DLN: 93493294010069 OMB No 1545-0047 Return of Organization Exempt From Income Tax 2018 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 Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 D Employer identification number B Check if applicable THE BARNES FOUNDATION ☐ Address change 23-6000149 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminate E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 2025 BENJAMIN FRANKLIN PARKWAY ☐ Amended return ☐ Application pending (215) 278-7000 City or town, state or province, country, and ZIP or foreign postal code PHILADELPHIA, PA $\,$ 19130 G Gross receipts \$ 99,500,237 Name and address of principal officer H(a) Is this a group return for THOMAS COLLINS □Yes ☑No subordinates? 2025 BENJAMIN FRANKLIN PARKWAY H(b) Are all subordinates PHILADELPHIA, PA 19130 ☐ Yes ☐No included? Tax-exempt status **☑** 501(c)(3) □ 501(c)() **◄** (insert no) 4947(a)(1) or □ 527 If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW BARNESFOUNDATION ORG L Year of formation 1922 M State of legal domicile PA K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ **EDUCATIONAL INSTITUTION** Summary 1 Briefly describe the organization's mission or most significant activities TO PROMOTE THE ADVANCEMENT OF EDUCATION AND THE APPRECIATION OF THE FINE ARTS AND HORTICULTURE TO MAINTAIN AN ART GALLERY CONTAINING WORKS OF ANCIENT AND MODERN ART Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 4 13 Number of independent voting members of the governing body (Part VI, line 1b) 5 188 Total number of individuals employed in calendar year 2018 (Part V, line 2a) Total number of volunteers (estimate if necessary) . . . 165 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 861,734 b Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** 16,070,197 24,219,932 8 Contributions and grants (Part VIII, line 1h) . . 9 Program service revenue (Part VIII, line 2g) . 4,336,247 4,692,107 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 2,335,194 6,881,003 730,436 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 285,358 23,026,996 36,523,478 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 9,569,262 10,001,172 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . 250,554 310,088 b Total fundraising expenses (Part IX, column (D), line 25) ▶3,218,631 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 14,538,588 14,852,687 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 24,358,404 25,163,947 19 Revenue less expenses Subtract line 18 from line 12 . -1,331,408 11,359,531 Net Assets or Fund Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . 202,910,631 204,717,439 2,238,458 21 Total liabilities (Part X, line 26) . 2,585,742 202,478,981 22 Net assets or fund balances Subtract line 21 from line 20 . 200,324,889 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 2019-10-08 Signature of officer Sign Here MARGARET B ZMINDA EXECUTIVE VP, CFO AND COO Type or print name and title Date Print/Type preparer's name Preparer's signature Check I If P00757336 Paid self-employed Firm's name RSM US LLP Firm's EIN ▶ 42-0714325 Preparer Use Only Firm's address ▶ 30 SOUTH 17TH STREET SUITE 710 Phone no (215) 765-4600 PHILADELPHIA, PA 19103 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018) Cat No 11282Y

Form	990 (2018)					Page 2
Pa	rt III Statemer	nt of Program Servic	e Accomplis	hments		
	——— Check ıf Scl	hedule O contains a respo	nse or note to a	any line in this Part III		🗹
1	Briefly describe the	e organization's mission		•		
		NCEMENT OF EDUCATION ANCIENT AND MODERN		ECIATION OF THE FINE	ARTS AND HORTICULTURE TO M	1AINTAIN AN ART GALLERY
2	Did the organization	on undertake any significa	nt program ser	vices during the year w	hich were not listed on	
	the prior Form 990	or 990-EZ?				🗌 Yes 🗹 No
	If "Yes," describe t	hese new services on Sch	nedule O			
3	Did the organization	on cease conducting, or m	ake significant	changes in how it cond	ucts, any program	
	services?	🗌 Yes 🗹 No				
	If "Yes," describe t	hese changes on Schedul	e O			
4	Section 501(c)(3)		ns are required	to report the amount of	largest program services, as mea of grants and allocations to others	
4a	(Code) (Expenses \$	8,203,985	including grants of \$) (Revenue \$	23,490)
	See Additional Data					
4b	(Code) (Expenses \$	7,584,937	including grants of \$) (Revenue \$	4,034,479)
	See Additional Data					
4c	(Code) (Expenses \$	3,027,721	including grants of \$) (Revenue \$	306,565)
	See Additional Data					
4d	Other program ser	vices (Describe in Schedi	•			
	(Expenses \$	ıncl	uding grants of	\$) (Revenue \$)
4e	Total program se	ervice expenses 🕨	18,816,6	43		

	990 (2018)			Page 3
Par	Checklist of Required Schedules	- 1		
	T- th		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	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V "	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	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		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 "In the schedule D, Part IX" in the schedule D, Part IX II the 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		No
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	
Ь	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	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		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
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

Nο

Nο

21

22

Form	990 (2018)			Page 4
Pa	tIV 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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 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? If "Yes," complete Schedule L, Part III	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
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
Ь	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		
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

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

No

No

37

38

135

0

1a

Yes

Yes

Form 990 (2018)

37

38

Part V

If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Yes Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7с Nο

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

10a

10b

11a

11b

12b

13b

13c

12a

13a

14a

14b

15

No

No

Form **990** (2018)

a Initiation fees and capital contributions included on Part VIII, line 12 . . .

11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b Gross income from other sources (Do not net amounts due or paid to other sources

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

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

Page 6

Form **990** (2018)

				a "No'	' resp	onse to i	lines
							✓
A. Governing Body and Management							
						Yes	No
the number of voting members of the governing body at the end of the tax year	1a			13			
or if the governing body delegated broad authority to an executive committee or							
the number of voting members included in line 1a, above, who are independent	1b			13			
	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched Check if Schedule O contains a response or note to any line in this Part VI A. Governing Body and Management	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O Check if Schedule O contains a response or note to any line in this Part VI A. Governing Body and Management the number of voting members of the governing body at the end of the tax year are material differences in voting rights among members of the governing, or if the governing body delegated broad authority to an executive committee or ar committee, explain in Schedule O the number of voting members included in line 1a, above, who are independent	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instricted in Schedule O contains a response or note to any line in this Part VI	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	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 A. Governing Body and Management The number of voting members of the governing body at the end of the tax year are material differences in voting rights among members of the governing, or if the governing body delegated broad authority to an executive committee or ar committee, explain in Schedule O The number of voting members included in line 1a, above, who are independent	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 A. Governing Body and Management the number of voting members of the governing body at the end of the tax year the number of voting members in voting rights among members of the governing, or if the governing body delegated broad authority to an executive committee or ar committee, explain in Schedule O the number of voting members included in line 1a, above, who are independent	Check if Schedule O contains a response or note to any line in this Part VI

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Nο Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Nο of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . 4 Νo Did the organization become aware during the year of a significant diversion of the organization's assets? • . 5 Νo Did the organization have members or stockholders? 6 Nο

7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
Ь	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?	8a	Yes	ı
Ь	Each committee with authority to act on behalf of the governing body?	8b	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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
		\square	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Ь	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? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	,
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶	NV D	٠ ٧٨	
18	CA , CT , DC , DE , FL , IL , MA , MD , NJ , 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	INT , PA	1, VA	

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

policy, and financial statements available to the public during the tax year

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest

State the name, address, and telephone number of the person who possesses the organization's books and records

MARGARET B ZMINDA 2025 BENJAMIN FRANKLIN PARKWAY PHILADELPHIA, PA 19130 (215) 278-7000

101111 330 (2	010)										Page /
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	≘ ın t	hıs	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	ıstees, Key E	mploy	ees	, an	d F	lighe	st (Compensated En	nployees	
year .	this table for all persons requir of the organization's current of		·						, ,		•
of compensa	tion Enter -0- in columns (D), (if the organization's current key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five current high direportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	ner t	than a	n off	icer, director, truste	e or key employee)	1
• List all o	of the organization's former office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's former dir e , more than \$10,000 of reportat										e
compensated	in the following order individual demployees, and former such p	ersons									
☐ Check tl	nis box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	Т
	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one bo oth a direct	ox, un off tor/t	t cho unles ficer rust	and a	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MI3C)	(W- 2/1099- MISC)	related organizations
See Additiona	al Data Table										

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

Page 8

	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one bo	ox, u an off tor/ti	t che unles ficer		son	(D) Reportab compensat from the organization 2/1099-MI	ion e ı (W-	(E) Reportable compensation from related organizations (' 2/1099-MISC	w-	Estima amount o compens from	ited f other sation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2, 1055-MI.	30)	2/1039-1113C		relati organiza	ed
See	Additional Data Table			 	\sqcup	\vdash	<u> </u>	\vdash				\dashv		
				 	\vdash	\vdash	\vdash	+				+		
			_		\vdash	\vdash	_	+				\dashv		
					\vdash	\vdash	_					+		
							<u> </u>							
					H									
												$ \top $		
		ort VIII Section		. .			>							
_	Total from continuation sheets to Pa Total (add lines 1b and 1c)	art VII , Section	A	· ·			>		2,223,8	79		0		219,504
2	Total number of individuals (including of reportable compensation from the			e liste	ed al	bov	e) whc	rec	eived more th	an \$10	00,000			
					—	—							Yes	No No
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule J</i>			.ee, ke	ey er		loyee, d		ghest compen	sated	employee on	3		No
4	For any individual listed on line 1a, is organization and related organizations individual										n the	4	Yes	
5	Did any person listed on line 1a receiv									or ındı	vidual for	-	165	
	services rendered to the organization		lete Sch	edule	· J fo	ır su	ıch per	rson	· · · ·	•		5		No
Se	ection B. Independent Contract Complete this table for your five high		 ed indep	ender	nt co		actors	that	received more	e than	\$100,000 of cor	nper	nsation	
	from the organization Report comper												(c	1
ALLIE	Name a	and business addre	ess						SECU		ription of services		Compen	
РО ВО	OX 828854													,=,
	ADELPHIA, PA 19182 RISCOLL CO								CONS	TRUCT	TON			671,614
	CITY AVE SUITE 500 CYNWYD, PA 19004													
-	ERPIECE INTERNATIONAL								FINE	ART LC	GISTICS			613,598
	ROADWAY SUITE 1410 YORK, NY 10006													
ELLIO	DT-LEWIS CORPORATION								FACIL	_ITIES	MGMT			451,120
PHILA	BLACK LAKE PLACE ADELPHIA, PA 19154													
	N TECH SERVICES INC CHESTNUT STREET 5TH FLOOR								CLEA	NING S	ERVICES			410,674
PHILA	ADELPHIA, PA 19130 Total number of independent contractor		t not lur		to th		listed	aho)	who receiv	ed mo	ore than \$100 00	n of	:	

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

compensation from the organization ▶ 13

Part			onse or note to any	line in this Part VIII			🗆
		·		(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
(4)	1a Federated campaign	s 1a			revenue		312 - 314
ints unt	b Membership dues .	. 1b					
ב פנים	c Fundraising events	1c	411,140				
Įš,	d Related organization	ns 1d					
<u>5</u> ₽	e Government grants (co	ntributions) 1e	81,936				
Contributions, Gifts, Grants and Other Similar Amounts	f All other contributions, and similar amounts no above	t included 1f	23,726,856				
	g Noncash contribution in lines 1a - 1f \$,820				
<u>5</u>	h Total. Add lines 1a-	1f	•	24,219,932			
			Business				
풀	2a ADMISSIONS			900099	08,854 3,4	108,854	
4	b SPECIAL EVENTS				53,198	654,8	53 298,345
π́	c EDUCATION				06,565	306,565	
ır vi c	d PUBLICATIONS				23,490	23,490	
Š				300004			
Program Service Revenue	e						
ď	f All other program ser		4,69	92,107			
	9 Total. Add lines 2a-2f		<u> </u>	1			1
	3 Investment income (in similar amounts)	cluding dividends, i	nterest, and other	1,530,32	29		1,530,329
	4 Income from investme		ond proceeds 🕨				
	5 Royalties		•				
		(ı) Real	(II) Personal	1			
	6a Gross rents						
	b Less rental expenses			1			
	c Rental income or			_			
	(loss)						
	d Net rental income or	(loss)]			
	- Cross amount	(ı) Securities	(II) Other	1			
	7a Gross amount from sales of assets other	65,287,032	2,070,960	,			
	than inventory						
	b Less cost or	51.005.170	0.1.45	1			
	other basis and sales expenses	61,986,173]			
	C Gain or (loss)	3,300,859	2,049,815	5,350,67	7.4		5,350,674
	d Net gain or (loss). 8a Gross income from fu		<u> </u>	3,330,67	4		3,330,674
<u>e</u>	(not including \$	411,140 of					
듄	contributions reported See Part IV, line 18	d on line 1c) a	37,310				
ev.	b Less direct expenses		155,104	-			
er	c Net income or (loss) f		ents	-117,79	94		-117,794
Other Revenue	9a Gross income from ga						
•	See Part IV, line 19	 a	l				
	b Less direct expenses	ь		1			
	c Net income or (loss) f	rom gamıng actıvıt	ies Þ				
	10aGross sales of inventor	ory, less					
	recarris and anowanes	a a	1,533,254				
	b Less cost of goods so	old b	814,337	1			
	c Net income or (loss) f	rom sales of invent	ory >	718,91	.7 512,	036 206,881	
	Miscellaneous F		Business Code			500	
	11aMISCELLANEOUS INC	COME	900099	113,58	113,	589	
				.=-	14		
	b LICENSING & MERCH	ANDISING	900099	15,72	24		15,724
					1		
	С						
	d All other revenue				1		
	e Total. Add lines 11a-		•	129,31	.3		
	12 Total revenue. See I	Instructions	· · · · •	36,523,47	'8 4,364,	534 861,734	
							Form 990 (2018)

b EVENT EXPENSES

e All other expenses

c PRINTING & POSTAGE

d CONSERVATION & EXHIBITI

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

Form 990 (2018)					Page 10
	nent of Functional Expenses				
	d 501(c)(4) organizations must complete all co Schedule O contains a response or note to any	-	·	, ,	🗹
	ounts reported on lines 6b,	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
	r assistance to domestic organizations and iments See Part IV, line 21		·		
2 Grants and othe Part IV, line 22	r assistance to domestic individuals. See				
	r assistance to foreign organizations, foreign nd foreign individuals. See Part IV, line 15				
4 Benefits paid to	or for members				
5 Compensation o key employees	f current officers, directors, trustees, and	2,375,235	698,731	1,019,886	656,618
defined under se	ot included above, to disqualified persons (as ection 4958(f)(1)) and persons described in (3)(B)				
7 Other salaries ai	nd wages	6,042,366	4,505,353	338,060	1,198,953
	cruals and contributions (include section 401 employer contributions)	123,941	94,076	7,882	21,983
9 Other employee	benefits	830,335	388,740	249,368	192,227
10 Payroll taxes .		629,295	471,866	58,662	98,767
11 Fees for services	s (non-employees)				
a Management .					
b Legal		81,664	3,774	77,100	790
${f c}$ Accounting ${f .}$		108,695		108,695	
d Lobbying					_
e Professional fund	draising services See Part IV, line 17	310,088			310,088
f Investment man	nagement fees	247,931		247,931	
	g amount exceeds 10% of line 25, column line 11g expenses on Schedule O)	3,202,926	2,901,998	284,588	16,340
-	promotion	505,711	504,711	186	814
13 Office expenses		325,824	97,417	39,908	188,499
14 Information tech	nnology	748,900	562,975	69,280	116,645
15 Royalties					
16 Occupancy .		2,667,665	2,372,347	284,898	10,420
		184,784	154,891	19,705	10,188
	vel or entertainment expenses for any r local public officials .				
19 Conferences, co	nventions, and meetings				
20 Interest					
21 Payments to affi	liates				
22 Depreciation, de	pletion, and amortization	5,041,758	4,818,181	198,735	24,842
23 Insurance .	-	434,014	367,977	24,607	41,430
miscellaneous ex	Itemize expenses not covered above (List xpenses in line 24e If line 24e amount line 25, column (A) amount, list line 24e nedule O)				
a CREDIT CARD	· · · · · · · · · · · · · · · · · · ·	325,202	251,116	139	73,947

117,652

203,681

147,008

154,149

18,816,643

11,732

87,311

3,128,673

322,680

266,465

147,008

241,460

25,163,947

205,028

51,052

3,218,631

Form **990** (2018)

11

12

13

14

15

16

17

18

19

20

21

23

24

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

Inventories for sale or use .

b Less accumulated depreciation

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

Prepaid expenses and deferred charges

10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Other assets See Part IV, line 11 . . .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

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

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

Total liabilities. Add lines 17 through 25 .

Investments—other securities See Part IV, line 11 . . .

Total assets.Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Loans and other payables to current and former officers, directors, trustees,

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

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

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

Retained earnings, endowment, accumulated income, or other funds

Investments—program-related See Part IV, line 11

basis Complete Part VI of Schedule D

Intangible assets

Page **11**

1.027.080

104,621,378

73,400,556

5.787.433

1,784,740

453.718

2.238.458

114.240.292

9,405,489

78.833.200

202,478,981

204,717,439

Form **990** (2018)

204.717.439

825,907

	Check if Schedule O contains a response or note to any line in this Part IX .			🗹
		(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing		1	
2	Savings and temporary cash investments	2,144,659	2	2,074,046

- 1	_	cash flori litterest bearing		_	
	2	Savings and temporary cash investments	2,144,659	2	2,074,046
	3	Pledges and grants receivable, net	5,296,666	3	16,871,493
	4	Accounts receivable, net	51,398	4	109,546
	5	Loans and other receivables from current and former officers, directors,			

trustees, key employees, and highest compensated employees. Complete 5 Loans and other receivables from other disqualified persons (as defined under

10a

10b

section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets Notes and loans receivable, net .

148,009,365

43,387,987

1.110.042

108,757,236

78,385,783

6.359.913

2.174.918

410.824

2.585.742

116.004.776

12,563,218

71.756.895

200.324.889

202,910,631

202.910.631

804.934

8

9

10c

11

12

13

14

15

16

17

18

19

20

21

22 23

24

25

26

27

28

29

30

31

32

33

34

3a

3b

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 ID:

Software Version:

EIN: 23-6000149

Name: THE BARNES FOUNDATION

Form 990 (2018)

Form 990, Part III, Line 4a:

THE FOUNDATION ENGAGES IN AN ACTIVE PROGRAM OF COLLECTION CARE AND CONSERVATION. THE BARNES ART COLLECTION COMPRISES OVER 8.000 WORKS OF FINE AND DECORATIVE ARTS, INCLUDING PAINTINGS, FRAMES, WORKS ON PAPER, FURNITURE AND DECORATIVE METALWORK. THE FOUNDATION'S PHILADELPHIA FACILITY INCLUDES A STATE-OF-THE-ART PAINTING CONSERVATION LAB IN 2018, THE BARNES CONTINUED ITS WORK ON PRESERVATION OF ITS 365 WORKS OF ART ON PAPER, 280 OF WHICH ARE PERMANENTLY INSTALLED IN THE COLLECTION GALLERY. A COMPREHENSIVE EXAMINATION OF CEZANNE'S THE LARGE BATHERS COMMENCED, ENHANCING OUR UNDERSTANDING OF THE ARTIST'S MATERIALS AND WORKING METHODS THROUGH SCIENTIFIC ANALYSIS AND TECHNICAL IMAGING IN A GROUNDBREAKING COLLABORATIVE PROJECT, THE BARNES PAINTING WILL BE STUDIED WITHIN THE CONTEXT OF THE ARTIST'S TWO OTHER PAINTINGS OF THE SAME SUBJECT IN THE COLLECTIONS OF THE NATIONAL GALLERY IN LONDON AND THE PHILADELPHIA MUSEUM OF ART. THE FOUNDATION CONTINUED THE MULTI-YEAR PROJECT, BEGUN IN 2015, OF RECOATING THE NEARLY 900 METAL OBJECTS DISPLAYED ON THE WALLS OF THE COLLECTION GALLERY. THE TREATMENT CONSISTS OF REMOVING OLD COATINGS, CLEANING THE SURFACE OF THE METAL, AND APPLYING A PROTECTIVE WAX COATING TO THE OBJECT 378 OBJECTS HAVE BEEN TREATED TO DATE THE FOUNDATION PRESENTED THREE SPECIAL EXHIBITIONS IN 2018 RUNNING NOVEMBER 17, 2017, THROUGH MARCH 12, 2018, THE BARNES PRESENTED THE ONLY US SHOWING OF KIEFER RODIN, A MAJOR EXHIBITION ORGANIZED IN COLLABORATION WITH THE MUSEE RODIN, PARIS TO MARK THE CENTENNIAL OF AUGUSTE RODIN'S DEATH THE EXHIBITION FEATURED RECENT WORKS BY RENOWNED CONTEMPORARY ARTIST ANSELM KIEFER THAT OFFER A NEW WAY OF OBSERVING AND UNDERSTANDING RODIN-ALONGSIDE WORKS BY RODIN, SOME ON VIEW IN THE US FOR THE FIRST TIME THE EXHIBITION BROUGHT TOGETHER OVER 100 ITEMS, INCLUDING SEVERAL LARGE-SCALE ILLUSTRATED BOOKS MADE BY KIEFER (B. 1945) IN HOMAGE TO RODIN (1840-1917), A SERIES OF LARGE PAINTINGS TITLED LES CATHEDRALES DE FRANCE, AND VITRINES FILLED WITH ASSORTED OBJECTS INCLUDING PLASTER CASTS, DRIED PLANTS, STONES, AND PIECES OF FABRIC ALSO ON VIEW WERE SCULPTURES AND DRAWINGS BY RODIN, INCLUDING RARELY DISPLAYED PLASTER MOLDS FROM MAY 6 THROUGH SEPTEMBER 3, 2018, THE BARNES PRESENTED RENOIR FATHER AND SON/PAINTING AND CINEMA, A MAJOR EXHIBITION EXAMINING THE ARTISTIC EXCHANGE BETWEEN RENOWNED IMPRESSIONIST PAINTER PIERRE AUGUSTE RENOIR AND HIS SON, CELEBRATED FILMMAKER JEAN RENOIR THE EXHIBITION BROUGHT TOGETHER OVER 120 WORKS, INCLUDING PAINTINGS, FILMS, DRAWINGS, CERAMICS, COSTUMES, PHOTOGRAPHS, AND POSTERS, FOR AN ILLUMINATING EXPLORATION OF PIERRE-AUGUSTE'S ROLE IN HIS SON'S WORK AND THE RELATIONSHIP BETWEEN PAINTING AND CINEMA THE EXHIBITION WAS ORGANIZED BY THE BARNES AND THE MUSEES DORSAY ET DE LORANGERIE, PARIS, IN COLLABORATION WITH LA CINEMATHEQUE FRANCAISE, PARIS THE THIRD EXHIBITION, ON VIEW FROM OCTOBER 21, 2018, THROUGH JANUARY 14, 2019, WAS TITLED BERTHE MORISOT WOMAN IMPRESSIONIST THIS LANDMARK EXHIBITION WAS THE US DEBUT OF THE SHOW, EXPLORING THE SIGNIFICANT YET UNDER-RECOGNIZED CONTRIBUTIONS OF BERTHE MORISOT (1841-1895), ONE OF THE FOUNDERS OF IMPRESSIONISM BERTHE MORISOT WOMAN IMPRESSIONIST WAS THE FIRST MONOGRAPHIC EXHIBITION OF THE ARTIST TO BE HELD IN THE US SINCE 1987. THE INTERNATIONALLY TOURING EXHIBITION WAS CO-ORGANIZED BY THE BARNES, THE DALLAS MUSEUM OF ART, THE MUSEE NATIONAL DES BEAUX-ARTS DU QUEBEC, AND THE MUSEES DORSAY ET DE LORANGERIE, PARIS THE PRESENTATION AT THE BARNES PROVIDED NEW INSIGHT INTO A DEFINING CHAPTER IN ART HISTORY AND THE OPPORTUNITY TO EXPERIENCE MORISOT'S WORK IN THE CONTEXT OF THE BARNES'S COLLECTION OF IMPRESSIONIST PAINTINGS THE FOUNDATION CONDUCTS ONGOING SCHOLARSHIP AND RESEARCH ON OBJECTS AND WORKS OF ART IN ITS COLLECTION, AND ON THE HISTORY OF THE ORGANIZATION AND ITS FOUNDERS IN 2018, THE ARCHIVES, LIBRARY, AND SPECIAL COLLECTIONS DEPARTMENT MADE SUBSTANTIAL PROGRESS ON PROCESSING THE VIOLETTE DE MAZIA ARCHIVAL COLLECTION. A SURVEY OF THESE MATERIALS HAS BEEN COMPLETED AND ARRANGEMENT OF THE MATERIALS HAS BEGUN, WITH THE GOAL OF CREATING A FINDING AID (INVENTORY) TO BE AVAILABLE ONLINE IN 2019 THE FOUNDATION ALSO HAS AN ART LIBRARY IN ITS PHILADELPHIA FACILITY WHICH IS OPEN TO STUDENTS, FACULTY AND RESEARCHERS, GENERALLY BY APPOINTMENT CHANGING DISPLAYS OF MATERIALS FROM THE BARNES ARCHIVES ARE REGULARLY SHOWN ON THE FOUNDATION'S LOWER LEVEL THE FIRST EXHIBIT PAUL PHILIPPE CRET AND THE BARNES FOUNDATION (SPRING 2018) REVIEWED HOW IN 1922, ALBERT BARNES CONTRACTED FRENCH ARCHITECT PAUL PHILIPPE CRET TO DESIGN A GALLERY AND RESIDENCE IN MERION, PENNSYLVANIA FEATURED IN THIS EXHIBITION WERE LETTERS BETWEEN THE TWO MEN. PLUS CRET'S PLANS AND SKETCHES FOR THE BUILDINGS THAT OFFICIALLY HOUSED THE BARNES FOUNDATION IN 1925 SINCE CRET HELPED DESIGN THE BENJAMIN FRANKLIN PARKWAY. THE SITE OF THE NEW BARNES BUILDING. THE EXHIBIT CELEBRATED THE PARKWAY'S CENTENNIAL YEAR AS WELL, THE SECOND EXHIBIT A SHADOW ON HER SUNSHINE ALBERT BARNES AND GEORGIA O'KEEFFE (FALL 2018) WAS ALIGNED WITH THE BERTHE MORISOT EXHIBITION TO CELEBRATE WOMEN ARTISTS, THIS EXHIBIT FEATURED LETTERS BETWEEN ALBERT BARNES AND GEORGIA O'KEEFFE A NEW RESEARCH INITIATIVE, OBJECT WHITE PAPERS, WAS LAUNCHED IN 2018 TO PRODUCE NEW KNOWLEDGE ABOUT UNDER-RESEARCHED OBJECTS IN THE COLLECTION WRITTEN PRIMARILY BY GRADUATE STUDENTS AND MEMBERS OF THE FOUNDATION'S ART TEAM, THESE SCHOLARLY PAPERS PLACE WORKS OF ART IN THEIR CULTURAL AND SOCIAL-HISTORICAL CONTEXTS THOUGH THESE PAPERS ARE INTENDED FOR INTERNAL USE, THEY FORM THE BASIS FOR CONTENT THAT IS SHARED WITH THE PUBLIC ART-HISTORICAL CONTENT FOR 250 COLLECTION OBJECTS WAS ADDED TO THE BARNES WEBSITE IN 2018 THESE NEWLY WRITTEN TEXTS BASED ON RECENT RESEARCH ON THE COLLECTION PROVIDE READERS WITH BASIC INFORMATION ABOUT THE HISTORY OF THE OBJECTS AND THE ARTISTS OR CULTURES WHO MADE THEM THIS CONTENT WILL ALSO BE VIEWABLE ON AN IN-GALLERY DIGITAL GUIDE, SET TO LAUNCH IN 2019 THE FOUNDATION HAS A LARGE LIVING COLLECTION, WHICH IS MAINTAINED IN ITS 12 ACRE ARBORETUM THE LIVING COLLECTION CONTAINS OVER 2,500 TAXA OF WOODY PLANTS AND PERENNIALS IN ADDITION. THE FOUNDATION HAS AN HERBARIUM WHICH INCLUDES OVER 10.000 PRESERVED PLANT SPECIMENS. THE FOUNDATION'S LIVING COLLECTION INCLUDES OVER 38 "STATE CHAMPION" TREES THE BARNES ARBORETUM IS HOME FOR A NATIONAL DISPLAY GARDEN OF HOSTA, THE LARGEST COLLECTION OF HARDY ORNAMENTAL FERNS IN THE MID-ATLANTIC STATES, AND A DISPLAY GARDEN OF MEDICINAL PLANTS UNIQUE IN THE DELAWARE VALLEY REGION EXPENSES FOR COLLECTIONS CARE INCLUDE A PRO-RATA SHARE OF DEPRECIATION AND OTHER FACILITY COSTS ALL LOCATIONS

Form 990, Part III, Line 4b: THE FOUNDATION'S PERMANENT COLLECTION GALLERY IN PHILADELPHIA IS OPEN TO THE PUBLIC SIX DAYS PER WEEK, WITH 2018 VISITATION OF APPROXIMATELY 228,000 VISITORS APPROXIMATELY 20% OF THOSE VISITORS WERE MEMBERSHIP SUPPORTERS OF THE BARNES FOUNDATION A RETAIL STORE SELLS REPRODUCTIONS, PUBLICATIONS AND OTHER ITEMS RELATED TO THE ART COLLECTION AND ARBORETUM. THE FOUNDATION ALSO PROVIDES ENTERTAINING PRIVILEGES TO ITS MEMBERS. HOSTING APPROXIMATELY 250 SPECIAL EVENTS WITH APPROXIMATELY 24,000 GUESTS IN 2018 THE ART TEAM AND GALLERY GUIDES, A GROUP OF ARTISTS AND ART HISTORIANS WHOSE PRIMARY FUNCTION IS TO PROVIDE VISITORS WITH INFORMATION ABOUT THE COLLECTION AND ITS HISTORY, CONTINUES TO BE STATIONED IN THE GALLERIES AND AVAILABLE TO ALL VISITORS. THE FOUNDATION'S ARBORETUM IS OPEN TO THE PUBLIC ON SELECTED DAYS OF THE WEEK SEASONALLY THE FOUNDATION OFFERS A VARIETY OF PUBLIC PROGRAMS TO ENGAGE NEW AND DIVERSE AUDIENCES AND IS COMMITTED TO WELCOMING COMMUNITIES FROM ACROSS PHILADELPHIA THIS YEAR, WE CONTINUED TO WORK WITH KEY COMMUNITY ORGANIZATIONS AND FORGED NEW COLLABORATIONS TO HELP US EXPAND OUR REACH AND MAKE MEANINGFUL CONNECTIONS WITH PHILADELPHIA'S DIVERSE NEIGHBORHOODS AND BEYOND. THE BARNES HOSTS SEVERAL RECURRING AND SPECIAL EVENTS THROUGHOUT THE YEAR. SUCH AS THE MONTHLY FIRST FRIDAY ENTERTAINMENT EVENINGS AND PECO FREE FIRST SUNDAY FAMILY DAY. WHICH OFFERS FREE ACCESS TO THE BARNES COLLECTION AND EXHIBITIONS AND WELCOMES MULTI-GENERATIONAL FAMILIES WITH A VARIETY OF CROSS-CULTURAL PROGRAMMING AND ACTIVITIES FOR ALL AGES THE BARNES'S ARTIST BASH IS HELD THREE TIMES A YEAR, AND ENCOURAGES THE CROWD TO GET CREATIVE AND MEET MUSICIANS. DANCERS, DESIGNERS, PERFORMERS, AND POETS YOUNG PROFESSIONALS NIGHT IS A SOCIAL EVENT FOR YOUNG ART AFICIONADOS AND APPRECIATORS, HELD THREE TIMES A YEAR AND ATTRACTING APPROXIMATELY 700 GUESTS EACH EVENT. BARNES ON THE BLOCK PARTIES WERE HELD TO CONNECT AND ENLIVEN THE NEIGHBORHOOD, MORE THAN HALF OF THE ATTENDESS LIVED WITHIN THREE MILES OF THE PARKWAY CAMPUS. THE EVENT OFFERED FREE ADMISSION TO THE COLLECTION. PLUS INDOOR AND OUTDOOR ACTIVITIES. INCLUDING A DANCE PARTY IN THE PARKING LOT WITH MUSIC FROM DIS. FOOD TRUCKS, AND A LOCAL BREWERY IN 2018. THE BARNES LAUNCHED BARNES JAWN(T)S, IMPROVISED AFTER-HOURS TOURS OF THE COLLECTION THAT GIVE THE SPOTLIGHT TO A DIVERSE ARRAY OF COMMUNITY LEADERS AND ARTISTS. THE BARNES TAKEOVER SERIES, LAUNCHED IN OCTOBER 2018, INVITES LOCAL ARTISTS TO SHARE THEIR UNIOUE INTERPRETATIONS OF THE BARNES COLLECTION DURING 2018 THE BARNES CONTINUED ITS COLLABORATION WITH PUENTES DE SALUD, TO CONTINUE THE PROGRAM IDEOLOGY OF "ART IS FOR EVERYONE" WAS SEEDED BARNES @ LOLA 38 IS A TWO-YEAR, MULTIFACETED SERIES OF ALL-AGES ARTS PROGRAMS, INCLUDING FAMILY WORKSHOPS, ARTIST PERFORMANCES, AND A TEEN STUDIO WITH A FREE MONTHLY SHUTTLE TO PECO FREE FIRST SUNDAY FAMILY DAY AT THE BARNES OVER THE SUMMER, A TEAM OF MUSEUM EDUCATORS AND TEACHING ARTISTS AND DESIGNERS PARTNERED WITH FOUR PHILADELPHIA PARKS AND RECREATION CENTERS, AS WELL AS THE CENTER FOR ARCHITECTURE AND DESIGN, TO LAUNCH SUMMER IMAGINARIUM WORKSHOPS MORE THAN 120 CHILDREN AGES 6-13 EXPLORED THE THEME

PUENTES A LAS ARTES (BRIDGES TO THE ARTS). AN ARTS-BASED BILITERACY ENRICHMENT PROGRAM DESIGNED TO SERVE PRE-K ELL/ESL LEARNERS FROM SOUTH PHILADELPHIA'S RAPIDLY GROWING LATINX IMMIGRANT COMMUNITY AND THEIR FAMILIES. IN ITS FIRST YEAR, THE PROGRAM SERVED 78 FAMILIES. EARLY LEARNERS GAINED 50 HOURS OF ARTS AND LITERACY INSTRUCTION AT SOUTHWARK COMMUNITY SCHOOL, LED BY TWO BILINGUAL TEACHING ARTISTS OVER 25 WEEKS BARNES @ LOLA 38. A COLLABORATION WITH THE PEOPLE'S EMERGENCY CENTER COMMUNITY DEVELOPMENT CORPORATION (PECCDC), WAS LAUNCHED TO FOSTER NEW CULTURAL PATHWAYS AND ACCESS TO THE ARTS FOR COMMUNITIES IN WEST PHILADELPHIA. WHERE DR BARNES'S ARGYROL FACTORY WAS LOCATED AND HIS

"CITY AS ENSEMBLE" OVER SIX SESSIONS, AND LEARNED TO BE BOLD URBAN PLANNERS AND VISIONARIES THE BARNES ALSO LAUNCHED THE ART FOR ALL COMMUNITY

PASS, WHICH OFFERS FREE BARNES ADMISSION TO LOW-INCOME, UNDERSERVED AUDIENCES WHO HAVE PARTICIPATED IN BARNES COMMUNITY ENGAGEMENT

INITIATIVES AND EDUCATION OUTREACH EFFORTS IN 2018. 235 GUESTS VISITED THE BARNES USING THE PASS THE BARNES DEVELOPED VIRTUAL REALITY (VR) HEADSETS THAT RE-CREATE THE BARNES'S GALLERIES. ALLOWING INDIVIDUALS TO VIRTUALLY EXPLORE THE COLLECTION IN PARTNERSHIP WITH THE FREE LIBRARY OF PHILADELPHIA, THE BARNES LAUNCHED EDUCATIONAL PROGRAMS TO ENGAGE PHILADELPHIANS IN AREAS WHERE ACCESS TO THE BARNES MAY POSE GEOGRAPHIC

HURDLES, PROGRAM EXPENSES FOR VISITATION INCLUDE A PRO-RATA SHARE OF DEPRECIATION AND OTHER FACILITY COSTS FOR ALL LOCATIONS

Form 990, Part III, Line 4c:

UNIVERSITY, BRYN MAWR COLLEGE, THE UNIVERSITY OF DELAWARE, TEMPLE UNIVERSITY, THE PENNSYLVANIA ACADEMY OF THE FINE ARTS, AND MOORE COLLEGE OF ART & DESIGN 37 CLASSES WERE OFFERED-INCLUDING 24 NEW COURSES AND SEVEN DESIGNED AROUND SPECIAL EXHIBITIONS ENROLLMENT HAS MORE THAN TRIPLED SINCE THE 2015-16 ACADEMIC YEAR, WITH MORE THAN 800 STUDENTS PARTICIPATING IN 2018 THE BARNES-DE MAZIA EDUCATION PROGRAM ALSO OFFERS NEED-BASED FULL SCHOLARSHIPS TO IMPROVE ACCESS TO THE PROGRAM IN 2018, 135 SCHOLARSHIPS WERE AWARDED TO ADULT LEARNERS WHO OTHERWISE

THE FOUNDATION SPONSORS SEPARATE CERTIFICATE PROGRAMS IN HORTICULTURE AND IN ART AND AESTHETICS DURING THE 2017-18 ACADEMIC YEAR, COURSE OFFERINGS WERE EXPANDED WITH NEW CONTENT AND INSTRUCTORS INCLUDING ART HISTORY FACULTY FROM THE UNIVERSITY OF PENNSYLVANIA, DREXEL

WOULD NOT HAVE HAD THE OPPORTUNITY TO PARTICIPATE ADDITIONALLY, A SPECIAL CURRICULUM WAS DEVELOPED TO ENGAGE MEDICAL STUDENTS AND PROFESSIONALS, FOCUSING ON HOW CLOSE-LOOKING SKILLS CAN BE BENEFICIAL IN A CLINICAL SETTING IN 2018. THE BARNES LAUNCHED AN EDUCATION PARTNERSHIP WITH SAINT JOSEPH'S UNIVERSITY THE LONG-RUNNING HORTICULTURE CERTIFICATE PROGRAM ESTABLISHED IN 1940 BY LAURA BARNES CONTINUES, AND SAINT JOSEPH'S UNIVERSITY WILL EXPLORE A NEW HORTICULTURE MINOR AS WELL AS ACADEMIC CREDIT FOR SELECT COURSES THE BARNES OFFERED A SERIES OF PUBLIC LECTURES IN 2018 ON TOPICS RELATED TO THE COLLECTION AND SPECIAL EXHIBITIONS THE BARNES ALSO PRESENTED TWO PUBLIC SYMPOSIA IN APRIL. THE 23RD ANNUAL GRADUATE STUDENT SYMPOSIUM DREW SPEAKERS AND FACULTY FROM NINE AREA UNIVERSITIES IN COLLABORATION WITH THE SCHOOL DISTRICT OF PHILADELPHIA. THE FOUNDATION HAS DEVELOPED GRADE-SPECIFIC OUTREACH PROGRAMS THAT COMBINE IN-CLASS LEARNING WITH A STRUCTURED TOUR OF THE

FOUNDATION'S ART COLLECTIONS LED BY BARNES EDUCATORS. THESE PROGRAMS ARE DESIGNED TO DEVELOP STUDENTS' ART APPRECIATION AND REINFORCE

READING COMPREHENSION, MATH SKILLS AND KNOWLEDGE OF SCIENCE, HISTORY AND SOCIAL STUDIES, DEPENDING ON THE GRADE LEVEL THESE PROGRAMS SERVED APPROXIMATELY 10,000 PHILADELPHIA SCHOOLCHILDREN IN 2018 THE BARNES ALSO PILOTED AND LAUNCHED IN FALL 2018 A SIX-WEEK ONLINE TEACHER TRAINING PROGRAM CALLED MATH IN ART TO PROVIDE TEACHERS IN THE PHILADELPHIA AREA AND BEYOND WITH TECHNIQUES FOR INTEGRATING ART INTO OTHER SUBJECT AREAS IN 2018 APPROXIMATELY 3,000 STUDENTS FROM KINDERGARTEN THROUGH HIGH SCHOOL VISITED THE BARNES FOR EDUCATIONAL TOURS OF THE COLLECTION

AND EXHIBITIONS EDUCATORS AT THE BARNES TAILOR THE TOUR EXPERIENCE TO MEET THE CLASSROOM TEACHER'S GOALS. THE FOUNDATION HAS ALSO DEVELOPED.

EDUCATIONAL FAMILY PROGRAMS PROGRAM EXPENSES FOR EDUCATION INCLUDE A PRO-RATE SHARE OF DEPRECIATION AND OTHER FACILITY COSTS

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

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

	£						•	(14, 2/4,000	(14) 2/4000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
AILEEN KENNEDY ROBERTS VICE CHAIRMAN, TRUSTEE	1 00	×		х				0	0	0
CATHERINE HUGHES TRUSTEE	1 00	×						0	0	0
DANIEL DILELLA TRUSTEE	1 00	×						0	0	0
DR BRENDA T THOMPSON TRUSTEE	1 00	×					_	0	0	0
CHRISTINE POGGI PHD TRUSTEE (AS OF 12/18/18)	1 00	×						0	0	0
DR KHALIL GIBRAN MUHAMMAD	1 00									

0

0

0

0

0

Х

Х

Х

Х

Х

1 00

1 00

1 00

1 00

......

...............

IKUSTEE
CHRISTINE POGGI PHD
TRUSTEE (AS OF 12/18/18)
DR KHALIL GIBRAN MUHAMMAD

TRUSTEE (THRU 12/18/18)

...... TRUSTEE (THRU 9/25/18)

DR NEIL L RUDENSTINE

JOHN ALCHIN

JOHN J AGLIALORO

JOHN MCFADDEN ESQ

TRUSTEE (AS OF 12/18/18)

TRUSTEE

TRUSTEE

and Independent Contractors

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

any hours

1 00

1 00

40 00

40 00

40 00

40 00

.

......

...............

Х

Х

Χ

Χ

Χ

Х

and Independent Contractors

TORY BURCH

TRUSTEE

PAMELA D BUNDY

THOMAS COLLINS

SARA GEELAN

NINA DIEFENBACH

MARGARET B ZMINDA

EXECUTIVE VP, CFO AND COO

TRUSTEE (THRU 12/18/18)

EXECUTIVE DIRECTOR & PRESIDENT

DEP DIR, GEN COUNSEL, ASST SECRETARY

DEPUTY DIRECTOR OF ADVANCEMENT

......

......

......

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

and a director/trustee)

organization

0

421,507

255,981

238,956

316,694

organizations

from the

24,734

33,938

29,973

12,682

0

	1							1 (1) 2 (4 0 0 0	(14, 24,000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
JOSEPH NEUBAUER CHAIRMAN, TRUSTEE	1 00	×		x				0	0	
SHELDON M BONOVITZ ESQ TRUSTEE	1 00	×						0	0	1
STEPHEN J HARMELIN ESQ TREASURER, TRUSTEE	1 00	×		х				0	0	
THE HON JACQUELINE F ALLEN SECRETARY, TRUSTEE	1 00	X		x				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 141 2/1000 1111 2/1000 organization and

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

and Independent Contractors

WILLIAM CARY

STEVEN BRADY

GEORGETTE C HAMATY

BARBARA BUCKLEY

DIRECTOR OF ANNUAL GIVING

DIRECTOR OF INFORMATION TECHNOLOGY

DIRECTOR OF FOUNDATION RELATIONS

SENIOR DIRECTOR OF CONSERVATION

	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
VINCENT D'ANTONIO SENIOR DIRECTOR OF OPERATIONS	40 00				×			184,275	0	7,590
SHELLEY BERNSTEIN DEP DIRECTOR FOR DIGITAL INITIATIVES	40 00				х			163,343	0	20,40

		l		l	_	l			
VINCENT D'ANTONIO	40 00			×			184,275	0	
SENIOR DIRECTOR OF OPERATIONS							101,273		
SHELLEY BERNSTEIN	40 00			×			163,343	0	
DEP DIRECTOR FOR DIGITAL INITIATIVES				<u> </u>			103,313		
MARTHA LUCY	40 00						100 000		
DEP DIR FOR EDUCATION, PUBLIC PROGRAMS					×		138,036	U	

SENIOR DIRECTOR OF OPERATIONS							
SHELLEY BERNSTEIN	40 00		v		163,343	0	
DEP DIRECTOR FOR DIGITAL INITIATIVES			_^_		105,545	0	
MARTHA LUCY	40 00			_	138.036	0	
DEP DIR FOR EDUCATION, PUBLIC PROGRAMS				_ ^	138,036	0	
MILLIAM CARV	40 00						

......

40 00

40 00

40 00

.

		l	l	l			l			
SHELLEY BERNSTEIN	40 00				×			163,343	0	20,401
DEP DIRECTOR FOR DIGITAL INITIATIVES					^			103,313		20,101
MARTHA LUCY	40 00					V		120.026		2 520
DEP DIR FOR EDUCATION,PUBLIC PROGRAMS						_ X		138,036	0	3,528

CTOR FOR DIGITAL INITIATIVES			×		163,343	0	20,401
UCY OR EDUCATION, PUBLIC PROGRAMS	40 00			Х	138,036	0	3,528

133,738

137,429

126,970

106,950

7,590

6,054

31,598

15,992

33,014

SCHEDULE Form 990 or 90EZ)		omplete if the o	Charity Statu rganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) empt charitable 990 or Form 99	organization or trust. 10-EZ.	a section	2018
epartment of the Trea ternal Revenue Servi	ه ا	► Go to	www.irs.gov/Forms	9 <u>90</u> for the late	est information		Open to Public Inspection
ame of the orga IE BARNES FOUNDA	TION					Employer identific	ation number
Part I Rea	on for Publi	c Charity Stat	us (All organization	s must comple	te this part.) S	23-6000149 See instructions.	
			e it is (For lines 1 thro				
A chu	ch, convention	of churches, or as	ssociation of churches	described in sec	tion 170(b)(1)	(A)(i).	
A sch	ol described in s	section 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	990 or 990-EZ))		
A hos	otal or a cooper	atıve hospıtal ser	vice organization desci	rıbed ın section	170(b)(1)(A)(iii).	
name	city, and state		ed in conjunction with	· 			
	anızatıon opera)(A)(iv). (Com		t of a college or univer	rsity owned or o	perated by a gov	ernmental unit descri	bed in section 170
		,	governmental unit de	scribed in sectio	on 170(b)(1)(A	ı)(v).	
		ormally receives \)(vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	nıt or from the gener	al public described in
A com	munity trust de	scribed in sectio i	n 170(b)(1)(A)(vi)	(Complete Part I	I)		
			escribed in 170(b)(1) lee instructions Enter				ege or university or
from invest	ctivities related ment income an	to its exempt fur d unrelated busir	(1) more than 331/3% actions—subject to cert ess taxable income (le omplete Part III)	taın exceptions,	and (2) no more	than 331/3% of its si	upport from gross
•			d exclusively to test fo	r public safety S	See section 509	(a)(4).	
more	oublicly support	ed organizations	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se	ction 509(a)(2). See section 509(a	
Type organ	 A supporting zation(s) the po 	organization oper	rated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by	
mana	ement of the si		pervised or controlled in ation vested in the san and C.				
			supporting organization ions) You must com				ited with, its
Type functi	III non-function	onally integrate I The organization	d. A supporting organi in generally must satis rt IV, Sections A and	zation operated fy a distribution	in connection wi requirement and	th its supported orgai	
Check	this box if the o	rganızatıon recei	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally
_		I non-functionally ed organizations	integrated supporting	organization			
Provide the (i) Name o		ation about the si	upported organization((iii) Type of		anization listed	(w) Amount of	(vi) Amount of
organi				(v) Amount of monetary support (see instructions)	(vi) Amount of other support (se instructions)		
				Yes	No		
· · · · · · · · · · · · · · · · · · ·							
tal							
	eduction Act N	otice, see the I	nstructions for	Cat No 1128!	5F !	Schedule A (Form 9	90 or 990-FZ) 201

instructions

	Page	_
1	L70	

oport Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170
(1)(A)(ix)
mplete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part
If the organization fails to qualify under the tests listed below, please complete Part III.)

	III. If the organization fai						iy under Part
_	Section A. Public Support	is to quality ut	ider the tests his	ted below, pied.	se complete rai	C 111.)	
	Calendar year		I	I			
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grant ")						
2	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
4	Total. Add lines 1 through 3						
4	The portion of total contributions by						
5	· · ·						
	each person (other than a governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from						
•	line 4						
S	ection B. Total Support		•	•	•		
	Calendar year	(a)2014	(b) 2015	(c)2016	(d)2017	(e)2018	(f)Total
	(or fiscal year beginning in) ▶	(a)2017	(0)2013	(6)2010	(u)2017	(e)2010	(1)Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on		+				
10							
	loss from the sale of capital assets						
	(Explain in Part VI) Total support. Add lines 7 through						
11	10						
12	Gross receipts from related activities, e	tc (see instruction	ons)	<u> </u>		12	
	First five years. If the Form 990 is for			ard fourth or fifth	n tay year as a sec	tion 501(c)(3) org	anization
		=				· · · · · · <u>-</u>	_
_	check this box and stop here				<u> </u>	<u>P</u> L	
	Section C. Computation of Public						
	Public support percentage for 2018 (line			column (f))		14	
	Public support percentage for 2017 Sch					15	
16a	33 1/3% support test—2018. If the	organızatıon dıd ı	not check the box	on line 13, and lin	ne 14 is 33 1/3% o	r more, check this	box
	and stop here. The organization qualif	ies as a publicly s	supported organiza	ation			ightharpoons
b	33 1/3% support test—2017. If the	organization did	not check a box of	on line 13 or 16a,	and line 15 is 33 i	./3% or more, chec	k this
	box and stop here. The organization	qualifies as a nub	alicly supported or	ganization			ightharpoons
47-	10%-facts-and-circumstances test-				ne 13 16a or 16h	and line 14	
1/2	is 10% or more, and if the organization						
	in Part VI how the organization meets t						
	J			J. garnización	-, as a publ	,	►□
	organization	2047 ****	, , ,		43.46.46.	47	
ь	10%-facts-and-circumstances test						
	15 is 10% or more, and if the organization						
	Explain in Part VI how the organization	i meets the Tact	s-and-circumstand	es test the orga	inization qualifies	as a publicly	_
	supported organization						▶□
18	Private foundation. If the organizatio	n did not check a	box on line 13, 1	6a, 16b, 17a, or 1	.7b, check this box	cand see	

P	art IIII Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	below, please co	omplete Part II.)	
30	Calendar year		43.5045		412.554.7		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6) ection B. Total Support						
	Calendar year			I	T		
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
h	Unrelated business taxable income						
_	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12							
	loss from the sale of capital assets						
13	(Explain in Part VI) Total support. (Add lines 9, 10c,						
	11, and 12)						
14	First five years. If the Form 990 is fo	r the organization	's fırst, second, tl	nird, fourth, or fift	:h tax year as a se	ction 501(c)(3) c	rganızatıon,
	check this box and stop here						▶ 🗆
Se	ection C. Computation of Public						
15	Public support percentage for 2018 (lin	ie 8, column (f) di	ivided by line 13,	column (f))		15	
16	Public support percentage from 2017 S	chedule A, Part II	II, line 15			16	
Se	ection D. Computation of Invest						
17	Investment income percentage for 201	1 8 (line 10c, colur	mn (f) divided by	line 13, column (f	())	17	
18	Investment income percentage from 2	017 Schedule A, ¹	Part III, line 17			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						▶ □
	33 1/3% support tests—2017. If the						
	not more than 33 1/3%, check this box	-			·		▶ □
20	Private foundation. If the organization		-				▶□
		AL GIG HOL CHECK O	. 202 011 11116 14, 1	a, or industrial	Callo DOX allu 366		

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (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 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

3а 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 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support 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

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

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

answer line 10b below

the organization had excess business holdings)

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

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

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

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

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

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

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

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

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

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

9с

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

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,"

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11 c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization	-		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
_	<u> </u>			
	ection D. All Type III Supporting Organizations		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?		103	-140
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations		l	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)		
	The organization satisfied the Activities Test Complete line 2 below	•		
	b			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test Answer (a) and (b) below.	į	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		
3	Parent of Supported Organizations Answer (a) and (b) below.	_		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3h		

Sched	lule A (Form 990 or 990-EZ) 2018			Page 6
Pai	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		
е	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-instructions)	ntegrat	ed Type III supporting or	ganızatıon (see

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

See instructions

6 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

7 Excess distributions carryover to 2019. Add lines 31 and 4c

8 Breakdown of line 7 a Excess from 2014.

b Excess from 2015. c Excess from 2016.

d Excess from 2017. e Excess from 2018.

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

Additional Data

Software ID: Software Version:

EIN: 23-6000149

Name: THE BARNES FOUNDATION

Page 8

Schedule A (Form 990 or 990-EZ) 2018 Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Part VI 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 **SCHEDULE D**

(Form 990)

Department of the Treasury

Supplemental Financial Statements

Complete if the organization answered "Yes," on Form 990,
 Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
 ► Attach to Form 990.

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

DLN: 93493294010069 OMB No 1545-0047

Open to Public Inspection

Intern	al Revenue Service	► Go to <u>www.irs.g</u>	ov/Form990 for the latest information.	Inspection
	me of the organiz			Employer identification number
IHE	BARNES FOUNDATION	V		23-6000149
Pa	rt I Organiza	ations Maintaining Donor Advis	sed Funds or Other Similar Funds o	
		e if the organization answered "Ye	s" on Form 990, Part IV, line 6.	
			(a) Donor advised funds	(b)Funds and other accounts
1	Total number at er	·		
2		f contributions to (during year)		
3		f grants from (during year)		
4	Aggregate value at	t end of year		
5		on inform all donors and donor adviso perty, subject to the organization's ex	rs in writing that the assets held in donor ad clusive legal control?	vised funds are the $\hfill \square$ Yes $\hfill \square$ No
6			nor advisors in writing that grant funds can or donor advisor, or for any other purpose c	
Pa	rt III Conserv	ation Easements. Complete If th	e organization answered "Yes" on Forn	n 990, Part IV, line 7.
1	Purpose(s) of con	servation easements held by the orgar	nization (check all that apply)	
	Preservation	of land for public use (e g , recreation	or education) \square Preservation of an	historically important land area
	☐ Protection of	f natural habitat	Preservation of a c	ertified historic structure
	☐ Preservation	of open space		
2	Complete lines 2a		qualified conservation contribution in the for	m of a conservation Held at the End of the Year
а		onservation easements		2a
b	Total acreage rest	ricted by conservation easements		2b
С	Number of conserv	vation easements on a certified historic	structure included in (a)	2 c
d	Number of conserv	vation easements included in (c) acqui	red after 7/25/06, and not on a historic	2d
		the National Register		
3	Number of conser tax year ►	vation easements modified, transferre 	d, released, extinguished, or terminated by	the organization during the
4	Number of states	where property subject to conservatio	n easement is located ►	
5		ation have a written policy regarding th of the conservation easements it holds	e periodic monitoring, inspection, handling o	of violations,
6	Staff and voluntee	er hours devoted to monitoring, inspec	ting, handling of violations, and enforcing co	nservation easements during the year
7	Amount of expens	ses incurred in monitoring, inspecting,	handling of violations, and enforcing conserv	ation easements during the year
8	Does each conser and section 170(h		above satisfy the requirements of section 1	70(h)(4)(B)(ı) ☐ Yes ☐ No
9	balance sheet, an		ervation easements in its revenue and exper footnote to the organization's financial state ts	
Par	t IIII Organiza	ations Maintaining Collections	of Art, Historical Treasures, or Oth	er Similar Assets.
		e if the organization answered "Ye	·	
1a	art, historical trea	sures, or other similar assets held for	6 (ASC 958), not to report in its revenue sta public exhibition, education, or research in f cial statements that describes these items	
b	historical treasure		6 (ASC 958), to report in its revenue statem ic exhibition, education, or research in furth	
(i) Revenue included	d on Form 990, Part VIII, line 1		▶ \$
(i	i)Assets included in	n Form 990, Part X		▶ \$
2	If the organization	·	cal treasures, or other similar assets for final 16 (ASC 958) relating to these items	·
а	_	on Form 990, Part VIII, line 1	-	> \$

b Assets included in Form 990, Part X

Par	t III	Organizations Ma	aintaining Col	lections of	Art, Histori	cal T	reası	ures, o	r Other	Similar As	sets (conti	nued)	
3		g the organization's acq is (check all that apply)	uisition, accessioi	n, and other r	ecords, check	any of	the fo	llowing	that are a	significant u	se of its coll	ection	
а	✓	Public exhibition			d	✓			ange prog	ırams			
b	✓	Scholarly research			e	✓	Othe	r EDUC	ATION				
С	✓	Preservation for future	generations										
4		vide a description of the XIII	organization's col	lections and e	explain how the	ey furt	her th	e organı:	zation's ex	kempt purpos	se in		
5		ng the year, did the org ets to be sold to raise fur								ılar	☐ Yes	☑ N	o
Pai	rt IV	Escrow and Cust Complete if the ory X, line 21.			on Form 990	, Part	: IV,	ine 9, o	r reporte	d an amou	nt on Form	990,	Part
1a		ne organization an agent uded on Form 990, Part I		an or other in	termediary for	contri	bution	ns or oth	er assets I	not	☐ Yes	□ N	o
b	τ ε "∨	es," explain the arrange	ment in Part VIII	and complete	e the following	table				Δr	nount		_
c		inning balance	ment m rait XIII	and complet	e the following	table			1c		nounc		_
d	-	itions during the year							1d				_
e		ributions during the year	-						1e				_
f		ing balance							1f				_
		-										$\overline{}$	_
2a		the organization include									_	∐ N	0
		es," explain the arrange											
i e	rt V	Endowment Fund	ds. Complete if										
1a	Regin	ning of year balance .		(a)Current	30,963	rior yea	-		ears back 62,264,076	(d)Three year	89,383	our year 51	367,619
	-	ibutions			07,504		3,196		12,864	· ·	.69,556		335,075
		ivestment earnings, gair	e and losses		34,186		9,304		2,784,075		106,429		340,686
		s or scholarships		,	,		<u> </u>			,		•	
		expenditures for facilities					-						
-		rograms	=5	3,3	67,000	3,16	5,737		3,176,815	3,1	.88,434	2,	453,997
f	Admir	nistrative expenses .											
g	End o	f year balance		72,0	37,281	69,13	0,963	1	61,884,200	62,2	264,076	57,	589,383
2	Prov	ride the estimated perce	ntage of the curre	ent vear end b	palance (line 1	a. colu	mn (a	ı)) held a	as				
а		rd designated or quasi-e	-	2 970 %	•	٠,	`	,,					
ь	Pern	nanent endowment 🕨	97 030 %										
c	Tem	porarily restricted endov	vment ▶ 0	%									
·		percentages on lines 2a			/o								
3a	Are	there endowment funds	not in the posses	sion of the or	ganization tha	t are h	eld ar	nd admin	stered fo	r the			
	_	inization by										Yes	No
	(i) u	ınrelated organizations				•					3a(i)		No
	• •	related organizations .				ا داداد					3a(ii)		No_
Д 4		'es" on 3a(II), are the rel cribe in Part XIII the inte	_		•						3b		
					3 endownienc	unus							
Pal	rt VI	Land, Buildings, Complete if the or			on Form 990	. Part	IV.	ıne 11a	. See For	m 990. Par	t X. line 10).	
	Desc	ription of property	(a) Cost or oth (investme	ner basis i	(b) Cost or other					lepreciation		ook valu	e
12	Land					1	62,889						162,889
		ngs					48,578			37,359,177		107	,789,401
		hold improvements		+		1 10,1	.0,570			37,333,177		102	.,, 05,701
		·		+		1 1	70,803			727,694			443,109
		ment					27,095	ļ		5,301,116		1	,225,979
e	omer			1		0,5	_,,093	1		0,001,110		1	,223,313

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

104,621,378

	Saa Form 990 Part V lina 17					
	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)		(b) Book value		(c) Method of or end-of-yea	valuation r market value
	al derivatives					
	Tield equity interests	<u> </u>				
(A)						
[B)						
(C)						
(D)						
(E)						
F)						
(G)						
(H)						
Fotal. (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)	•				
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on F	Form 990. P	art IV. line	e 11c. See Fo	rm 990. Par	t X. line 13.
	(a) Description of investment		ok value		(c) Method of	
(1)				Cost	or end-or-yea	ir market value
(2)						
3)						
4)						
5)						
6)						
(7)						
(8)						
(8)						
(9)	nn (b) must equal Form 990, Part X. col (B) line 13)					
(9) Fotal. (Colum	Other Assets. Complete if the organization answered		m 990, Part	IV, line 11d S	See Form 990,	
9) Fotal. (Column Part IX			n 990, Part	IV, line 11d S	See Form 990,	Part X, line 15 (b) Book value
9) Total. (Column Part IX 1)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d S	See Form 990,	
Fotal. (Column Part IX 1)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d S	See Form 990,	
Fotal. (Column Part IX 1) 2) 3)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d S	iee Form 990,	
(9) Fotal. (Column Part IX 1) 2) 3)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d S	See Form 990,	
(9) Fotal. (Column Part IX 1) 2) 3) 4)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d S	See Form 990,	
(9) Fotal. (Column Part IX 1) 2) 3) 4) 5)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d S	See Form 990,	
Fotal. (Column Part IX 1) 1) 2) 3) 4) 5) 6) 7)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d S	See Form 990,	
9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d S	See Form 990,	
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8)	Other Assets. Complete if the organization answered (a) Description		m 990, Part	IV, line 11d S	See Form 990,	
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8)	Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, col (B) line 15 Other Liabilities. Complete if the organization a	n				(b) Book value
9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X	Other Assets. Complete if the organization answered (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15	n		 n 990, Part I		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X	Other Assets. Complete if the organization answered (a) Description (a) Description (b) Must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization a See Form 990, Part X, line 25.	n	es' on Forr	 n 990, Part I		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal (1)	Other Assets. Complete if the organization answered (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization a See Form 990, Part X, line 25. (a) Description of liability	n	es' on Forr	 n 990, Part I		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal (1)	Other Assets. Complete if the organization answered (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization a See Form 990, Part X, line 25. (a) Description of liability	n	es' on Forr	 n 990, Part I		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X 1) Federal (1) 2) 3)	Other Assets. Complete if the organization answered (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization a See Form 990, Part X, line 25. (a) Description of liability	n	es' on Forr	 n 990, Part I		(b) Book value
9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal (1) 2) 3) 4)	Other Assets. Complete if the organization answered (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization a See Form 990, Part X, line 25. (a) Description of liability	n	es' on Forr	 n 990, Part I		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X 1) Federal (1) 2) 3) 4)	Other Assets. Complete if the organization answered (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization a See Form 990, Part X, line 25. (a) Description of liability	n	es' on Forr	 n 990, Part I		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X 1) Federal (2) 3) 4) 5)	Other Assets. Complete if the organization answered (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization a See Form 990, Part X, line 25. (a) Description of liability	n	es' on Forr	 n 990, Part I		(b) Book value
Fotal. (Column Part IX 1) 1) 2) 3) 4) 5) 66) 7) 88) 9) Fotal. (Column Part X 1) Federal (1) Federal (2) 3) 4) 5) 6)	Other Assets. Complete if the organization answered (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization a See Form 990, Part X, line 25. (a) Description of liability	n	es' on Forr	 n 990, Part I		(b) Book value
Fotal. (Column Part IX 1) 1) 2) 3) 4) 5) 6) 7) Part X 1. 1) Federal (1) 5) 6) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7)	Other Assets. Complete if the organization answered (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization a See Form 990, Part X, line 25. (a) Description of liability	n	es' on Forr	 n 990, Part I		(b) Book value
(9) Fotal. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Column Part X 1.	Other Assets. Complete if the organization answered (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization a See Form 990, Part X, line 25. (a) Description of liability	n	es' on Forr	 n 990, Part I		(b) Book value

Part XI

2

e 3

b

c

Part XII

5

1 2

c

d

3

4

b

5

Part XIII

See Additional Data Table

4

Schedule D (Form 990) 2018

Page 4

-6,190,935

36,678,582

3,417,539

24,916,016

247,931

25.163.947

Schedule D (Form 990) 2018

b c d

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

Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b .

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

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

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

Supplemental Information

Other (Describe in Part XIII)

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

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Add lines 2a through 2d . .

Return Reference

Net unrealized gains (losses) on investments 2a 2b

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

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

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

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

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

2c

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2d 4a

2a

2b

2c

2d

4a

4b

Explanation

566.406 -155,104

-9.172.899

2.415.558

2,415,558

1,001,981

247.931

2e

3

4c

5

es 2a through 2d	2e	I
t line 2e from line 1	3	
s included on Form 990, Part VIII, line 12, but not on line 1		
nent expenses not included on Form 990, Part VIII, line 7b . 4a		
Describe in Part XIII)		
es 4a and 4b	4c	
venue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Reconciliation of Expenses per Audited Financial Statements With Expenses per R	eturr	1.

-155,10
36,523,47
28,333,55

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID: Software Version:

EIN: 23-6000149

Name: THE BARNES FOUNDATION

Supplemental Information

Return Reference

Explanation

PART III, LINE 1A

THE FOUNDATION OWNS A COLLECTION OF PAINTINGS, SCULPTURES, ANTIQUES AND OTHER OBJECTS OF A RT THE FOUNDATION HAS CAPITALIZED COLLECTION ITEMS PURCHASED DIRECTLY BY THE FOUNDATION A T COST, AND THOSE CONTRIBUTED OTHER THAN BY ITS FOUNDER AT THE FAIR MARKET VALUE ON THE DA TE OF THE GIFT SUBSTANTIALLY ALL OF THE COLLECTION OBJECTS WERE DONATED TO THE FOUNDATION BY ITS FOUNDER AND ARE RECORDED AT A \$1 NOMINAL VALUE, IN ACCORDANCE WITH A RESOLUTION OF THE BOARD OF TRUSTEES AT THE TIME OF THE GIFT THE FOUNDATION HAS DETERMINED THAT IT IS N OT PRACTICAL TO ESTABLISH A FAIR VALUE OF THE FOUNDER'S ORIGINAL CONTRIBUTION AS OF THE DA TE OF THE GIFT BECAUSE RECORDS RELATING TO THE FAIR VALUE AT THE DATE OF THE CONTRIBUTION ARE UNRELIABLE OR DO NOT EXIST

Supplemental Information	
Return Reference	Explanation
PART III, LINE 4	THE FOUNDATION'S COLLECTIONS INCLUDE WORKS OF ANCIENT AND MODERN ART AND A SIGNIFICANT COL LECTION OF LIVING SPECIMENS OF TREES, PLANTS AND FLOWERS THE WORKS OF ART THAT ARE DISPLA YED IN THE FOUNDATION'S GALLERY ARE AVAILABLE FOR VISITATION BY THE PUBLIC AND ARE ALSO US ED TO CONDUCT EDUCATIONAL ACTIVITIES TO TEACH THE PRINCIPLES OF ART APPRECIATION ESTABLISH ED BY ITS FOUNDER THE LIVING COLLECTIONS ARE USED IN THE FOUNDATION'S PROGRAMS TO TEACH PRINCIPLES OF AESTHETIC APPEAL OF PLANTS COMBINED WITH A BASE IN BOTANY, HORTICULTURE AND L ANDSCAPE DESIGN

Cupplemental Information

Supplemental Information		_
Return Reference	Explanation	
PART V, LINE 4	THE INCOME FROM THE FOUNDATION'S PERMANENTLY RESTRICTED ENDOWMENT FUNDS IS INTENDED TO SUP PORT THE FOUNDATION'S PROGRAM OF COLLECTION CARE, SCHOLARLY ACTIVITIES, EDUCATION AND UNRE STRICTED OPERATING COSTS	

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	INCOME TAXES THE FOUNDATION IS GENERALLY EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVI SIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE IN ADDITION, THE FOUNDATION QUALI FIES FOR CHARITABLE CONTRIBUTION DEDUCTIONS AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THA T IS NOT A PRIVATE FOUNDATION INCOME, WHICH IS NOT RELATED TO EXEMPT PURPOSES, LESS APPLI CABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE INCOME TAXES THE FOUNDATION D ID NOT PAY ANY UNRELATED BUSINESS INCOME TAXES IN 2018 OR IN 2017 MANAGEMENT HAS EVALUATE D THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE FOUNDATION HAD TAKEN NO MATERIAL U NCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS CONSEQUENTLY, NO ACCRUAL FOR INTEREST AND PENALTIES WAS DEEMED NECESSARY FOR THE YEARS ENDED DECEMBER 31, 2018 OR 2017 THE FOUNDATION FILES INCOME TAX RETURNS IN THE UNITED STATES FEDERAL JURIS DICTION GENERALLY, THE FOUNDATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE UNITED STATES FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2015

supplemental Information				
Return Reference	Explanation			
PART XI, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD 814,337 INVESTMENT EXPENSES -247,931			

Supplemental Information				
Return Reference	Explanation			
PART XI, LINE 4B - OTHER ADJUSTMENTS	SPECIAL EVENT DIRECT EXPENSES REPORTED ON FORM 990, PART VIII, LINE 8B -155,104			

S

_

_

Supplemental Information Return Reference Explanation PART XII, LINE 2D - OTHER COST OF GOODS SOLD 814,337 RESERVE ON BENEFICIAL INTEREST IN LEAD TRUST 32,540 SPECIAL E ADJUSTMENTS VENT DIRECT EXPENSES REPORTED ON FORM 990, PART VIII, LINE 8B 155,104

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493294010069 OMB No 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, EZ) 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 **Employer identification number** Namel & the organization THE BARNES FOUNDATION 23-6000149 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 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? 2 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," please explain If you need more space use Part II 3 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 basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 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 a Students' rights or privileges? 5a Nο b Admissions policies? 5b Nο 5c c Employment of faculty or administrative staff? Nο d Scholarships or other financial assistance? 5d Nο e Educational policies? 5e Νo f Use of facilities? 5f No g Athletic programs? 5g Nο h Other extracurricular activities? 5h Nο 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 Yes 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. Schedule E (Form 990 or 990-EZ) (2018)

ADMINISTRATION OF TIS EDUCATIONAL PROGRAM ADMISSIONS,
FINANCIAL AID, OR ANY OTHER BARNES FOUNDATION-ADMINISTERED
EDUCATIONAL ACTIVITY OR RELATED EMPLOYMENT PRACTICES THIS
POLICY IS PUBLICLY DISSEMINATED AND PUBLICIZED ON THE BARNES'S
WEBSITE AND IN EDUCATION-RELATED PRINTED MATERIALS, AND IS
ANNUALLY PUBLISHED IN A GENERAL DISTRIBUTION NEWSPAPER
SERVING THE PHILADELPHIA COMMUNITY

SCHEDULE E, PART I, LINE 6

THE ORGANIZATION RECEIVES GRANTS FROM THE PHILADELPHIA

THE ORGANIZATION RECEIVES GRANTS FROM THE PHILADELPHIA
CULTURAL FUND (\$11,185), THE NATIONAL ENDOWMENT FOR THE ARTS
(\$40,000), AND THE COMMONWEALTH OF PENNSYLVANIA (\$70,751)

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

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding

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

organization entered more than \$15,000 on Form 990-EZ, line 6a Attach to Form 990 or Form 990-EZ. Go to www irs gov/Form990 for instructions and the latest information

DLN: 93493294010069 OMB No 1545-0047

Open to Public Inspection

					entineation number
				23-6000149	
•	_			m 990, Part IV, line	17.
ation raised funds thr	rough any	of the fo	ollowing activities Check a	all that apply	
		e	✓ Solicitation of non-	government grants	
ations		f	✓ Solicitation of gove	rnment grants	
		g	Special fundraising	events	
orm 990, Part VII) or	entity in	connectio	n with professional fundra	alsing services?	′es □ No
		idraisers)	pursuant to agreements	under which the fundrai	ser is
(ii) Activity	fundrai custo cont	ser have ody or rol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
CONSULTANT FOR FUNDRAISING ACTIVITIES	Yes	No No	1,314,789	309,232	1,005,55
	1		1,314,789	309,232	1,005,55
	are not required to ation raised funds this ations written or oral agreement 990, Part VII) or considered individuals or entering the organization (iii) Activity CONSULTANT FOR FUNDRAISING	are not required to complete ation raised funds through any ations written or oral agreement with form 990, Part VII) or entity in paid individuals or entities (fundamental fundamental	are not required to complete this pation raised funds through any of the formations at ions or an agreement with any individuals or entity in connection and individuals or entities (fundraisers) (5,000 by the organization (iii) Activity (iii) Did fundraiser have custody or control of contributions? CONSULTANT FOR FUNDRAISING	are not required to complete this part. ation raised funds through any of the following activities. Check are Solicitation of non-ations f Solicitation of gove g Special fundraising written or oral agreement with any individual (including officers, orm 990, Part VII) or entity in connection with professional fundraising individuals or entities (fundraisers) pursuant to agreements (5,000 by the organization (ii) Activity (iii) Did fundraiser have custody or control of contributions? Yes No CONSULTANT FOR FUNDRAISING ACTIVITIES No 1,314,789	ities.Complete if the organization answered "Yes" on Form 990, Part IV, line are not required to complete this part. ation raised funds through any of the following activities. Check all that apply e

licensing

che	dule G (Form 990 or 990-EZ) 2018					F	Page 3
.1	Does the organization conduct gaming	activities with nonmember	rs?		☐ Yes	□No	
.2	Is the organization a grantor, beneficia formed to administer charitable gaming		a member of a partnership or other entity		□Yes		
3	Indicate the percentage of gaming activ	vity conducted in					
а	The organization's facility			13a			%
b	An outside facility			13b			%
4	Enter the name and address of the pers	son who prepares the orga	inization's gaming/special events books and r	ecords			
	Name ►						
	Address ►						
5a	Does the organization have a contract virevenue?	with a third party from who	om the organization receives gaming		□Yes	□No	
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by		ganization 🕨 \$ and th	ne			
С	If "Yes," enter name and address of the	e third party					
	Name ►						
	Address ►						
6	Gaming manager information						
	Name ►						
	Gaming manager compensation ▶ \$						
	Description of services provided ▶						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
7	Mandatory distributions						
а	Is the organization required under state retain the state gaming license?	e law to make charitable d	istributions from the gaming proceeds to		Yes	□No	
b	Enter the amount of distributions requirements in the organization's own exempt activities.		uted to other exempt organizations or spent		53		
Pai	t IV Supplemental Informatio	n. Provide the explana	tions required by Part I, line 2b, column blicable. Also provide any additional info				 S.
_	Return Reference		Explanation				

Schedule G (Form 990 or 990-EZ) 2018

efil	e GRAPHIC p	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 934	9329	4010	069
Sch	nedule J	C	ompensat	ion Information	ОМ	B No	1545-0	0047
(Form 990)			For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.					3
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.go</u>	ov/Form990 for	instructions and the latest inform	nation.		o Pul ectio	
Nar	ne of the organiz				Employer identificat			
THE	BARNES FOUNDAT:	ION			23-6000149			
Pa	rt I Questi	ons Regarding Compensa	ntion					
							Yes	No
1a				f the following to or for a person liste by relevant information regarding the				
	First-clas	s or charter travel		Housing allowance or residence for	personal use			
	_	r companions	님	Payments for business use of person				
		nification and gross-up paymen	ts 📙	Health or social club dues or initiation				
	□ Discretion	nary spending account		Personal services (e g , maid, chauf	reur, cner)			
b		ixes in line 1a are checked, did t all of the expenses described ab		ollow a written policy regarding paym nplete Part III to explain	ent or reimbursement	1 b		
2				or allowing expenses incurred by all r, regarding the items checked in line	. 152	2	Yes	
	unectors, truste	ees, officers, including the CEO/	Executive Directo	r, regarding the items checked in line	: La·			
3				ed to establish the compensation of the	ne			
				not check any boxes for methods CEO/Executive Director, but explain i	n Part III			
	✓ Compens							
	_ '	ation committee lent compensation consultant	H	Written employment contract Compensation survey or study				ł
		of other organizations		Approval by the board or compensa	tion committee			
		-	_					
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the fi	ling organization or a			
а	Receive a sever	rance payment or change-of-cor	ntrol payment?			4a		No
b	•	or receive payment from, a supp	•	· ·		4b		No
С		or receive payment from, an equ		<u> </u>		4c		No
	ir res to any	or lines 4a-c, list the persons an	id provide the app	plicable amounts for each item in Part	: 111			
	Only 501(c)(3	3), 501(c)(4), and 501(c)(29) organizations	must complete lines 5-9.				
5		ed on Form 990, Part VII, Section		the organization pay or accrue any				
а	The organizatio	n [?]				5a		No
b	Any related org					5b		No
	If "Yes," on line	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section contingent on the net earnings o		the organization pay or accrue any				
а	The organizatio	n ²				6a		No
b	Any related org					6b		No
	•	e 6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section described in lines 5 and 6? If "Ye		the organization provide any nonfixed irt III	d	7	Yes	
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," de	escribe	8	Vec	
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also follo	ow the rebuttable	presumption procedure described in	Regulations section	9	Yes	
For F	Paperwork Redi	uction Act Notice, see the In	structions for Fo	orm 990. Cat No 5	0053T Schedule J	(Form	990)	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) Breakdown	of W-2 and/or 1099-MISC	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)(ı)-(D)	column (B) reported as deferred on prior Form 990	
THOMAS COLLINS EXECUTIVE DIRECTOR &	(i)	395,258	20,000	6,249	8,025	16,709	446,241	0	
PRESIDENT	(ii)	0	0	0	0	0	0	0	
MARGARET B ZMINDA EXECUTIVE VP, CFO AND	(i)	253,529	0	2,452	7,950	25,988	289,919	0	
· · · · · · · · · · · · · · · · · · ·	(ii)	0	0	0	0	0	0	0	
SARA GEELAN DEP DIR, GEN COUNSEL,	(i)	237,845	0	1,111	7,431	22,542	268,929	0	
ACCT CECDETABY	(ii)	0	0	0	0	0	0	0	
1 NINA DIEFENBACH DEPUTY DIRECTOR OF	(i)	313,888	0	2,806	8,041	4,641	329,376	0	
ADV/ANCEMENT	(ii)	0	0	0	0	0	0	0	
5 VINCENT D'ANTONIO SENIOR DIRECTOR OF	(i)	183,250	0	1,025	5,338	2,252	191,865	0	
PERATIONS	(ii)	0	0	0	0	0	0	0	
5 SHELLEY BERNSTEIN DEP DIRECTOR FOR DIGITAL	(i)	162,593	0	750	4,800	15,601	183,744	0	
INITIATIVES	(ii)	0	0	0	0	0	0	0	
7 STEVEN BRADY DIRECTOR OF INFORMATION	(i)	136,685	0	744	410	31,188	169,027	0	
FECHNOLOGY	(ii)	0	0	0	0	0	0	0	

Page 3					
Part III Supplemental Information					
Provide the information, explanation, or	Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information				
Return Reference	Explanation				
PART I, LINE 7	THOMAS COLLINS PARTICIPATES IN A BONUS PLAN IN WHICH THE BONUS IS DETERMINED BASED ON CERTAIN INDIVIDUAL AND/OR ORGANIZATIONAL				

METRICS THE BONUS IS AWARDED AT THE DISCRETION OF THE EXECUTIVE COMMITTEE OF THE BOARD

DLN: 93493294010069 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** THE BARNES FOUNDATION 23-6000149 **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 . 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . Qualified conservation contribution—Historic structures 14 Oualified 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 . . Archeological artifacts . Other ▶ (25 Χ 22,125 AIRLINES MILES Χ 26 Other ▶ (15,000 HOTEL ROOMS) 27 Other ▶ (Χ IPADS) 28 Other ▶ (_ 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 Nο **b** If "Yes," describe the arrangement in Part II 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 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. Schedule M (Form 990) (2018) Cat No 51227J

Schedule M (Form 990) (2018)	Page 2
I, column (b), the	formation. ation required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part number of contributions, the number of items received, or a combination of both. Also complete dditional information.
Return Reference	Explanation
PART I, COLUMN (B)	THE NUMBER OF CONTRIBUTIONS FOR NON-CASH GIFTS ARE BASED ON THE NUMBER OF CONTRIBUTIONS
	Schedule M (Form 990) (2018)

efile GRAPH	C print - DO NOT PROCESS As Filed Data -	DLN	: 93493294010069
SCHEDUL (Form 990 or EZ)	Complete to provide information for responses to specific ques Form 990 or 990-EZ or to provide any additional informati Attach to Form 990 or 990-EZ.	tions on on.	OMB No 1545-0047 2018 Open to Public Inspection
Vamel Betherofge THE BARNES FOUND 990 Schedule		23-6000149	ification number
Return Reference	Explanation		
FORM 990, PART VI, SECTION B, LINE 11B	THE BARNES FOUNDATION 990 IS PREPARED BY AN INDEPENDENT FIRM BASED BY MANAGEMENT A DRAFT IS REVIEWED AND REVISED BY THE EXECUTIVE VIC OO, THE DIRECTOR OF FINANCE AND THE GENERAL COUNSEL (MEMBERS OF MEN FINALIZED BY THE INDEPENDENT FIRM AND THE BARNES FOUNDATION SUB EVIEW TO ALL BOARD MEMBERS PRIOR TO FILING AFTER A COMMENT PERIOD TO THE IRS	E PRESIDENT, CI ANAGEMENT) TH MITS THE DRAFT	FO AND C HE 990 IS TH 990 FOR R

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	IN ADDITION TO REQUIRING EACH TRUSTEE, OFFICER AND KEY EMPLOYEE TO MAKE A DISCLOSURE OF AN Y POSSIBLE PERSONAL, FAMILIAL, OR BUSINESS RELATIONSHIP THAT COULD GIVE RISE TO A CONFLICT OF INTEREST OR THE APPEARANCE OF A CONFLICT OF INTEREST, THE FOUNDATION'S CONFLICT OF INT EREST POLICY ALSO REQUIRES THE DISCLOSURE OF ANY CHANGE OF CIRCUMSTANCE THAT WOULD GIVE RI SE TO CONFLICTS CONCERNS MOREOVER, THE FOUNDATION HAS ADOPTED A WHISTLEBLOWER POLICY DESI GNED TO ENCOURAGE PROMPT DISCLOSURE BY TRUSTEES, OFFICERS AND EMPLOYEES OF ANY UNLAWFUL OR IMPROPER BEHAVIOR OR TRANSACTIONS, INCLUDING THOSE THAT RAISE POTENTIAL CONFLICT OF INTER EST CONCERNS EACH YEAR ALL DIRECTORS, OFFICERS, TRUSTEES AND KEY EMPLOYEES ARE REMINDED OF THEIR OBLIGATIONS TO COMPLY WITH THE CONFLICT ON INTEREST POLICY AT THE ORGANIZATION'S A NNUAL MEETING AND PERIODICALLY AT OTHER TIMES DURING THE YEAR

Return Reference	Explanation
PART VI, SECTION B,	THE BARNES FOUNDATION PERFORMS A REVIEW OF THE COMPENSATION AND BENEFITS PACKAGE (INCLUDIN G FRINGE, RETIREMENT AND SEVERANCE BENEFITS) FOR KEY EMPLOYEES AT THE TIME OF HIRE THIS R EVIEW RELIES UPON COMPARABILITY DATA TO DETERMINE WHETHER THE COMPENSATION ARRANGEMENT IN ITS ENTIRETY IS REASONABLE FOR THIS PURPOSE, APPROPROPRIATE AND RELEVANT INFORMATION INCL UDES COMPENSATION PAID BY SIMILIARLY SITUATED TAX-EXEMPT AND TAXABLE ORGANIZATIONS FOR FUN CTIONALLY COMPARABLE POSITIONS THIS REVIEW ALSO TAKES INTO ACCOUNT THE SIZE, REVENUE, GEO GRAPHIC LOCATION, STRUCTURE AND COMPLEXITY OF THE ORGANIZATION

Return Explanation Reference

990 Schedule O, Supplemental Information

FORM 990, PART VI, DOCUMENTS (E.G., CONFLICT OF INTEREST POLICY), ARE AVAILABLE FOR REVIEW UPON REQUEST FOR THE SAME PERIOD OF DISCLOSURE AS SET FORTH IN SECTION 6104(D), DIRECTED TO THE FOLLOWING GENERAL COUNSEL (A MEMBER OF MANAGEMENT), BARNES FOUNDATION, 2025 BENJAMIN FRANKLIN PARKWA Y, PHILADELPHIA, PA 19130

Return Explanation

FORM 990, PART IX, RAISING EXPENSES 6,607 TOTAL EXPENSES 1,317,459 MANAGEMENT AND GENERAL EXPENSES 52,852 FUND RAISING EXPENSES 6,607 TOTAL EXPENSES 1,376,918 OTHER PROFESSIONAL SERVICES PROGRAM SER VICE EXPENSES 1,584,539 MANAGEMENT AND GENERAL EXPENSES 231,736 FUNDRAISING EXPENSES 9,7 33 TOTAL EXPENSES 1.826,008

990 Schedule O, Supplemental Information Return Reference Explanation

FORM 990,	IN THE PREPARATION OF ITS 2018 FINANCIAL STATEMENTS, THE FOUNDATION ADOPTED THE PROVISIONS
PART X,	OF ASU 2016-14 NOT-FOR-PROFIT ENTITIES (TOPIC 958) PRESENTATION OF FINANCIAL STATEMENTS
LINE 27-29	FOR NOT-FOR-PROFIT ENTITIES IN CONNECTION WITH THIS CHANGE, THE FOUNDATION RECORDED SOME
	RECLASSIFICATIONS OF NET ASSETS BETWEEN THE TWO NEW CLASSIFICATIONS, THOSE (1) WITH DONOR
	RESTRICTIONS AND (2) WITHOUT DONOR RESTRICTIONS THE FORM 990, PART X, HOWEVER, HAS NOT BE
	EN REVISED TO INCORPORATE THIS CHANGE AND AS A RESULT THE NET ASSETS ARE STILL CLASSIFIED
	NTHREE CATEGORIES (1) UNRESTRICTED, (2) TEMPORARY RESTRICTED AND (3) PERMANENTLY RESTRI
	CTED THEREFORE, BARNES FOUNDATION HAS UPDATED THE BEGINNING YEAR NET ASSETS TO REFLECT TH
	ERECLASSIFICATIONS AS MENTIONED ABOVE IN ORDER TO REPORT CONSISTENTLY WITH THE END OF YEA
	R NET ASSETS THIS RECLASSIFICATION HAD NO EFFECT ON TOTAL NET ASSETS
l J	

Return Explanation
Reference

FORM 990, PART XI, LINE 9