EXTENDED TO MAY 17, 2021

(Rev. January 2020) Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

Open to Public Inspection

OMB No. 1545-0047

A F		2019 calendar year, or tax year beginning JUL 1, 2019 and ending	TITAT 20 2020	
<u>A F</u>	or the	T		
B 0	heck if	C Name of organization	D Employer identif	fication number
а				
	Address change	FINE PENNSYLVANIA ACADEMY OF THE FINE ARTS		
	Name change	Doing business as	23-13522	256
	Initial	Number and street (or P.O. box if mail is not delivered to street address) Room/s		
	Final	128 NORTH BROAD STREET	215-972-	
	⊒return/ termin-	·		
_	ated □Amende	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	33,130,909.
	return	PHILADELPHIA, PA 19102	H(a) Is this a group	
	Applica tion pending	Finame and address of principal officer: DAVID R. BRIGHAM, FID	for subordinate	s? Yes X No
	pending	SAME AS C ABOVE	H(b) Are all subordinates	included? Yes No
I T	ax-exe	mpt status: $\boxed{\mathbf{X}}$ 501(c)(3) $\boxed{}$ 501(c) () \blacktriangleleft (insert no.) $\boxed{}$ 4947(a)(1) or $\boxed{}$	527 If "No," attach	a list. (see instructions)
J۷	Vebsite	e: ▶ WWW.PAFA.ORG	H(c) Group exempti	on number
				M State of legal domicile: PA
		Summary	our or formation,	otato or rogar dominoro
		Briefly describe the organization's mission or most significant activities: AS THE F	TDOM ADM MIICE	TIM AND
ě				
auc		SCHOOL IN THE US, PAFA CELEBRATES THE TRANSFO		
Governance	l	Check this box if the organization discontinued its operations or disposed of m		1
Š	l		3	
	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		
S	5 7	Fotal number of individuals employed in calendar year 2019 (Part V, line 2a)	5	406
ij	6 7	Total number of volunteers (estimate if necessary)	6	44
Activities &		Fotal unrelated business revenue from Part VIII, column (C), line 12		161,352.
Ă		Net unrelated business taxable income from Form 990-T, line 39		
	_ 	vet unrelated business taxable moonle nom of our june of	Prior Year	Current Year
Revenue	١ ,	Death the Manager of the ANNI Manager of the A	14,369,692.	
	8 (Contributions and grants (Part VIII, line 1h)		
	9 F	Program service revenue (Part VIII, line 2g)	13,504,505.	
	10 li	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	1,368,803.	
ш	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	355,782.	
	12 7	Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	29,598,782.	
	13 (Grants and similar amounts paid (Part IX, column (A), lines 1-3)	5,002,152.	5,406,036.
	l	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	45 0	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	9,710,426.	9,363,076.
ses	162 5	Professional fundraising fees (Part IX, column (A), line 11e)	0.	
Expenses	10a	Fotal fundraising expenses (Part IX, column (D), line 25) \(\bigs \) 1,190,295.		
Ä			9,274,634.	8,949,709.
_	'' \	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		
	l	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	23,987,212.	
		Revenue less expenses. Subtract line 18 from line 12	5,611,570.	-1,400,094.
Net Assets or Fund Balances			Beginning of Current Year	End of Year
sets	20 ⊺	Total assets (Part X, line 16)	126,480,948.	121,329,646.
AS	21 7	Total liabilities (Part X, line 26)	32,173,447.	31,458,035.
.et	22 1	Net assets or fund balances. Subtract line 21 from line 20	94,307,501.	89,871,611.
Pa	irt II	Signature Block		
Unde	er penali	ties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the best of m	ny knowledge and belief, it is
		, and complete. Declaration of preparer (other than officer) is based on all information of which prep		ij miewieuge und benei, it ie
ii uo,	1	L	aror nao any kitowioago:	
٠.		Signature of officer	Date	
Sigr		•	Date	
Her	e	MARYANNE MURPHY, CFO		
		Type or print name and title	Ta	
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Paid	 E	HARRISON PEREIRA	05/17/21 self-empl	
Prep	arer	Firm's name TAIT, WELLER & BAKER LLP		23-1144520
		Firm's address TWO LIBERTY PL, 50 S. 16TH ST, STE 2		
	-	PHILADELPHIA, PA 19102-2529		L5-979-8800
Mav	the IR	S discuss this return with the preparer shown above? (see instructions)	1	X Yes No
y				100

Pa	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE ACADEMY OPERATES A POST-SECONDARY EDUCATIONAL PROGRAM IN FINE ARTS
	AS WELL AS A GALLERY COLLECTION OF AMERICAN ART. IN ADDITION, THE
	ACADEMY SPONSORS FINE ARTS CLASSES FOR ALL AGES AND FREE ARTS
_	PROGRAMS.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 16,643,918. including grants of \$ 5,406,036.) (Revenue \$ 11,487,436.)
	PAFA'S POST-SECONDARY FINE ARTS PROGRAM OFFERS PROGRAMS IN PAINTING,
	PRINT-MAKING, SCULPTING AND DRAWING. THE SCHOOL GRANTS A FOUR YEAR
	CERTIFICATE, A BACHELOR OF FINE ARTS DEGREE, AND A MASTER OF FINE ARTS
	DEGREE.
4b	(Code:) (Expenses \$ 2,398,113. including grants of \$) (Revenue \$1,056,050.)
40	(Code:) (Expenses \$2,398,113. including grants of \$) (Revenue \$1,056,050.) PAFA OPERATES A GALLERY THAT DISPLAYS GREAT WORKS OF AMERICAN ART. IT
	IS THE OLDEST SUCH GALLERY IN THE U.S. AND ITS PRINCIPAL BUILDING IS A
	HISTORICAL STRUCTURE. THE SCHOOL ALSO HOSTS SEVERAL SPECIAL
	EXHIBITIONS EACH YEAR.
	EMILIBITION INC.
4c	(Code:) (Expenses \$ 847,119. including grants of \$) (Revenue \$ 562,930.)
	PUBLIC EDUCATION TEAM SPONSORS FINE ART CLASSES FOR ALL AGES BOTH ON
	AND OFF-SITE.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 19,889,150.
	Form 990 (2019)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
-	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
·	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	Ť		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		-23
′		7		x
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		v	
_	Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			7,7
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	_X_	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
124		12a	Х	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	IZa		
b		12b		v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	13	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	ا بيرا		Х
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			٦,
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
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	17		X
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	X	
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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	_	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		Х

	990 (2019) PENNSYLVANIA ACADEMY OF THE FINE ARTS 23-135	2256	Р	age 4
Pai	T IV Checklist of Required Schedules (continued)			_
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		37	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	-
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		Х	
04-	Schedule J	23	Λ	+
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	24a	Х	
h	Schedule K. If "No," go to line 25a	24a	21	X
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		+
·	any tax-exempt bonds?	24c		X
Ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	214		+
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If</i> "Yes." <i>complete</i>			
	Schedule L. Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	Х	
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			l
	"Yes," complete Schedule L, Part IV	28c	ļ	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	₩
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			,,
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			_v
0.4	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			x
25-	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		 ^
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35b		
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
30	· · · · · · · · · · · · · · · · · · ·	36		X
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		+
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	0,		
-	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pai		1 00		
	Check if Schedule O contains a response or note to any line in this Part V			
	. , , , , , , , , , , , , , , , , , , ,		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 19	2		
	Enter the number of Forms W-2G included in line 1a. Enter -0. if not applicable.	0		

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Form **990** (2019)

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

Form 990 (2019) PENNSYLVANIA ACADEMY OF THE FINE AKTS

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

	i (dominaed)								
_	5	l I		Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	2a 406							
L	filed for the calendar year ending with or within the year covered by this return		2b	Х					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return		20	- 22					
20	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions		За	Х					
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	······	3b	X					
	At any time during the calendar year, did the organization have an interest in, or a signature or other a		JU	- 25					
·u	financial account in a foreign country (such as a bank account, securities account, or other financial a		4a		x				
b	If "Yes," enter the name of the foreign country								
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts (FBAR).							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		х				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transactions and taxable party notify the organization that it was or is a party to a prohibited tax shelter transactions.		5b		Х				
С									
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the								
	any contributions that were not tax deductible as charitable contributions?		6a		Х				
b	If "Yes," did the organization include with every solicitation an express statement that such contribution								
	were not tax deductible?		6b						
7	Organizations that may receive deductible contributions under section 170(c).								
а	$ Did the organization \ receive \ a \ payment \ in \ excess \ of \$75 \ made \ partly \ as \ a \ contribution \ and \ partly \ for \ goods \ and \ services \ $	vices provided to the payor?	7a	X					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Х					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s required							
	to file Form 8282?	 I I	7c		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	7e		х				
е	3 , , , , , , , , , , , , , , , , , , ,								
f	3 7 7 7 7 7 1								
g									
h									
8	,								
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.								
а	5111		9a						
b			9b						
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12	10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b							
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders	11a							
b	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)	11b							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?		13a						
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the	المدا							
_	organization is licensed to issue qualified health plans	13b	-						
	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tay year?	13c	14a		Х				
14a b	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14a 14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner		1-10						
	excess parachute payment(s) during the year?		15		x				
	If "Yes," see instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		х				
	If "Yes," complete Form 4720, Schedule O.								
		·		000					

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

800						X					
Sec	tion A. Governing Body and Management										
		ı	1 44		Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>	44								
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.										
b	Enter the number of voting members included on line 1a, above, who are independent	1b	44								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with	any other								
	officer, director, trustee, or key employee?			2	Х						
3	Did the organization delegate control over management duties customarily performed by or under the										
				3		х					
4											
5	Did the organization become aware during the year of a significant diversion of the organization's ass			<u>4</u> 5		X					
6				6		X					
	•			-							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					.					
_	more members of the governing body?			7a		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st					,,					
	persons other than the governing body?			7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	-	-								
а	The governing body?			8a	X						
b	Each committee with authority to act on behalf of the governing body?			8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched a	t the								
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)								
					Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?			10a		X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	s, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b							
11a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?										
b											
12a	a Did the organization have a written conflict of interest policy? If "No," go to line 13										
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y										
	in Schedule O how this was done	, -		12c	Х						
13	Did the organization have a written whistleblower policy?			13	Х						
14	Did the organization have a written document retention and destruction policy?			14	Х						
15	Did the process for determining compensation of the following persons include a review and approva										
.5	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	. by iii	acpondone								
•	The organization's CEO, Executive Director, or top management official			15a	х						
				15b	X						
D	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			130							
160	, , , , , , , , , , , , , , , , , , , ,	ont	vith a								
108	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangent tayable extituduring the year?			16-		Х					
1.	taxable entity during the year?			16a		Δ					
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	-	=								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ										
800	exempt status with respect to such arrangements?			16b							
	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed PA	-1.00	T (01'			1-1-					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	ıa 990	1-1 (Section 501(c)(3)	s only)	availa	pie					
	for public inspection. Indicate how you made these available. Check all that apply.										
	Own website Another's website X Upon request Other (explain		,								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	nflict (of interest policy, and	finand	cial						
	statements available to the public during the tax year.										
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks an	d records								
	MARYANNE MURPHY - 215-972-2097										
	128 N BROAD STREET, PHILADELPHIA, PA 19102										

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

See instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	(do box		Pos heck	ition	than o	one n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) KEVIN F. DONOHOE	5.00	ļ								•
CHAIRMAN		Х		Х				0.	0.	0.
(2) JOSEPH D. CULLEY	5.00			l						•
TREASURER	 	Х		Х				0.	0.	0.
(3) ANNE E. MCCOLLUM	5.00	ļ								
VICE CHAIR	 	Х		Х				0.	0.	0.
(4) THOMAS N. PAPPAS	5.00	ļ								
VICE CHAIR	 	Х		Х				0.	0.	0.
(5) SUSAN M. HENDRICKSON	5.00									
SECRETARY		Х		Х				0.	0.	0.
(6) JAMES C. BIDDLE	5.00	1								
TRUSTEE		Х						0.	0.	0.
(7) DONALD R. CALDWELL	5.00								_	_
TRUSTEE		Х						0.	0.	0.
(8) CHARLES E. CHASE	5.00								_	_
TRUSTEE		Х						0.	0.	0.
(9) JONATHAN L. COHEN	5.00									
TRUSTEE		Х						0.	0.	0.
(10) ROBERT I. FRIEDMAN, ESQ.	5.00									
TRUSTEE		Х						0.	0.	0.
(11) WILLIAM P. HANKOWSKY	5.00									
TRUSTEE		Х						0.	0.	0.
(12) RO KING	5.00									
TRUSTEE		X						0.	0.	0.
(13) MARGUERITE LENFEST	5.00									
TRUSTEE		Х						0.	0.	0.
(14) WINSTON I. LOWE	5.00									_
TRUSTEE		Х						0.	0.	0.
(15) JAMES E. O'NEILL, ESQ.	5.00									
TRUSTEE		Х						0.	0.	0.
(16) THEODORE O. ROGERS, JR, ESQ.	5.00									
TRUSTEE		Х						0.	0.	0.
(17) RICHARD W. SNOWDEN	5.00									
TRUSTEE		Х						0.	0.	0.
032007 01 20-20					•			•	-	Form 990 (2019)

932007 01-20-20 Form **990** (2019)

10111 330 (2013)	1111111111				_		_					<u> 190 - </u>
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A)	(B)	(C)						(D)	(E)		(F)	
Name and title	Average	ge Positi			sition more than one			Reportable	Reportable	Es	timate	ed
	hours per	box	, unle	ss per	rson i	s both	n an	compensation	compensation	an	nount o	of
	week		cer an	nd a di	irecto	r/trus	tee)	from	from related		other	
	(list any	director						the	organizations		pensa	
	hours for related	or dir	g.			ated		organization	(W-2/1099-MISC)		om the	
	organizations	ıstee	truste		a a	bens		(W-2/1099-MISC)			anizati	
	below	ual tru	ional		ploye	t com					d relate	
	line)	ndividual trustee or	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			orga	anizatio	JI 15
(18) REGINALD M. BROWNE	5.00	=	=	0	×	Τ ω	ш.					
TRUSTEE		Х						0.	0.			0.
(19) PIA HALLORAN	5.00											
TRUSTEE		Х						0.	0.			0.
(20) J. BRIEN MURPHY, M.D.	5.00											
TRUSTEE		Х						0.	0.			0.
(21) ARLEN SHENKMAN	5.00											
TRUSTEE		Х						0.	0.			0.
(22) KENNETH R. WOODCOCK	5.00	1						_				
TRUSTEE		Х						0.	0.			0.
(23) MARK A. DOUGLAS	5.00											_
TRUSTEE		Х						0.	0.			0.
(24) CHARLES H. HARPER	5.00	ļ										•
TRUSTEE	F 00	Х				_		0.	0.			0.
(25) ROBERT E. KOHLER, PH. D.	5.00	.,							_			^
TRUSTEE	F 00	Х						0.	0.			0.
(26) JANNIE K. LAU	5.00	x						_	_			^
TRUSTEE		Λ						0.	0.			0.
1b Subtotal								1,209,613.	0.	10	3,30	
c Total from continuation sheets to Part VI								1,209,613.	0.		3,30 3,30	
d Total (add lines 1b and 1c) 2 Total number of individuals (including but n							-	<u> </u>	• •	10.	3,30	<u> </u>
compensation from the organization	ot iimitea to tri	ose	iiste	u ac	ove	y wri	o re	ceived more than \$100,	000 of reportable			10
compensation from the organization											Yes	No
3 Did the organization list any former officer,	director, trust	ee. k	ev e	lame	ove	e. or	hial	nest compensated emp	lovee on			
line 1a? If "Yes," complete Schedule J for s	•		•		•		_		•	3		Х
4 For any individual listed on line 1a, is the su												
and related organizations greater than \$150),000? If "Yes,	" co	mple	ete S	Sche	dule	J fo	or such individual		4	Х	
5 Did any person listed on line 1a receive or a												

rendered to the organization? |f "Yes," complete Schedule J for such person

Section B. Independent Contractors

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

(B) Description of services	(C) Compensation
SECURITY SERVICES	537,632.
CUSTODIAL SERVICES	263,689.
CATERING	204,277.
FACILTY MAINTENANCE	191,338.
CONSULTING	189,533.
d above) who received more than	
	Description of services SECURITY SERVICES CUSTODIAL SERVICES CATERING FACILTY MAINTENANCE CONSULTING

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2019)

and Highest (C) Position all that apply) and output apply and the apply apply and the	0. 0. 0.	Reportable compensation from related organizations (W-2/1099-MISC) 0. 0.	(F) Estimated amount of other compensation from the organization and related organizations 0. 0.
rosition all that apply) aakold ma patesuad moo	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC) 0. 0.	Estimated amount of other compensation from the organization and related organizations 0.
all that apply) about the particular apply about the par	compensation from the organization (W-2/1099-MISC) 0. 0.	compensation from related organizations (W-2/1099-MISC) 0 • 0 •	amount of other compensation from the organization and related organizations 0.
om pensated em ployee	from the organization (W-2/1099-MISC) 0. 0. 0.	from related organizations (W-2/1099-MISC) 0 • 0 •	other compensation from the organization and related organizations 0.
Officer Key employee Highest compensated employee Former	the organization (W-2/1099-MISC) 0. 0. 0.	organizations (W-2/1099-MISC) 0 • 0 •	compensation from the organization and related organizations 0.
Officer Key employee Highest compensated employee Former	organization (W-2/1099-MISC) 0. 0. 0.	(W-2/1099-MISC) 0. 0. 0.	from the organization and related organizations 0.
Officer Kay em ployee Highest compensated em	(W-2/1099-MISC) 0. 0. 0.	0. 0. 0.	organization and related organizations 0.
Orfficer Key employee Highest compensate	0. 0. 0.	0. 0.	and related organizations 0. 0.
Officer Key employee Highest compe	0. 0. 0.	0. 0.	0.
Officer Key empl Highest c	0. 0. 0.	0. 0.	0.
Office Of	0. 0. 0.	0. 0.	0.
	0. 0. 0.	0. 0.	0.
	0. 0. 0.	0. 0.	0.
	0.	0.	0.
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	0.	0.	0.
		0	0.
+ -	0.	0.	0.
	0	0	0.
	0.	0.	0.
		0	0.
		•	•
	0.1	0.1	0.
	0.	0.	0.
		3.	<u></u>
$_{\rm X}$	355.000	0.	30,317.
	223,0000	3.	,
	175.000	0.	14,945.
X		•	,
	x		0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0

								FINE ARTS	23-135	2256
Part VII Section A. Officers, Directors, Tru	ustees, Key Er	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				sition			Reportable	Reportable	Estimated
	hours per week (list any hours for related organizations below	stee or director	Institutional trustee	Officer Officer	that Key employee	Highest compensated employee	ly)	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
47) PROCEED ANDERGON	line)	PI	su	#0	, Ke	<u>을</u>	For			
(47) BROOKE D. ANDERSON DIRECTOR OF THE MUSEUM	40.00	-				x		200,000.	0.	17,080
(48) MALINI DODDAMANI	40.00					^		200,000.	0.	17,000
CHIEF MARKETING OFFICER	40.00	1				x		185,000.	0.	15,799
(49) ASHLEY REBECCA LOMERY	40.00					25		103,000.	0.	13,133
CHIEF DEVELOPMENT OFFICER		1				x		154,613.	0.	13,204
(50) MEGAN K MCCARTHY, PHD	40.00					<u> </u>		,		.,
VP MAJOR GIFTS						Х		140,000.	0.	11,956
			_							
		-								
		1								
		1								
		1								
		-								
		1								
		1								
		1								
		L	L		L	L				
					<u> </u>					
		1								
otal to Part VII, Section A, line 1c								1,209,613.		103,301

Form 990 (2019) PENNSYL
Part VIII Statement of Revenue

		Check if Schedule O contains a	response o	or note to any lin	e in this Part VIII			
				,	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
						function revenue	business revenue	sections 512 - 514
SS	1 :	a Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			1b					
S S		c Fundraising events	1c	435,928.				
fts,		d Related organizations	1d	100,520.				
ية إق			1e	89,389.				
Sir		e Government grants (contributions)	ie	05,505.				
utic er	1	f All other contributions, gifts, grants, and	1f	6,623,528.				
ë Đ		similar amounts not included above		253,470.				
on Dd		g Noncash contributions included in lines 1a-1f	1g \$	255,470.	7,148,845.			
OB		h Total. Add lines 1a-1f		Business Code	7,110,013.			
_	•	a TUITION AND FEES		900099	11,310,699.	11,310,699.		
ice	2 6			900099	562,930.	562,930.		
er ue	-	c RENTALS FOR EXEMPT ACT.		900099	491,684.	491,684.		
m S				900099	310,802.	310,802.		
gra Re		d WOMENS BOARD REVENUE e MUSEUM ADMISS/COLLECT		900099	233,340.	71,988.	161,352.	
Program Service Revenue	,	<u> </u>		300033	233,340.	71,300.	101,332.	
-		f All other program service revenue			12 909 455			
-		g Total. Add lines 2a-2f			12,909,455.			
	3	Investment income (including divider			1,505,808.			1,505,808.
		other similar amounts)			1,303,000.			1,303,000.
	4	Income from investment of tax-exem	-					
	5	Royalties) Real	(ii) Personal				
	•) I leai	(ii) i ersoriai				
		a Gross rents 6a						
		b Less: rental expenses 6b						
		c Rental income or (loss) 6c						
		d Net rental income or (loss)	ecurities	(ii) Other				
	, ,		304,487.	(ii) Other				
		assets other than inventory b Less: cost or other basis	301,107.					
Φ		and sales expenses	386 548					
Ď.			417,939.					
her Revenue		. ,			417,939.			417,939.
<u>بر</u> ۳		d Net gain or (loss)a Gross income from fundraising events (r			117,303.			117,333.
	0 (including \$ 435,928.						
Ò		contributions reported on line 1c). So	- 1					
		Part IV, line 18		157,171.				
		b Less: direct expenses		237,994.				
		c Net income or (loss) from fundraising			-80,823.			-80,823.
		a Gross income from gaming activities			33,323			22,523
	9 (Part IV, line 19						
		b Less: direct expenses						
		c Net income or (loss) from gaming ac						
		a Gross sales of inventory, less returns						
	10 6	and allowances		428,406.				
		b Less: cost of goods sold						
		c Net income or (loss) from sales of inv			240,766.	240,766.		
\neg		C The modifie of (1999) from Saids of fin	contory	Business Code	, , , , , ,	,		
sne	11 :	a MISCELLANEOUS		900099	176,737.	176,737.		
Miscellaneous Revenue		b			,	,,,,,,,,,		
əlla		c						
isce	Ì	d All other revenue						
Σ	Ì	e Total. Add lines 11a-11d			176,737.			
	12	Total revenue. See instructions			22,318,727.	13,165,606.	161,352.	1,842,924.

Form 990 (2019) PENNSYLVANIA Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must cor	mplete column (A).	
Check if Schedule O contains a respor	nse or note to any line in	this Part IX		
	(-)	,	(0)	(5)

Doc of Include amounts reported on lines 60, Total expenses Program service	Do r	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, to religious productions, to religious programments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to of for members Compensation of current officers, directors, trustees, and key employees Geographic parts and suppass (as clinical under section 498(c)(3)(8) Other salistics and vagues Pension plan accruals and contributions (include section 4918) and 493, 282. 7, 405, 728. 5, 922, 127. 760, 932. 722, 659 Pension plan accruals and contributions (include section 4918) and 493(b) employer contributions (include section 4918) and 493(b			Total expenses	expenses		
2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 in an 16 in 25, 406, 036. 8 Benefits paid to or for members 5 Compensation of current officiers, directors, trustees, and key employees 6 Compensation or included above to disqualified persons (as defined under section 4988(IV)13) and persons described in section 4988(IV)13) and 493(IV) and persons 4988(IV)13) and 493(IV) and 493	1	- 1				
Individuals See Part N, line 22 5,406,036. 5,406,036.		- · · · · · · · · · · · · · · · · · · ·				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation or included adove to disqualified persons (as defined under section 4988(r)(1)) and persons described in section 4988(r)(8)(8) 7 (405,728. 5,922,127. 760,932. 722,669 8 Pession plan accruals and contributions (include section 4918) (and 409) employer contributions (include section 4918) (and 409) employer contributions (include section 4918, and 4091, a	2		F 406 036	F 406 036		
organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 and 18 benefits paid to or for members 5 compensation of current officers, directors, trustees, and key employees 493,282. 493,28			5,406,036.	5,406,036.		
Individuals See Part V, lines 15 and 16 Benefits paid to or for members See Part V, lines 15 and 16 See Part V, lines 15 See Part V, lines 17 See Part V, lines 17 See Part V, line 17	3	- I				
4 Benefits paid to or for members . Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above to disqualified persons (as Ediffered under section 4968(f()) and porsons described in section 4968(f()) and porsons described in section 4968(f()) and porsons described in section 4968(f()) and 493(f) employer contributions (include section 401(f) and 493(f)) employer contributions (include section 401(f) and 493(f) employer contribution (include section 401(f) and 493(f) employer (include section 401(f) and 493(f) employer (include section 401(f) employer (include section 401(f) employer (include section 401(f) employer (include section 401(f) employer (inc						
5 Compensation of current officers, directors, trustees, and key employees 6 Compensation in included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(3)(8) 7 Cother salaries and wages 8 Pension plan accruisal and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 1 Page 1 24, 824. 580, 404. 93, 552. 70, 868 persons plan section 401(k) and 403(b) employer contributions 9 Other employee benefits 1 Page 1 24, 824. 580, 404. 93, 552. 70, 868 persons plan section 401(k) and 403(b) employer contributions 9 Other employee benefits 1 Page 1 24, 824. 580, 404. 93, 552. 70, 868 persons plan section 401(k) and 403(b) employer contributions 1 Page 2 29, 937. 411, 639. 84, 532. 50, 262 persons of the contributions of th						
trustees, and key employees Compensation not included above to disqualifed persons (as defined under section 4958(x)(3)(8) 7 Other statines and wages 8 Pension plan accrusis and contributions (include section 401(k) and 403(k) employer contributions) 9 Other employee benefits 7 44, 824. 580, 404. 93, 552. 70, 868 10 Payoril taxes 11 Fees for services (nonemployees): 12 Advantagement 13 9, 857. 9, 361. 30, 496. 14 Logouring 15 Professional fundraising services. See Part IV, line 17 Professional fundraising services. See Part IV,						
6 Compensation not included above to disqualified persons (as defined under section 4958(c)(3)(8)	5	· ·	402 202		402 202	
persons (as defined under section 4958(pt(1)) and persons described in section 4958(pt(3)(8)) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(k) employer contributions) 9 Other employee benefits 7 44 , 824 , 580 , 404 , 93 , 552 , 70 , 868 10 Payoril taxes 11 Fees for services (nonemployees): a Management b Legal 4 Accounting 229 , 937 , 9, 361 , 30 , 496 , 229 , 937 , 229			493,282.		493,282.	
persons described in section 4958(c)(3(B) 7,405,728. 5,922,127. 760,932. 722,669 8 Pension plan accruals and contributions (include section 401(k) and 402(b) employer contributions) 9 Other employee benefits 744,824. 580,404. 93,552. 70,868 10 Payroll taxes 546,433. 411,639. 84,532. 50,262 11 Fees for services (nonemployees): 12 Management 8 Management 9	6					
7 Other salaries and wages 8 Pension plan acruals and contributions (include section 40 like) and 403(p) employer contributions) 9 Other employee benefits 172,809. 140,106. 15,596. 17,107 1744,824. 580,404. 93,552. 70,868 546,433. 411,639. 84,532. 50,262 17 Fees for services (nonemployees): 18 Management 19 Legal 29,857. 9,361. 30,496. 229,937. 229,937. 229,937. 229,937. 229,937. 229,937. 229,937. 229,937. 229,937. 229,937. 229,937. 229,937. 256,708. 256,708. 9 266,708. 256,708. 9 277,130. 115,371. 136,658. 25,101 2044ertising and promotion 203,926. 71,203. 137,723. 2044ertising and promotion 203,926. 71,203. 137,723. 2044ertising and promotion 203,932. 139,532. 272,130. 115,371. 136,658. 25,101 26,040retis) (Aparticular texpenses of Schol) (Aparticular texpenses)						
8 Pension plan accruals and contributions (includes action 401(k) and 403(b) employer centributions) 9 Other employee benefits		. , , , , ,	7 405 700	F 000 107	760 022	722 ((0
172,809			7,405,728.	5,944,147.	760,932.	122,009
10 Payroll taxes 546,433 411,639 84,532 50,262	8	•	170 000	140 100	15 506	17 107
10 Payroll taxes 546,433 411,639 84,532 50,262	_				13,390.	1/,1U/
Fees for services (nonemployees): a Management						70,868 F0 363
a Management b Legal			340,433.	411,039.	04,332.	30,202
b Legal 39,857. 9,361. 30,496. 229,937. 229,937. 229,937. 30,496. 229,937. 30,496. 229,937. 30,496. 229,937. 30,496. 3		` ' ' '				
Company Comp			20 057	0 261	30 406	
d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 277, 130. 115, 371. 136, 658. 25, 101 2 Advertising and promotion 208, 926. 71, 203. 137, 723. 3 Office expenses 697, 093. 545, 516. 83, 833. 67, 744 1 Information technology 139, 532. 139, 532. 16 Occupancy 1,508,530. 1,508,530. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 19 Conferences, conventions, and meetings 10 Interest 10 Other expenses. Itemize expenses on to covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 2 RENTRAL EXPENSES – STUDE b MEMBERSHIP DUES AND SUB 280, 674. 100, 000. 180, 674. 281 MISCELLANEOUS 240, 770. 210, 841. 23, 100. 6, 829. All other expenses. Add lines 1 through 24e All other expenses. Add lines 1 through 24e deducational expenses. Add lines 1 th				9,301.		
e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 277, 130 . 115, 371 . 136, 658 . 25, 101 208, 926 . 71, 203 . 137, 723 . 330 . 330 . 345, 516 . 83, 833 . 67, 744 1 Information technology 139, 532 . 139, 532			449,931.		449,931.	
Formation Investment management fees 256,708. 256,709. 2						
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 277 , 130 . 115 , 371 . 136 , 658 . 25 , 101 208 , 926 . 71 , 203 . 137 , 723 . 31 Office expenses . 697 , 093 . 545 , 516 . 83 , 833 . 67 , 744 41 Information technology . 139 , 532 . 139 , 532 . 41 Information technology . 1,508 , 530 . 1,508 , 530 . 42			256 700	256 700		
Column (A) amount, list line 11g expenses on Sch 0.1 277,130			230,700.	230,700.		
Advertising and promotion 208,926. 71,203. 137,723.	g	, -	277 130	115 271	136 659	25 101
13 Office expenses 697,093. 545,516. 83,833. 67,744 Information technology 139,532. 139,532. 15 Royalties 1,508,530. 1,508,530. 17 Travel 123,030. 117,598. 3,568. 1,864 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 9,136. 6,532. 2,519. 85 10 Interest 791,254. 664,560. 126,694. 12 Payments to affiliates 2,172,594. 2,172,594. 18 Payments to affiliates 2,172,594. 330,821. 18 Payments to affiliates 2,172,594. 2,172,594. 18 Payments to affiliates 2,172,594. 2,172,594. 18 Payments to affiliates 2,172,594. 2,172,594. 19 Payments to affiliates 2,172,594. 2,172,594. 10 Payments of travel or entertainment expenses of line 24e, following thing 24e, if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 10 Payments of travel or entertainment expenses of line 24e, following and payments of fravel or entertainment expenses 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594. 2,172,594		· · · · · · · · · · · · · · · · · · ·				23,101
139,532. 139,532. 139,532.						67 711
1,508,530.				343,310.		07,744
1,508,530. 1,508,530. 1,508,530. 1,864			139,332.		139,334.	
123,030			1 508 530	1 508 530		
Payments of travel or entertainment expenses for any federal, state, or local public officials Payments of travel or entertainment expenses for any federal, state, or local public officials Payments of state, or local public officials Payments to affiliates Payments to affiliate Payments					3 568	1 864
for any federal, state, or local public officials Conferences, conventions, and meetings Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) RENTAL EXPENSES – STUDE MEMBERSHIP DUES AND SUB C BAD DEBT MISCELLANEOUS All other expenses Ald lines 1 through 24e All other expenses. Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.			123,030.	117,390.	3,300.	1,004
Conferences, conventions, and meetings 9,136	18	,				
Payments to affiliates Payments to affiliate Payments to affiliates Payments to affiliates Payments to affiliates Payments to affiliate Payments to affiliates Payments to affiliate	40	· · · · · · · · · · · · · · · · · · ·	9 136	6 532	2 519	85
Payments to affiliates Depreciation, depletion, and amortization 2,172,594						0.5
Depreciation, depletion, and amortization 2,172,594. 2,172,594.			171,474.	004,000	120,094.	
1 330,821. 330,8			2 172 594	2 172 594		
Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a RENTAL EXPENSES - STUDE b MEMBERSHIP DUES AND SUB c BAD DEBT d MISCELLANEOUS e All other expenses All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.						
above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a RENTAL EXPENSES - STUDE b MEMBERSHIP DUES AND SUB c BAD DEBT d MISCELLANEOUS e All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.			330,021•	330,021.		
line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a RENTAL EXPENSES - STUDE b MEMBERSHIP DUES AND SUB c BAD DEBT d MISCELLANEOUS e All other expenses Total functional expenses. Add lines 1 through 24e 240,770. 210,841. 23,100. 6,829 694,869. 615,258. 38,056. 41,555 25 Total functional expenses. Add lines 1 through 24e educational campaign and fundraising solicitation.	2 4	above (List miscellaneous expenses on line 24e. If				
a RENTAL EXPENSES - STUDE b MEMBERSHIP DUES AND SUB c BAD DEBT d MISCELLANEOUS e All other expenses Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. 586,427. 586						
MEMBERSHIP DUES AND SUB 362,421. 117,518. 239,366. 5,537	_		586 427.	586 427.		
BAD DEBT 280,674. 100,000. 180,674					239 366	5 537
MISCELLANEOUS 240,770. 210,841. 23,100. 6,829					233,300•	
All other expenses 694,869. 615,258. 38,056. 41,555 Total functional expenses. Add lines 1 through 24e 23,718,821. 19,889,150. 2,639,376. 1,190,295 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.					23 100.	
Total functional expenses. Add lines 1 through 24e 23,718,821. 19,889,150. 2,639,376. 1,190,295 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.						
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.						
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.			20,,10,021.		2,000,0100	±,±,0,2,5
educational campaign and fundraising solicitation.	LU					

Form **990** (2019)

Par	tΧ	Balance Sheet					
		Check if Schedule O contains a response or note	to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1			
	2	Savings and temporary cash investments			2,113,737.	2	1,307,141.
	3	Pledges and grants receivable, net			5,800,584.	3	3,693,504
	4	Accounts receivable, net		126,101.	4	229,691	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa	antial c	ontributor, or 35%			
		controlled entity or family member of any of these		5			
	6	Loans and other receivables from other disqualifi					
		under section 4958(f)(1)), and persons described		6			
ts	7	Notes and loans receivable, net			85,937.	7	66,425
Assets	8	Inventories for sale or use			165,243.	8	189,050
۲	9	Prepaid expenses and deferred charges			407,477.	9	280,340
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D					
	b	Less: accumulated depreciation	10b	29,600,138.	53,966,520.	10c	52,461,320
	11	Investments - publicly traded securities	40,758,869.	11	39,523,250		
	12	Investments - other securities. See Part IV, line 1	23,056,480.	12	23,578,925		
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			100 100 010	15	101 000 010
	16	Total assets. Add lines 1 through 15 (must equa			126,480,948.	16	121,329,646
	17	Accounts payable and accrued expenses			1,312,904.	17	1,446,231
	18	Grants payable			1 155 453	18	0 045 000
	19	Deferred revenue			1,157,453.	19	2,847,882
	20	Tax-exempt bond liabilities			20,271,363.	20	24,692,460
	21	Escrow or custodial account liability. Complete P				21	
es	22	Loans and other payables to any current or forme					
Liabilities		trustee, key employee, creator or founder, substa					
iab		controlled entity or family member of any of these	-		0 000 000	22	1 700 000
_	23	Secured mortgages and notes payable to unrelat			9,200,000.	23	1,700,000
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines		•	231,727.		771,462.
	00	of Schedule D			32,173,447.		31,458,035
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check		_	32,113,441.	26	31,430,033
S		and complete lines 27, 28, 32, and 33.	K ner				
nce	27				53,627,129.	27	51,312,898.
ala	27 28	Net assets without donor restrictions Net assets with donor restrictions			40,680,372.	28	38,558,713.
	20	Organizations that do not follow FASB ASC 95			40,000,572	20	30,330,713
ᇤ		and complete lines 29 through 33.	o, che	ck liefe			
p	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or equ				30	
18S	31	Retained earnings, endowment, accumulated inc				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			94,307,501.	32	89,871,611.
_	UZ	וייייייייייייייייייייייייייייייייייייי			126,480,948.	33	121,329,646.

Form **990** (2019)

Pa	T XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			X		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,31				
2	Total expenses (must equal Part IX, column (A), line 25)	2	23	,71	8,8	21.		
3	Revenue less expenses. Subtract line 2 from line 1	3		,40				
4	0.4							
5	Net unrealized gains (losses) on investments	5		-41	5,3	99.		
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-2	,62	0,3	97.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10	89	,87	1,6	11.		
Pa	t XII Financial Statements and Reporting	•						
	Check if Schedule O contains a response or note to any line in this Part XII					X		
					Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		[
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.	_					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?			2b	Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,						
	consolidated basis, or both:							
	X Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,						
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit						
	Act and OMB Circular A-133?			За	Х			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		····					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		<u></u>	3b	Х			
	-			Form	990	(2019)		

932012 01-20-20

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Employer identification number Name of the organization PENNSYLVANIA ACADEMY OF THE FINE ARTS 23-1352256 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Schedule A (Form 990 or 990-EZ) 2019 PENNSYLVANIA ACADEMY OF THE FINE ARTS 23-1352256 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
	ction B. Total Support				1		
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 4		, ,		, ,	1	
	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	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11							
	Gross receipts from related activities,	etc. (see instruction	ons)			12	
	First five years. If the Form 990 is for	•	,				
	organization, check this box and stop	p here			•		
Sec	ction C. Computation of Publi	ic Support Per	centage				
14	Public support percentage for 2019 (I	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	%
15	Public support percentage from 2018	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2019. If the	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly suppo	orted organization				▶□
b	33 1/3% support test - 2018. If the	organization did no	t check a box on	line 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ation			▶□
17a	10% -facts-and-circumstances test	- 2019. If the org	anization did not	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstand	ces" test, check th	nis box and stop I	here. Explain in Pa	rt VI how the organ	nization
	meets the "facts-and-circumstances"	test. The organizat	ion qualifies as a	publicly supported	organization		▶□
b	10% -facts-and-circumstances test						
	more, and if the organization meets the	ne "facts-and-circur	mstances" test, ch	neck this box and	stop here. Explain	n in Part VI how the	е
	organization meets the "facts-and-circ	cumstances" test.	The organization o	qualifies as a public	cly supported orga	nization	▶□
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17l	o, check this box a	nd see instructions	s >
				<u>-</u>	Sche	edule A (Form 990	or 990-F7) 2019

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6		, ,	, ,		'	
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a section	n 501(c)(3) organiza	ation,
check this box and stop here	<u></u>	<u></u>	<u></u>	<u></u>	<u> </u>	>
Section C. Computation of Public	c Support Per	rcentage				
15 Public support percentage for 2019 (li	ne 8, column (f), c	divided by line 13,	column (f))		15	
16 Public support percentage from 2018					16	
Section D. Computation of Inves	tment Income	e Percentage				
17 Investment income percentage for 20	19 (line 10c, colur	mn (f), divided by li	ine 13, column (f))		17	
18 Investment income percentage from 2					18	
19a 33 1/3% support tests - 2019. If the						7 is not
more than 33 1/3%, check this box an	d stop here. The	organization quali	fies as a publicly s	supported organiza	ation	▶□
b 33 1/3% support tests - 2018. If the	· ·			•	•	
line 18 is not more than 33 1/3%, chec	ck this box and st	top here. The orga	nization qualifies a	as a publicly supp	orted organization	▶∟
20 Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see in	structions	> L

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on 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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

 If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
4		
1		
2		
20		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
-		
9b		
9c		
00		
10a		
10b		

Pal	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		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		İ
Sec	tion 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,			l
	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			1
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			1
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			1
	supervised, or controlled the supporting organization.	2		
Sec	tion 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			l
	or management of the supporting organization was vested in the same persons that controlled or managed			l
	the supported organization(s).	1		
Sec	tion 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			l
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			1
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			l
	supported organizations played in this regard	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see insti	ructions		
2	Activities Test. Answer (a) and (b) below.	40110110)	Yes	No
а	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,			1
	how the organization was responsive to those supported organizations, and how the organization determined			1
	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			1
	reasons for the organization's position that its supported organization(s) would have engaged in these			1
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	_~		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
u	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b		Ju		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
	5 II Too. Gooding III This fold blayed by the organization in this regald.			

Schedule A (Form 990 or 990-EZ) 2019 PENNSYLVANIA ACADEMY OF THE FINE ARTS 23-1352256 Page 6

Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ıg Orgar	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on	Nov. 20, 1970 (explain in F	Part VI). See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	omplete Se	ections A through E.	
Sect	ion 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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
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		
Sect	ion 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-functiona	lly integrate	ed Type III supporting orga	anization (see
	instructions).	. •		·

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 PENNSYLVANIA ACADEMY OF THE FINE ARTS 23-1352256 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets **5** Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI). See instructions. 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2019 from Section C, line 6 10 Line 8 amount divided by line 9 amount (i) (ii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2019 Amount for 2019 Distributable amount for 2019 from Section C, line 6 2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2019 **a** From 2014 **b** From 2015 **c** From 2016 **d** From 2017 e From 2018 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2020. Add lines 3j and 4c. 8 Breakdown of line 7:

Schedule A (Form 990 or 990-EZ) 2019

a Excess from 2015
 b Excess from 2016
 c Excess from 2017
 d Excess from 2018
 e Excess from 2019

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

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

Tax) (see separate instructions), the	en			
• Section 501(c)(4), (5), or (6) organi	izations: Complete Part III.			
Name of organization			Empl	oyer identification number
PENNS	LVANIA ACADEMY OF	THE FINE A	RTS	23-1352256
Part I-A Complete if the c	organization is exempt und	er section 501(c)	or is a section 527 or	ganization.
 Provide a description of the orga Political campaign activity exper Volunteer hours for political cam 	nditures		▶ \$	
Part I-B Complete if the c	organization is exempt und	er section 501(c)((3).	
1 Enter the amount of any excise t	ax incurred by the organization und	der section 4955	▶\$	
2 Enter the amount of any excise t	ax incurred by organization manage	ers under section 4955	> \$	
3 If the organization incurred a sec	ction 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV.	 	504/	1 1 504/	1/01
Part I-C Complete if the c	organization is exempt und	er section 501(c),	except section 501(c	<u>)(3).</u>
 Total exempt function expendituline 17b Did the filing organization file Fo Enter the names, addresses and made payments. For each organic contributions received that were 		and on Form 1120-POL N) of all section 527 pod from the filing organia separate political org	Solitical organizations to which zation's funds. Also enter the anization, such as a separate	Yes No n the filing organization e amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2019

LHA

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Sched	ule C (Form 990 or 990-EZ) 2019	DENNS.	VT.372NT	A ACADEMY O	F THE EINE 2	እ ጽ ጥሮ 23_1	L352256	Page 2
	: II-A Complete if the org section 501(h)).	anizatio	n is exen	npt under section	501(c)(3) and file	d Form 5768 (ele	ection und	ler
A Ch		tion belon	as to an affi	liated group (and list in	Part IV each affiliated	group member's nam	ie. address. E	IN.
	expenses, and share					5	,	,
B Ch	eck if the filing organiza	tion check	ed box A ar	nd "limited control" pro	visions apply.			
			oying Exper eans amou	nditures ints paid or incurred.)		(a) Filing organization's totals	(b) Affiliate tota	
1a	Total lobbying expenditures to influ	uence pub	ic opinion (grassroots lobbying)				
	Total lobbying expenditures to influ	-						
	Total lobbying expenditures (add li							
	Other exempt purpose expenditure							
е	Total exempt purpose expenditure							
	Lobbying nontaxable amount. Ente							
	If the amount on line 1e, column (a) o	r (b) is:	The lob	bying nontaxable am	ount is:			
	Not over \$500,000		20% of	the amount on line 1e.				
	Over \$500,000 but not over \$1,000	0,000	\$100,00	00 plus 15% of the exc	ess over \$500,000.			
	Over \$1,000,000 but not over \$1,5	00,000	\$175,00	00 plus 10% of the exc	ess over \$1,000,000.			
L	Over \$1,500,000 but not over \$17,	000,000	\$225,00	00 plus 5% of the exce	ss over \$1,500,000.			
L	Over \$17,000,000		\$1,000,	000.				
g	Grassroots nontaxable amount (en	ter 25% of	line 1f)					
h	Subtract line 1g from line 1a. If zer	o or less, e	enter -0					
	Subtract line 1f from line 1c. If zero	-						
j	If there is an amount other than ze	ro on eithe	r line 1h or	line 1i, did the organiza	ation file Form 4720			
	reporting section 4911 tax for this	year?					Yes	No
	(Some organizations t		a section 50	eraging Period Under 01(h) election do not l ate instructions for lir	have to complete all o	of the five columns b	elow.	
		Lobi	ying Expe	nditures During 4-Yea	r Averaging Period			
	Calendar year (or fiscal year beginning in)	(a)	2016	(b) 2017	(c) 2018	(d) 2019	(e) T	otal
	Lobbying nontaxable amount							
	Lobbying ceiling amount (150% of line 2a, column(e))							
c	Total lobbying expenditures							
d	Grassroots nontaxable amount							
	Grassroots ceiling amount (150% of line 2d, column (e))							

Schedule C (Form 990 or 990-EZ) 2019

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2019 PENNSYLVANIA ACADEMY OF THE FINE ARTS 23-13522 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description				(b)	
of the lobbying activity.	Yes		No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state, or					
local legislation, including any attempt to influence public opinion on a legislative matter					
or referendum, through the use of:					
a Volunteers?		+	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		-	X		
c Media advertisements?		+	X X		
d Mailings to members, legislators, or the public?		+	X		
e Publications, or published or broadcast statements?		-	X		
f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body?		-	X		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		+	X		
	37	+	21		0.
					0.
j Total. Add lines 1c through 1i					
b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), s	ection 501(c	(5), c	or sec	tion	
501(c)(6).					
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures f	rom the prior yea	ar?	3		
Part III-B Complete if the organization is exempt under section 501(c)(4), s	• •				
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answer	ered "No" Of	₹ (b)	Part I	II-A, line	3, is
answered "Yes."			_		
1 Dues, assessments and similar amounts from members			1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of	political				
expenses for which the section 527(f) tax was paid).					
a Current year			2a		
b Carryover from last year			2b		
c Total			2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du			3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
expenditure next year?	•		4		
5 Taxable amount of lobbying and political expenditures (see instructions)			5		
Part IV Supplemental Information					
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated	group list). Part	II-A lir	nes 1 ai	nd 2 (see	
instructions); and Part II-B, line 1. Also, complete this part for any additional information.	9.045,, . 4	,		(000	
PART II-B, LINE 1, LOBBYING ACTIVITIES:					
IN FYE 2020, PAFA DID NOT PAY ANY LOBBYING COSTS BU	JT STAFF	MEM	BER:	S MAY	
HAVE PARTICIPATED IN EFFORTS TO INFLUENCE GENERAL I	LEGISLATI	ON	AT '	THE	
GMAME OR HERBERT LEVEL WOR RECOVER		- -	.m		
STATE OR FEDERAL LEVEL, NOT DEEMED LOBBYING BUT RAT	HER INC	.DEN	I'I'AL		
EFFORTS IN SUPPORTING PAFA IN ITS OVERALL SUCCESS.					

Schedule C (Form 990 or 990-EZ) 2019

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

PENNSYLVANIA ACADEMY OF THE FINE ARTS

Employer identification number 23-1352256

Pai	t I Organizations Maintaining Donor Advise	d Funds or Othe	r Si	milar Fund	s or Ac	coun	ts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.					
		(a) Donor ad	vised	funds		(b) Fun	ds and other accounts
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in v	writing that the asset	s hel	d in donor adv	ised fund	ds	
	are the organization's property, subject to the organization's	exclusive legal contro	ol?				Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing tha	t gra	nt funds can b	e used o	nly	
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or fo	r any	other purpose	e conferr	ing	
	impermissible private benefit?						Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered	"Yes	" on Form 990	, Part IV,	line 7.	
1	Purpose(s) of conservation easements held by the organization	on (check all that app	ly).				
	Preservation of land for public use (for example, recrea	tion or education)		Preservation	of a histo	orically	important land area
	Protection of natural habitat			Preservation	of a certi	fied his	storic structure
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation con	tribu	tion in the forn	n of a co	nservat	tion easement on the last
	day of the tax year.						Held at the End of the Tax Year
а	Total number of conservation easements					2a	
b	Total acreage restricted by conservation easements					2b	
С	Number of conservation easements on a certified historic stru	ucture included in (a)				2c	
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not	t on a	a historic struc	ture		
	listed in the National Register					2d	
3	Number of conservation easements modified, transferred, rel-	eased, extinguished,	or te	rminated by th	ne organi	zation	during the tax
	year ▶						
4	Number of states where property subject to conservation eas	sement is located			_		
5	Does the organization have a written policy regarding the per	riodic monitoring, insp	oecti	on, handling of	f		
	violations, and enforcement of the conservation easements it	holds?					Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, $\\$	handling of violations	s, and	d enforcing co	nservatio	n ease	ments during the year
	>						
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and	d enf	orcing conserv	ation eas	sement	s during the year
	▶ \$						
8	Does each conservation easement reported on line 2(d) above						
	and section 170(h)(4)(B)(ii)?						Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its re	eveni	ue and expens	e statem	ent and	d
	balance sheet, and include, if applicable, the text of the footn	note to the organization	on's	financial stater	nents tha	at desc	ribes the
Da	organization's accounting for conservation easements.	: Aut Iliataviaal 7			14h a = C	::!	· Acceto
Pai	t III Organizations Maintaining Collections of		rea	isures, or C	uner 5	IIIIIIai	Assets.
	Complete if the organization answered "Yes" on Form						
1a	If the organization elected, as permitted under FASB ASC 95	•					
	of art, historical treasures, or other similar assets held for pub	•	,			nce of p	public
	service, provide in Part XIII the text of the footnote to its finar						
b	If the organization elected, as permitted under FASB ASC 95	•					
	art, historical treasures, or other similar assets held for public	exhibition, education	າ, or	research in fur	therance	of pub	olic service,
	provide the following amounts relating to these items:						
	(i) Revenue included on Form 990, Part VIII, line 1						\$
							\$
2	If the organization received or held works of art, historical treatments				ial gain, p	orovide	
	the following amounts required to be reported under FASB A						
а	Revenue included on Form 990, Part VIII, line 1						\$
b	Assets included in Form 990, Part X						\$

932051 10-02-19

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Schedule D (Form 990) 2019

		VANIA ACADE						352256	5 Page	2
Par	rt III Organizations Maintaining C	ollections of Art	, Historical Tre	easures, o	r Othe	r Simil	ar Asse	ets _{(contin}	iued)	
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following tha	t make s	ignifican	it use of it	:S		
	collection items (check all that apply):									
а	X Public exhibition	d	Loan or exc	change progr	am					
b	X Scholarly research	е	Other							_
С	X Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how they further t	he organizati	on's exer	npt purp	ose in Pa	art XIII.		
5	During the year, did the organization solicit o						,			
D :	to be sold to raise funds rather than to be ma							Yes	X No	0
Pai	t IV Escrow and Custodial Arrang		ete if the organization	on answered	"Yes" on	Form 9	90, Part l'	V, line 9, or		
	reported an amount on Form 990, Pa									—
па	Is the organization an agent, trustee, custodi		•							
	on Form 990, Part X?						l	Yes	No	D
D	If "Yes," explain the arrangement in Part XIII	and complete the foil	owing table:					Amount		_
_	Poginning balance					10		Amount		_
c d	Beginning balance									_
u	J /									_
f	Distributions during the year Ending balance									_
	Did the organization include an amount on Fe							Yes	□ No	_ 0
	If "Yes," explain the arrangement in Part XIII.									_
	rt V Endowment Funds. Complete i	f the organization ans	swered "Yes" on F	orm 990, Par	: IV, line	10.				_
	·	(a) Current year	(b) Prior year	(c) Two year			e years ba	ck (e) Four	years back	<u>K</u>
1a	Beginning of year balance	37,873,755.	29,763,671.	26,09	8,921.	24	,221,16	1. 25,	542,728	}.
b	Contributions	297,151.	8,221,923.	3,15	9,086.		591,11	3.	16,778	; .
С	Net investment earnings, gains, and losses	181,665.	1,142,925.	1,26	2,463.	2	,047,88	8541,2		· •
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	1,256,209.	1,254,764.	. 75	6,799.		761,24	1.	797,124	
f	Administrative expenses									_
g	End of year balance	37,096,362.	37,873,755.	29,76	3,671.	26	,098,92	1. 24	221,161	· •
2	Provide the estimated percentage of the curr		(line 1g, column (a	a)) held as:						
а	Board designated or quasi-endowment	2.09	_%							
b	Permanent endowment ► 97.91	%								
С		%								
	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are held a	nd administe	red for th	ne organ	ization	Г		_
	by:							2 (0)	Yes No	
	(i) Unrelated organizations								X	
	(ii) Related organizations								─ ├^	_
	If "Yes" on line 3a(ii), are the related organiza							3b		—
4 Par	Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm		vinient iunas.							_
	Complete if the organization answere		Part IV line 11a 9	See Form 990) Part X	line 10				
	Description of property	(a) Cost or of		t or other		ccumula	ated	(d) Bool	k value	_
	bescription of property	basis (investm	, ,	(other)		preciation	I .	(u) 5001	Value	
12	Land	- ` ` ` 	· ·	00,000.				2.500	0,000	_
b	Land Buildings			25,686.	25.	380,	093.	48,14	5.593	<u>.</u>
C	Leasehold improvements		, , , , , ,			/			.,	_
d	Equipment		5,54	17,690.	4.	220,	045.	1,32	7,645	-
	Other			88,082.	,				3,082	
	I. Add lines 1a through 1e. (Column (d) must e						▶	52,463	1,320	-

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 PENNSYLVANIA	A ACADEMY OF T	THE FINE ARTS	23-1352256 Page
Part VII Investments - Other Securities.	TICHDEHI OF	IIII I IIII IIIII	
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	11b. See Form 990, Part X, line	12.
(a) Description of security or category (including name of security)	(b) Book value		ost or end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) BENEFICIAL INTERESTS IN			
(B) PERPETUAL TRUSTS	10,557,249.	END-OF-YEAR MA	ARKET VALUE
(C) POOLED INVESTMENT			
(D) FUND/HEDGE FUND	13,021,676.	END-OF-YEAR MA	ARKET VALUE
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	23,578,925.		
Part VIII Investments - Program Related.	. , ,		
Complete if the organization answered "Yes"	on Form 990. Part IV. line 1	I1c. See Form 990. Part X. line	13.
(a) Description of investment	(b) Book value		ost or end-of-year market value
(1)		, ,	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Complete if the organization answered "Yes"	on Form 000 Port IV line 1	Id Soc Form 000 Bort V line	15
	Description	i id. See Foiii 990, Fait A, iiile	(b) Book value
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	<u>: 15.)</u>		
Complete if the organization answered "Yes"	on Form 990 Part IV line 1	Ide or 11f See Form 900 Bort	Y line 25
(1) 5	on Form 330, Fait IV, IIIIe	ric or rii. Oce Fullii 990, Palt	(b) Book value
			(S) Book value
(1) Federal income taxes (2) SWAP - MARKET VALUATION			771,462
(2) SWAP - MARKET VALUATION			//1,402

(3) (4) (5) (6) (7) (8)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2019

771,462.

0.1	DENNICYI VANTA ACADEMY OF H	THE EINE ADMC	22	1352256 Page 4
	radule D (Form 990) 2019 PENNSYLVANIA ACADEMY OF T			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	•		
1			1	15,892,151.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			-,,-
a	Net unrealized gains (losses) on investments	$ _{2a} _{-415,399}$.		
b	Donated services and use of facilities			
c	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
e	Add lines 2a through 2d		2e	-177,405.
3	Subtract line 2e from line 1		3	16,069,556.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
' a		4a 256,708.		
h	Other (Describe in Part XIII.)			
6			4c	6,249,171.
			5	22,318,727
Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial State	ments With Expenses per F		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	•		
1			1	17,707,644.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			27,707,0220
-	Donated services and use of facilities	2a		
a h		l l	1	
0	Prior year adjustments Other Jesses		-	
٦	Other losses	1 1 007 004	-	
u	Other (Describe in Part XIII.)		200	237,994.
e	Add lines 2a through 2d		2e 3	17,469,650.
3	Subtract line 2e from line 1		3	17,409,030.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 . 1 256 700		
a	Investment expenses not included on Form 990, Part VIII, line 7b		-	
b	Other (Describe in Part XIII.)	4b 5,992,463.		6 240 171
C	Add lines 4a and 4b		4c	6,249,171.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	23,718,821.
	rt XIII Supplemental Information.			
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; P 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a		; Part	X, line 2; Part XI,
PAI	RT X, LINE 2:			
PAI	FA HAS REVIEWED ITS TAX POSITIONS AND HAS	CONCLUDED THAT NO	LI	ABILITY
FOI	R UNRECOGNIZED TAX BENEFITS SHOULD BE REC	ORDED RELATED TO U	NCE	RTAIN TAX
POS	SITIONS TAKEN ON FEDERAL AND STATE TAX RE	TURNS FOR THE OPEN	TA	X YEARS
(20	016-2018) OR IS EXPECTED TO BE TAKEN IN T	HE CURRENT 2019 TA	ХΥ	EAR.
PAI	RT XI, LINE 2D - OTHER ADJUSTMENTS:			
FUI	NDRAISING EXPENSES			237,994.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RECLASSIFICATION OF SCHOLARSHIPS 5,406,036.

STUDENT HOUSING EXPENSE NETTED WITH TUITION AND FEES ON

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 PENNSYLVANIA ACADEMY OF THE FINE ARTS 23-1352256 Page Part XIII Supplemental Information (continued)
FINANCIAL STATEMENT 586,427.
TOTAL TO SCHEDULE D, PART XI, LINE 4B 5,992,463.
PART XII, LINE 2D - OTHER ADJUSTMENTS:
FUNDRAISING EXPENSES 237,994.
PART XII, LINE 4B - OTHER ADJUSTMENTS:
RECLASSIFICATION OF SCHOLARSHIPS 5,406,036.
STUDENT HOUSING EXPENSE NETTED WITH TUITION AND FEES ON
FINANCIAL STATEMENT 586,427.
TOTAL TO SCHEDULE D, PART XII, LINE 4B 5,992,463.
FORM 990, SCHEDULE D, PART III, LINE 1A
PART III - LINE 1A - WORKS OF ART - FOOTNOTE FROM FINANCIAL STATEMENT
PAFA MAINTAINS A COLLECTION OF RARE AMERICAN ART THAT IS HELD FOR PUBLIC
EXHIBITION. THE COLLECTION IS KEPT UNDER CURATORIAL CARE AND IS SUBJECT
TO PAFA'S POLICY THAT REQUIRES THE PROCEEDS FROM THE SALES OF ACCESSIONED
COLLECTION ITEMS TO BE USED ONLY TO ACQUIRE OTHER ITEMS FOR COLLECTION.
PAFA DOES NOT RECOGNIZE THE CONTRIBUTIONS OF DONATED COLLECTION ITEMS, AS
ITS COLLECTIONS ARE NOT CAPITALIZED. DURING THE YEAR ENDED JUNE 30, 2019
AND 2018, PAFA HAD DONATED ACCESSIONS WITH APPROXIMATE APPRAISED VALUES
TOTALING \$1,956,100 AND \$451,100, RESPECTIVELY. COLLECTION ITEMS PURCHASED
BUT NOT CAPITALIZED TOTALED \$1,379,849 AND \$6,074,018 DURING THE YEARS
ENDED JUNE 30, 2019 AND 2018, RESPECTIVELY.

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Schools

► Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

PENNSYLVANIA ACADEMY OF THE FINE ARTS

Employer identification number 23-1352256

art I	LJJZ		
arti j		YES	П
Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			T
other governing instrument, or in a resolution of its governing body?	1	Х	
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	Х	Г
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	Х	L
PAFA INCLUDES STATEMENTS IN ITS ADVERTISING THAT THEIR POLICY			
IS TO NOT DISCRIMINATE AGAINST ANY MINORITY DUE TO			
RACE, CREED, OR COLOR.			
Does the organization maintain the following?			
Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	L
Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Х	L
Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
admissions, programs, and scholarships?	4c	Х	L
d Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Х	L
Does the organization discriminate by race in any way with respect to:			
a Students' rights or privileges?	<u>5a</u>		L
Admissions policies?	5b		L
Employment of faculty or administrative staff?	5c		L
d Scholarships or other financial assistance?	5d		L
Educational policies?	5e		
f Use of facilities?	5f		
g Athletic programs?	5g		
Other extracurricular activities?	5h		H
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
		v	
a Does the organization receive any financial aid or assistance from a governmental agency?	6a	Х	\vdash
b Has the organization's right to such aid ever been revoked or suspended?	6b		
If you answered "Yes" on either line 6a or line 6b, explain on Part II.			
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	7	Х	

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

Schedule E (Form 990 or 990-EZ) 2019

Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information.
LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:
PAFA RECEIVES FROM TIME TO TIME FINANCIAL ASSISTANCE FROM GOVERNMENT
PROGRAMS.

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the	organization
-------------	--------------

Employer identification number

	PENNSYL	VANIA ACADEMY OF '	THE I	INI	E ARTS	23-1352	256			
Part I	Fundraising Activities. required to complete this par	Complete if the organization ansv	wered "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not			
a	 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations b Internet and email solicitations c Phone solicitations g Special fundraising events 									
	(i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Did fundraiser have custody or contributions? (iv) Gross receipts from activity (v) Amount paid to (or retained by) fundraiser listed in col. (i) (vi) Amount paid to (or retained by) or ganization									
			Yes	No						
	states in which the organizatio	n is registered or licensed to solici		utions	or has been notified	it is exempt from re	gistration			

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

Schedule G (Form 990 or 990-EZ) 2019

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE (add col. (a) through WINE AUCTION col. (c)) (event type) (event type) (total number) 593,099 593,099. Gross receipts 435,928. 435,928. 2 Less: Contributions Gross income (line 1 minus line 2) 157,171. 157,171. 4 Cash prizes 5 Noncash prizes 5,509. 5,509. Direct Expenses 4,879. 4,879. 6 Rent/facility costs 112,048. 112,048. 7 Food and beverages 23,090. 23,090. 8 Entertainment 92,468. 92,468. Other direct expenses 237,994. **10** Direct expense summary. Add lines 4 through 9 in column (d) -80,823. 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: _ 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2019

Sch	edule G (Form 990 or 990-EZ) 2019 PENNSYLVANIA ACADEMY OF THE FINE ARTS 23-1	<u>.352256</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:		
		13a	%
	The organization's facility	13b	
	An outside facility	ISD	70
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount		
	of gaming revenue retained by the third party > \$		
С	If "Yes," enter name and address of the third party:		
	Name		
	Address >		
16	Gaming manager information:		
10	Garming manager mormation.		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	∟ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year 🕨 \$		
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part II.	t III, lines 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
	·		

Schedule G	(Form 990 or 990-EZ)	PENNSYLVANIA	ACADEMY	OF	THE	FINE	ARTS	23-1352256	Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Infor	mation (continued)							
		(
	<u> </u>	<u> </u>				<u></u>			
									

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

► Attach to Form 990.

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

OMB No. 1545-0047
2019

Open to Public Inspection

Employer identification number

	PENNSYLVA	NIA ACADE	MY OF THE F	INE ARTS				23-1352256
Part I	General Information on Grants a	nd Assistance						
1 Do	es the organization maintain records t	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assi	stance, and the selectio	
crit	teria used to award the grants or assis	stance?						X Yes No
2 De:	scribe in Part IV the organization's pro	ocedures for monit	oring the use of grant	funds in the United	States.			
Part II	Grants and Other Assistance to	Domestic Organiz	ations and Domestic	Governments.	Complete if the org	anization answered "\	es" on Form 990, Part l	IV, line 21, for any
	recipient that received more than S	\$5,000. Part II can	be duplicated if additi	onal space is need	ed.			
1 (a)	(a) Name and address of organization or government (b) EIN (c) IRC section (if applicable) (d) Amount of cash grant (e) Amount of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance						(h) Purpose of grant or assistance	
2 Ent	ter total number of section 501(c)(3) a	nd government ord	anizations listed in the	e line 1 table	ı	ı		•
	ter total number of other organizations	-	•					
	or Paperwork Reduction Act Notice							Schedule I (Form 990) (2019)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	282	5,406,036.	0.		
DENOMINATIO	202	3,400,030.			
Part IV Supplemental Information. Provide the information	required in Part I, line	e 2; Part III, column	(b); and any other ac	Iditional information.	
PART I, LINE 2:					
THE AMOUNT OF FUNDS DISTRIBUTED	S COMPARED	WITH INDI	IVIDUAL STU	DENT	
ACCOUNTS TO INSURE A BALANCE OF E	TUNDS. STUD	ENT FINANC	CIAL NEED I	S EVALUATED	
TO INSURE STUDENTS DO NOT RECEIVE	E AN OVER A	WARD ACCOR	RDING TO TH	E GUIDELINES	
OF THE FEDERAL GOVERNMENT. STUDEN	TS RECEIVI	NG GRANT F	FUNDS ARE M	ONITORED FOR	
ACADEMIC PROGRESS CONCERNING GRAI	DE POINT AV	ERAGE AND	COMPLETED	NUMBER OF	
COURSES ONCE A YEAR.					
COULTED VALUE AS A MANAGEMENT					

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

PENNSYLVANIA ACADEMY OF THE FINE ARTS

 $Employer\ identification\ number \\ 23-1352256$

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

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

Schedule J (Form 990) 2019

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) DAVID R. BRIGHAM	(i)	355,000.	0.	0.	14,336.	15,981.	385,317.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CLINT JUKKALA	(i)	175,000.	0.	0.	7,392.	7,553.	189,945.	0.
DEAN OF SCHOOL OF FINE ART	ii)	0.	0.	0.	0.	0.	0.	0.
(3) BROOKE D. ANDERSON	(i)	200,000.	0.	0.	923.	16,157.	217,080.	0.
DIRECTOR OF THE MUSEUM	ii)	0.	0.	0.	0.	0.	0.	0.
(4) MALINI DODDAMANI	(i)	185,000.	0.	0.	7,600.	8,199.	200,799.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ASHLEY REBECCA LOMERY	(i)	154,613.	0.	0.	6,177.	7,027.	167,817.	0.
	ii)	0.	0.	0.	0.	0.	0.	0.
(6) MEGAN K MCCARTHY, PHD	(i)	140,000.	0.	0.	5,600.	6,356.	151,956.	0.
VP MAJOR GIFTS	ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
(((ii)							
	(i)							
(((ii)							
	(i)							
(ii)							
	(i)							
((ii)							
	(i)							
(ii)							
	(i)							
(ii)							
	(i)							
(ii)							
	(i)							
(ii)							
	(i)							
	ii)							
	(i)							
	ii)							

Part II Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. PART I, LINE 1A: SOCIAL CLUB DUES ARE PAID FOR THE PRESIDENT.
SOCIAL CLUB DUES ARE PAID FOR THE PRESIDENT.

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

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

explanations, and any additional information in Part VI.

Attach to Form 990.

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

2019
Open to Public Inspection

Name of the organization

PENNSYLVANIA ACADEMY OF THE FINE ARTS

Employer identification number 23-1352256

	THIMPTICANIT									<u> Э</u>	<u> </u>				
Part I	Bond Issues SE	EE PART VI	FOR COLUMN	N (A) CON	TINUAT	IONS									
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	d (e) Issu	ue price	(f) Descriptio	n of purpose	(g) De	g) Defeased (h) On				oole	
											of is	of issuer fina		financing	
									Yes	No	Yes	No	Yes	N	
	HILADELPHIA AUTHORITY														
A FC	OR INDUSTRIAL DEVELOPME	23-2237287	NONEAVAIL	06/25/15	2100	0000.	REFINANCE	DEBT		X		X		X	
В														L	
С														<u> </u>	
D															
Part II	l Proceeds														
				<i>F</i>	١		В	С				D			
1 A	Amount of bonds retired														
2 A	Amount of bonds legally defeased														
	otal proceeds of issue				<u>,000,</u>										
4 G	Gross proceeds in reserve funds														
5 C	Capitalized interest from proceeds														
	Proceeds in refunding escrows														
7 Is	ssuance costs from proceeds			21	218,909.										
	•														
9 V	Vorking capital expenditures from proceeds														
10 C	Capital expenditures from proceeds														
11 C	Other spent proceeds														
	· · · · ·														
13 Y	ear of substantial completion			2	2015										
				Yes	No	Yes	No	Yes	No		Yes		No		
	Vere the bonds issued as part of a refunding	•													
	fissued prior to 2018, a current refunding issu				X										
	Vere the bonds issued as part of a refunding		•												
	ssued prior to 2018, an advance refunding iss				X										
	las the final allocation of proceeds been mad			Х								_			
	Does the organization maintain adequate boo														
fi	inal allocation of proceeds?			X											

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

Schedule K (Form 990) 2019

Par	t III Private Business Use								
			Α		В		С		D
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
	which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?		X						
За	Are there any management or service contracts that may result in private								
	business use of bond-financed property?		X						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
	counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of								
	bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
	counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by								
	entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5	Enter the percentage of financed property used in a private business use as a result of								
	unrelated trade or business activity carried on by your organization, another								
	section 501(c)(3) organization, or a state or local government		%		%		%		
_6	Total of lines 4 and 5		<u>%</u>		<u>%</u>		<u>%</u>		<u>%</u>
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond-financed property to a non-								
	governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed								
	of		<u>%</u>		<u>%</u>		<u>%</u>		<u> </u>
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections								
	1.141-12 and 1.145-2?		+						
9	Has the organization established written procedures to ensure that all nonqualified								
	bonds of the issue are remediated in accordance with the requirements under		•						
Dav	Regulations sections 1.141-12 and 1.145-2?		X				l		
Par	t IV Arbitrage			В			<u></u>		
_	Lieu the insulantian Ferra 2000 T. Arbitana and Debata. Violat Deduction and	Yes No			No No	Yes	No	Yes	No No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	res	X	Yes	NO	res	NO	res	NO
	Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply?		21						
	· · · · · · · · · · · · · · · · · · ·		Х						
	Rebate not due yet?		X						
	Exception to rebate?		X						
	No rebate due? If "Yes" to line 2c, provide in Part VI the date the rebate computation was		- 23				1		
	performed								
3		х							
	o the bond loade a variable rate loade:		1						I .

Part IV Arbitrage (continued)								
		4	E	3		С	D)
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of								
section 148?		X						
Part V Procedures To Undertake Corrective Action								
		Ą	E	3	(Ç	D)
Has the organization established written procedures to ensure that violations of	Yes	No	Yes	No	Yes	No	Yes	No
federal tax requirements are timely identified and corrected through the voluntary								
closing agreement program if self-remediation isn't available under applicable								
regulations?	X							
Part VI Supplemental Information. Provide additional information for responses to questions	s on Schedule	K. See instru	uctions					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: PHILADELPHIA AUTHORITY FOR INDUS	STRIAL 1	DEVELOP	MENT					

SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open To Public Inspection

Name of the orga		ENNSVI.V.	מאדם מרמה	EMV	OF	THE FINE A	A B TT G		-	identi 522!		on nur	mber
Part I Exc							ction 501(c)(29) organ				50		
							, or Form 990-EZ, Pa						
1		(b)	Relationship bety			lified					(d)	Correc	cted?
(a) Name of o	lisqualified p	erson	person and or	ganiza	ation	(0	c) Description of trans	saction				es	No
											Д	\dashv	
											\bot	\dashv	
											—	\dashv	
											+-	+	
2						1161							
		•	ū	•		qualified persons dur	,		. ^				
section 4958			, above, reimburs					_	► \$ ► \$				
3 Enter the am	ount or tax,	ii ariy, ori iiile 2	, above, reimburs	eu by	ine or	gariizatiori			φ				
Part II Loa	ns to and	d/or From In	terested Pers	ons.									
Com	plete if the c	organization and	swered "Yes" on F	orm 9	990-EZ	. Part V. line 38a or F	orm 990, Part IV, line	e 26: or	if the	e orgai	nizatic	n	
			0, Part X, line 5, 6			, · · , ··· · · · ·	,,,,,	,		3			
(a) Name		(b) Relationshi	<u> </u>	(d) Lo	oan to or	(e) Original	(f) Balance due	(g) li	n	(h) Apr	proved (i) W		ritten
interested p	erson	with organization	n of loan		n the ization?	principal amount		default?		committee?		agreei	ment?
					From		_		No	Yes	No	Yes	No
<u>DAVID BRI</u>	GHAM	CEO	SUITABLE		X	200,000.	0.		X	X	<u> </u>	Х	
										\sqcup	<u> </u>		
										\vdash	 		
				-						\vdash	<u> </u>	<u> </u>	
										\vdash			
										\vdash			
										\vdash			
Total		·				> \$							
	nts or As	sistance Be	nefiting Inter	este	d Per	sons.	•						
Com	plete if the c	organization an	swered "Yes" on F	orm 9	990, Pa	art IV, line 27.							
(a) Name of	interested p	person	(b) Relationship			(c) Amount of	(d) Type					ose of	:
			interested pers the organiza		d	assistance	assistano	ce		a	assista	ance	
			trie Organiza	ation					_				
									+				
									+				
									+				
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									+				

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

Schedule L (Form 990 or 990-EZ) 2019

SEE PART V FOR CONTINUATIONS

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

PENNSYLVANIA ACADEMY OF THE FINE ARTS

Employer identification number 23-1352256

Par	t I Types of Property						
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribution amounts reported on	(d) Method of de noncash contribu	•	:s
			items contributed	Form 990, Part VIII, line 1g			
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property			1 1 0 1 1 0			
9	Securities - Publicly traded	X	9	142,449.	AVERAGE HIG	H/LOW_	
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or trust interests					_	
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other (WINE AUCTION)	X	107	111,020.	AUCTION SAL	E VALU	E
26	Other						
27	Other						
28	Other ()						
29	Number of Forms 8283 received by the organizer which the organization completed Form 828	-	•				
						Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it		
	must hold for at least three years from the date	of the initia	l contribution, and	which isn't required to be us	sed for		
	exempt purposes for the entire holding period?					30a	X
b	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance p	oolicy that re	equires the review of	of any nonstandard contribut	ions?	31 X	
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash			
	contributions?					32a	X
b	If "Yes," describe in Part II.						
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of property	for which column (a) is chec	ked,		
	describe in Part II.						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2019

Schedule M (Form 990) 2019

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.

Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

PENNSYLVANIA ACADEMY OF THE FINE ARTS

Employer identification number 23-1352256

FORM 990, PART LINE 1, DESCRIPTION OF ORGANIZATION MISSION: AND ART-MAKING.

FORM 990, PART VI, SECTION A, LINE 2:

PAFA USES THE SERVICES OF A TRUST COMPANY WHERE THREE BOARD MEMBERS ARE THOMAS N. PAPPAS AND WINSTON I. LOWE PAID DIRECTORS, DONALD R. CALDWELL, ASSETS UNDER MANAGEMENT WITH THIS INVESTMENT COMPANY TOTALED APPROXIMATELY \$25,760,000 AND \$26,341,000 AS OF JUNE 30, 2020 AND 2019, RESPECTIVELY. FOR THE YEAR ENDED JUNE 30, 2019, PAFA WAS CHARGED A 0.4% FEE FOR THIS SERVICE. FOR THE YEAR ENDED JUNE 30, 2020, THIS FEE WAS APPROXIMATELY \$117,000. IN ADDITION, THIS TRUST COMPANY PROVIDES A LINE OF CREDIT FOR PAFA; INTEREST EXPENSE PAID DURING THE YEAR FOR THIS LINE OF CREDIT WAS APPROXIMATELY \$306,500. ALTHOUGH THE TRUST COMPANY IN QUESTION CHARGES PAFA FOR ITS SERVICES, IT ALSO MADE SUBSTANTIAL GIFTS TO PAFA. THE NET CHARGES AFTER SUCH GIFTS RESULTED IN THIS FEE BEING QUITE SMALL. THE QUESTION OF THE TRUST COMPANY'S CHARGES TO PAFA WAS SUBMITTED TO THE FINANCE COMMITTEE, AND THEN TO THE FULL BOARD OF TRUSTEES. AFTER CONSIDERATION OF THE TRUST COMPANY'S CHARGES, THE TRUST COMPANY'S GIFTS TO AND THE PERFORMANCE OF THE TRUST COMPANY, THE BOARD DECIDED THAT THE RELATIONSHIP WITH THE TRUST COMPANY WAS QUITE BENEFICIAL TO PAFA. WAIVED ANY TECHNICAL CONFLICT WITH THE TRUST COMPANY.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PREPARED BY TAIT, WELLER & BAKER LLP. THE FORM IS THEN REVIEWED BY THE CFO PRIOR TO FILING WITH THE IRS.

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

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

Name of the organization

IS TO BE NEGATED.

Employer identification number

PENNSYLVANIA ACADEMY OF THE FINE ARTS 23-1352256

FORM 990, PART VI, SECTION B, LINE 12C:

DURING THE FISCAL YEAR, EACH MEMBER OF THE BOARD OF TRUSTEES AND EACH

SENIOR KEY EMPLOYEE COMPLETES A FORM SETTING FORTH, IF ANY, ANY POTENTIAL

CONFLICT OF INTEREST HE/SHE HAS WITH PAFA. SUCH COMPLETED FORMS ARE

RETAINED BY THE VICE-CHAIR/SECRETARY OF THE BOARD. IF ANY CONFLICT OF

INTEREST IS IDENTIFIED, IT IS REFERRED TO THE APPROPRIATE COMMITTEE OF THE

BOARD, WHICH EXAMINES IT AND REFERS IT TO THE ENTIRE BOARD FOR ACTION. THE

BOARD DECIDES WHETHER SUCH CONFLICT IS TO BE WAIVED, ON THE GROUNDS THAT

THE TRANSACTION OR RELATIONSHIP IN QUESTION IS FAVORABLE TO PAFA

NOTWITHSTANDING THE CONFLICT, OR WHETHER SUCH RELATIONSHIP OR TRANSACTION

FORM 990, PART VI, SECTION B, LINE 15: THE SEVEN OFFICERS OF THE BOARD OF TRUSTEES (PAFA'S GOVERNING BODY) CONSISTING OF: THE CHAIR OF THE BOARD; THE VICE-CHAIR AND TREASURER; THE VICE-CHAIR AND SECRETARY; THE VICE-CHAIR AND ASSISTANT SECRETARY; THE VICE-CHAIR; ASSISTANT TREASURER AND ASSISTANT SECRETARY COLLECTIVELY CONSTITUTE THE COMPENSATION COMMITTEE WHICH DELIBERATES AND DECIDES ON THE COMPENSATION OF THE PRESIDENT/CEO OF THE ORGANIZATION. THE COMMITTEE STUDIES COMPARABILITY DATA OBTAINED FROM SEVERAL SOURCES AND IT MAINTAINS CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION IN THE FORM OF NOTES AND MINUTES MADE BY THE BOARD CHAIR WHICH ARE MAINTAINED IN THE PRIVATE OFFICE OF THE BOARD CHAIR. IN THE PRESIDENT/CEO'S FIRST YEAR IN THE PRESIDENT/CEO AND PAFA ENTER INTO A WRITTEN EMPLOYMENT OFFICE, AGREEMENT WHICH EMBODIES THE DECISIONS ON COMPENSATION. IN EACH SUCCEEDING YEAR OF THE PRESIDENT/CEO'S TENURE, THE COMPENSATION COMMITTEE REVIEWS THE COMPENSATION AND MAKES ANY NECESSARY ADJUSTMENTS. WITH RESPECT TO COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES OF PAFA, RECOMMENDATIONS

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

Name of the organization

Employer identification number

PENNSYLVANIA ACADEMY OF THE FINE ARTS	23-1352256						
ARE FIRST MADE BY THE PRESIDENT/CEO (AFTER HIS INTERNAL PR	OCESS OF						
CONSULTATION WITH SENIOR STAFF, INCLUDING THE EXECUTIVE VI	CE-PRESIDENT OF						
FINANCE AND ADMINISTRATION) WHICH ARE EMBODIED IN THE ANNU	AL BUDGET, AND						
REVIEWED BY THE COMPENSATION COMMITTEE OF THE BOARD AND BY	THE BOARD'S						
FINANCE COMMITTEE (WHICH IS CHAIRED BY THE VICE-CHAIR AND TREASURER OF THE							
BOARD). THE ANNUAL BUDGET, WHICH EMBODIES THE COMPENSATION OF THE							
PRESIDENT/CEO (AS INITIALLY PROPOSED BY THE BOARD'S COMPENSATION COMMITTEE)							
AND THE COMPENSATION OF OTHER OFFICERS AND KEY EMPLOYEES (AS INITIALLY						
PROPOSED BY THE PRESIDENT/CEO) IS ULTIMATELY PRESENTED TO	THE ENTIRE BOARD						
OF TRUSTEES BY THE BOARD'S FINANCE COMMITTEE FOR CONSIDERA	TION, POSSIBLE						
AMENDMENT, AND FINALLY ADOPTION.							
FORM 990, PART VI, SECTION C, LINE 19:							
THE DOCUMENTS ARE MAINTAINED IN THE FINANCE OFFICE AND ARE	AVAILABLE TO THE						
PUBLIC UPON REQUEST.							
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:							
CHANGE IN BENEFICIAL INTEREST IN PERPETUAL TRUSTS	43,161.						
COLLECTION ITEMS PURCHASED BUT NOT CAPITALIZED	-1,520,803.						
CHANGE IN MARKET VALUE OF SWAP	-539,735.						
PROCEEDS FROM ART SALE	2,170.						
LOSS ON TERMINATION OF INTEREST RATE SWAP AGREEMENT	-405,046.						
LOSS ON EARLY EXTINGUISHMENT OF DEFERRED FINANCING	-180,144.						
OTHER LOSS PER FINANCIAL STATEMENTS	-20,000.						
TOTAL TO FORM 990, PART XI, LINE 9 -2,620,397.							
FORM 990, PART XII, LINE 2C							

THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES APPROVES THE ENGAGEMENT