriptio		▶ 1d. See Form 990, Part	
	Other Assets. Complete if the organization answered 'Yes' on F			X, line 15. (b) Book value
Part IX	Other Assets. Complete if the organization answered 'Yes' on F			
Part IX (1)	Other Assets. Complete if the organization answered 'Yes' on F			
(1) (2)	Other Assets. Complete if the organization answered 'Yes' on F			
(1) (2) (3)	Other Assets. Complete if the organization answered 'Yes' on F			
(1) (2) (3) (4)	Other Assets. Complete if the organization answered 'Yes' on F			
(1) (2) (3) (4) (5)	Other Assets. Complete if the organization answered 'Yes' on F			
(1) (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answered 'Yes' on F			
(1) (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answered 'Yes' on F			
(1) (2) (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answered 'Yes' on F			
(1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered 'Yes' on F (a) Description (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities.	n	1d. See Form 990, Part	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered 'Yes' on F (a) Description (b) must equal Form 990, Part X, col.(B) line 15.)	orm 990, Part IV, line 1	1d. See Form 990, Part	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X)	Other Assets. Complete if the organization answered 'Yes' on F (a) Description (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on F	orm 990, Part IV, line 1	1d. See Form 990, Part	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Columpart X) 1. (1) Federal in (2) ASSET R	Other Assets. Complete if the organization answered 'Yes' on F (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of I ncome taxes ETIREMENT OBLIGATION	orm 990, Part IV, line 1	1d. See Form 990, Part	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Colume Part X) 1. (1) Federal in (2) ASSET R (3) INTERES (4) LIABILIT	Other Assets. Complete if the organization answered 'Yes' on F (a) Description (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of I	orm 990, Part IV, line 1	1d. See Form 990, Part	(b) Book value Post of the property of the
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Colume Part X) 1. (1) Federal in (2) ASSET R (3) INTERES (4) LIABILIT	Other Assets. Complete if the organization answered 'Yes' on F (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of I ncome taxes ETIREMENT OBLIGATION T RATE SWAPS	orm 990, Part IV, line 1	1d. See Form 990, Part	(b) Book value 90, Part X, line 25. (b) Book value 0 1,232,150 7,580,714
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Colume Part X) 1. (1) Federal in (2) ASSET R (3) INTERES	Other Assets. Complete if the organization answered 'Yes' on F (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of I ncome taxes ETIREMENT OBLIGATION T RATE SWAPS	orm 990, Part IV, line 1	1d. See Form 990, Part	(b) Book value 90, Part X, line 25. (b) Book value 0 1,232,150 7,580,714
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Colument X) 1. (1) Federal in (2) ASSET R (3) INTERES (4) LIABILIT (5)	Other Assets. Complete if the organization answered 'Yes' on F (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of I ncome taxes ETIREMENT OBLIGATION T RATE SWAPS	orm 990, Part IV, line 1	1d. See Form 990, Part	(b) Book value 90, Part X, line 25. (b) Book value 0 1,232,150 7,580,714
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Colume Part X) 1. (1) Federal in (2) ASSET R (3) INTERES (4) LIABILIT (5) (6)	Other Assets. Complete if the organization answered 'Yes' on F (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of I ncome taxes ETIREMENT OBLIGATION T RATE SWAPS	orm 990, Part IV, line 1	1d. See Form 990, Part	(b) Book value 90, Part X, line 25. (b) Book value 0 1,232,150 7,580,714
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Colume Part X) 1. (1) Federal in (2) ASSET R (3) INTERES (4) LIABILIT (5) (6) (7)	Other Assets. Complete if the organization answered 'Yes' on F (a) Description mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of I ncome taxes ETIREMENT OBLIGATION T RATE SWAPS	orm 990, Part IV, line 1	1d. See Form 990, Part	(b) Book value 90, Part X, line 25. (b) Book value 0 1,232,150 7,580,714

Part XI

2

4

b

C

Part XII

5

1

2

C

d

е 3

b

Part XIII

See Additional Data Table

4

5

а

Schedule D (Form 990) 2019

Page 4

-107,102,576

233,302,222

233,355,240

108,864,912

53,018

7,420

108,857,492

22,815,021

131.672.513

Schedule D (Form 990) 2019

Donated services and use of facilities b Recoveries of prior year grants Other (Describe in Part XIII.) 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1:

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

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Add lines **4a** and **4b**

Supplemental Information

Total expenses and losses per audited financial statements

Add lines **4a** and **4b**

Donated services and use of facilities . . .

Prior year adjustments

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

Return Reference

Subtract line 2e from line 1 .

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Net unrealized gains (losses) on investments

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

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

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

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional 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

2c

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

2d 4a

4b

2a 2b

2c

2d

4a

4b

Explanation

2a

2b

-29.856.896

2e 3 53,018 Reconciliation of Expenses per Audited Financial Statements With Expenses per Re

7,420

1,541,247

21,273,774

2e

3

4c

5

-77,245,680

4c	
5	
eturi	n.
1	

chedule D (Form 990) 2019	Page 5
Part XIII Supplemental Information (continued)	
Return Reference Explanation	

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

EIN: 04-2103579

Name: TRUSTEES OF PHILLIPS ACADEMY

Supplemental Information

Return Reference Explanation SCHEDULE D, PART III, LINE 1A: E OF CONTRIBUTION USING A LEVEL 2 FAIR VALUE APPROACH, WITH THE EXCEPTION OF ADDITIONS TO THE ACADEMY'S COLLECTIONS OF ART, ARTIFACTS, ANTIQUES, AND RARE BOOKS. THE ACADEMY DOES NO T CAPITALIZE ITS COLLECTIONS; THEREFORE, GIFTS OR ADDITIONS TO THE COLLECTIONS ARE NOT REF

LECTED IN THE ACADEMY'S FINANCIAL STATEMENTS.

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART III, LINE 4:	THE ACADEMY MAINTAINS THE ADDISON, AN ACADEMIC ART MUSEUM DEDICATED TO THE COLLECTION OF A MERICAN ART. THE MUSEUM'S PURPOSE IS TO ACQUIRE, PRESERVE, INTERPRET, AND EXHIBIT WORKS OF ART FOR THE EDUCATION AND ENJOYMENT OF LOCAL, REGIONAL, NATIONAL, AND INTERNATIONAL AUDIE NCES, INCLUDING THE STUDENTS, FACULTY, AND COMMUNITY OF PHILLIPS ACADEMY, AND OTHER STUDEN TS, TEACHERS, SCHOLARS, AND THE GENERAL PUBLIC. THE ACADEMY ALSO MAINTAINS THE PEABODY, WH ICH IS COMPRISED OF COLLECTIONS OF ARTIFACTS, DOCUMENTS, AND IMAGES CATALOGING THE INDIGEN OUS CULTURES OF THE AMERICAS, PAST AND PRESENT, A COMPARATIVE COLLECTION, AS WELL AS BOOKS, MONOGRAPHS AND SERIALS ON ARCHAEOLOGY AND NATIVE CULTURES OF THE AMERICAS. THESE MATERIA LS SERVE THE EDUCATION AND RESEARCH NEEDS PRIMARILY OF THE PHILLIPS ACADEMY COMMUNITY AND, TO A LESSER EXTENT, REGIONAL SCHOOLS AND THE BROADER COMMUNITY OF ARCHAEOLOGISTS AND SCHO LARS. THE PEABODY HAS DEVELOPED OVER FIFTY SINGLE-CLASS CURRICULUM UNITS AND TEACHES AN IN TERDISCIPLINARY COURSE IN HUMAN ORIGINS WITH THE BIOLOGY DEPARTMENT, DRAWING UPON STAFF EX PERTISE, ITS LIBRARY, RESEARCH, IMAGE AND ARCHIVES COLLECTIONS. PEABODY PERSONNEL ALSO SUP ERVISE THE HISTORY AND ARCHAELOGY CLUBS AND STUDENT INDEPENDENT PROJECTS. FURTHER USE OF T HE COLLECTIONS BY STUDENTS WITH AN INTEREST IN ARCHAEOLOGY AND ANTHROPOLOGY TAKES PLACE AS SENIOR INDEPENDENT PROJECTS.

Supplemental Information	
Return Reference	Explanation
	THE ACADEMY IS AN INCOME-ONLY BENEFICIARY OF CERTAIN PERPETUAL TRUSTS WHOSE AGGREGATE MARKET VALUE AT JUNE 30, 2020 WAS \$6,219,659.

Return Reference	Explanation
SCHEDULE D, PART V, LINE 4:	ANDOVER'S ENDOWMENT IS A CRITICAL SOURCE OF SUPPORT FOR THE ACADEMY. THE ENDOWMENT COMPRIS ES A WIDE VARIETY OF FUNDS WITH A WIDE VARIETY OF PURPOSES, INCLUDING UNRESTRICTED FUNDS, AND RESTRICTED FUNDS FOR FINANCIAL AID, FACULTY CHAIRS, THE ADDISON, THE PEABODY AND OTHER SPECIAL INTENTS. TOTALLING \$1,124 MILLION AT JUNE 30, 2020, THE ENDOWMENT CURRENTLY SUPPORTS APPROXIMATELY 40% OF THE ACADEMY'S BUDGET.

Supplemental Information

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART X, LINE 2:	THE ACADEMY ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS USING A "MORE LIKELY TH AN NOT" THRESHOLD FOR THE RECOGNITION OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TE CHNICAL MERITS OF THE POSITION UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY. IF A TAX POSITION OR POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNREC OGNIZED TAX BENEFIT IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY ASSESSMENT" THAT AGGRE GATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITIONS. INTEREST AND PENALTIES ASSESSED, IF ANY, ARE ACCRUED AS INCOME TAX EXPENSE. THE ACADEMY HAS DENTIFIED ITS TAX ST ATUS AS A TAX-EXEMPT ENTITY AND ITS CLASSIFICATION OF REVENUES AS RELATED OR UNRELATED AS ITS ONLY TAX POSITIONS; HOWEVER, THE ACADEMY HAS DETERMINED THAT THESE TAX POSITIONS DO NO T RESULT IN UNCERTAINTIES REQUIRING RECOGNITION. THE ACADEMY IS NOT CURRENTLY UNDER EXAMIN ATION BY ANY TAXING JURISDICTION. ITS FEDERAL AND STATE INCOME TAX RETURNS ARE GENERALLY O PEN FOR EXAMINATION FOR THREE YEARS FOLLOWING THE DATE FILED.

Supplemental Information Return Reference Explanation SCHEDULE D, PART XI, LINE 2D: UNREALIZED LOSS ON SWAP MARKET VALUE (\$4,439,432) FINANCIAL AID (\$21,273,774) CHANGE IN VA LUE OF SPLIT-INTEREST AGREEMENTS (\$2,679,443) INVESTMENT EXPENSE (\$1,541,247) GAIN ON SALE OF ASSETS \$77.000 ------ TOTAL TO SCHEDULE D, PART XI, LINE 2D: (\$29,856,896)

Supplemental Information Return Reference Explanation SCHEDULE D, PART XI, LINE 4B: CHANGE IN BAD DEBT EXPENSE \$60,438 COST OF GOODS SOLD (7,420) ------ TOTAL TO SCHEDULE D. PART XI, LINE 4B \$53,018

Supplemental Information Return Reference Explanation SCHEDULE D, PART XII, LINE COST OF GOODS SOLD \$7,420 ------ TOTAL TO SCHEDULE D, PART XII, LINE 2D \$7,420

Supplemental Information Return Reference Explanation FINANCIAL AID \$21,273,774 ------ TOTAL TO SCHEDULE D, PART XII, LINE 4B \$21,273,774 SCHEDULE D, PART XII, LINE

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493133057341 OMB No. 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Go to www.irs.gov/Form990EZ for the latest information. Inspection Department of the Treasury Namel Retherosganization **Employer identification number** TRUSTEES OF PHILLIPS ACADEMY 04-2103579 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 4c Yes 4d Yes If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: 5a Nο **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? . 5c Νo **d** Scholarships or other financial assistance? . 5d Νo e Educational policies? . . 5e No f Use of facilities? . . 5f No **g** Athletic programs? 5g Νo 5h No If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. **6a** Does the organization receive any financial aid or assistance from a governmental agency? 6a Νo b Has the organization's right to such aid ever been revoked or suspended? 6b No If you answered "Yes" to either line 6a or line 6b, explain on Part II. 7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II. Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Cat. No. 50085D Schedule E (Form 990 or 990-EZ) (2019)

Return Reference	Explanation
SCHEDULE E, PART I, LINE 3:	PHILLIPS ACADEMY'S NON-DISCRIMINATION POLICY APPEARS ON ITS PUBLIC-FACING WEBSITE, WWW.ANDOVER.EDU, AND IS ALSO INCLUDED IN THE SCHOOL CATALOG, WHICH IS ALSO AVAILABLE FREE-OF-CHARGE THROUGH THE WEBSITE. THE TEXT OF THIS POLICY IS AS FOLLOWS: PHILLIPS ACADEMY ADMITS QUALIFIED STUDENTS OF ANY RACE, COLOR, NATIONAL OR ETHNIC ORIGIN, SEX, GENDER IDENTITY OR EXPRESSION, RELIGION, SEXUAL ORIENTATION, DISABILITY STATUS, OR ANY OTHER STATUS PROTECTED BY APPLICABLE LAW, AND EXTENDS TO THEM ALL THE RIGHTS, PRIVILEGES, PROGRAMS, AND ACTIVITIES GENERALLY ACCORDED OR MADE AVAILABLE TO STUDENTS AT THE SCHOOL. PHILLIPS ACADEMY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, NATIONAL OR ETHNIC ORIGIN, SEX, GENDER IDENTITY OR EXPRESSION, RELIGION, SEXUAL ORIENTATION, DISABILITY STATUS, OR ANY OTHER STATUS PROTECTED BY APPLICABLE LAW, IN THE ADMINISTRATION OF ITS EDUCATIONAL, ADMISSIONS, FINANCIAL AID, ATHLETIC, AND OTHER SCHOOL-ADMINISTERED PROGRAMS.
	Schedule E (Form 990 or 990-EZ) (2019)

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493133057341 OMB No. 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2019 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. Open to Public ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** TRUSTEES OF PHILLIPS ACADEMY 04-2103579 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance 2 outside the United States. Activites per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) 3 (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the program service, describe for and investments employees, agents, region (by type) (such as, region and independent fundraising, program specific type of in the region service(s) in the region contractors in the services, investments, grants to recipients located in the region region) See Add'l Data 313,585,775 **3a** Sub-total . b Total from continuation sheets to Part I . . . 17,204 c Totals (add lines 3a and 3b) 313,602,979

	uplicated if addit	(c) Number of		(a) Mannay of as -1-	(f) Amount of	(a) Decembring	(h) Math
ype of grant or assistance	(b) Region	recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other

Sched	dule F (Form 990) 2019		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☑ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		
		Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)		
		✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	☑ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	· ·	✓ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	☐Yes	☑ No

Schedule F ((Form 990) 20:	19 Page 5				
Part V	Provide the amounts of method); a	ntal Information information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting nd Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide nal information. See instructions.				
990 S che	90 Schedule F, Supplemental Information					
Baturn	Deference	Evaluation				

990 Schedule F, Supp	blemental Information
Return Reference	Explanation

SOFTWARE AND ITS GENERAL LEDGER.

LINE 3:

SCHEDULE F, PART I, THE ORGANIZATION IDENTIFIES THE EXPENSES DISCLOSED ON PART I BY REVIEWING ITS EXPENSE REPORTING

Additional Data

Europe (Including Iceland and

Greenland)

Software ID: Software Version:

EIN: 04-2103579

Name: TRUSTEES OF PHILLIPS ACADEMY

55,292,280

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the in region (by type) (i.e., employees or is a program service, for region region agents in fundraising, program describe specific type of services, grants to service(s) in region region recipients located in the region) North America Investments 258,129,821

Investments

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) East Asia and the Pacific Fundraising 46,332 East Asia and the Pacific Program Services PROFESSIONAL 22,770 DEVEL PMNT

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Europe (Including Iceland and Program Services ADMISSION RECRUITING 15,640 Greenland) North America Program Services OFF-CAMPUS LEARNING 12,177

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) East Asia and the Pacific ADMISSION RECRUITING 11,330 Program Services Central America and the Program Services OFF-CAMPUS LEARNING 9,553 Caribbean

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Europe (Including Iceland and Fundraising 8.809 Greenland) South Asia Fundraising 6,526

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) South America OFF-CAMPUS LEARNING 5,314 Program Services Middle East and North Africa Program Services ADMISSION RECRUITING 5,015

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Middle East and North Africa Fundraising 4.906 Russia and the Newly Program Services ADMISSION RECRUITING 4,747 Independent States

Form 990 Schedule F Par	orm 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region				
Europe (Including Iceland and Greenland)			····	PROFESSIONAL DEVELPMNT	4,233				
Central America and the Caribbean			Program Services	ADMISSION RECRUITING	3,161				

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures in region (by type) (i.e., offices in the employees or is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) South America Program Services ADMISSION RECRUITING 3.161 South Asia Program Services PROFESSIONAL 2,936 DEVEL PMNT

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) North America Fundraising 2.746 South Asia Program Services PROGRAM ACTIVITY 2,463

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) North America PROGRAM ACTIVITY 2.457 Program Services North America Program Services ADMISSION RECRUITING 2,438

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) Europe (Including Iceland and Program Services ART EXHIBITION 1,206 Greenland) Europe (Including Iceland and Program Services CONFERENCE 754 Greenland)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures in region (by type) (i.e., offices in the employees or is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) South America Program Services RESEARCH 685 South America Program Services PROFESSIONAL 558 DEVEL PMNT

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) East Asia and the Pacific IOFF-CAMPUS LEARNING 550 Program Services East Asia and the Pacific Program Services CONFERENCE 411

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding

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

Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

OMB No. 1545-0047

DLN: 93493133057341

Open to Public

Department of the Treasury

Attach to Form 990 or Form 990-EZ.

	enue Service	►Go to www.	irs.gov/Fo	rm990 for i	nstructions and the latest ir	formation.		Inspection
	he organization 5 OF PHILLIPS ACADEMY						Employer ide	ntification number
NOOTELS	OF THIELITS ACADEM						04-2103579	
Part I	Fundraising Active Form 990-EZ filers	•	_		answered "Yes" on Fo	orm 990,	Part IV, line 1	7.
1 Indi	cate whether the organiz	ation raised funds th	rough an	y of the fo	ollowing activities. Check	all that a	oply.	
a 🗹 l	Mail solicitations			е	✓ Solicitation of non	-governm	ent grants	
b 🗹	Internet and email solicit	ations		f	Solicitation of gov	ernment g	grants	
c 🗸	Phone solicitations			g	Special fundraisin	g events		
d 🗸 :	In-person solicitations							
	the organization have a sey employees listed in Fo							s 🗆 No
	es," list the 10 highest pe e compensated at least s			draisers)	pursuant to agreements	under wh	ich the fundraise	r is
	and address of individua entity (fundraiser)	l (ii) Activity	fundrai custo cont) Did ser have ody or rol of outions?	(iv) Gross receipts from activity	or re fundra	nount paid to etained by) iser listed in col. (i)	(vi) Amount paid to (or retained by) organization
CYNTI	HIA KOURE	GRANT WRITING	Yes	No				
	TTAGE STREET			No			20,449	
NATIO	CK, MA 01760						·	
otal		<u> </u> 		 . ►			20,449	
3 List all licensi	I states in which the organg.	anization is registered	d or licens	sed to soli	cit contributions or has b	I peen notifi	l ed it is exempt f	rom registration or

	rt II Fundraising Events. Compl				
	than \$15,000 of fundraising		d gross income on Form	990-EZ, lines 1 and	6b. List events with
	gross receipts greater than \$	(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col. (a) through
		(event type)	(event type)	(total number)	col. (c))
Keverkie					
200					
¥					
	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
	4 Cash prizes				
N T	5 Noncash prizes				
Experises	6 Rent/facility costs				
Š	7 Food and beverages				
Zied Zied	Sentertainment				
2	Other direct expenses	through O in column (d)			
	11 Net income summary. Subtract line 10				
Pai	rt III Gaming. Complete if the org			V, line 19, or reported	l i more than \$15,000
	on Form 990-EZ, line 6a.	1			1
E		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
Revenue					
<u>.</u>	1 Gross revenue				
TSe.	2 Cash prizes				
7	3 Noncash prizes				
វ	3 Noncash prizes				
ង ប្ដូ	4 Rent/facility costs				
ži Delo	4 Rent/facility costs				
វ រូវ ភ្ន			☐ Yes%	☐ Yes%	
វ រដ្ឋភ្ជុំ 	4 Rent/facility costs	☐ Yes%	☐ Yes % ☐ No	☐ Yes %	
<u>1</u> 1910 –	4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor	□ No	1_		
	4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary. Add lines 2	No	□ No	□ No ►	
	4 Rent/facility costs	No through 5 in column (d)	No	No	
	4 Rent/facility costs	No through 5 in column (d) t line 7 from line 1, column tion conducts gaming activities	No	No ▶ ▶	Ves □No
a b	4 Rent/facility costs	through 5 in column (d) through 5 in column (d)	nn (d)	No	☐ Yes ☐ No
9 a	4 Rent/facility costs	through 5 in column (d) thine 7 from line 1, column tion conducts gaming activations activities in each column.	No nn (d)	No	
9 a	4 Rent/facility costs	through 5 in column (d) thine 7 from line 1, column cion conducts gaming activaming activities in each column censes revoked, suspend	No nn (d)	No	
a b	4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary. Add lines 2 8 Net gaming income summary. Subtract the state(s) in which the organization licensed to conduct of If "No," explain:	through 5 in column (d) thine 7 from line 1, column cion conducts gaming activaming activities in each column censes revoked, suspend	No nn (d)	No	

Sche	dule G (Form 990 or 990-EZ) 20	19				F	age 3
11	Does the organization conduct	gaming activities with nonmembers	5?		Yes	□No	
12	Is the organization a grantor, be formed to administer charitable		member of a partnership or other entity		Yes		
13	Indicate the percentage of gam	ing activity conducted in:					
а	The organization's facility .			13a			%
b	An outside facility			13b			%
14	Enter the name and address of	the person who prepares the organ	nization's gaming/special events books and	records:			
	Name •						
	Address >						
15a			m the organization receives gaming		· 🗆 Yes	Пио	
b	If "Yes," enter the amount of g	aming revenue received by the org ained by the third party > \$	anization 🕨 \$ and	the			
c	If "Yes," enter name and addre	ss of the third party:					
	Name •						
	Address •						
16	Gaming manager information:						
	Name 🟲						
	Gaming manager compensation	1 ▶ \$					
	Description of services provided	d ▶					
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions:						
а	<u>-</u>		stributions from the gaming proceeds to		Yes	Пио	
b	Enter the amount of distributio	ns required under state law distribu	ited to other exempt organizations or spen	t			
		pt activities during the tax year	·				
Pai			ions required by Part I, line 2b, colun licable. Also provide any additional int				5.
	Return Reference		Explanation				

efile GRAPHIC prin	nt - DO NOT PRO	CESS	As Filed Data -					DLN: 9349	3133057341
· · · · · · · · · · · · · · · · · · ·	e full content of	this do	cument, please se	lect landscape mode	e (11" x 8.5") whe	n printing.	ı	OMP N= 41	E4E 0047
Schedule I (Form 990)		_		Other Assistance		•		OMB No. 19	
		_		and Individuals		-		20.	17
Department of the Treasury Internal Revenue Service		Con		ation answered "Yes," o ▶ Attach to Form w.irs.gov/Form990 for	990.	•		Open to Inspe	
Name of the organization TRUSTEES OF PHILLIPS	ACADEMY						Employe	r identification num	ber
TRUSTEES OF PHILLIPS	ACADEMI						04-2103	579	
Part I General :	Information on (Grants	and Assistance						
				the grants or assistance, t		for the grants or assistance	e, and	✓	Yes 🗌 No
				e of grant funds in the Un					
				nd Domestic Governme litional space is needed.	nts. Complete if the o	ganization answered "Yes"	on Form 990, Par	rt IV, line 21, for ar	ny recipient
(a) Name and addre organization or government	` ` ′	IN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description noncash assis		rpose of grant stance
(1) TOWN OF ANDOVE 36 BARTLETT ST ANDOVER, MA 01810		1069	GOVERNMENT	420,290				SEE PAR	RT IV
(2) CITY OF METHUEN 41 PLEASANT ST METHUEN, MA 01844	04-600	1220	GOVERNMENT	29,666				SEE PAR	RT IV
2 Enter total numbe	r of section 501(c)(3) and go	vernment organizations	listed in the line 1 table .				-	2
3 Enter total numbe	r of other organization	ns listed	in the line 1 table .					-	
For Paperwork Reduction	Act Notice, see the Ir	struction	s for Form 990.		Cat. No. 50055	jP		Schedule I (Fo	orm 990) 2019

(1) FINANCIAL AID 9-MONTH PROGRAM

OTHER AID TO 9-MONTH PROGRAM

(3) FINANCIAL AID SUMMER SESSION

Part III can be duplicated if additional space is needed.

Explanation

METHUEN.

Schedule I (Form 990) 2019

Part III

STUDENTS

(3)

(4)

(5)

(6)

(7)

Part IV

Return Reference

SCHEDULE I, PART I, LINE 2:

SCHEDULE I, PART II, LINE 1:

SCHEDULE I, PART III:

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

209,143

38,400

SCHOOL SUPPLIES, PARTICIPATION IN OFF-CAMPUS PROGRAMS AND MISCELLANEOUS PERSONAL EXPENSES.

(b) Number of

recipients

544

544

48

ACADEMY'S FINANCIAL AID OFFICE IN CASE OF EMERGENCY.

566,442

379,182

MOST AID TO ACADEMY STUDENTS IS IN-KIND IN THE FORM OF TUITION REMISSION AND PAYMENT OF MANDATORY AND OTHER ACADEMY FEES. OTHER NON-CASH

AID DISCLOSED IN SCHEDULE I, PART III IS MONITORED THROUGH THE USE OF THE ACADEMY'S STUDENT DEBIT CARD OR STORE VOUCHERS, WHICH ARE RECEIPTED. CASH GRANTS IN PART III ARE STUDENT STIPENDS AND ARE DISBURSED DIRECTLY TO STUDENT BANK ACCOUNTS OR ARE PROVIDED DIRECTLY BY THE

UNDER THE TERMS OF AN AGREEMENT BETWEEN THE ACADEMY AND THE TOWN OF ANDOVER ("ANDOVER"), THE ACADEMY MAKES AN ANNUAL VOLUNTARY CONTRIBUTION TO ANDOVER. THE PAYMENT IS NOT RESTRICTED TO ANY PARTICULAR USE BY ANDOVER AND IS MADE WITHOUT CONSIDERATION OF THE TAX STATUS OF ACADEMY PROPERTY. SCHEDULE I, PART II, LINE 2: THE ACADEMY ACQUIRED AND DEVELOPED A PARCEL IN THE TOWN OF METHUEN ("METHUEN") THAT IT USES TO FURTHER ITS TAX-EXEMPT PROGRAMS. THE ACADEMY MAKES AN ANNUAL VOLUNTARY PAYMENT TO METHUEN, THE AMOUNT OF WHICH APPROXIMATES THE TAX REVENUE METHUEN DERIVED FROM THE PARCEL BEFORE THE ACADEMY ACQUIRED IT. THE PAYMENT IS NOT RESTRICTED TO ANY PARTICULAR USE BY

STATED IN THE ACADEMY'S CONSTITUTION OF 1778, AND REAFFIRMED IN ITS STATEMENT OF PURPOSE, THE SCHOOL IS CHARGED TO EDUCATE "YOUTH FROM EVERY QUARTER." THE ACADEMY PROVIDES ALL ASSISTANCE ON A NON-DISCRIMINATORY BASIS AND IN FURTHERANCE OF THE OBJECTIVE OF ATTRACTING A DIVERSE STUDENT BODY, A TOTAL OF 533 STUDENTS RECEIVED SOME COMPONENT OF THE TOTAL AID DISCLOSED ON LINES 1 AND 2 OF PART III, OTHER NON-CASH ASSISTANCE TO 9-MONTH PROGRAM STUDENTS CONSISTS OF STUDENT TRAVEL TO AND FROM CAMPUS, SPECIALIZED INSTRUCTION AND TUTORING TO INCLUDE MUSIC GRANTS, TECHNOLOGY, TEXTBOOKS, COLLEGE APPLICATIONS, MEDICAL EXPENSES, CLOTHING, LAUNDRY SERVICE, PHONE, ATHLETIC EQUIPMENT,

FINANCIAL AID

(e) Method of valuation (book.

FMV, appraisal, other)

SEE PART IV

FINANCIAL AID

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Schedule I (Form 990) 2019

(f) Description of noncash assistance

Page 2

efil	le GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 93	49313	33057	341
Sch	nedule J	Co	mpensati	ion Information	0	MB No.	1545-0	0047
(For	m 990)	For certain Office		rustees, Key Employees, and Hig	hest			
		Complete if the organic		ated Employees vered "Yes" on Form 990, Part IV,	, line 23.	20)
D			▶ Attach	to Form 990. instructions and the latest inforn		Openi		
•	tment of the Treasury al Revenue Service	P do to <u>www.ms.gov</u>	7 <u>71 01111990</u> 101	matructions and the latest mion	nation:		ectio	
	me of the organiza				Employer identifica	tion nu	ımber	
					04-2103579			
Pa	rt I Questi	ons Regarding Compensat	ion				I	
1 a				the following to or for a person liste			Yes	No
		·		y relevant information regarding the	se items.			
		s or charter travel	⊻	Housing allowance or residence for	•			
		companions nification and gross-up payments		Payments for business use of person Health or social club dues or initiation				
		nary spending account	<u> </u>	Personal services (e.g., maid, chauf				
b				follow a written policy regarding pay ve? If "No," complete Part III to expl		1b	Yes	
2				or allowing expenses incurred by all		2	Yes	
	directors, truste	es, officers, including the CEO/E	xecutive Director	r, regarding the items checked on Lir	ne la?			
3				ed to establish the compensation of the not check any boxes for methods	ne			
				CEO/Executive Director, but explain i	n Part III.			
	✓ Compensa	ation committee		Written employment contract				
		ent compensation consultant	▽	Compensation survey or study				
	✓ Form 990	of other organizations	✓	Approval by the board or compensa	tion committee			
4	During the year, related organiza		990, Part VII, Se	ction A, line 1a, with respect to the fi	iling organization or a			
а	Receive a sever	ance payment or change-of-cont	rol payment? .			4a		No
b	Participate in, o	r receive payment from, a supple	emental nonqual	ified retirement plan?		4b		No
С				nsation arrangement? Dicable amounts for each item in Part		4c		No
	ir res to any c	or lines 4a-c, list the persons and	provide the app	olicable 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		ed on Form 990, Part VII, Sectior ontingent on the revenues of:		the organization pay or accrue any				
а	The organization	1?				5a		No
b						5b		No
_	,	5a or 5b, describe in Part III.	A 12 4 12.1					
6		ed on Form 990, Part VII, Section ontingent on the net earnings of:		the organization pay or accrue any				
a	_	1?				6a		No
b	,	anization?				6 b		No_
7	For persons liste	ed on Form 990, Part VII, Section	n A, line 1a, did	the organization provide any nonfixed	d	7	V	
8			•	red pursuant to a contract that was		_	Yes	
J	subject to the in	nitial contract exception described	d in Regulations	section 53.4958-4(a)(3)? If "Yes," de		8		No
9				presumption procedure described in		9		
For F	Panerwork Redu	ction Act Notice, see the Inst	ructions for Fo	orm 990. Cat No. 5	50053T Schedule 3	(Forn	1 9901	2019

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the to (A) Name and Title						(D) Nontaxable		(F)
(A) Name and Title	(B)	(B) Breakdown of W-2 and/or 1099-MISC compensation			and other	benefits	columns	Compensation in
	(i) B compen		(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table								

Schedule J (Form 990) 2019					
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				
SCHEDULE J, PART I, LINE 1A:	HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE: FERNANDO R. ALONSO, PATRICK J. FARRELL, LINDA CARTER GRIFFITH, AMY PATEL, JOHN G. PALFREY, AND JAMES F. VENTRE RECEIVED HOUSING AS A CONDITION OF EMPLOYMENT FOR THE CONVENIENCE OF THE EMPLOYER AND IN ACCORDANCE WITH THE ACADEMY'S FACULTY HOUSING POLICY. THE ACADEMY HAS VALUED HOUSING AT 5% OF THE APPRAISED VALUE OF THE HOME AS DETERMINED BY THE ASSESSOR'S OFFICE OF THE TOWN OF ANDOVER, MASSACHUSETTS, WHERE THE ACADEMY IS LOCATED. SUCH AMOUNTS ARE NOT TAXABLE COMPENSATION. PERSONAL SERVICES: THE RESIDENCE OF THE HEAD OF SCHOOL, AND IN THE CURRENT YEAR, THE INTERIM HEAD OF SCHOOL'S RESIDENCE, WERE USED THROUGHOUT THE YEAR FOR NUMEROUS FUNDRAISING EVENTS, PARTIES, MEETINGS AND OTHER ACADEMY-RELATED GATHERINGS. A HOUSEKEEPER CLEANS THE RESIDENCES. THE SERVICE IS ALLOCATED BASED UPON PUBLIC VERSUS PRIVATE SPACE IN THE RESIDENCES. CLEANING OF THE PRIVATE SPACE IS INCLUDED IN THE HEAD OF SCHOOL'S AND THE INTERIM HEAD OF SCHOOL'S TAXABLE COMPENSATION, WHICH IS APPROVED IN ACCORDANCE WITH THE PROCESS DESCRIBED AT PART VI, SECTION B, LINE 15.				
SCHEDULE J, PART I, LINE 7:	CERTAIN INDIVIDUALS LISTED IN SCHEDULE J, PART II RECEIVED NON-FIXED PAYMENTS APPROVED BY THE COMPENSATION COMITTEE AND THE AMOUNT OF SUCH BONUSES ARE SHOWN ON SCHEDULE J, PART II, COLUMN (B)(II).				

Schedule J (Form 990) 2019

12JESSICA HERBSTER

GENERAL COUNSEL

(ii)

(i)

(ii)

204,236

0

Software ID:

Software Version:

EIN: 04-2103579

Name: TRUSTEES OF PHILLIPS ACADEMY

(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MISC	compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation		(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on prior Form 990
1JOHN G PALFREY HD OF SCHOOL/TRUSTEE	(i)	309,116	0	254,833	32,413	157,750	754,112	C
(END 8/19)	(ii)	0	0	0	0	0	0	(
1ANDREA T H NIX FORMER CFO	(i)	132,828	0	0	13,340	5,476	151,644	C
	(ii)	0	0	0	0	0	0	(
2 KIRSTEN A GLANTZ CHIEF INVEST. OFFICER	(i)	395,014	385,500	0	671	47,138	828,323	(
	(ii)	0	0	0	0	0	0	(
3THOMAS P LOCKERBY SECRETARY OF THE	(i)	380,598	0	0	32,413	37,427	450,438	(
ACADEMY	(ii)	0	0	0	0	0	0	(
4J LAWRENCE MUENCH DIRECTOR OF FACILITIES	(i)	185,383	0	0	20,355	2,920	208,658	(
	(ii)	0	0	0	0	0	0	(
5 PATRICK J FARRELL FORMER DEAN OF FACULTY	(i)	143,660	0	0	15,805	81,862	241,327	(
	(ii)	0	0	0	0	0	0	(
6JAMES F VENTRE INTERIM HEAD OF	(i)	251,356	0	0	29,915	88,403	369,674	C
SCHOOL/TRUSTEE	(ii)	0	0	0	0	0	0	(
7 FERNANDO R ALONSO ASST HEAD OF SCHOOL,	(i)	274,720	0	0	32,023	59,723	366,466	C
CFO ,	(ii)	0	0	0	0	0	0	(
8 JUDITH F DOLKART DIRECTOR, ADDISON	(i)	199,523	0	0	21,924	10,166	231,613	(
GALLERY	(ii)	0	0	0	0	0	0	(
9AMY PATEL MEDICAL DIRECTOR	(i)	200,843	0	0	23,567	88,771	313,181	(
	(ii)	0	0	0	0	0	0	(
10LINDA CARTER GRIFFITH ASSOC HEAD OF SCHOOL	(i)	200,399	0	0	23,745	102,763	326,907	C
3 3 33	(ii)	0	0	0	0	0	0	(
11XIAOHE LI INVESTMENT ANALYST	(i)	198,836	0	0	10,086	10,185	219,107	(

11,470

2,600

218,306

0

0

efile GRAPHIC print - DO NOT PROCESS As Filed Data -Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule K **Supplemental Information on Tax-Exempt Bonds** (Form 990)

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions,

▶ Attach to Form 990.

explanations, and any additional information in Part VI.

Open to Public

OMB No. 1545-0047

Inspection

DLN: 93493133057341

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

Name of the organization **Employer identification number** TRUSTEES OF PHILLIPS ACADEMY 04-2103579 Part I **Bond Issues** (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (f) Description of purpose (g) Defeased (h) On (i) Pool (e) Issue price behalf of financing issuer Yes No Yes No Yes No Х MA DEVELOPMENT FINANCE 04-3431814 57583UZZ4 01-14-2014 53.875.221 REFUNDING OF 2008 BONDS & Χ **AGENCY** CONST. REFUNDING OF 1993 BONDS & MA DEVELOPMENT FINANCE 04-3431814 57583FL25 02-04-2003 59,910,000 Χ Χ CONST. **AGENCY** Part ${f I}$ **Proceeds** Α В C D 2 3 53,875,221 59,910,000 5 6 7 452,094 671,812 8 9 10 20,034,983 20,013,672

11

12

13

14

15

16

2

Part III

Department of the Treasury

Internal Revenue Service

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

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

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

Private Business Use

Were the bonds issued as part of a current refunding issue of tax-exempt Were the bonds issued as part of an advance refunding issue of taxable

Does the organization maintain adequate books and records to support the final allocation of

Χ Χ

No

Χ

35,041,375

No

Χ

2016

Yes

Yes

Χ Χ Х

Yes

2004

39,224,516

No

Χ

No

Χ

Χ

Yes

Yes

No

No

Yes

D

Yes

Schedule K (Form 990) 2019

No

No

Х Cat. No. 50193E

Yes

counsel to review any research agreements relating to the financed property?

a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3)

Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply?

hedge with respect to the bond issue?

If "Yes" to line 2c, provide in Part VI the date the rebate Is the bond issue a variable rate issue?

Was the hedge terminated?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

Has the organization established written procedures to ensure that all nongualified bonds of

Schedule K (Form 990) 2019

6

Part IV

b

C

Arbitrage

В C D Α Yes Nο Yes No Yes No Yes No Are there any management or service contracts that may result in private business use of Х Х

0 %

Χ

Χ

Х

Yes

Χ

Χ

Χ

MORGAN STANLEY BANK

В

Χ

No

Χ

Χ

Χ

3060 %

Χ

Χ

Χ

0 %

Х

Х

Χ

Yes

C

No

Page 2

D

Schedule K (Form 990) 2019

No

Yes

If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside b Χ counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-financed C Χ Χ If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside d

Α

No

Χ

Χ

Χ

Χ

Χ

Yes

Χ

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

Page 3

No

D

D

No

Yes

Yes

В

No

Explanation

No

Χ

Yes

R

No

Yes

No

C

Nο

Yes

Yes

Yes

Χ

Nο

Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

ARBITRAGE ANALYSIS OPINION LETTER ISSUED ON 1/22/2020 FOR BOND A.

Schedule K (Form 990) 2019

(GIC)?

period?

Part VI

BOND A

Arbitrage (Continued)

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

requirements of section 148? . . .

Return Reference

Return Reference	Explanation
BOND B	ARBITRAGE ANALYSIS OPINION LETTER ISSUED ON 11/20/2020 FOR BOND B.

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493133057341 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** TRUSTEES OF PHILLIPS ACADEMY 04-2103579 Part I **Types of Property** (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 0 N/A 1 Art—Works of art . . Χ 121 Art-Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles 7 Boats and planes . . 8 Intellectual property . . . Securities-Publicly traded . Χ 162 6,236,138 AVG. OF HIGH/LOW PRI 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . 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 ► (___ 26 Other ▶ (______) 27 Other ▶ (______) Number of Forms 8283 received by the organization during the tax year for contributions 29 6 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 isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2019)	Page 2		
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		
SCHEDULE M, PART I, COLUMN (B):	THE ACADEMY REPORTS THE NUMBER OF ITEMS CONTRIBUTED IN PART I, COLUMN (B).		
,	THE ACADEMY REPORTED ZERO VALUE ON FORM 990, PART VIII, STATEMENT OF REVENUE LINE 1G AS PERMITTED UNDER SFAS 116. IT DOES NOT CAPITALIZE THE COLLECTIONS OF THE ADDISON GALLERY OF AMERICAN ART AND THE PEABODY INSTITUTE OF ARCHAEOLOGY.		
	Schedule M (Form 990) (2019)		

efile GRAPH	DLN: 93493133057341		
SCHEDUL (Form 990 or EZ)	990- Complete to provide information for responses to s Form 990 or 990-EZ or to provide any addition Attach to Form 990 or 990-EZ	pecific questions on al information. 2019 Open to Public	
Namel Betherofg TRUSTEES OF PHIL 990 Schedule		Employer identification number 04-2103579	
Return Reference	Explanation		
FORM 990, PART I, LINE 1 & PART III, LINE I:	PHILLIPS ACADEMY IS A COEDUCATIONAL, BOARDING SCHOOL LOCATED IN ANDOVER, MASSACHUSETTS FOR STUDENTS IN GRADES NINE THROUGH TWELVE AND POST-GRADUATES. THE SCHOOL STRIVES TO HELP YOUNG PEOPLE FROM DIVERSE BACKGROUNDS ACHIEVE THEIR POTENTIAL NOT ONLY INTELLECTUALLY, BUT ALSO ARTISTICALLY, ATHLETICALLY AND MORALLY, SO THAT THEY MAY LEAD RESPONSIBLE AND FULFULLING LIVES.		

990	Schedule	ο,	Supplemental	Information

Return Reference	Explanation
FORM 990, PART III, LINE 4D:	TOTAL OF ALL OTHER PROGRAM SERVICES EXPENSES \$1,388,710. INCLUDING GRANTS OF \$488,356. REV ENUE \$82,020. THE INSTITUTE FOR RECRUITIMENT OF TEACHERS (IRT) ADDRESSES THE LACK OF DIVERS ITY IN THE NATION'S TEACHING FACULTIES BY RECRUITING OUTSTANDING STUDENTS OF COLOR AND OTH ER SCHOLARS COMMITTED TO DIVERSITY IN EDUCATION, PREPARING THEM FOR THE DEMANDS OF CAREERS IN EDUCATION, COUNSELING THEM THROUGH THE GRADUATE SCHOOL APPLICATION PROCESS, AND ADVOCA TING FOR SUFFICIENT FUNDING FOR ADVANCED STUDY. SINCE 1990, THE IRT HAS BUILT A NATIONAL C ONSORTIUM OF COLLEGES AND UNIVERSITIES THAT ARE EAGER TO ENROLL IRT STUDENTS TO DIVERSIFY THEIR GRADUATE STUDENT BODIES AND TO EXPAND THE PIPELINE OF EDUCATORS TO TEACH, COUNSEL, A ND ADMINISTRATE IN AMERICAN SCHOOLS, COLLEGES, AND UNIVERSITIES. IRT URGES ITS STUDENTS TO DEARN THEIR ADVANCED DEGREES AND TEACHING CREDENTIALS BEFORE THEY LAUNCH THEIR EDUCATIONAL CAREERS. ANNUALLY, THE IRT ENROLLS APPROXIMATELY 130 TALENTED STUDENTS WHO ARE MAJORING IN THE ARTS, HUMANITIES, SOCIAL SCIENCES, OR EDUCATION, TO ITS TWO DISTINCT PROGRAMS: THE SUMMER WORKSHOP FOR RISING AND GRADUATING COLLEGE SENIORS, AND THE ASSOCIATE PROGRAM FOR COLLEGE SENIORS AND GRADUATES WHO WISH TO CONTINUE THEIR EDUCATIONAL STUDIES. SINCE ITS INCE PTION, NEARLY EVERY IRT APPLICANT HAS BEEN ADMITTED TO AT LEAST ONE GRADUATE SCHOOL WITHIN THE IRT CONSORTIUM OF 43 COLLEGES AND UNIVERSITIES; MOST HAVE BEEN ADMITTED TO FOUR OR MORE APPROXIMATELY 92 PERCENT OF THESE STUDENTS HAVE RECEIVED PARTIAL TO FULL TUITION WAIVE RS AND FULL FELLOWSHIP ASSISTANCESHIP FUNDING FOR UP TO SIX YEARS OF GRADUATE SCHOOL WITHIN THE IRT HAS WORKED WITH OVER 2,500 INTERNS AND ASSOCIATES. OF THAT NUMBER, OVER 1,000 PARTICIPANTS HAVE ALREADY RECEIVED TERMINAL MASTER'S DEGRESS AND 357 HAVE BEARDAD HOLS. I RT ALUMNI SERVE IN THE ADMINISTRATIVE AND TEACHING RANKS AT OVER 130 COLLEGES AND UNIVERSITIES SO NOTHE PHILLIPS ACADEMY CAMPUS. A COLLABORATION DETWEEN PHILLIPS ACADEMY AND THE BREAD LOAF SCHOOL. OF ENGLISH, MIDDLEBUTY COLLEGES GRADUATE S

Return

Reference	
FORM 990,	OUND TO SUPPORT PROGRAM PARTICIPANTS IN THEIR SCHOOLS AND COMMUNITY ORGANIZATIONS, OFFERIN G
PART III,	WORKSHOPS, CONFERENCES, AFTER-SCHOOL EVENTS, AND OTHER SIMILAR PROGRAMS. FOUNDED IN 1988, PALS
LINE 4D:	(PHILLIPS ACADEMY - ANDOVER HIGH SCHOOL - LAWRENCE SCHOOLS) IS A NO-COST, ACADEMIC- YEAR AND
	SUMMER PROGRAM FOR MIDDLE SCHOOL STUDENTS FROM LAWRENCE, MA. IN A TYPICAL YEAR, T HE ACADEMIC-
	YEAR COMPONENT OPERATES ON A DROP-IN BASIS. EACH MONTH, SESSIONS ARE PREPARED AND TAUGHT BY
	VOLUNTEERS FROM PHILLIPS ACADEMY AND ANDOVER HIGH SCHOOL AND PRESENTED TO SI XTH-GRADE
	THROUGH EIGHTH-GRADE STUDENTS AT OUR PARTNER SCHOOLS, THE BRUCE SCHOOL, PARTHUM MIDDLE
	SCHOOL, UP ACADEMY LEONARD, AND SPARK ACADEMY. THESE SEESIONS FOCUS ON THE IMPORTAN CE OF
	EXCELLING IN MIDDLE SCHOOL, PREPARATION FOR HIGH SCHOOL ADMISSION TESTING AND APPLIC ATION
	PROCESSES, ESSAY WRITING, AND INTERPERSONAL AND ACADEMIC SKILLS. THE 2020 SUMMER PRO GRAM
1	OFFERED AN ASYNCHRONOUS ACADEMIC EXPERIENCE FOR 44 STUDENTS ENTERING GRADES 7, 8 AND 9.

Explanation

DECISION.

Return

Reference	
SECTION A,	THE PHILLIPS ACADEMY BOARD OF TRUSTEES HAS SEVENTEEN CHARTER TRUSTEES, IDENTIFIED AS MEMBERS OF THE CORPORATION IN THE AMENDED AND RESTATED BY-LAWS OF THE TRUSTEES OF PHILLIPS ACADEMY, AND SIX ALUMNI TRUSTEES. CHARTER TRUSTEES HAVE FULL VOTING PRIVILEGES. ALUMNI TRUSTEES VOTE ON ALL MATTERS EXCEPT THE ELECTIONS OF MEMBERS OF THE CORPORATION, OFFICERS OF THE CORPORATION, AND THE HEAD OF SCHOOL. THE TRUSTEE BY-LAWS EMPOWER THE CORPORATION TO APPOINT AN EXECUTIVE COMMITTEE WITH ALL OF THE POWERS OF THE TRUSTEES EXCEPT AS SPECIFICALLY LIMITED BY THE BOARD. THE EXECUTIVE COMMITTEE IS COMPRISED OF THE BOARD PRESIDENT, THE HEAD OF SCHOOL AND CHAIRPERSONS OF EACH OF THE OTHER STANDING COMMITTEES OF THE BOARD. THE COMMITTEE HAS BEEN DELEGATED ALL OF THE POWERS OF THE TRUSTEES IN CIRCUMSTANCES WHERE THE ENTIRE BOARD IS UNABLE TO CONVENE TO RENDER A

Explanation

990 Schedule O, Supplemental Information

Return Explanation

Peference

LINE 2:

Reference	
FORM 990,	TRUSTEES PETER L.S. CURRIE AND LOUIS G. ELSON HAVE A RELATIONSHIP IN A BUSINESS ENTITY. THE ACADEMY
PART VI,	HAS NO RELATIONSHIP WITH THIS ENTITY.
SECTION A,	

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 8B:	IN ACCORDANCE WITH THE AMENDED AND RESTATED BY-LAWS OF TRUSTEES OF PHILLIPS ACADEMY, ONLY THE EXECUTIVE COMMITTEE HAS THE AUTHORITY TO ACT ON BEHALF OF THE ACADEMY'S GOVERNING BODY, ITS BOARD. THE ACADEMY DOES NOT MAINTAIN MINUTES OF ANY EXECUTIVE COMMITTEE MEETINGS, WHICH ARE RARE, AND GENERALLY CONVENE TO VOTE ON AN ISSUE THAT HAS BEEN DELEGATED TO THIS COMMITTEE BY THE FULL BOARD BECAUSE INSUFFICIENT INFORMATION WAS AVAILABLE AT THE REGULARLY SCHEDULED MEETING OF THE FULL BOARD AND A DECISION IS NEEDED BEFORE THE NEXT SCHEDULED BOARD MEETING. HOWEVER, IF THE EXECUTIVE COMMITTEE UNDERTAKES ANY ACTION, SUCH ACTION IS INCLUDED IN THE MINUTES OF THE NEXT REGULARLY SCHEDULED MEETING OF THE BOARD. THE BOARD MEETS AT LEAST THREE TIMES ANNUALLY. ALL BOARD MINUTES ARE APPROVED BY THE BOARD; THEREFORE, APPROVAL OF SUCH MINUTES CONSTITUTES APPROVAL AND ACCEPTANCE OF ANY ACTIONS TAKEN BY THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE MET ONCE REMOTELY DURING THE ACADEMY'S 2020 FISCAL YEAR TO ELECT ALUMNI TRUSTEES.

Return Reference	Explanation	
FORM 990, PART VI, SECTION B, LINE 11:	WORKING WITH A PAID PREPARER, THE RETURN WAS PREPARED PRIMARILY IN THE ACADEMY'S COMPTROLLER'S OFFICE AND THEN REVIEWED INTERNALLY BY TWO SENIOR FINANCIAL MANAGERS. AT ITS MAY 2021 MEETING THE ACADEMY'S AUDIT COMMITTEE APPROVED THIS FORM 990 IN ITS FINAL FORM. IMMEDIATELY AFTER THE MAY AUDIT COMMITTEE MEETING, THIS FORM 990 WAS POSTED TO THE BOARD OF TRUSTEES WEB SITE WHERE THEY COULD REVIEW IT.	

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C:	THE ACADEMY HAS TWO SEPARATE CONFLICT OF INTEREST POLICIES. ITS POLICY FOR INTERESTED PERSONS ADDRESSES TRANSACTIONS BETWEEN THE ACADEMY AND ANY CURRENT OR FORMER OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES, ANY OTHER PERSON IN A POSITION TO EXERCISE SUBSTANTIAL INFLUENCE OVER THE AFFAIRS OF THE ACADEMY, FAMILY MEMBERS AND OTHER RELATED ENTITIES. THIS POLICY IS DESIGNED TO ELICIT DISCLOSURE OF TRANSACTIONS WHICH WOULD HAVE TO BE INCLUDED IN THE ACADEMY'S FORM 990. AS SUCH, THE THRESHOLDS FOR REPORTING AND DEFINITIONS OF TRANSACTIONS REQUIRED TO BE REPORTED ARE ALIGNED WITH THOSE IN FORM 990. THE ACADEMY ALSO HAS A SECOND POLICY FOR FACULTY, STAFF AND OTHER DECISION MAKERS ACTING ON BEHALF OF THE ACADEMY. WHILE THIS SECOND POLICY ALSO SEEKS TO IDENTIFY AND ADDRESS CONFLICTS, THE INQUIRIES ARE LESS EXTENSIVE THAN THOSE IN THE POLICY FOR INTERESTED PERSONS. ANNUALLY IN THE FALL, THE POLICIES ARE DISTRIBUTED AND ALL RECIPIENTS MUST DISCLOSE IN WRITING ALL POTENTIAL CONFLICTS OF INTEREST. CONFLICTS DISCLOSED ARE ADDRESSED IN ACCORDANCE WITH THE POLICIES, EITHER BY THE TRUSTEE AUDIT COMMITTEE, THE BOARD OF TRUSTEES OR THE CONFLICT OF INTEREST OFFICER, THE ACADEMY'S DEAN OF ADMINISTRATION AND FINANCE. THE POLICIES CLEARLY STATE THAT ALL RECIPIENTS OF THE POLICY ARE OBLIGED THROUGHOUT THE YEAR TO ABIDE BY ITS TERMS AND TO TAKE NO STEPS TO ENTER INTO ANY TRANSACTION WHICH MIGHT GIVE RISE TO A CONFLICT OF INTEREST WHOUT FIRST DISCLOSING SUCH TRANSACTION TO AND RECEIVING APPROVAL TO ENTER INTO THE TRANSACTION FROM THE CONFLICT OF INTEREST OFFICER, DURING THE YEAR, IF APPROPRIATE, NEWLY-HIRED PERSONNEL ARE REQUIRED TO COMPLETE THE POLICY. DURING THE COURSE OF THE YEAR, IF THE CONFLICT OF INTEREST OFFICER BECOMES AWARE OF POTENTIAL CONFLICTS THROUGH ANY OTHER MEANS, HE INVESTIGATES THE TRANSACTION IN ACCORDANCE WITH THE POLICY AND MAINTAINS RECORDS TO EVIDENCE THE RESULTS OF HIS INVESTIGATION.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15:	COMPENSATION OF THE ACADEMY'S HEAD OF SCHOOL, ITS INTERIM HEAD OF SCHOOL, ITS CHIEF OPERATING AND FINANCIAL OFFICER, INS CHIEF FINANCIAL OFFICER, AND ITS KEY EMPLOYEES IS REVIEWED AND APPROVED IN ACCORDANCE WITH THE ACADEMY'S AMENDED AND RESTATED COMPENSATION PHILOSOPHY STATEMENT (THE "STATEMENT"), ADOPTED AT A MEETING OF THE ACADEMY'S BOARD OF TRUSTEES IN JANUARY 2006, WHEREIN THE BOARD DECLARES ITS SUPPORT FOR FULL DISCLOSURE OF ALL EXECUTIVE COMPENSATION AND BENEFITS AS LEGALLY REQUIRED IN IRS FORM 990. THE COMPENSATION OF THE BOARD OF TRUSTEES IS CHARGED WITH IMPLEMENTING THE PHILOSOPHY AND PRACTICES ARTICULATED IN THE STATEMENT. THE STATEMENT REQUIRES THAT: COMPENSATION FOR ITS SENIOR ADMINISTRATORS BE BASED UPON COMPARISONS WITH COMPENSATION AT PEER INSTITUTIONS; ALL COMPENSATION DECISIONS BE BASED UPON COMPARISONS WITH COMPENSATIONS; ALL PARTICIPATING IN COMPENSATION DECISIONS OF BE BASED UPON ETHICAL CONSIDERATIONS; ALL PARTICIPATING IN COMPENSATION DECISIONS COMPLETE THE ACADEMY'S CONFLICT OF INTEREST STATEMENT AND RECUSE THEMSELVES FROM PARTICIPATION IF THEY HAVE ANY DIRECT OR INDIRECT FINANCIAL INTEREST WITH THE ACADEMY; ALL ACADEMY; COMPENSATION PRACTICES ARE TO BE IN ACCORDANCE WITH APPLICABLE LAWS AND ALL BOARD MEMBERS AND THOSE ADMINISTRATORS THAT PARTICIPATE IN DETERMINING COMPENSATION FOR THE ACADEMY'S OFFICERS AND KEY EMPLOYEES BE FAMILIAR WITH INTERNAL REVENUE CODE (IRC) SECTION 4958, WHICH IMPOSES INTERMEDIATE SANCTION PENALTIES FOR EXCESS BENEFIT TRANSACTIONS. ANNUALLY, THE COMPENSATION COMMITTEE REPORTS ITS COMPENSATION DECISIONS TO THE FULL BOARD MEMBERSHIP. THE COMPENSATION COMMITTEE REVIEWS AND APPROVES ALL BASE COMPENSATION ARRANGEMENTS EXCEEDING \$150,000 A YEAR, EXCLUDING HOUSING, INCLUDING, IN PARTICULAR, THE HEAD OF SCHOOL'S AND THE CHIEF FINANCIAL OFFICER'S COMPENSATION. THE COMPENSATION COMMITTEE REVIEWS APPROPRIATE EXECUTIVE COMPENSATION OF INDIFFICER'S COMPENSATION THE NATIONAL ASSOCIATION OF INDEPENDENT SCHOOL'S AND THE CHIEF FINANCIAL OFFICER'S COMPENSATION. THE NATIONAL ASSOC

Return Explanation

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

990 Schedule O, Supplemental Information

Return Explanation

Reference

FORM 990,	THE ACADEMY DOES NOT GENERALLY MAKE ITS GOVERNING DOCUMENTS AND ITS CONFLICT OF INTEREST POLICY
PART VI,	AVAILABLE TO THE PUBLIC. IT WILL FURNISH ITS FINANCIAL STATEMENTS UPON REQUEST, EITHER VIA EMAIL OR IN
SECTION C,	HARD COPY THROUGH THE MAIL.
LINE 19:	

990 Schedule O, Supplemental Information

Return

Reference	Explanation
FORM 990,	OTHER CHANGES IN NET ASSETS: UNREALIZED LOSS ON SWAP MARKET VALUE (\$4,439,432) CHANGE IN BAD DEBT
	EXPENSE (\$60,438) CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS (\$2,679,443) GAIN ON SALE OF ASSETS \$\\ \$77,000 TOTAL TO FORM 990, PART XI, LINE 9: (\$7,102,313)

Evolunation

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -										DLN: 93493:	133057	341				
SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service	Complete if the organization and Preasury ► Go to www.irs.gov/F				cions and Unrelated Partnerships ered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. attach to Form 990. and the latest information.								OMB No. 1545-0047 2019 Open to Public Inspection					
Name of the organization TRUSTEES OF PHILLIPS ACADEMY	<u> </u>								Emp	loyer identif	ication							
										103579								
Part I Identification	of Disregarded E	ntities. Complete if	the orgai	nization ansv	vered "Yes	s" on Form	າ 990, Part	: IV, line 3	33.									
Name, address, and	(a) EIN (if applicable) of disr	egarded entity		(b) Primary a		Legal dom or foreigr	c) icile (state n country)	(d) Total inc	ome	(e) End-of-year as	ssets	(f Direct coi enti						
	of Related Tax-Ex npt organizations do	empt Organizatior uring the tax year.	ıs. Compl	ete if the org	ganization	answered	l "Yes" on I	Form 990	, Part I	V, line 34 be	ecause	e it had one or	more					
Name, address, an	(a) d EIN of related organizat	ion	Prim	(b) ary activity	Legal dom	c) icile (state n country)	(d) Exempt Cod			(e) tharity status on 501(c)(3))	Di	(f) rect controlling entity	Section (13) cor enti	512(b) ntrolled ty?				
													Yes	No				
For Paperwork Peduction Ag						t No 5013						edule P (Form						

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 related organization	of	(b) Primary activity (c) Legal domicile (state or foreign country	entity	irect Predomina rolling income(rela	nant Share c elated, ted, from der 512-	(g) Share of end-of-year assets	(H Disprop alloca	rtionate tions? a	Code V-UBI Gen main 20 of Schedule K-1 (Form 1065)		ral or aging ner?	(k) Percentage ownership
							Yes	No		Yes	NO	
Part IV Identification of Related Orga because it had one or more related.						nswered "Ye	s" on F	orm 99	0, Part IV	, line	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) ct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	Share	(g) of end-of- year ssets	Percei	ntage ership	(:	(i) ection 512(b) 13) controlled entity?
		* * * * * * * * * * * * * * * * * * * *	N/A		TDUST				+			Yes No
(1)CHARITARI E TRUSTS (28)	FUNDDATCING	MΛ	INIA		ITDIICT		1		1			I No

Part IV Identification of Related Organ because it had one or more related	zations Taxable as a C organizations treated as	orporation or 1 a corporation or	Frust. Com trust durir	plete if the one	organization a ear.	nswered "Yes	" on Form 99	90, Part IV, lin	ie 34	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or for country)	eign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)		(g) Share of end-of year assets	(h) F- Percentage ownership	Section (13) of	(i) n 512(b) ontrolled otity?
(1)CHARITABLE TRUSTS (28) 180 MAIN STREET ANDOVER, MA 01810	FUNDRAISING	МА	1	NA	TRUST					No
(2)SOF-VIII INVESTOR IV 21 THOMAS STREET BRISTOL, BSI 6JS UK	INVESTING	UK	1	NA	C CORP	57,940	466,974	100.000 %	Yes	
(3)POOLED INCOME FUND (1) 180 MAIN STREET ANDOVER, MA 01810	FUNDRAISING	МА	r	VA	TRUST					No
									900)	
								ichedule R (Fo	rm 990) 2	019

Schedule R (Form 990) 2019		Pa	ge 3
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.		Yes	No
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	1a		No
b Gift, grant, or capital contribution to related organization(s)	1 b		No
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1 d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1 g	\neg	No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
I Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sharing of paid employees with related organization(s)	10		No
p Reimbursement paid to related organization(s) for expenses	1 p		No
q Reimbursement paid by related organization(s) for expenses	1 q		No
	\sqcup		<u> </u>

k Lease of facilities, equipment, or other assets from related organization(s)				1k	No					
l Performance of services or membership or fundraising solicitations for related organization(s)				11	No					
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)				10	No					
p Reimbursement paid to related organization(s) for expenses				1p	No					
q Reimbursement paid by related organization(s) for expenses				1 q	No					
r Other transfer of cash or property to related organization(s)				1r Yes	 					
$oldsymbol{s}$ Other transfer of cash or property from related organization(s)				1s	No					
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	including covered re	elationships and tra	nsaction thresholds.							
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	ount involved						
(1)CHARITABLE LEAD TRUST - RECEIPT OF TRUST DIST	R	361,744	CASH							
(2)CHARITABLE LEAD TRUST - RECEIPT OF TRUST DIST	С	299,950	CASH							

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Part VI Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

was not a related organization. See instructions regarding exclusion for certain investment partnerships.															
(a) Name, address, and EIN of entity	(b) Primary activity	domicilo	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)		(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General c managin partner?	or 'g ?	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No			
													_		
												П			
				_						Schedul	e R (Form	1990)) 2019		

Schedule R (Form 990) 2019								
Part VII Supplemental Information								
Provide additional information for responses to questions on Schedule R. (see instructions).								
Return Reference	Explanation							
SCHEDULE R, PART IV:	CHARITABLE TRUSTS ARE LOCATED IN THE FOLLOWING JURISDICTIONS: IL, FL, MA, NY, NC, VA, WA, PA AND CA.	_						