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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.

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

DLN: 93493135021890 OMB No. 1545-0047

Open to Public

01110	41771
Form C	90
Departm	ent of the
Treasury	
Internal l	Revenue :

Inspection Service For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019 C Name of organization D Employer identification number B Check if applicable: PHILLIPS EXETER ACADEMY \square Address change 02-0222174 ☐ Name change % MERRIL A DWYER Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number ☐ Amended return Number and street (or P.O. box if mail is not delivered to street address) Room/suite ☐ Application pending (603) 772-4311 City or town, state or province, country, and ZIP or foreign postal code EXETER, NH $\,$ 038332460 $\,$ G Gross receipts \$ 468,771,459 Name and address of principal officer: H(a) Is this a group return for WILLIAM RAWSON □Yes ☑No subordinates? 20 MAIN STREET H(b) Are all subordinates EXETER, NH 038332460 ☐ Yes ☐No included? **☑** 501(c)(3) **☐** 501(c)() **◄** (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW.EXETER.EDU L Year of formation: 1781 M State of legal domicile: NH **K** Form of organization: lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other Summary 1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O. Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) . 21 20 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 1,261 **6** Total number of volunteers (estimate if necessary) 6 5,144 Total unrelated business revenue from Part VIII, column (C), line 12 7a -4,418,144 **b** Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 21,888,460 8 Contributions and grants (Part VIII, line 1h) . 29,490,880 Ravenue 61,991,029 65,445,655 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 104,087,722 86,611,223 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,215,250 1,154,762 196,784,881 175,100,100 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 23,872,343 24,564,234 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 60,072,483 62,896,875 Expenses 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶6,218,905 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 42,380,482 41,722,724 126,325,308 129,183,833 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 . 70,459,573 45,916,267 Net Assets or Fund Balances **Beginning of Current Year** End of Year 1,713,668,931 1,726,083,549 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 172,955,332 178,875,778 22 Net assets or fund balances. Subtract line 21 from line 20 . 1,540,713,599 1,547,207,771 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-05-13 Signature of officer Sign Here MARIJKA BEAUCHESNE CFO Type or print name and title Print/Type preparer's name Preparer's signature Check \square if P00641463 Paid self-employed Firm's name PricewaterhouseCoopers LLP Firm's EIN ▶ Preparer Use Only Firm's address ► 101 SEAPORT BLVD SUITE 500 Phone no. (617) 530-5000

☑ Yes ☐ No

BOSTON, MA 02210

May the IRS discuss this return with the preparer shown above? (see instructions)

Form	990 (2018)					Page 2				
Pa	rt III Statement	of Program Servi	ce Accomplis	hments						
	Check if Sche	edule O contains a resp	onse or note to	any line in this Part III		🗹				
1		organization's mission:		•						
SEE :	SCHEDULE O.									
2	Did the organization	undertake any signific	ant program ser	vices during the year w	hich were not listed on					
	the prior Form 990 c	or 990-EZ?				🗌 Yes 🗹 No				
	If "Yes," describe the	ese new services on So	chedule O.							
3	Did the organization	cease conducting, or	make significant	changes in how it cond	ucts, any program					
	services?									
	If "Yes," describe the	ese changes on Schedi	ule O.							
4	Section 501(c)(3) ar		ions are required	to report the amount	largest program services, as mea of grants and allocations to others					
	(Code:) (Expenses \$	105,279,336	including grants of \$	22,972,087) (Revenue \$	57,117,058)				
	See Additional Data									
4b	(Code:) (Expenses \$	5,561,581	including grants of \$	1,592,147) (Revenue \$	7,794,960)				
	See Additional Data									
4c	(Code:) (Expenses \$	1,859,940	including grants of \$) (Revenue \$	1,139,554)				
	See Additional Data									
4d	Other program servi	ces (Describe in Sched	dule O.)							
	(Expenses \$	inc	cluding grants of	\$) (Revenue \$)				
4e	Total program ser	vice expenses ▶	112,700,8	57						

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Par	Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	<u> </u>
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	3		No
4	for public office? If "Yes," complete Schedule C, Part I			
•	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?	5		No
6	If "Yes," complete Schedule C, Part III			
	to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part !	6		No
	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
	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	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	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 2	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX "	11d		No
е	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	Yes	
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		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? 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		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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	tiV Checklist of Required Schedules (continued)			Page 4
Pai	Checklist of Required Schedules (continued)		Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? 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
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	9 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒		Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? 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	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	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
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	Yes	No No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 421		1 65	110
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	

3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a 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 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a No 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: ▶_

See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .. 5a Nο Nο b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization 6a Nο solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were

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 and services 7a Yes 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? Yes Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7c No

d If "Yes," indicate the number of Forms 8282 filed during the year 7d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e No 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . No If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 7h Sponsoring organizations maintaining donor advised funds.

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during 8

9a 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? . . . 9h Section 501(c)(7) organizations. Enter: a 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 10b a Gross income from members or shareholders 11a

b Gross income from other sources (Do not net amounts due or paid to other sources 11b 12a **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year.

11 Section 501(c)(12) organizations. Enter: 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?

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 13b which the organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a No

14b

15

Nο

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b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

orm	990 (2018)			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	nse to l	lines
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 21			
	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 20			
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	Yes	
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
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8 a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	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	Code		
			Yes	No
	Did the organization have local chapters, branches, or affiliates? 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?	10a 10b		No
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	105		
	form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
.2a	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	
L3	Did the organization have a written whistleblower policy?	13	Yes	
L 4	Did the organization have a written document retention and destruction policy?	14	Yes	
L 5	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	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).			
	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?	161		
6-		16b		
<u>5e</u> .7	ction C. Disclosure List the States with which a copy of this Form 990 is required to be filed▶			
	CA , IN , NH , OK			
L8	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)			
L9 20	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. State the name, address, and telephone number of the person who possesses the organization's books and records:			
	►MERRIL A DWYER 20 MAIN STREET EXETER, NH 038332460 (603) 777-3436			- (55 (5)

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

Check if Schedule O contains a response or note to any line in this Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. • List all of the organization's current key employees, if any. See instructions for definition of "key employee."

- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the
- organization and any related organizations. • List all of the organization's former officers, key employees, 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. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) (B) (C) (D) (F) (E) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person amount of other compensation compensation week (list is both an officer and a from the from related compensation organization (Wany hours director/trustee) organizations from the for related 2/1099-MISC) (W- 2/1099organization and Former Highest compensatemployee Individual trustee or director Officer organizations (ey employee MISC) related Institutional below dotted organizations line) Trustee See Additional Data Table

Part VII

PO BOX 28012

BOSTON, MA 02111

NEW YORK, NY 100878012 ANN BEHA ARCHITECTS, 33 kINGSTON STREET

compensation from the organization ▶ 29

738,517

1,159,962

698,397

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	(A) Name and Title	Name and Title Average hours per week (list any hours Average hours per week (list any hours Average hours per than one box, unless person is both an officer and a director/trustee) Average hours Position (do not check more than one box, unless person compensation from the organization (Worganization)			Reportable compensation from related organizations (w-	Estima amount o compens from	ated of other sation the						
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/109	9-MISC)	2/1099-MISC)	organizati relat organiza	ed
See	Additional Data Table													
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	Sub-Total	rt VII Section			•		}					+		
_					٠.		•		2,	085,495		0		335,532
2	Total number of individuals (including of reportable compensation from the	but not limited	to thos			bove	e) who	rece	eived mo	ore than \$1	00,000	•		
													Yes	No
3	Did the organization list any former			ee, k	ey e	mplo	oyee, d	or hi	ghest co	mpensated	employee on			
	line 1a? If "Yes," complete Schedule 3	for such individ	dual .	•	•	•		•				3		No
4	For any individual listed on line 1a, is organization and related organization										n the			
	individual				•	•	•	•	•			4	Yes	
5	Did any person listed on line 1a receive services rendered to the organization		•						_	tion or indi	vidual for	5		No
Se	ection B. Independent Contract	ors												
1	Complete this table for your five high- from the organization. Report comper											mpen	sation	
	· · · · · · · · · · · · · · · · · · ·	(A)		, , , , , ,		9					(B)		(C	
HARV	Name a EY CONSTRUCTION CO,	nd business addre	ess							CONTRACT :	ription of services SERVICES		Comper 4	,972,336
10 H	ARVEY ROAD ORD, NH 03110													•
DANI	EL O'CONNELL SONS INC,									CONTRACT :	SERVICES		8	,463,520

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

HARVEY CONSTRUCTION CO,	CONTRACT SERVICES	4,9
0 HARVEY ROAD		
BEDFORD, NH 03110		
DANIEL O'CONNELL SONS INC,	CONTRACT SERVICES	8,4

EDFORD, NH 03110		
ANIEL O'CONNELL SONS INC, DO KELLY WAY	CONTRACT SERVICES	٤

SEDIONE, NIT 63116		
DANIEL O'CONNELL SONS INC,	CONTRACT SERVICES	8
800 KELLY WAY		
HOLYOKE, MA 01040		

300 KELLY WAY		I
HOLYOKE, MA 01040		l
TOD WILLIAMS BILLIE TSIEN ARCHITECT,	ARCHITECTURAL	

DANIEL O'CONNELL SONS INC,	CONTRACT SERVICES	8
800 KELLY WAY		
HOLYOKE, MA 01040		
TOD WILLIAMS BILLIE TSIEN ARCHITECT,	ARCHITECTURAL	
222 CENTRAL PARK SOUTH		İ
NEW YORK NV 10010	1	1

Hoerotte, The oroto		
TOD WILLIAMS BILLIE TSIEN ARCHITECT,	ARCHITECTURAL	
222 CENTRAL PARK SOUTH		
NEW YORK, NY 10019		
NIXON PEABODY LLP,	LEGAL SERVICES	

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

ARCHITECTURAL

		Statement of	Povonuo									Page 9
Part	VIII			recn	onse or note to any	line in t	his Part VIII					П
		Check ii Schedul	e o contains e	<u> </u>	or note to any	((A) revenue	Rel ex fu	(B) ated or kempt nction	U	(C) nrelated pusiness evenue	(D) Revenue excluded from tax under sections
	12	Federated campaig	ns	1a				re	venue			512 - 514
nts nts		• Membership dues	l.	1b	<u> </u>							
irai 10 u		Fundraising events	Į.	1c	<u> </u>							
s, G Am		d Related organization	l.	1d	<u> </u> 							
Sife lar		Government grants (co	ļ.	1a 1e	<u> </u> 							
im:		All other contributions,	´ [те	<u> </u> 							
tior r.S	Ι.	and similar amounts no above		1f	21,888,460							
ib ib	١,	Noncash contribution	ns included		_							
Contributions, Gifts, Grants and Other Similar Amounts		in lines 1a - 1f:\$		2,6	642,195							
<u>ة</u> ك	ا ا	h Total. Add lines 1a-	·1f	•	•		21,888,460					
e					Business	Code						
hen	2a	STUDENT TUITION & FE	ES			611710	, ,	51,803	56,85			
Service Revenue	b	AUX.& SUMMER PROGRA	AMS			611710	8,5	93,852	8,59	3,852		
vice	c			_								
Ser	d			_								
anı	е			_						\dashv		
Program	f	All other program se	rvice revenue		65.4	لــــــــــــــــــــــــــــــــــــ						
•	g	Total. Add lines 2a-2	f		>							
		Investment income (in imilar amounts)			interest, and other		7,738,538	3			-4,588,302	12,326,840
		Income from investme			ond proceeds		(
		Royalties					(
			(i) Real		(ii) Personal							
	6a	Gross rents	5	10,820								
	b	Less: rental expenses		10,020		1						
		5		10.000								
	C	Rental income or (loss)	5	10,820	(ή						
	d	Net rental income o	r (loss)		•		510,820		340,662		170,158	
	_	C	(i) Securit	ies	(ii) Other	-						
	/a	Gross amount from sales of assets other	372,1	65,953								
		than inventory										
	b	Less: cost or other basis and	202.2	02.260		1						
		sales expenses		93,268		1						
		Gain or (loss) Net gain or (loss)		72,685		<u> </u> 	78,872,68	5				78,872,685
		Gross income from fu			•		, ,					, ,
ne		(not including \$contributions reporte	ud on line 1c)	of								
.e⊢		See Part IV, line 18	• • • •	а	0							
Re		Less: direct expense		b	0]						
Other Revenue		Net income or (loss)		-	rents 🕨		(
ρq	9a	Gross income from g See Part IV, line 19		es.								
				а	0							
		Less: direct expense		b	0							
		Net income or (loss)		activit	ties	1	(
	TU	Gross sales of invent returns and allowand										
				а	· · · · · · · · · · · · · · · · · · ·							
		Less: cost of goods s		b			272 70					272 702
	С	Net income or (loss) Miscellaneous		inven	Business Code		273,782	-				273,782
	11	^a APPLICATION FEES	Revenue		611710		150,950		150,950			
							•					
	b	BOOKSTORE COMMI	SSIONS		611710		104,90	5				104,905
		· · ·										
	c	TUITION REFUND IN	SURANCE		611710		45,580		45,580			
								_				
							68,72	5	68,725			
		Total. Add lines 11a			•		370,160					
	12	Total revenue. See	instructions.	• •	· · · •		175,100,100		66,051,572		-4,418,144	91,578,212

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses	aliinana All athan ann		slata asluman (A)	
Section 501(c)(3) and 501(c)(4) organizations must complete all co		nizations must comp	nete column (A).	
Check if Schedule O contains a response or note to any	/ line in this Part IX .	(n)	(C)	<u> ⊔</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0			
2 Grants and other assistance to domestic individuals. See Part IV, line 22	24,564,234	24,564,234		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	848,765	296,167	453,876	98,722
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	654,669	197,801	390,934	65,934
7 Other salaries and wages	43,848,222	37,240,556	2,932,087	3,675,579
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	4,812,020	4,148,576	304,126	359,318
9 Other employee benefits	9,421,899	8,285,838	545,933	590,128
10 Payroll taxes	3,311,300	2,776,734	260,507	274,059
11 Fees for services (non-employees):				
a Management	0			
b Legal	1,363,805	10,205	1,353,600	
c Accounting	319,903		319,903	
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	230,351		230,351	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)	2,097,100	1,720,559	293,748	82,793
12 Advertising and promotion	260,052	254,249	4,413	1,390
13 Office expenses	1,700,036	1,421,843	143,536	134,657

1,647,405

6,421,314

1,671,087

1,022,764

2,739,997

1,107,068

3,597,560

2,033,395

1,270,753

124,239

218,742

129,183,833

0

0 13,897,153

14 Information technology

20 Interest

expenses on Schedule O.)

a STUDENT RELATED EXPENSES

c PLANT RELATED ACTIVITIES

b FOOD/PROVISIONS

d MEMBERSHIP DUES

e All other expenses

18 Payments of travel or entertainment expenses for any

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

Total functional expenses. Add lines 1 through 24e
 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).

federal, state, or local public officials .

22 Depreciation, depletion, and amortization .

19 Conferences, conventions, and meetings

21 Payments to affiliates

15 Royalties .

17 Travel .

16 Occupancy .

23 Insurance .

1,389,606

4,764,471

1,173,631

748,739

2,641,908

13,387,326

660,727

3,584,949

2,033,395

1,224,134

73,020

102,189

112,700,857

181,374

1,604,102

111,894

124,765

69,547

361,479

409,481

12,221

33,054

28,268

94,872

10,264,071

76,425

52,741

385,562

149,260

28,542

148,348

36,860

390

13,565

22,951

21,681 6,218,905

Form 990 (2018)

Page **11**

0

0

0

68,950,963

178.875.778

440,147,966

763,656,420

343,403,385

1,547,207,771

1,726,083,549

Form **990** (2018)

		Check if Schedule O contains a response or not	te to any	/ line in this Part IX			🗆
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			11,210,921	1	16,679,092
	2	Savings and temporary cash investments .		[103,663,644	2	62,772,154
	3	Pledges and grants receivable, net			14,109,513	3	12,853,353
	4	Accounts receivable, net		[665,461	4	190,982
	5	Loans and other receivables from current and for trustees, key employees, and highest compensar Part II of Schedule L	ated em	ployees. Complete	0	5	0
S)	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organizationstrary employees' beneficiary organizations Part II of Schedule L	n 4958(ations of (see ins	c)(3)(B), and section 501(c)(9) tructions) Complete	0		0
ē	7	Notes and loans receivable, net		_	0		0
Assets	8	Inventories for sale or use			316,769		302,344
~	9	Prepaid expenses and deferred charges	. • •		2,590,216	9	2,891,655
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	497,587,396			
	b	Less: accumulated depreciation	10b	172,228,100	326,184,916	10 c	325,359,296
	11	Investments—publicly traded securities .			38,274	11	805,121
	12	Investments—other securities. See Part IV, line	11 .		1,182,871,060	12	1,228,445,689
	13	Investments—program-related. See Part IV, line	e 11 .		0	13	0
	14	Intangible assets		[0	14	0
	15	Other assets. See Part IV, line 11			72,018,157	15	75,783,863
	16	Total assets.Add lines 1 through 15 (must equ	ial line 3	34)	1,713,668,931	16	1,726,083,549
	17	Accounts payable and accrued expenses			8,965,421	17	8,438,912
	18	Grants payable		<u> </u>	0	18	0
	19	Deferred revenue		<u> </u>	21,353,357	19	21,485,903
	20	Tax-exempt bond liabilities			80,000,000	20	80,000,000
(۸	21	Escrow or custodial account liability. Complete F	Part IV o	f Schedule D	0	21	0

0 22

0

0

62,636,554

172.955.332

431.943.329

771,600,621

337,169,649

1,540,713,599

1,713,668,931

23

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25

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31 32

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34

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

persons. Complete Part II of Schedule L .

Complete Part X of Schedule D

Unrestricted net assets

and other liabilities not included on lines 17 - 24).

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958),

Total liabilities. Add lines 17 through 25 .

Net Assets or Fund Balances 27 28 Temporarily restricted net assets 29 Permanently restricted net assets check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds . . . 31 Paid-in or capital surplus, or land, building or equipment fund . . . 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances

Liabilitie

23

24

26

Form 990 (2018)

3a

3h

No

Form 990 (2018)

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 Version:

EIN: 02-0222174

Name: PHILLIPS EXETER ACADEMY

Software ID:

Form 990 (2018)

Form 990, Part III, Line 4a:

SEE SCHEDULE O.

Form 990, Part III, Line 4b: SEE SCHEDULE O.

Form 990, Part III, Line 4c: AUXILIARY ENTERPRISES INCLUDE STUDENT GRILL, FACILITY RENTALS, AND THE CHILDREN'S CENTER WHICH SERVICE THE ACADEMY DURING BOTH SUMMER AND REGULAR SESSIONS.

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

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

	any hours							organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
WOLE C COAXUM VICE PRESIDENT/TRUSTEE	2.0	Х						0	0	0
MARC CHOPIN DE LA BRUYERE TRUSTEE	0.0	Х						0	0	0
WALTER C DONOVAN TRUSTEE	2.0	Х						0	0	0
JOHN A DOWNER	2.0	×						0	0	0

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WALTER C DONOVAN
TRUSTEE
JOHN A DOWNER
PRESIDENT/TRUSTEE

MARK A EDWARDS

NINA D RUSSELL MD

J DOUGLAS SMITH

JENNIFER P HOLLERAN

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

MORGAN C SZE

CIATTA Z BAYSAH

......

..........

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 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,

and Independent Contractors

SERENA WILLE SIDES

......

KRISTYN MCLEOD VAN OSTERN

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

SUZI K COHEN

CLAUDINE GAY

PETER A GEORGESCU

							(11/ 2/1000	(14/ 2/1000	organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations	
DANIEL C OAKLEY TRUSTEE	2.0	Х					0	0	0	
DEIDRE O'BYRNE TRUSTEE	2.0	Х					0	0	0	
SALLY JUTABHA MICHAELS TRUSTEE	2.0	Х					0	0	0	
	2.0									

SALLY JUTABHA MICHAELS	2.0	X			0	0	
TRUSTEE	0.0				7)	
JANNEY E WILSON	2.0	×			0	0	
TRUSTEE	0.0	Λ.				3	
PETER M SCOCIMARA	2.0	_			0	0	

TRUSTEE	0.0						
JANNEY E WILSON	2.0						
		X			0	0	
TRUSTEE	0.0						
PETER M SCOCIMARA	2.0						
		Χ			0	0	
TRUSTEE	0.0						
SEDENA WILLE SIDES	2.0						

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TRUSTEE	0.0						
JANNEY E WILSON	2.0						
		Х			0	0	ĺ
TRUSTEE	0.0						
PETER M SCOCIMARA	2.0						
		Χ			0	0	1
TRUSTEE	0.0						

(A) (B) (C) (D) (E) (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 any hours and a director/trustee) organization organizations from the

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

and Independent Contractors

DAVID W HANSON

HOLLY BARCROFT

GENERAL COUNSEL

MORGAN DUDLEY

DIRECTOR INSTITUTIONAL ADV.

FORMER CFO

	6						<i>'</i>	(14/ 2/1000	(
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)		organization and related organizations
WILLIAM RAWSON	40.0									
PRINCIPAL	0.0	X		×				210,814	0	52,096
MARIJKA BEAUCHESNE CFO	40.0			х				253,007	0	40,451
	0.0									
LISA MACFARLANE	40.0							400 305	0	61.760
FORMER PRINCIPAL	0.0					X		488,285	U	61,760
JUSTIN MERRILL	40.0							224 527		F7.662
				l	1	X	1	321,537	0	57,662

342,104

225,314

244,434

0

0

27,964

60,867

34,732

CFO	0.0					
LISA MACFARLANE	40.0					
				Х	488,285	
FORMER PRINCIPAL	0.0					
JUSTIN MERRILL	40.0					
				х	321,537	
DIRECTOR OF INVESTMENTS	0.0				,	

40.0

0.0 40.0

0.0 40.0

0.0

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efile	e GRA	APHIC pri	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493135021890
SCI	ΗED	ULE A	Public (Charity Statu	e and Dul	olic Supp	ort	OMB No. 1545-0047
	m 990		Complete if the or	ganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) o empt charitable 990 or Form 99	organization or trust. 10-EZ.	r a section	2018
•		the Treasury	► Go to	www.irs.gov/Form	<u>990</u> for the late	st information	•	Open to Public Inspection
Name	e of th	n e organiza TER ACADEMY					Employer identific	ation number
				(1)			02-0222174	
Pa he o			for Public Charity State a private foundation because				see instructions.	
1	. ga <u>-</u>		onvention of churches, or as	•	· '	, ,	(A)(i).	
2	✓	·	escribed in section 170(b)(
3			or a cooperative hospital serv		,	, ,		
4			esearch organization operate	_			•	nter the hospital's
_		name, city,						h
5	Ш	-	ation operated for the benefit (iv). (Complete Part II.)	t of a college or unive	rsity owned or of	perated by a gov	rernmental unit descri	bed in section 1/U
6		A federal, s	tate, or local government or	governmental unit de	escribed in sectio	on 170(b)(1)(<i>A</i>	۱)(v).	
7			ation that normally receives a ' 0(b)(1)(A)(vi). (Complete		s support from a	governmental u	ınit or from the gener	al public described in
8			ty trust described in section		(Complete Part I	I.)		
9			ural research organization de rant college of agriculture. S					ege or university or a
LO		from activition	ation that normally receives: ies related to its exempt fun income and unrelated busin see section 509(a)(2). (Co	ctions—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross
l1		An organiza	ation organized and operated	exclusively to test fo	r public safety. S	See section 509	(a)(4).	
12		more public	ation organized and operated cly supported organizations of through 12d that describes	lescribed in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a	
а		Type I. A so	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B.	ated, supervised, or coppoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
b		manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ation vested in the sar				
C			unctionally integrated. A s					ted with, its
d		Type III n	organization(s) (see instructi on-functionally integrated integrated. The organization s). You must complete Par	d. A supporting organ n generally must satis	ization operated fy a distribution	in connection wi	th its supported organ	1.1
e		Check this	box if the organization receiv	ed a written determir	nation from the I		pe I, Type II, Type II	I functionally
f	Enter		or Type III non-functionally of supported organizations	integrated supporting	-			
g			ring information about the su					
	(i) N	lame of supp 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		
Tota		vork Bode-	tion Act Notice, see the Ir	actructions for	Cat. No. 11285	<u> </u>	 Schedule A (Form 9	

L	Support Schedule for $(b)(1)(A)(ix)$	Organizations	Described in S	ections 170(b))(1)(A)(IV), 17	'U(b)(1)(A)(VI)	, and 170
	(Complete only if you che III. If the organization f						y under Part
	Section A. Public Support	ans to quanty un	ider the tests hs	ted below, pleas	e complete Part	111.)	
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	(or fiscal year beginning in)	(a) 2014	(B) 2013	(6) 2010	(u) 2017	(6) 2010	(1) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")	23,523,287	47,217,066	20,288,108	29,490,880	21,888,460	142,407,801
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 the organization without charge						0
4	Total. Add lines 1 through 3	23,523,287	47,217,066	20,288,108	29,490,880	21,888,460	142,407,801
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the						18,284,992
	amount shown on line 11, column (f)						
	Public support. Subtract line 5 from line 4.						124,122,809
	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c)2016	(d) 2017	(e) 2018	(f) Total
7		23,523,287	47,217,066	20,288,108	29,490,880	21,888,460	142,407,801
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,029,981	4,074,521	5,964,319	7,392,340	8,249,358	31,710,519
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.)	678,826	704,272	689,855	739,553	756,778	3,569,284
11							177,687,604
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	304,873,066
13	First five years. If the Form 990 is for	or the organization	's first, second, th	ird, fourth, or fifth	tax year as a sect	tion 501(c)(3) orga	nization,
	check this box and stop here					▶ 🗆	
S	Section C. Computation of Publi						_
	Public support percentage for 2018 (li					14	69.854 %
	Public support percentage for 2017 Sc					15	72.045 %
16 a	3 33 1/3% support test—2018. If the						
b	and stop here. The organization qual 33 1/3% support test—2017. If the	ne organization did	not check a box o	n line 13 or 16a, a	ınd line 15 is 33 1/	3% or more, check	this
17a	box and stop here. The organization a 10%-facts-and-circumstances tes is 10% or more, and if the organization in Part VI how the organization meets	t— 2018. If the ore	ganization did not s-and-circumstance	check a box on lines" test, check this	e 13, 16a, or 16b, box and stop he	and line 14 re. Explain	. ▶□
Ь	organization	st—2017. If the o zation meets the "i on meets the "fact:	rganization did not facts-and-circumst s-and-circumstanc	ccheck a box on lii cances" test, check es" test. The organ	ne 13, 16a, 16b, o this box and stor nization qualifies a	r 17a, and line • here. s a publicly	
18	supported organization	ion did not check a				and see	▶□

Р	art IIII Support Schedule for	Organization	s Described in	Section 509(a	a)(2)		1 4 9 0		
	(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If								
	the organization fails to	qualify under t	the tests listed l	pelow, please co	mplete Part II.)				
Se	ection A. Public Support						_		
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total		
1	(or fiscal year beginning in) ► 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								
4	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								
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons								
b	Amounts included on lines 2 and 3								
_	received from other than disqualified								
	persons that exceed the greater of								
	\$5,000 or 1% of the amount on line								
_	13 for the year. Add lines 7a and 7b								
8	Public support. (Subtract line 7c								
J	from line 6.)								
Se	ection B. Total Support				•		•		
	Calendar year	(2) 2014	(h) 2015	(a) 2016	(d) 2017	(e) 2018	(f) Total		
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2016	(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. Add lines 10a and 10b.								
С 11	Net income from unrelated business								
	activities not included in line 10b,								
	whether or not the business is								
	regularly carried on.								
12	Other income. Do not include gain or loss from the sale of capital assets								
	(Explain in Part VI.)								
13	Total support. (Add lines 9, 10c,								
	11, and 12.)								
14	First five years. If the Form 990 is for	_			,				
	check this box and stop here						▶ ⊔		
	ection C. Computation of Public S			1 (6)		15			
15									
16	Public support percentage from 2017 S	chedule A, Part II	II, line 15			16			
Se	ction D. Computation of Investr						·		
17	Investment income percentage for 201	. 8 (line 10c, colur	nn (f) divided by	line 13, column (f))	17			
18	Investment income percentage from 20					18			
19a	331/3% support tests—2018. If the	organization did r	ot check the box	on line 14, and lir	ne 15 is more than	33 1/3%, and lir	ne 17 is not		
	more than 33 1/3%, check this box and s	stop here. The or	rganization qualifi	es as a publicly su	ipported organizati	ion	. ▶□		
	33 1/3% support tests—2017. If the								
	not more than 33 1/3%, check this box	and stop here.	The organization o	qualifies as a publ	icly supported orga	anization	. ▶□		
20	Private foundation. If the organization						►□		

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

Section A. All Supporting Organizations Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1

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. Did the organization have any supported organization that does not have an IRS determination of status under section 509

1 (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

3с 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 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

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by 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 5b

organization's organizing document? 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

6 organization's supported organizations? If "Yes," provide detail in Part VI. 6 7

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

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

7 complete Part I of Schedule L (Form 990 or 990-EZ). 8

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.

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 Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings). 10b

Schedule A (Form 990 or 990-EZ) 2018

	leddie A (Point 990 01 990-EZ) 2016		- F	age 3
₽}	Supporting Organizations (continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?	<u> </u>		<u> </u>
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?			
	governing body of a supported organization:	11a		
b	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.	11 c		
S	Section 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 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.	-		ĺ
S	Section 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 supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
_	Section D. All Type III Supporting Organizations		<u> </u>	
	,,,		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		
_	Section E. Type III Functionally-Integrated Supporting Organizations		<u> </u>	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct)	ions):		
_	a The organization satisfied the Activities Test. Complete line 2 below.	00		
	b The organization is the parent of each of its supported organizations. Complete line 3 below.			
	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.		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		
	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		<u> </u>
3	Parent of Supported Organizations. Answer (a) and (b) below.	<u> </u>		<u> </u>
	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? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard.	3h		_

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	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		
7	Check here if the current year is the organization's first as a non-functionally-in instructions)	ntegrate	ed Type III supporting o	rganization (see

Page **6**

Schedule A (Form 990 or 990-EZ) (2018)

b Applied to 2018 distributable amount
c Remainder. Subtract lines 4a and 4b from 4.
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

a Excess from 2014. **b** Excess from 2015. **c** Excess from 2016.

Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines

See instructions.

d Excess from 2017.e Excess from 2018.

3j and 4c.

8 Breakdown of line 7:

Schedule A (Page (Form 990 or 990-EZ) 2018 Page									
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).									
	Facts And Circumstances Test									
990 Sched	lule A, Supplemen	tal Information	<u> </u>							
Return Reference Explanation										
SCHEDULE	A, PART II, LINE 10	OTHER INCOME 2014 2015 2016 2017 2018 TOTAL \$678,826 \$704,272 \$689,855 \$739,553 \$756,778 \$3,569,284								

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

DLN: 93493135021890

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. • Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. • Section 527 organizations: Complete Part I-A only. If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)); Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization **Employer identification number** PHILLIPS EXETER ACADEMY 02-0222174 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No Was a correction made? 4a ☐ Yes ☐ No If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b......... Did the filing organization file Form 1120-POL for this year? ☐ Yes 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 charge is peeded, 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				
6				
For Paperwork Reduction Act Notice, see	the instructions for Form 990 or 990-EZ.	Cat.	No. 50084S Schedule C (Form 990 or 990-EZ) 2018

Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Page 2

A	Check If the filing organization belongs to a expenses, and share of excess lobby		st in Part IV each a	affiliated group m	ember's name, a	address, EIN,
В	Check ▶ ☐ if the filing organization checked box	· ,	provisions apply.			
	Limits on Lobbyir (The term "expenditures" mean	ng Expenditures	,		a) Filing anization's totals	(b) Affiliated group totals
 1a	Total lobbying expenditures to influence public opi	inion (grass roots lobbying	ı)			
b	Total lobbying expenditures to influence a legislati					
c	Total lobbying expenditures (add lines 1a and 1b)					
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add lines 1c a					
f	Lobbying nontaxable amount. Enter the amount fro	om the following table in	both			
	If the amount on line 1e, column (a) or (b) is	s: The lobbying nontax	able amount is:			
	Not over \$500,000					
	Over \$500,000 but not over \$1,000,000	0.				
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	excess over \$1,000,	000.		
	Over \$1,500,000 but not over \$17,000,000	00.				
	Over \$17,000,000					
g	Grassroots nontaxable amount (enter 25% of line	1f)				
h	Subtract line 1g from line 1a. If zero or less, enter	r -0				
i	Subtract line 1f from line 1c. If zero or less, enter	-0				
j	If there is an amount other than zero on either line section 4911 tax for this year?					☐ Yes ☐ No
	(Some organizations that made	Averaging Period Un a section 501(h) ele e the separate instru	ction do not ha	ave to comple		five
	Lobbying Ex	penditures During 4	-Year Averagii	ng Period	T	
	Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					

Fe		anization is exempt under section 501(c)(3) and has NOT finder section 501(h)).	(a	`	(b	
For e		gh 1i below, provide in Part IV a detailed description of the lobbying			•	
CLIV	icy.		Yes	No	Amo	unt
1		nization attempt to influence foreign, national, state or local legislation, public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?			No		
b	Paid staff or management (include	compensation in expenses reported on lines 1c through 1i)?		No		
С	Media advertisements?			No		
d	Mailings to members, legislators, or	the public?		No		
е	Publications, or published or broadd	ast statements?		No		
f	Grants to other organizations for lo	bbying purposes?		No		
g	Direct contact with legislators, their	staffs, government officials, or a legislative body?		No		
h	Rallies, demonstrations, seminars,	conventions, speeches, lectures, or any similar means?		No		
i	Other activities?		Yes			131,075
j	Total. Add lines 1c through 1i					131,075
2a	Did the activities in line 1 cause the	e organization to be not described in section 501(c)(3)?		No		-
b	If "Yes," enter the amount of any ta	ax incurred under section 4912				
С	If "Yes," enter the amount of any ta	ax 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?				
Pai	rt III-A Complete if the orga	anization is exempt under section $501(c)(4)$, section $501(c)$)(5), o	r sectio	n	
	501(c)(6).					
				_	Yes	No
1	, ,	e) dues received nondeductible by members?			L	↓
2	• ,	nouse lobbying expenditures of \$2,000 or less?			2	
3		over lobbying and political expenditures from the prior year?			3	
Pai		anization is exempt under section 501(c)(4), section 501(c) TH Part III-A, lines 1 and 2, are answered "No" OR (b) Part				:)(6)
1		ounts from members	1			
2	Section 162(e) nondeductible lobby expenses for which the section	ing and political expenditures (do not include amounts of political 527(f) tax was paid).				
а	Current year		2a			
b	Carryover from last year		2b			
С			2c			
3		on 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3			
4	the organization agree to carryover	t on line 2c exceeds the amount on line 3, what portion of the excess does to the reasonable estimate of nondeductible lobbying and political				
_		Philada and a dhanna fara in the marking a	4			
5		litical expenditures (see instructions)	5			
P	art IV Supplemental Infor	mation				
		t l-A, line 1; Part l-B, line 4; Part l-C, line 5; Part II-A (affiliated group list); complete this part for any additional information.	Part II-	A, lines 1	and 2 (s	ee
	Return Reference	Explanation				
LOBI	B N O C	CHEDULE C, PART II-B, LINE 11 PHILLIPS EXETER ACADEMY IS A MEMBER (OARDING SCHOOLS, EIGHT SCHOOL ASSOCIATION, AISNE, CSEE, CASE, I ACUBO, NACUFS, NAFSA, ABOPS, CENTER FOR THE STUDY OF BOYS AND (F COMMERCE, NBOA, SCHOOL YEAR ABROAD, NHMEA, NAIS, TABS, NEASO ONSORTIUM, DIGITAL INSURANCE LLC, AND A BETTER CHANCE. THESE OF	SANNE, (GIRLS, EX C, MASTE RGANIZA	COLLEGE XETER AF RY TRAN TIONS M	BOARD, REA CHAN SCRIPT AY USE A	4

SCHEDULE D

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.

OMB No. 1545-0047

DLN: 93493135021890

2018

Inte

(Form 990)

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partment of the Treaternal Revenue Service		► Attach to Form 99 ov/Form990 for the				n to Public spection
lame of the ore				Employer id	entification	number
		and Francis on Other	Cimilan Francis a	02-0222174		
	anizations Maintaining Donor Advi plete if the organization answered "Ye			r Accounts.		
	F	(a) Donor ac		(b)Fund	s and other	accounts
Total number	at end of year					
Aggregate va	lue of contributions to (during year)					
Aggregate va	lue of grants from (during year)					
Aggregate va	lue at end of year					
	nization inform all donors and donor adviso 's property, subject to the organization's ex				_	Yes 🗌 No
charitable pu	nization inform all grantees, donors, and dour poses and not for the benefit of the donor fit?	or donor advisor, or f	or any other purpose o		rmissible	Yes 🗌 No
art III Con	servation Easements. Complete if the	ne organization ansv	vered "Yes" on Forn	n 990, Part I\		
	of conservation easements held by the orga			,		
☐ Preser\	vation of land for public use (e.g., recreation	n or education)	Preservation of an	historically imp	ortant land	area
☐ Protect	ion of natural habitat	·	Preservation of a c	ertified historic	structure	
	vation of open space	_		er unica inicioni	. Strattare	
	• •				- 4 :	
	es 2a through 2d if the organization held and the last day of the tax year.	qualified conservation	contribution in the for		ation at the End o	of the Year
a Total number	r of conservation easements			2a		
b Total acreage	e restricted by conservation easements			2b		
c Number of co	onservation easements on a certified histori	c structure included in	(a)	2c		
	onservation easements included in (c) acqu ed in the National Register	red after 7/25/06, and	l not on a historic	2d		
Number of c tax year ▶	onservation easements modified, transferre	d, released, extinguisl	ned, or terminated by	the organizatio	n during the	
Number of s	tates where property subject to conservation	n easement is located	>			
	ganization have a written policy regarding the ment of the conservation easements it holds			of violations,	☐ Yes	□ No
Staff and yo	lunteer hours devoted to monitoring, inspec	ting handling of viola	tions and enforcing co	ncervation eas		
► Stair and vo	number flours devoted to monitoring, maper	cing, nanding or viola	dons, and emorting co	onservation eas	ements dam	ig the year
Amount of e ▶ \$	xpenses incurred in monitoring, inspecting,	handling of violations,	and enforcing conserv	vation easemer	nts during the	e year
Does each c	onservation easement reported on line 2(d)	above satisfy the requ	uirements of section 1	70(h)(4)(B)(i)		
and section	170(h)(4)(B)(ii)?				☐ Yes	□ No
balance shee	describe how the organization reports cons et, and include, if applicable, the text of the tion's accounting for conservation easemen	footnote to the organ				
art IIII Orga	anizations Maintaining Collections	of Art, Historical		er Similar A	ssets.	
	plete if the organization answered "Ye		•			
art, historica	zation elected, as permitted under SFAS 11 Il treasures, or other similar assets held for art XIII, the text of the footnote to its finar	public exhibition, educ	ation, or research in f			
historical tre	zation elected, as permitted under SFAS 11 asures, or other similar assets held for pub ounts relating to these items:					
-	cluded on Form 990, Part VIII, line 1			> \$		
	ded in Form 990, Part X					
If the organi	zation received or held works of art, histori	cal treasures, or other	similar assets for final	_	ide the	
_	luded on Form 990, Part VIII, line 1	, ,		• •		
	ded in Ferre 000 Pert V					

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 52283D Schedule D (Form 990) 2018

Par	t IIII	Organizations Ma	aintaining Coll	ections of Art, I	Histor	ical Tı	reas	ures, o	r Other	Similar As	sets (continuec	d)
3		the organization's acqu (check all that apply):	uisition, accession	, and other records	, check	any of	the fo	ollowing t	hat are a	significant u	se of its	s collectio	on
а	✓	Public exhibition			d		Loar	or exch	ange prog	rams			
b	✓	Scholarly research			е		Othe	er					
С	✓	Preservation for future	generations										
4	Provid Part >	de a description of the o	organization's coll	ections and explain	how th	ey furtl	her th	e organiz	zation's ex	empt purpos	se in		
5		g the year, did the orga s to be sold to raise fun									☐ Ye	es 🗸	No
Pai	rt IV	Escrow and Custo Complete if the org X, line 21.			rm 990), Part	IV, I	ine 9, o	r reporte	d an amou	nt on F	orm 99	0, Part
1a		e organization an agent, ded on Form 990, Part X									☐ Ye	es 🗌	No
b	If "Y∈	es," explain the arrange	ment in Part XIII	and complete the fo	ollowing	table:				Ar	mount		
c	Begin	ning balance							1c				
d	Addit	ions during the year . .							1d				
е	Distri	butions during the year	·						1e				
f	Endin	ig balance							1f				
2a	Did th	ne organization include	an amount on For	m 990, Part X, line	21, for	escrow	v or c	ustodial a	ccount lia	bility?	□ Y∈	s 🗆	No
b	If "Ye	es," explain the arranger	ment in Part XIII.	Check here if the e	explanat	ion has	s beer	n provide	d in Part)	KIII			
Pa	rt V	Endowment Fund											
			·	(a)Current year		Prior yea			ears back			(e)Four y	ears back
1 a	Beginn	ing of year balance .	[1,314,997,478	1,	,240,384	1,295	1,13	34,211,292	1,211,8	380,961	1,22	22,713,625
b	Contrib	outions		10,232,665		8,983	3,054	:	14,225,801	2,8	317,644		1,724,889
С	Net inv	estment earnings, gain	s, and losses	49,567,791		122,393	3,634	14	18,329,692	-26,4	194,761	;	38,851,062
d	Grants	or scholarships	. [19,877,838		19,682	2,779	:	19,256,064	9,256,064 18,47			17,789,300
е		expenditures for facilitie ograms	es	39,305,124		36,861	1,225	3	36,778,424	35,1	169,985	;	33,288,082
f	Admini	strative expenses .	[340,272		219	9,501		348,002	3	344,847	331,233	
g	End of	year balance		1,315,274,700	1,	,314,997	7,478	1,24	10,384,295	1,134,2	211,292	1,2	11,880,961
2	Provid	de the estimated percer	ntage of the curre	nt vear end balance	e (line 1	a. colu	mn (a	a)) held a	s:				_
а		d designated or quasi-er		, 16.000 %		3,		.,,					
b	Perm	anent endowment >	26.000 %										
_		orarily restricted endow		00 %									
٠		ercentages on lines 2a,	***************************************										
3a		here endowment funds			tion tha	t are h	eld ar	nd admin	istered foi	r the			
	organ	nization by:									_	Ye	
	(i) ur	nrelated organizations			•						_	a(i) Ye	
		elated organizations .				 						a(ii)	No
ь 4		es" on 3a(ii), are the rela ribe in Part XIII the inte	-	•			.f •				<u></u>	3b	
	rt VI	Land, Buildings,			WITHERIC	Turius.							
. (:1	G VI	Complete if the org			rm 990), Part	IV, I	ine 11a	. See For	m 990, Par	rt X, lir	ne 10.	
	Descri	ption of property	(a) Cost or othe (investmen	er basis (b) Cost	t or othe	•				epreciation		(d) Book v	alue
	Land					4,33	31,270	1					4,331,270
		gs				464,35		+		155,693,452		:	308,658,026
		old improvements		<u> </u>		,50	,	1	<u> </u>	,,			, ,
		nent				21.31	12,370			16,534,648			4,777,722
	Other	F		<u> </u>			92,278			-,,-			7,592,278
		ines 1a through 1e.(Co	lumn (d) must eq	ual Form 990, Part	X, colu	•				•			325,359,296

Part VII Investments—Other Securities. Complete if the Complete if the Complete if the Complete in the Complet	he organization answ	vered "Yes" on Form 9	90, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b) Book value		od of valuation: of-year market value
(1) Financial derivatives		cost of end-c	or-year market value
(2) Closely-held equity interests			
(3) Other(A) PUBLIC EQUITIES	428,488,505		F
(B) ABSOLUTE RETURN & LONG /SHORT	564,389,264		F
(C) PRIVATE EQUITY & REAL ESTATE	230,279,290		F
(D) OTHER	5,288,630		F
(E)			
(F) (G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments—Program Related. ▶	1,228,445,689		
Complete if the organization answered 'Yes' on			
(a) Description of investment	(b) Book value		od of valuation: of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)	•		
Part IX Other Assets. Complete if the organization answered (a) Description		rt IV, line 11d. See Form	990, Part X, line 15. (b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)			. •
Part X Other Liabilities. Complete if the organization a See Form 990, Part X, line 25.	answered 'Yes' on Fo	rm 990, Part IV, line 1	1e or 11f.
1. (a) Description of liability	(b) Bo	ook value	
(1) Federal income taxes		0	
ANNUITIES & DEFERRED GIVING AR ASSET RETIREMENT OBLIGATION		33,311,345 3,177,228	
BOND INTEREST RATE SWAP		17,749,910	
STUDENT ORGANIZATION FUNDS		184,728	
PENSION & OTHR EMPLYMNT RLTD		14,397,563	
STUDENT INSURANCE PAYABLE (7)		130,189	
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	<u> </u>	68,950,963	
2. Liability for uncertain tax positions. In Part XIII, provide the text of	*		· —
organization's liability for uncertain tax positions under FIN 48 (ASC	740). Check here if the	text of the footnote has b	peen provided in Part XIII 🗹

Net unrealized gains (losses) on investments

Other (Describe in Part XIII.)

Donated services and use of facilities . . .

Prior year adjustments

Other (Describe in Part XIII.)

Subtract line 2e from line 1

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

Add lines 2a through 2d . .

Donated services and use of facilities

Schedule D (Form 990) 2018

b

d

е

Part XII

3

1

2

C

d

3

4

1

2e

3

4c

5

-35,940,398

1,220,899

Page 4

-34,719,499

173,728,066

1,372,034

6,293,366

126,221,027

175,100,100

4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	, ,	4a			1,372,034
b	Other (Describe in Part XIII.)	4b	,		
c	Add lines 4a and 4b				
5	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 and losses per audited financial statements

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

> Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. 1 132,514,393

Amounts included on line 1 but not on Form 990, Part IX, line 25: 2d

2a

2b

2c

2d

2a 2b

2c

6,293,366 2e 3 4c 5

	Page 5
Information (continued)	
Explanation	

Schedule D (Form 990) 2018

Additional Data

Name: PHILLIPS EXETER ACADEMY

Software ID: Software Version:

EIN: 02-0222174

NCEPTION, ARE NOT RECOGNIZED AS ASSETS IN THE STATEMENT OF FINANCIAL POSITION.

Supplemental Information

Return Reference

SCHEDULE D - SUPPLEMENTAL

INFORMATION

COLLECTIONS, WHICH WERE ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS SINCE THE ACADEMY'S

Explanation FORM 990, SCHEDULE D, PART III, LINE 1A THE ACADEMY'S COLLECTIONS INCLUDE WORKS OF ART, LI TERARY WORKS, HISTORICAL TREASURES, AND ARTIFACTS. THESE COLLECTIONS ARE PROTECTED AND PRE SERVED FOR PUBLIC EXHIBITION, EDUCATION, RESEARCH, AND FURTHERANCE OF PUBLIC SERVICE. THE

Supplemental Information	
Return Reference	Explanation
	THE ACADEMY HAS BOOKS, PAINTINGS AND OTHER ITEMS WITH HISTORICAL SIGNIFICANCE THAT ARE HELD FOR STUDY AND OBSERVATION BY OUR STUDENTS AND FACULTY. THESE OBJECTS ARE PRESERVED SO THAT THEY MAY PROVIDE EDUCATIONAL EXPERIENCE TO FUTURE GENERATIONS OF STUDENTS AND ADULTS IN THE CAMPUS COMMUNITY.

Supplemental Information	
Return Reference	Explanation
FORM 990, SCHEDULE D, PART V, LINE 4	PHILLIPS EXETER ACADEMY'S ENDOWED FUNDS ARE INVESTED INTO PERPETUITY AND THE INCOME IS USE D TO FUND ACADEMY PROGRAMS. THE FUNDS ARE INVESTED FOR LONG TERM GROWTH SO THAT CURRENT AN D FUTURE GENERATIONS OF STUDENTS WILL RECEIVE BENEFIT FROM THE FUNDS.

Supplemental Information	
Return Reference	Explanation
- FIN 48	THE ACADEMY IS A TAX-EXEMPT ORGANIZATION ACCORDING TO THE INTERNAL REVENUE CODE SECTION 50 1(C)(3). HOWEVER, THE ACADEMY IS SUBJECT TO FEDERAL INCOME TAXES ON UNRELATED BUSINESS INC OME RELATED TO CERTAIN INVESTMENTS. AS OF JUNE 30, 2019 & 2018, THE ACADEMY DID NOT HAVE A NY UNCERTAIN TAX POSITIONS.

Cupplemental Information

Return Reference	Explanation					
XI, LINE 2D	AMOUNTS INCLUDED ON LINE 1, BUT NOT FORM 990, PART VIII, LINE 12 OTHER: COS NETTED AGAINST GROSS REVENUE 378,091 ASSET RETIREMENT OBLIGATION ADJUSTMENT (46,477) CHANGE IN VALUE OF FUNDS FOR DEFERRED GIVING 1,241,343 SUMMER FIN AID NETTED AGAINST TUITION (1,590,772) PV A DIVISTMENTS FOR PHASED RET DI AN 435 000 OTHER RECLASSIFICATIONS 335 556 OTHER COMPONENTS NE					

TOTAL 1,220,899

T PERIODIC PENSION COST 468,058

Supplemental Information

Supplemental Information	
Return Reference	Explanation
XII, LINE 2D	AMOUNTS INCLUDED ON LINE 1, BUT NOT ON FORM 990, PART IX, LINE 25 OTHER COMPONENTS OF NET PERIODIC PENSION COST 653,407 INTEREST RATE SWAP ADJUSTMENT 5,261,436 COST OF SALES FOR AU X ENT 378,091 STUDENT LOAN REVENUE (REPORTED ON PART IX 990) 432 TOTAL 6,293,3 66

Supplemental Information	
Return Reference	Explanation
FORM 990, SCHEDULE D, PART XII, LINE 4B	AMOUNTS INCLUDED ON PART IX, LINE 25, BUT NOT ON LINE 1 OTHER: SUMMER FINANCIAL AID NETTED AGAINST TUITION 1,590,772 TOTAL 1,590,772

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135021890 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 instructions. Inspection Department of the Treasury Namel Retherosganization **Employer identification number** PHILLIPS EXETER ACADEMY 02-0222174 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 **d** Copies of all material used by the organization or on its behalf to solicit contributions? 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 Νo 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) (2018)

Schedule E (Form 990 or 990EZ) (2018) Page					
Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information (see instructions).					
Return Reference	Explanation				
RACIALLY NONDISCRIMINATORY POLICY	SCHEDULE E, PART I, LINE 3 THE POLICY IS EXPLAINED TO ALL CANDIDATES UPON APPLYING TO THE ACADEMY AND TO GUIDANCE COUNSELORS OF SCHOOLS THROUGHOUT THE COUNTRY AND FOREIGN				

CANDIDATES UPON APPLYING TO THE ACADEMY AND TO GUIDANCE
COUNSELORS OF SCHOOLS THROUGHOUT THE COUNTRY AND FOREIGN
COUNTRIES BY MEANS OF THE ACADEMY APPLICATION FORM AND
WEBSITE.

Schedule F (Form 990 or 990-F7) (2018)

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135021890 OMB No. 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2018 ▶ 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 **Employer identification number** Name of the organization PHILLIPS EXETER ACADEMY 02-0222174 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and 1 other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance 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 (d) Activities conducted in (e) If activity listed in (d) is a (c) Number of (f) Total expenditures offices in the region (by type) (e.g., program service, describe for and investments employees, agents, region and independent fundraising, program specific type of in region contractors in services, investments, grants service(s) in region to recipients located in the region region) See Add'l Data 10 1,050,421 3a Sub-total . 390,107,668 b Total from continuation sheets to Part I . c Totals (add lines 3a and 3b) n 10 391,158,089

chedule F (Form 990) 2018							Page 3
				ed States. Complete if	f the organization ar	nswered "Yes" to Form S	990, Part IV, line 16.
a) Type of grant or assistance	duplicated if addit (b) Region	(c) Number of recipients	eeded. (d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Sched	dule F (Form 990) 2018		Page 4
Par	Toreign 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
_		⊡ ≀es	110
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

Part V	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).
990 S ched	ule F, Supplemental Information
Retur Referer	

 \mid END THE EXPENSES ARE MANUALLY AGGREGATED BY REGION, ACTIVITY AND TYPE OF SERVICE.

Additional Data

East Asia and the Pacific

Software ID: Software Version:

EIN: 02-0222174

Name: PHILLIPS EXETER ACADEMY

STUDY PROGRAM

17,087

Form 990 Schedule F Pari	t 1 - Activities	Outside The C	Inited 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)	0	10	Program Services	STUDY PROGRAM	646,303

Program Services

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 FACULTY DEVELOPMENT 10,490 IProgram Services East Asia and the Pacific Investments 15,184

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 15,365 IInvestments Greenland) Central America and the Program Services STUDY PROGRAM 74,863 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) Program Services STUDY PROGRAM 4.245 Russia and the Newly Independent States South Asia 1,788 Program Services ISTUDY PROGRAM

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) Sub-Saharan Africa STUDY PROGRAM 8,662 Program Services East Asia and the Pacific Program Services FACULTY DEVELOPMENT 23,800

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 FACULTY DEVELOPMENT 21.541 Greenland) FACULTY DEVELOPMENT 1,026 South America Program Services

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 Asia FACULTY DEVELOPMENT 346 Program Services Sub-Saharan Africa Program Services FACULTY DEVELOPMENT 6,859

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 2,439 East Asia and the Pacific Fundraising 96,348

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) Europe (Including Iceland and Fundraising 104,075 Greenland) Fundraising 17,327 South America

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) South Asia Fundraising 16,869 North America Program Services ADMISSIONS 2,825 RECRUITMENT

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) Fast Asia and the Pacific Program Services ADMISSIONS 35,137 IRECRUITMENT Europe (Including Iceland and Program Services ADMISSIONS 11,538 Greenland) IRECRUITMENT

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) South America Program Services ADMISSIONS 6,626 IRECRUITMENT Central America and the 350,326,045 Investments 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 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) Europe (Including Iceland and 33,439,243 Investments Greenland) North America 6,252,058 Investments

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 I

(Form 990)

Department of the

Treasury

nis document, please select landscape mode (11" x 8.5") when printing.

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

lacktriangle Go to $\underline{www.irs.gov/Form990}$ for the latest information.

OMB No. 1545-0047

2018

DLN: 93493135021890

Open to Public Inspection

Internal Revenue Service							
Name of the organization PHILLIPS EXETER ACADEMY	Employer identific	ation number					
David Company Linform		and Assistance				02-0222174	
			FIG. 1	ALCONOMICS OF STREET	£		
Does the organization ma the selection criteria used					for the grants or assistance	e, and	☑ Yes ☐ No
2 Describe in Part IV the org							
Part II Grants and Other	Assistance to Don	nestic Organizations a	and Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes"	on Form 990, Part IV, line	21, for any recipient
(a) Name and address of organization or government	(b) EIN	(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 of noncash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
		-					
For Paperwork Reduction Act Noti			<u> </u>	Cat. No. 5005			nedule I (Form 990) 2018

Page **2**

Schedule I (Form 990) 2018

Tuition Food/Assista

(1) REGULAR SESSION SCHOLARSHIP	793		21,373,300	11110	Taltion Tees/Assista
(2) REGULAR SESSION OTHER AID	493	69,998	1,326,509	FMV	OTHER FIN. ASSIST.
(3) SUMMER PROGRAM SCHOLARSHIPS	230		1,590,767	FMV	Tuition Fees/Assista
(4) SUMMER PROGRAM - OTHER AID	24		1,380	FMV	Other Financial Assi
(4)					

MAINTAINS EXTENSIVE RECORDS TO JUSTIFY BOTH AWARDS AND THE FINANCIAL NEED ELIGIBILITY OF THE RECIPIENTS.

21 575 580 FMV

SCHEDULE I. PART I. LINE 2 SCHOLARSHIPS AND MOST FINANCIAL ASSISTANCE CREDITS ARE NON CASH AND ARE APPLIED DIRECTLY TO STUDENT ACCOUNTS AT ITHE ACADEMY. ON OCCASION FINANCIAL AID STUDENTS ARE REIMBURSED FOR NECESSARY EXPENSES SUCH AS TRANSPORTATION OR THE COST OF COMPUTER EQUIPMENT. DOCUMENTATION EVIDENCING PAYMENT BY THE STUDENT IS REQUIRED BEFORE DISBURSEMENT OF CASH AID IS MADE. PHILLIPS EXETER ACADEMY

(5) (6)

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

493

(7)

Part IV

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

Return Reference

MONITORING GRANT FUNDS

Schedule I (Form 990) 2018

(1) REGULAR SESSION SCHOLARSHIP

Part III

efil	le GRAPHIC p	rint - DO NOT PROCESS	As Filed Data	a - DLN: 934	9313	35021	890
Schedule J (Form 990)		Co	ion Information ○ [™]	OMB No. 1545-00			
			rustees, Key Employees, and Highest steed Employees rered "Yes" on Form 990, Part IV, line 23. to Form 990.	2018			
•	tment of the Treasur al Revenue Service	y ► Go to <u>www.irs.go</u>				to Pul ectio	
Nar	me of the organi			Employer identificat			
PHII	LLIPS EXETER ACAI	JEMY		02-0222174			
Pa	rt I Quest	ions Regarding Compensa	tion	•			
						Yes	No
1a				the following to or for a person listed on Form y relevant information regarding these items.			
	First-clas	s or charter travel	lacksquare	Housing allowance or residence for personal use			
	_	r companions		Payments for business use of personal residence			
		nnification and gross-up payments		Health or social club dues or initiation fees			
	☐ Discretio	nary spending account	\checkmark	Personal services (e.g., maid, chauffeur, chef)			
b		oxes in line 1a are checked, did the all of the expenses described abo		ollow a written policy regarding payment or reimbursement plete Part III to explain	1 b	Yes	
2			or allowing expenses incurred by all	2	Yes		
	directors, trust	ees, officers, including the CEO/E	r, regarding the items checked in line 1a?				
3				d to establish the compensation of the			
		CEO/Executive Director. Check all		not check any boxes for methods CEO/Executive Director, but explain in Part III.			
		ed organization to establish comp	Delisation of the C	cco/executive birector, but explain in Fait III.			
		sation committee		Written employment contract			
		dent compensation consultant	$oldsymbol{ olimits}$	Compensation survey or study			
	✓ Form 99	O of other organizations	✓	Approval by the board or compensation committee			
4	During the yea related organiz		990, Part VII, Se	ction A, line 1a, with respect to the filing organization or a			
а	Receive a seve	rance payment or change-of-cont	rol payment? .		4a	Yes	
b		or receive payment from, a suppl			4b		No
c							No
	If "Yes" to any	of lines 4a-c, list the persons and	l provide the app	licable amounts for each item in Part III.			
_	, ,,,	3), 501(c)(4), and 501(c)(29)	•	•			
5		contingent on the revenues of:		the organization pay or accrue any			
a	-	on?			5a		No
b		panization? e 5a or 5b, describe in Part III.			5b		No
6		ted on Form 990, Part VII, Sectio contingent on the net earnings of		the organization pay or accrue any			
а	The organization	on?			6a		No
b					6b		No
	•	e 6a or 6b, describe in Part III.					
7				the organization provide any nonfixed rt III	7		No
8	subject to the	nitial contract exception describe	d in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," describe 	•	V	
9	If "Yes" on line	8, did the organization also follo	w the rebuttable	presumption procedure described in Regulations section	9	Yes Yes	
For F	Paperwork Red	uction Act Notice, see the Ins	tructions for Fo	orm 990. Cat. No. 50053T Schedule J			2018

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

(A) Name and Title		(B) Breakdowr	of W-2 and/or 1099-MISC	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	column (B) reporte as deferred on prio Form 990
L LISA MACFARLANE FORMER PRINCIPAL	(i)	208,753		279,532	29,272	32,488	550,045	0
	(ii)							
2 JUSTIN MERRILL DIRECTOR OF INVESTMENTS	(i)	321,477		60	31,056	26,606	379,199	0
	(ii)							
DAVID W HANSON ORMER CFO	(i)	160,785		181,319	21,750	6,214	370,068	0
	(ii)							
HOLLY BARCROFT GENERAL COUNSEL	(i)	225,044		270	26,705	34,162	286,181	0
	(ii)							
MORGAN DUDLEY DIRECTOR INSTITUTIONAL ADV.	(i)	244,176		258 	29,361	5,371 	279,166	0
T. MATHETANA DAMICON	(ii)	200 207						
WILLIAM RAWSON PRINCIPAL	(i)	209,337		1,477	25,200	26,896 	262,910	0
MARIJKA BEAUCHESNE	(ii)	252,953			20.656	44.705	202.450	
CFO	(i) (ii)			54 	28,656	11,795	293,458	0
	(,							
							-	

Page								
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							

Schodule 1 (Form 990) 2018

THE YEAR FOR ACADEMY RELATED EVENTS. A HOUSEKEEPING SERVICE CLEANS THE RESIDENCE. THE SERVICE IS ALLOCATED BETWEEN THE PUBLIC AND

PRIVATE SPACES. CLEANING OF THE PRIVATE RESIDENCE IS INCLUDED IN THE PRINCIPAL'S TAXABLE COMPENSATON.

Return Reference	Explanation
,	THE FORMER PRINCIPAL AND FORMER CFO RECEIVED SEPARATION PAYMENTS WITHIN 9 AND 12 MONTHS, RESPECTIVELY, OF THE END OF THEIR EMPLOYMENT. THESE PAYMENTS INCLUDED ON SCHEDULE J, PART II, COLUMN B (III) WERE MADE IN FULFILLMENT OF THE ACADEMY'S CONTRACTUAL OBLIGATIONS.

Return Reference	Explanation						
	LISA MACFARLANE AND WILLIAM RAWSON - NONTAXABLE BENEFITS INCLUDE THE VALUE OF ON-CAMPUS HOUSING PROVIDED FOR THE CONVENIENCE OF THE EMPLOYER. FOR CALENDAR YEAR 2018, MORGAN DUDLEY HAD A MEMBERSHIP TO A UNIVERSITY CLUB IN CONNECTION WITH THE ORGANIZATION'S BUSINESS PURPOSES AND INSTITUTIONAL ADVANCEMENT.						

Return Reference	Explanation
	THE ACADEMY ENTERED INTO A CONTRACT WITH NEW PRINCIPAL WILLIAM RAWSON EFFECTIVE 7/1/2018 THAT QUALIFIES FOR THE INITIAL CONTRACT EXCEPTION UNDER TREASURY REGULATION SECTION 53.4958-4(A)(3).

I (Form 990) 2018

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	ote: To capture the full con	tent of this docum	ent, please sele	ct landscape mode	(11" x 8.	5") wh	ien p	rinting.						_	
	chedule K	Sui	nnlemental I	Information o	on Tax-Exempt Bonds					OMB No. 1545-0047					
Complete if the organization answered "Yes" to Form					•					2018					
				, and any additional		in Part	t VI.								
	partment of the Treasury ernal Revenue Service	► Attach to Form 990 irs.gov/Form990 for	90. or the latest information.						Open to Public Inspection						
	ne of the organization ILLIPS EXETER ACADEMY									Emplo	Employer identification number				
	LEEFS EXETER ACADEMI									02-02	22174				
P	art I Bond Issues	1	T				_			1					
	(a) Issuer name	(b) Issuer EIN (c) CUSIP # (d		(d) Date issued	(e) Issue price		(f) Description of purpose			(g) De	efeased	(h) On behalf of	1	(i) Pool financing	
_	NULLIEALTH & EDUCATION	03.0370066	644644672	04.04.2046		00.000	CEE D	ADT \/T		Yes	No	Yes No	_	No	
А	NH HEALTH & EDUCATION FACILITIES AUTHORITY	02-0279866	644614SZ3	04-01-2016	80,0	00,000	SEEP	SEE PART VI			X	X		X	
P	art II Proceeds														
						4		E		C			D		
1	Amount of bonds retired						0	0							
2	Amount of bonds legally defea						0								
3						80,130,819									
4	·					0									
5						0									
6	-					0									
<u>7</u>	· · · · · · · · · · · · · · · · · · ·					490,448									
8	Credit enhancement from pro-				0										
9	Working capital expenditures	•			0										
10					29,640,371										
11					50,000,000										
12					0		0								
13	Year of substantial completion				2018										
_					Yes	No	<u> </u>	Yes	No	Yes	No	Ye	5	No	
14					X										
15						Х							$-\!$		
16	6 Has the final allocation of proceeds been made?			Х											
17	Does the organization maintai				X										
P	art Ⅲ Private Business l	Jse													
					A B			<u> </u>			D	-ī			
1	Was the organization a partne financed by tax-exempt bonds				Yes	No X		Yes	No	Yes	No	Ye	5	No	
2		ents that may result in	private business use	e of bond-financed		Х									
For	For Paperwork Reduction Act Notice, see the Instructions for Form 990.				Cal	. No. 50	1193F			-	S	chedule K (Form 99	0) 2018	

b

C

d

6

8a

Part IV

b

C

Arbitrage

Page **2**

D

D

Schedule K (Form 990) 2018

No

Yes

Yes

В

No

Yes

Α

Nο

Χ

Χ

0 %

0.338 %

0.338 %

Χ

Χ

Χ

Yes

В

No

Yes

Χ

Νo

Χ

3425 %

Χ

Χ

Α

Yes

Х

Χ

Х

BNY MELLON

C

No

Yes

C

No

Yes

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

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

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

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

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

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 nonqualified bonds of

Exception to rebate?

Was the hedge terminated?

hedge with respect to the bond issue?

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

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

Schedule K (Form 990) 2018

(GIC)?

period?

Part V

Part VI

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

SCHEDULE K, PART I, LINE A, COLUMN

,		1
	Yes	No

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

BOND PURPOSE: CAPITAL CONSTRUCTION AND REFUNDING OF 2007 BOND

В

No

Explanation

No

Yes

Yes

No

No

Yes

Nο

Yes

Yes

Χ

Χ

Page 3

No

D

D

Nο

Yes

Yes

Return Reference		Explanation	
SCHEDULE K, PART II, LINE 3	INCLUDES INTEREST EARNED OF \$130,819		

SC

DLN: 93493135021890 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2018 ▶ 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** PHILLIPS EXETER ACADEMY 02-0222174 **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 1 Art—Works of art . . Art—Historical treasures Art—Fractional interests Books and publications Clothing and household goods Cars and other vehicles Boats and planes . . Intellectual property . . Securities-Publicly traded . 2,642,195 FMV 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . 13 Oualified conservation contribution-Historic structures . . . Qualified conservation contribution—Other . Real estate—Residential Real estate—Commercial . 17 Real estate-Other . . Collectibles 18 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . . . 23 Scientific specimens . 24 Archeological artifacts . . Other ▶ (Χ 0 N/A MUSICAL INSTRUMENT) 26 Other ▶ (Χ ON/A DONOR RECEPTION) 27 Other ▶ (_ 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a No **b** If "Yes," describe the arrangement in Part II. 31 31 Yes Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 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 did not report an amount in column (c) for a type of property for which column (a) is checked, For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J Schedule M (Form 990) (2018)

efile GRAPHIC print - DO NOT PROCESS			As Filed Data -		DLN:	93493135021890				
SCHEDULE O (Form 990 or 990- EZ) Supplement Complete to p			vide information fo r 990-EZ or to prov ▶ Attach to Forn	on to Form 990 or 9 r responses to specific questi ide any additional information n 990 or 990-EZ. 90 for the latest information.	ions on on.	OMB No. 1545-0047 2018 Open to Public Inspection				
Namel Betherofg PHILLIPS EXETER A 990 Schedule	ACADEMY	mental Informatio	n		Employer identi 02-0222174	fication number				
Return Reference	Explanation									
MISSION STATEMENT	CONTINUES THAN 1,000 DAY STUDE CURIOSITY THOUGHTF HEALTH, AN KINDNESS. OTHERS, TI VALUE THE AT EXETER INDIVIDUAL AND INDEP OTHERS AN	S THE COMMITMENT I STUDENTS APPROXI ENTS, THE SCHOOL SI , AND TENACITY WITH UL DISCOURSE FOST ND THE DAILY INTERA BECAUSE LEARNING HE RICHNESS OF EDU DIFFERENCES THEY AND THE SUPPORT I S AND AS MEMBERS ENDENCE OF THOUG	TO UNITE GOODNES MATELY 80 PERCENCERS YOUNG PEOPLI DECENCY AND GOER THE LIFE OF THIS CATIONS OF A RESIDENT OF SOCIETY. EXETE HT SUSTAIN THEIR ON THEM SURPASS	IPS EXETER ACADEMY, AN INS AND KNOWLEDGE. WITH A STAND KNOWLEDGE. WITH A LIT OF WHOM ARE BOARDERS LE WHO COMBINE PROVEN A LIT OF WHOM COMBINE PROVEN A LIT OF WHOM COMBINE PROVEN AND A LIT OF WHOM COMBINE PROVEN AND A LIT OF WHOM COMBINE PROVERS TO SER SEEKS TO GRADUATE YOU CONTINUING INQUIRY AND RESE THEIR SELF-CONCERN, A LIT OF WHOM COMBINE PROVERS AND A LIT OF WHOM COMBINE WHOM COMBINE PROVERS AND A LIT OF WHOM COMBINE WHOM COMB	TOTAL ENROLLM AND 20 PERCEN CADEMIC ABILIT ADEMY, EXACTIN CTIVITY PROMOT NTEGRITY, EMPA IDIVIDUAL'S ENGA ISIONS. STUDENT CHALLENGES THA STIMULATE THEIF JNG PEOPLE WH EFLECTION, WHO	MENT OF MORE IT OF WHOM ARE Y, INTELLECTUAL G INQUIRY AND TE FITNESS AND THY, AND AGEMENT WITH TS AND FACULTY AT STUDENTS MEET R DEVELOPMENT AS OSE CREATIVITY DSE INTEREST IN				

	+
Return Reference	Explanation
PROGRAM SERVICE ACCOMPLISHMENTS	FORM 990, PART III, LINE 4A PHILLIP EXETER ACADEMY'S PRIMARY PROGRAM SERVICE IS THE EDUCAT ION OF STUDENTS IN GRADES 9 THROUGH 12 IN A FULLY RESIDENTIAL BOARDING SCHOOL ENVIRONMENT. ENROLLMENT FOR 2018-2019 WAS 1,096. THE FOUNDATION OF EXETER'S REGULAR SESSION CURRICULUM CONTINUES TO BE THE TEACHING METHOD MADE POSSIBLE IN 1931 BY THE GENEROSITY OF EDWARD HAR KNESS: DISCUSSION IN SMALL CLASSES MEETING AROUND SEMINAR TABLES WHERE MAXIMUM STUDENT INVO LOVEMENT AND INTERCHANGE ARE BOTH ENCOURAGED AND REQUIRED. SINCE 1931, THIS PROCESS HAS CONTINUED WHILE THE CONTENT OF THE CURRICULUM HAS UNDERGONE SEVERAL REVISIONS AS EXETER HAS SOUGHT TO BLEND ITS RESPECT FOR TRADITION WITH ITS COMMITMENT TO EDUCATE YOUNG PEOPLE FOR A RAPIDLY CHANGING WORLD. THE CURRENT CURRICULUM IS BASED ON TWO FUNDAMENTAL ASSUMPTIONS A BOUT AN EXETER EDUCATION, FIRST, DUE TO INCREASING SPECIALIZATION AT THE COLLEGE LEVEL, EX ETER VIEWS ITS CHARGE AS PROVIDING STUDENTS WITH A BROAD, LIBERAL ARTS PROGRAM. SECOND, THE ACADEMY BELIEVES THE PROCESS OF EDUCATION IS AS IMPORTANT AS ITS CONTENT. FACULTY EMPHAS IZE NOT MERELY WHAT THEY WANT STUDENTS TO KNOW, BUT ALSO WHAT SORTS OF INDIVIDUALS THEY WAN AT THEM TO BECOME; YOUNG PEOPLE WHOSE PASSION FOR LEARNING EXCEEDS WHAT THEY ALREADY KNOW AND WHOSE INTEREST IN OTHERS AND IN THE WORLD SURPASSES THEIR SELF-CONCERN. EXETER'S SCHOOL YEAR CONSISTS OF THREE TERMS, WHICH ALLOWS EXPANDED ELECTIVE CHOICES ACROSS A RANGE OF DISCIPLINES TO BE COMBINED WITH A FOCUS ON DEPTH OF STUDY IN ADVANCED COURSES IN EACH DEPAR TMENT. STUDENTS NORMALLY ENROLL IN FIVE COURSES AND PARTICIPATE IN A SPORT EACH TERM. FORM 990, PART III, LINE 4B PHILLIPS EXETER ACADEMY'S SUMMER SESSION: EVERY JULY, EXETER SUMMER, WHICH HAS BEEN IN OPERATION SINCE 1919, WELCOMES TO CAMPUS SOME 760 STUDENTS FOR FIVE WEEKS OF ACADEMIC STUDY, ATHLETICS, AND EXPLORATION THAT CARRY PARTICIPANTS FAR BEYOND THE CLASSROOMS AND THE PLAYING FIELDS. TYPICALLY, STUDENTS COME TO US FROM MORE THAN 40 STATES, AND 50 COUNTRIES. SUMMER FROM PUBLIC AND PRIVATE SCHOO

Return Reference	Explanation
PROGRAM SERVICE ACCOMPLISHMENTS	D TO EXPLORE THE USE OF STUDENT-CENTERED, DISCUSSION-BASED EDUCATION THAT IS LOOSELY DESCR IBED AS THE "HARKNESS METHOD" OF TEACHING. ENVIRONMENT LITERATURE INSTITUTE IS A COLLABORA TION WITH THE ASSOCIATION FOR THE STUDY OF LITERATURE AND THE ENVIRONMENT (ASLE) AND IS DE SIGNED TO ESTABLISH A COMMUNITY OF TEACHERS WORKING IN THE FIELD OF ENVIRONMENTAL HUMANITI ES. EXETER DIVERSITY INSTITUTE IS A CONFERENCE FOR HUMANITIES TEACHERS TO EXPLORE THE ROLE SOCIAL IDENTITY ISSUES PLAY IN A STUDENT-CENTERED HARKNESS CLASSROOM. TEACHERS LEARN TO B ROADEN THEIR UNDERSTANDING OF THEMSELVES AS ENGLISH AND HISTORY TEACHERS FOR STUDENTS FROM DIVERGENT BACKGROUNDS. CONFERENCE ATTENDEES LIVE AND LEARN WITH TEACHERS FROM DIVERSE BAC KGROUNDS: PUBLIC SCHOOLS, INDEPENDENT SCHOOLS, VETERANS AND NEWCOMBERS. THE EXETER ASTRONOMY CONFERENCE IS A WEEKLONG MEETING OF ASTRONOMY EDUCATORS OF ALL LEVELS TO SHARE EXPERIENC ES AS ASTRONOMY EDUCATORS, GENERATE LONG-TERM COLLABORATIONS, LEARN ABOUT CHANGES IN ASTRO NOMY AND TO REVITALIZE AND REFRESH ASTRONOMY EDUCATORS. THE EXETER MATHEMATICS INSTITUTE (EMI) IS AN INTENSIVE, HANDS-ON, ONSITE PROFESSIONAL DEVELOPMENT PROGRAM FOR PUBLIC MIDDLE AND SECONDARY SCHOOL MATHEMATICS TEACHERS. RUN BY PHILLIPS EXETER ACADEMY'S MATHEMATICS DE PARTMENT, EMI CONSISTS OF LOCAL FOUR DAY WORKSHOPS OFFERED DURING THE SUMMER IN SIX TO NIN E SCHOOL DISTRICTS ACROSS THE NATION.

Return

GOVERNING BODY AND MANAGEMENT FORM 990, PART VI, SECTION A, LINE 1A THE EXECUTIVE COMMITTEE WHICH CONSISTS OF THE PRESIDENT, THE VICE PRESIDENT, THE PRINCIPAL AND NOT FEWER THAN TWO OTHER TRUSTEES SHALL HAVE THE POWERS OF THE TRUSTEES IN THE INTERVALS BETWEEN TRUSTEES' MEETINGS. THEY MAY ACT, ON BEHALF OF THE TRUSTEES, UPON ALL MATTERS EXCEPT THOSE WHICH, IN THE OPINION OF THE COMMITTEE SHOULD AWAIT THE NEXT MEETING OF THE TRUSTEES. ALL ACTION SO TAKEN SHALL BE DEEMED THE ACTION OF THE TRUSTEES. FORM 990, PART VI, SECTION A, LINE 2 WOLE C. COAXUM, JOHN A. DOWNER - BUSINESS RELATIONSHIP IN THE FORM OF INVESTMENT IN AFFILIATED COMPANY TERMINATED AS OF MAY 2019. WOLE C. COAXUM, WILLIAM RAWSON - BUSINESS RELATIONSHIP IN THE FORM OF INVESTMENT IN AFFILIATED COMPANY TERMINATED AS OF	Reference	Едріанацоп
JANUARY 2019. FORM 990, PART VI, SECTION A, LINE 7A THE GENERAL ALUMNI/AE ASSOCIATION (GAA) BOARD OF DIRECTORS CONSISTS OF 21 REGULAR MEMBERS. THEY ELECT FOUR OFFICERS: PRESIDENT, TWO VICE-PRESIDENTS AND A SECRETARY. THE PRESIDENT AND TWO VICE-PRESIDENTS SERVE WITH THE ACADEMY'S BOARD OF TRUSTEES FOR THEIR TERMS AS GAA OFFICERS WHICH CAN BE A PERIOD FROM 2-6 YEARS.	BODY AND	VICE PRESIDENT, THE PRINCIPAL AND NOT FEWER THAN TWO OTHER TRUSTEES SHALL HAVE THE POWERS OF THE TRUSTEES IN THE INTERVALS BETWEEN TRUSTEES' MEETINGS. THEY MAY ACT, ON BEHALF OF THE TRUSTEES, UPON ALL MATTERS EXCEPT THOSE WHICH, IN THE OPINION OF THE COMMITTEE SHOULD AWAIT THE NEXT MEETING OF THE TRUSTEES. ALL ACTION SO TAKEN SHALL BE DEEMED THE ACTION OF THE TRUSTEES. FORM 990, PART VI, SECTION A, LINE 2 WOLE C. COAXUM, JOHN A. DOWNER - BUSINESS RELATIONSHIP IN THE FORM OF INVESTMENT IN AFFILIATED COMPANY TERMINATED AS OF MAY 2019. WOLE C. COAXUM, WILLIAM RAWSON - BUSINESS RELATIONSHIP IN THE FORM OF INVESTMENT IN AFFILIATED COMPANY TERMINATED AS OF JANUARY 2019. FORM 990, PART VI, SECTION A, LINE 7A THE GENERAL ALUMNI/AE ASSOCIATION (GAA) BOARD OF DIRECTORS CONSISTS OF 21 REGULAR MEMBERS. THEY ELECT FOUR OFFICERS: PRESIDENT, TWO VICE-PRESIDENTS AND A SECRETARY. THE PRESIDENT AND TWO VICE-PRESIDENTS SERVE WITH THE ACADEMY'S

Explanation

Reference	Explanation	
FORM 990	FORM 990, PART VI, SECTION B, LINE 11 ONCE PHILLIPS EXETER'S FORM 990 IS COMPLETED, IT IS FIRST REVIEWED	
REVIEW	BY PHILLIPS EXETER ACADEMY'S INTERNAL MANAGEMENT AND OUTSIDE ADVISORS. FOLLOWING THAT REVIEW,	
PROCESS	PEA'S INTERNAL MANAGEMENT AND OUTSIDE ADVISORS PRESENT THE FORM 990 TO THE AUDIT COMMITTEE FOR	
	REVIEW AND COMMENT. THE COMPLETED FORM 990 IS PROVIDED TO ALL MEMBERS OF THE BOARD OF TRUSTEES	ı
	PRIOR TO THE FORM BEING FILED WITH THE IRS.	ı

Return Reference	Explanation
CONFLICT OF INTEREST POLICY	FORM 990, PART VI, SECTION B, LINE 12 PHILLIPS EXETER ACADEMY MAINTAINS A WRITTEN CONFLICT OF INTEREST POLICY REQUIRING DISCLOSURE OF RELEVANT FACTS THAT GIVE RISE TO A POTENTIAL CONFLICT OF INTEREST. ANNUALLY, TRUSTEES, MEMBERS OF THE INVESTMENT COMMITTEE, ADMINISTRATORS, AND STAFF WITH PURCHASING RESPONSIBILITIES ARE REQUIRED TO ACKNOWLEDGE IN WRITING THAT THEY HAVE READ, UNDERSTAND AND SIGN A CONFLICT OF INTEREST. ADDITIONALLY, AT THE END OF THE FISCAL YEAR AND BEFORE THE SUBMISSION OF FORM 990, EACH TRUSTEE, OFFICER AND/OR KEY EMPLOYEE IS PROVIDED WITH A QUESTIONNAIRE REQUIRING DISCLOSURE OF ANY CONFLICTS OF INTEREST THAT MAY HAVE EXISTED DURING THE PRIOR FISCAL YEAR.
	I MONTIOOAL TEAN.

990 Schedule O, Supplemental Information

Return Explanation

Reference

PROCESS FOR	FORM 990, PART VI, SECTION B, LINE 15 PHILLIPS EXETER ACADEMY MAINTAINS AN EXECUTIVE COMPENSATION
DETERMINING	PHILOSOPHY INTENDED TO COMPLY WITH IRC 4958 INTERMEDIATE SANCTIONS THAT REQUIRES PERIODIC
COMPENSATION	REVIEW OF PEER INSTITUTIONS FOR COMPENSATION COMPARISONS AMONG EXECUTIVES DEFMED

"DISQUALIFIED PERSONS." THE BOARD OF TRUSTEES APPROVES THEIR SALARIES ANNUALLY AND DOCUMENTS THEIR DETERMINATIONS IN MEETING MINUTES. OTHER EXECUTIVE COMPENSATION IS BASED ON A REVIEW OF PEER SCHOOLS USING AROPS AND OTHER SALARY SURVEY DATA AND IS APPROVED BY THE ADMINISTRATION.

Return Explanation
Reference

DISCLOSURE FORM 990, PART VI, SECTION C, LINE 19 PHILLIPS EXETER ACADEMY'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST. THE ORGANIZATION'S STATEMENT OF FINANCIAL POSITION AND STATEMENT OF ACTIVITIES ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE IN THE ANNUAL FINANCIAL REPORT.

990 Schedule O, Supplemental Information

COST (653,406) MISCELLANEOUS 388,088

Return Reference

ı	RECONCILIATION	FORM 990, PART XI, OTHER CHANGES, LINE 9 CHANGE IN VALUE OF FUNDS FOR DEFERRED GIVING 1,241,343	
ı	OF CHANGE IN	PENSION RELATED CHARGES OTHER THAN NET PERIODIC PENSION COST 468,058 OP/NON OP TRANSFER	
ı	NET ASSETS	335,656 INTEREST RATE SWAP ADJUSTMENT (EB) (5,261,436) OTHER COMPONENTS OF NET PERIODIC PENSION	

Explanation

TOTAL OTHER CHANGES, LINE 5 (3,481,697)

efile GRAPHIC print - DO NOT PROCESS
SCHEDULE R

(Form 990)

Department of the Treasury

As Filed Data -

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

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

OMB No. 1545-0047
2018

DLN: 93493135021890

Open to Public Inspection

Internal Revenue Service **Employer identification number** Name of the organization PHILLIPS EXETER ACADEMY 02-0222174 Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (a)
Name, address, and EIN (if applicable) of disregarded entity (c) Legal domicile (state (f) Direct controlling (e) Total income End-of-year assets Primary activity or foreign country) entity

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co ent	512(b
(1)HEINZ EXETER SCHOLARSHIP FUND	SCHOLARSHIP	PA	501(C)(3)	PF	NA .	Yes	No No
PO BOX 185		,,,			,		"
PITTSBURG, PA 15201 25-1482044							
(2)MSSC TRUST FBO PHILLIPS EXETER ACADEMY PO BOX 748	SCHOLARSHIP	SC	501(C)(3)	12D, III-O	NA		No
SULLIVANS ISLAND, SC 29482 57-6114852							
(3)YOCUM FAMILY PERPETUAL CHARITABLE TRUST 1100 N MARKET ST	SCHOLARSHIP	PA	501(C)(3)	120, III-0	NA		No
WILMINGTON, DE 19890 23-7704439							
(4)TUW PHILENA R PEABODY-LLOYD 01-34608 PO BOX 803878	SCHOLARSHIP	IL	501(C)(3)	120, III-0	NA		No
CHICAGO, IL 60680 36-6088658							
							<u> </u>

Schedule R (Form 990) 2018												Page 2
Part III Identification of Related Organizations Taxable as a Pa one or more related organizations treated as a partnership d			te if the orga	anization ansv	wered "Yes	" on Form	990, 1	Part I\	/, line 34 be	ecaus	se it l	had
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income			tionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or aging	(k) Percentage ownership
				514)			Yes	No		Yes	No	

Part IV Identification of Related Orgonical because it had one or more related to the part IV.					nization ans	wered "Yes"	on Forn	n 990,	Part IV,	line :	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreig country)		(d) et controlling entity	(e) ype of entity corp, S corp, or trust)	(f) Share of total income	Share of yea	end-of- ar	(h Percer owner	ntage	Section (13) co en	(i) n 512(b) ontrolled tity?
(1)POOLED INCOME FUND (2)	FUNDRAISING	NH	NA	Т							Yes	No
(2)CHARITABLE REMAINDER TRUST (87) SEE SCHEDULE R PART VII FOR LEGAL DOMICILE COLUMN C, NH 03833	FUNDRAISING		NA	T								
												_
								Sch	nedule R	(Forr	n 990) 2	018

e Loans or loan guarantees by related organization(s) . .

No

No No

No

Page 3

Yes

1d

1e

1f

1q 1h

11

1m

1n

10

1r

1s Yes

Schedule R (Form 990) 2018

(d)

Method of determining amount involved

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?	1	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	Yes	
h. Gift grant or capital contribution to related organization(s)	, 🗆	No

of the tax year, and the organization engage in any or the following transactions with one or more related organizations instead in raits 11-17:		l
Receipt of (i) interest, (ii)annuities, (iii) royalties, or(iv) rent from a controlled entity	1a	I
Gift, grant, or capital contribution to related organization(s)	1a 1b 1c	ſ
Gift, grant, or capital contribution from related organization(s)	1c	ſ

Loans or loan guarantees to or for related organization(s)

Lease of facilities, equipment, or other assets to related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

(a)

Name of related organization

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

(b)

Transaction

type (a-s)

(c)

Amount involved

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

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.

(a) Name, address, and EIN of entity	(b) Primary activity	domicile	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	10	(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets (h) Disproprt allocation		ı	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Form	990	0) 2018

Schedule R (Form 990) 2018						
Part VII Supplemental Information						
Provide additional infor	rmation for responses to questions on Schedule R (see instructions).					
Return Reference	Explanation					
PART IV, LINE (2), COLUMN (C)	CA, DE, FL, IA, IL, MA, NC, NH, NJ, NY, OH, PA, RI, TN, TX					