Return of Organization Exempt From Income Tax

Form **990**

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

2023

Open to Public Inspection

A F	or th	e 202	3 calendar year, or tax year beginning 07/01/2023 a	nd ending]		06	/30/20	24				
_			C Name of organization		1	D Employer id	entific	ation num	ber				
Bo	heck if ap	oplicable:	PHILLIPS EXETER ACADEMY										
	Addre		Doing Business As			02	-02	22174					
	7 '	change	Number and street (or P.O. box if mail is not delivered to street address)	om/suite		E Telephone n							
	+	return	20 MAIN STREET			(603)772-4311							
	Term		City or town, state or province, country, and ZIP or foreign postal code			(0	03,	772 15					
	Amer		EXETER, NH 03833-2460		- 1,	G Gross receip	nts \$	604 65	77 Q.	17			
	returr Appli	cation	F Name and address of principal officer: WILLIAM RAWSON			H(a) Is this a gro			Yes	X No			
	pendi	ng	WILDIAN RINGON			subordinates	s?	<u> </u>	Yes				
_	Toy ov	omnt at	20 MAIN STREET, EXETER, NH 03833-2460	507	— '	H(b) Are all subord		t. (see instruc	_	No			
÷		empt st		527				,	,110115)				
			WWW.EXETER.EDU	1		H(c) Group exem	•						
			nization: X Corporation Trust Association Other	L Year of f	ormatio	on: 1781 M	State	of legal do	micile:	NH			
Ρ	art I		mmary										
_		Briefly	y describe the organization's mission or most significant activities: _ SEE SCE	FEDOTE (<u>0.</u>								
Governance													
rna													
) Ve	2		this box 🕨 🔛 if the organization discontinued its operations or disposed o				S.						
ŏ	3	Numb	er of voting members of the governing body (Part VI, line 1a)				3			23			
8	4		er of independent voting members of the governing body (Part VI, line 1b)				4			22			
Activities &	5		number of individuals employed in calendar year 2023 (Part V, line 2a)				5		1	,254			
냚	6	Total	number of volunteers (estimate if necessary)				6		4	,244			
ď	7a	Total	unrelated business revenue from Part VIII, column (C), line 12				7a		-97	,456.			
	b	Net ur	nrelated business taxable income from Form 990-T, line 34	<u>.</u>			7b			NONE			
						Prior Year		Curr	ent Ye	ar			
Ф	8	Contri	ibutions and grants (Part VIII, line 1h)		3	37,964,1	53.	18,	,954	,636.			
Revenue	9	Progra	om service revenue (Port VIII line 2g)	-	-	72,411,93	39.	76,	,281	,596.			
ě	10		tment income (Part VIII, column (A), lines 3, 4, and 7d)	ECTION	4	41,463,58	31.	90,	, 935	,806.			
œ	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			1,746,3	54.	1,	,107	,110.			
	12	Total	revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		15	53,586,03	37.	187,	, 279	,148.			
	13	Grant	s and similar amounts paid (Part IX, column (A), lines 1-3)		2	26,555,03	38.	26,	,783	,813.			
	14		its paid to or for members (Part IX, column (A), line 4)			N	ONE			NONE			
Ø	15		es, other compensation, employee benefits (Part IX, column (A), lines 5-10)		-	71,579,63	17.	75,	,083	,387.			
Expenses	16a		ssional fundraising fees (Part IX, column (A), line 11e)			N	ONE			NONE			
- be	b		fundraising expenses (Part IX, column (D), line 25) 8,954,928.										
ш	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			55,033,5	57.	56.	.321	,018.			
			expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			53,168,2				,218.			
	19		nue less expenses. Subtract line 18 from line 12			417,8				,930.			
or					Beginni	ing of Current			of Yea				
ets	20	Total :	assets (Part X, line 16)			02,825,14	_	2,078,	494	595			
Ass Bal	21		liabilities (Part X, line 26)			91,873,18				,045.			
Net Assets or Fund Balances	22		ssets or fund balances. Subtract line 21 from line 20.			10,951,96		1,885,					
	art II		gnature Block		<u> </u>	10,001,00	7 1 •	<u> </u>	233	, 550.			
			of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents. an	d to the best o	f mv l	knowledge	and be	elief. it is			
			complete. Declaration of preparer (other than officer) is based on all information of which p										
Sig	jn		Signature of officer			Date							
He	re		MARIJKA BEAUCHESNE CFO										
			Type or print name and title										
_			Type preparer's name Preparer's signature	Date		Check	if F	PTIN					
Paid	d			5/8/202	25	self-employ	J "	P00369	1622				
Pre	parer		VIS L PATTON	3, 3, 2, 02									
Use	Only		sname PWC US TAX LLP			Firm's EIN Phono no		2-0460 02-414					
Max	/ the I		saddress 655 NEW YORK AVE NW, STE 1100 WASHINGTON, DC 20001 cuss this return with the preparer shown above? (see instructions)			Phone no.		$\frac{02-414}{ x _{Y_0}}$					
			Reduction Act Notice, see the separate instructions.	<u></u>					es _ 99(No (2023)			
. 01	. upc		rrougerier, riot itotioo, doe tile deparate illdii dellelldi					1 011		<i>,</i> (८७८७)			

Form 990 (2023) Page **2**

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: SEE SCHEDULE O.
	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes," describe these new services on Schedule O.
3 4	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	the total expenses, and revenue, if any, for each program service reported. (Code:) (Expenses \$ 129,784,893. including grants of \$ 25,899,400.) (Revenue \$ 69,715,807.)
-u	SEE SCHEDULE O.
4b	(Code:) (Expenses \$5,345,663. including grants of \$711,637.) (Revenue \$6,806,653.) SEE SCHEDULE O.
4c	(Code:) (Expenses \$
	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$) Total program service expenses 135,914,048.

JSA 3E1020 2.000 Form 990 (2023)
Part IV Page 3

Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	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		X
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	X	
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete 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? 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	44.		3.7
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
u	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	114		v
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e	X	X
	Did the organization report an amount for other habilities in Part X, line 25? If Yes, complete schedule D, Part X	116	Λ	
'	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		Λ	
12 a	Schedule D, Parts XI and XII.	12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If	120	Λ	
J	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
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		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		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		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
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		X

Form 990 (2023)
Part IV Chocklist of Poquired Schodules (continued)

Par	t IV Checklist of Required Schedules (continued)		V	Na
22	Did the aggregation general many than CE 000 of grants or other applications to be for democitie individuals on		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22	V	
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23	Λ	
24 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	2/12	Х	
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	- 1	
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
·	to defease any tax-exempt bonds?	24c		Х
Ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	-		X
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	244		
2 5 a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	234		- 21
~	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
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? <i>If "Yes," complete Schedule L, Part II.</i>	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		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the 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		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash 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	Х	
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			
	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 Part V, line 1	34	X	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
_	19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Part				
	Check if Schedule O contains a response or note to any line in this Part V		Vac	N'a
4.	Enter the number reported in hex 2 of Form 4000. Fater 0 if and applicable		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	4.	v	
	reportable gaming (gambling) winnings to prize winners?	1c	Χ	

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Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1,254			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	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 Accounts (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 transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts 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 provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		
	required to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7.		3.5
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		_X
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	/ 11		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
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 organization is licensed to issue qualified health plans			
_				
	Enter the amount of reserves on hand	14a		
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> · · · · · ·	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the 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.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes." complete Form 6069.			

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

Sect	ion A. Governing Body and Management					11
	y , y				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	23			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar					
b	committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent	1b	22			
2	Did any officer, director, trustee, or key employee have a family relationship or a business re	lations	hip with			
_	any other officer, director, trustee, or key employee?		-	2		X
3	Did the organization delegate control over management duties customarily performed by or un					
	supervision of officers, directors, trustees, or key employees to a management company or other			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was f			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to e	ect o	appoint			
	one or more members of the governing body?			7a	Χ	
b	Are any governance decisions of the organization reserved to (or subject to approval	by) n	nembers,			
	stockholders, or persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions und	ertake	n during			
	the year by the following:			_		
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.			9		Х
Secti	on B. Policies (This Section B requests information about policies not required by the Inte	ernal	Revenue	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	chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt p	urpose	s?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before f	ling th	e form? .	11a		X
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests			401		
	rise to conflicts?			12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the p	•		120	77	
	describe on Schedule O how this was done			12c 13	X	
13	Did the organization have a written whistleblower policy?			14	X	
14	Did the organization have a written document retention and destruction policy?			17	21	
15	Did the process for determining compensation of the following persons include a review are independent persons, comparability data, and contemporaneous substantiation of the deliberation		-			
а	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar	r arra	ngement	10-		3.5
_	with a taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to					
	organization's exempt status with respect to such arrangements?			16b		
Secti	ion C. Disclosure			100		
17	List the states with which a copy of this Form 990 is required to be filedCA, IN, NH, OK,					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable)	990	and 990-T	(sect	ion 5	01(c)
.0	(3)s only) available for public inspection. Indicate how you made these available. Check all that ap Own website Another's website X Upon request Other (explain on So	ply.		(000.		01(0)
19	Describe on Schedule O whether (and if so, how) the organization made its governing docur and financial statements available to the public during the tax year.	nents,	conflict o	finter	est p	olicy,
20	State the name, address, and telephone number of the person who possesses the organization's SAMANTHA K. SLINEY 20 MAIN STREET EXETER, NH 03833-2460	oooks	and record	S.		

603-777-3211

Form **990** (2023)

Form 990 (2023) PHILLIPS EXETER ACADEMY 02-0222174

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, **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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

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

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

(A) Name and title	(B) Average hours per week	box,	not ch unles	Pos neck s pe	erson	e than o is both or/trust	an	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) WILLIAM RAWSON	40.00									
PRINCIPAL	NONE	Х		Х				656,751.	NONE	135,966.
(2) JUSTIN MERRILL	40.00									
DIRECTOR OF INVESTMENTS	NONE					Х		383,862.	NONE	80,659.
(3) KATHARINA LILLY	40.00									
MEDICAL DIRECTOR	NONE					Х		294,822.	NONE	131,688.
(4) MARIJKA BEAUCHESNE	40.00									
CFO	NONE			Х				365,057.	NONE	55,415.
(5) MORGAN DUDLEY	40.00									
DIRECTOR INSTITUTIONAL ADV.	NONE					Х		329,829.	NONE	75,347.
(6) HOLLY BARCROFT	40.00									
GENERAL COUNSEL	NONE					Х		316,985.	NONE	86,770.
(7) WILLIAM LEAHY	40.00									
DEAN OF ENROLLMENT	NONE					X		210,049.	NONE	102,781.
(8) WOLE C. COAXUM	2.00									
TRUSTEE	NONE	X						NONE	NONE	NONE
(9) MORGAN C. SZE	2.00									
PRESIDENT/TRUSTEE	NONE	X						NONE	NONE	NONE
(10) DEIDRE G. O'BYRNE	2.00									
VICE PRESIDENT/TRUSTEE	NONE	Х						NONE	NONE	NONE
(11) E. JANNEY WILSON	2.00									
TRUSTEE	NONE	Х						NONE	NONE	NONE
(12) PETER M. SCOCIMARA	2.00									
TRUSTEE	NONE	Х						NONE	NONE	NONE
(13) SUZI K. COHEN	2.00									
TRUSTEE	NONE	Х						NONE	NONE	NONE
(14) KRISTYN MCLEOD VAN OSTERN	2.00									
TRUSTEE	NONE	X						NONE	NONE	NONE
										Form 990 (2023)

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Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	nplo	ye	es,	and F	lig	hest Compensat	ed Employees (c	ontinued)
(A) Name and title	(B) Average			Pos	C) sition			(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours for	box,	(do not check more than one box, unless person is both an officer and a director/trustee)					compensation from the	compensation from related organizations	amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
15) CIA BUCKLEY MARAKOVITS	2.00									
TRUSTEE	NONE	X						NONE	NONE	NONE
(16) SANJAY SHETTY	2.00	37						NONE	NONTE	NONE
TRUSTEE	NONE	X						NONE	NONE	NONE
(17) IRA D. HELFAND TRUSTEE	2.00	- v						NONE	NIONIE	NONE
	2.00	X						NONE	NONE	NONE
(18) SCOTT SANG-WON HAHN TRUSTEE	NONE	X						NONE	NONE	NONE
(19) ELIZABETH A. FLEMING	2.00	Α.						NOINE	NONE	NONE
TRUSTEE	NONE	x						NONE	NONE	NONE
(20) PAULINA L. JEREZ	2.00							INOINE	IVONE	NOINE
TRUSTEE	NONE	x						NONE	NONE	NONE
(21) GILES K. KEMP	2.00	21						NONE	NONE	110111
TRUSTEE	NONE	X						NONE	NONE	NONE
(22) ERIC A. LOGAN	2.00							110112	1,01,7	110111
TRUSTEE	NONE	X						NONE	NONE	NONE
(23) UNA JAIN BASAK	2.00									
TRUSTEE	NONE	X						NONE	NONE	NONE
(24) SAMUEL M. MARUCA	2.00							-	-	
TRUSTEE	NONE	Х						NONE	NONE	NONE
(25) MICHAEL J. SCHMIDTBERGER	2.00									
TRUSTEE	NONE	X						NONE	NONE	NONE
1b Sub-total								2,557,355.	NONE	668,626.
c Total from continuation sheets to Part VII, S							>	NONE	NONE	NONE
d Total (add lines 1b and 1c)							\blacktriangleright	2,557,355.	NONE	668,626.
2 Total number of individuals (including but not reportable compensation from the organizatio		hose	liste	d a		e) who	o re	eceived more than	\$100,000 of	
										Yes No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched										3
4 For any individual listed on line 1a, is the organization and related organizations gr	sum of rep	oortab	ole o	com	per	nsatior	า aı s."	nd other compens	sation from the	
individual										4
5 Did any person listed on line 1a receive or										
for services rendered to the organization? If "Y										5

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.

(A) Name and business address	(B) Description of services	(C) Compensation

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

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Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	nplo	ye	es,	and F	lig	hest Compensat	ed Employ	ees (c	ontinue	ed)	
(A)	(B)			(0	C)			(D)	(E)			(F)	
Name and title	Average	(40			sition	. 46		Reportable	Reporta			stimated	
	hours per week (list any					e than o		compensation from	compensation			nount of other	
	hours for	office			lirect	or/truste		the	organizat			pensatio	on
	related	or c	Inst	Officer	Key	Hig	Former	organization	(W-2/1099			om the	
	organizations	lirec		cer	Key employee	hest oloy	mer	(W-2/1099-MISC)				anizatior d related	
	below dotted line)	otor tall t	ona		ploy	t cor						anization	
		Individual trustee or director	Institutional trustee		/ee	npe					9-		
		96	stee			Highest compensated employee							
						ted							
26) BRADFORD BRINER	2.00												
TRUSTEE	NONE	Х						NONE		NONE		1	NONE
27) CHRISTINE M. ROBSON WEAVER	2.00												
TRUSTEE	NONE	Х						NONE		NONE		1	NONE
28) LEROY SIMS	2.00												
TRUSTEE	NONE	X						NONE		NONE		1	NONE
29) BELINDA A. TATE	2.00												
TRUSTEE	NONE	X						NONE		NONE		1	NONE
	†	1											
	†	1											
	 	1											
	+	1											
	+	1											
		1											
		1											
- <u></u> -							_						
1b Sub-total							>						
c Total from continuation sheets to Part VII, S	-						>						
d Total (add lines 1b and 1c)							<u> </u>	<u> </u>	•				
2 Total number of individuals (including but not		hose	liste	d al	bove	e) who	re	eceived more than	\$100,000	of			
reportable compensation from the organization	n 🖊											 	
												Yes	No
3 Did the organization list any former office													
employee on line 1a? If "Yes," complete Sched	lule J for su	ch inc	lividu	ual							3		X
4 For any individual listed on line 1a, is the	sum of rep	oortab	ole d	om	pen	sation	n a	nd other compens	sation from	the			
organization and related organizations gr	eater than	\$15	50,0	00?) If	"Yes	,"	complete Schedu	le J for	such			
individual											4	Х	
5 Did any person listed on line 1a receive or													
for services rendered to the organization? If "Y	'es," comple	te Sci	hedu	ıle J	I for	such	per	rson			5		X
Section B. Independent Contractors													
1 Complete this table for your five highest com													
compensation from the organization. Report of	compensati	on fo	r the	ca	lend	dar yea	ar e	ending with or with	nin the orga	anizatio	n's tax		
year.			_										
(A)								(B)			(C)		
SEE SCHEDULE O Name and business add	dress							Description of se	ervices	C	ompens	sation	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 45

02-0222174

Part VIII Statement of Revenue

		Check if Schedule	O cc	ontains a r	espor	se or note to ar	ny line in this Part V	/111		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants, and Other Similar Amounts	1a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (cor All other contributions, gand similar amounts not ind Noncash contributions i lines 1a-1f	ntribu gifts, clude	utions) grants, d above . ded in	1a 1b 1c 1d 1e 1f	18,954,636. 761,730.				3001013 312 314
ರ್ಟ∣	h	Total. Add lines 1a-1f		_			18,954,636.			
						Business Code				
8	2a	STUDENT TUITION & FEES	S			611710	68,472,710.	68,472,710.		
اه ڲٙ	h	AUX.& SUMMER PROGRAMS				611710	7,808,886.	7,808,886.		
S Z	c									
eve	d									
PS	e									
Program Service Revenue	e f	All other program service	ο rov	/ANIIA						
	g	Total. Add lines 2a-2f					76,281,596.			
	3	Investment income (in								
	ŭ			_	Jiido,	interest, and	9,784,425.	916,461.	-1,058,898.	9,926,862.
	4	other similar amounts) Income from investment of tax-exempt bond			hond	proceeds	NONE			
	5	Royalties		•		•	NONE			
	•			(i) Rea		(ii) Personal				
	60	Cross ronts	60	.,	L,596.	() = ====				
	6a		6a	311	.,550.					
	b	· -	6b	F1.1		NONE				
	С	` / _	6c		L,596.	NONE		214 100	100 400	
	d	Net rental income or (los	SS) .				511,596.	314,109.	197,487.	
	7a	Gross amount from		(i) Securi	ities	(ii) Other				
		sales of assets								
		other than inventory	than inventory 7a 497,870,570		570.					
ne	b	Less: cost or other basis								
evenue		and sales expenses	7b	416,719	9,189.					
Re	С	Gain or (loss)	7c	81,151	1,381.					
	d	Net gain or (loss)					81,151,381.		763,955.	80,387,426.
Other	8a	Gross income from	n f	undraising						
0		events (not including \$ _								
		of contributions repo	orted	on line						
		1c). See Part IV, line 18			8a	NONE				
	b	Less: direct expenses			8b	NONE				
	С	Net income or (loss) fro	m fu	ndraising e	vents		NONE			
	9a	Gross income from	om	gaming						
		activities. See Part IV, lin	ne 19)	9a	NONE				
	b	Less: direct expenses .			9b	NONE				
	c	Net income or (loss) from					NONE			
	10a	Gross sales of in	-	-						
	. Ju	returns and allowances		•	10a	888,773.				
	h	Less: cost of goods sold			10b	679,510.				
		Net income or (loss) from					209,263.			209,263.
-			00		,	Business Code	207,203.			203,203.
Miscellaneous Revenue	4.4	TUITION REFUND INSURAN	NCF			611710	37,794.	37,794.		
Je al	11a		TACE:							
le la	b	APPLICATION FEES				611710	150,250.	150,250.		50.655
Re	C	BOOKSTORE COMMISSIONS				611710	59,615.	a.c. = - ·		59,615.
Ĕ	d	All other revenue				611710	138,592.	138,592.		
	е	Total. Add lines 11a-11d					386,251.			
	12	Total revenue. See instr	ructio	ns			187,279,148.	77,838,802.	-97,456.	90,583,166.

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Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a resp	onse or note to any line	e in this Part IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	NONE			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	26,783,813.	26,783,813.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	NONE			
4	Benefits paid to or for members	NONE			
5	Compensation of current officers, directors,				
	trustees, and key employees	1,080,890.	390,513.	560,206.	130,171
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	NONE			
7	Other salaries and wages	53,477,180.	44,026,064.	4,417,544.	5,033,572
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	5,753,494.	4,789,886.	474,605.	489,003
9	Other employee benefits	10,808,574.	8,941,440.	885,807.	981,327
10	Payroll taxes	3,963,249.	3,209,198.	387,138.	366,913
11	Fees for services (nonemployees):				
а	Management	NONE			
b	Legal	272,801.		272,801.	
С	Accounting	433,152.		433,152.	
d	Lobbying	NONE			
	Professional fundraising services. See Part IV, line 17.	NONE			
f	Investment management fees	525,174.		525,174.	
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule O.)	3,785,257.	2,917,004.	563,193.	305,060
	Advertising and promotion	231,385.	167,055.		64,330
	Office expenses	2,670,439.	2,510,481.	55,854.	104,104
	Information technology	3,261,938.	2,813,805.	299,425.	148,708
	Royalties	NONE	6 500 065	0.018.613	
	Occupancy	8,818,985.	6,529,265.	2,217,613.	72,107
	Travel	2,743,252.	2,232,440.	82,318.	428,494
18	Payments of travel or entertainment expenses	NONE			
	for any federal, state, or local public officials	NONE	1 540 006	200 254	417 422
	Conferences, conventions, and meetings	2,168,912.	1,542,226.	209,254. 69,210.	417,432
	Interest	2,911,601.	2,811,737.	09,210.	30,654
	Payments to affiliates	NONE 18,065,969.	17,438,257.	435,032.	192,680
	Depreciation, depletion, and amortization	1,743,514.	922,477.	782,571.	38,466
	Insurance	1,743,314.	722, 111.	702,371.	30,400
24	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 O.)				
2	STUDENT RELATED EXPENSES	2,201,162.	2,145,788.	36,698.	18,676
	FOOD/PROVISIONS	2,609,500.	2,609,500.	3070301	20,010
	PLANT RELATED ACTIVITIES	1,670,503.	1,612,460.	40,226.	17,817
	MEMBERSHIP DUES	446,226.	366,847.	28,160.	51,219
	All other expenses	1,761,248.	1,153,792.	543,261.	64,195
	Total functional expenses. Add lines 1 through 24e	158,188,218.	135,914,048.	13,319,242.	8,954,928
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here		. ,	,	, - ,
	following SOP 98-2 (ASC 958-720)				

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Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this P	art X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	25,022,123.	1	10,999,901.
	2	Savings and temporary cash investments	65,319,817.	2	73,730,597.
	3	Pledges and grants receivable, net	33,007,896.	3	27,098,728.
	4	Accounts receivable, net	1,587.	4	103,480.
	5	Loans and other receivables from 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	NONE	5	NONE
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	6	NONE	
ţ	7	Notes and loans receivable, net	NONE	7	NONE
Assets	8	Inventories for sale or use	437,761.	8	397,338.
Ÿ	9	Prepaid expenses and deferred charges	3,736,757.	9	4,419,403.
	10 a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 617,433,601.			
	b	Less: accumulated depreciation 10b 242,355,444.	352,831,940.	10c	375,078,157.
	11	Investments - publicly traded securities SEE SCHEDULE .O	99,777,003.	11	113,583,622.
	12	Investments - other securities. See Part IV, line 11	1,353,674,581.	12	1,398,732,064.
	13	Investments - program-related. See Part IV, line 11.	NONE		NONE
	14	Intangible assets	NONE	14	NONE
	15	Other assets. See Part IV, line 11		15	74,351,305.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	2,002,825,149.	16	2,078,494,595.
	17	Accounts payable and accrued expenses		17	16,615,382.
	18	Grants payable	NONE	18	NONE
	19	Deferred revenue SEE SCHEDULE O	23,857,626.	19	16,681,171.
	20	Tax-exempt bond liabilities		20	80,000,000.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	NONE		NONE
Ś	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
Ιġ		controlled entity or family member of any of these persons	NONE	22	NONE
Ë	23	Secured mortgages and notes payable to unrelated third parties	NONE		NONE
	24	Unsecured notes and loans payable to unrelated third parties	NONE		NONE
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	79,352,496.	25	79,964,492.
	26	Total liabilities. Add lines 17 through 25	191,873,185.	26	193,261,045.
ses		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
lan	27	Net assets without donor restrictions	513,703,171.	27	527,502,839.
ã	28	Net assets with donor restrictions.	1,297,248,793.	28	1,357,730,711.
Fund Balances		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.	, , , , , , , , , , , , , , , , , , , ,		, , , , , , , , , , , , , , , , , , , ,
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Assets	31	Retained earnings, endowment, accumulated income, or other funds		31	
¥.	32	Total net assets or fund balances	1,810,951,964.	32	1,885,233,550.
Net	33	Total liabilities and net assets/fund balances	2,002,825,149.	33	2,078,494,595.
	55	Total habilities and flet assets/fully balances, , , , , , , , , , , , , , , , , , ,	4,004,045,149.	33	Form 990 (2023)

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Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1		37,2		
2	Total expenses (must equal Part IX, column (A), line 25)	58,1	88,	<u>218</u> .
3		29,0		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 1 , 83	L0,9	51,	<u>964</u> .
5	Net unrealized gains (losses) on investments	<u>10,7</u>	83,	<u>217</u> .
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain on Schedule O)	4,4	07,	<u>439</u> .
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))	<u> 35,2</u>	33,	<u>550</u> .
Part				
	Check if Schedule O contains a response or note to any line in this Part XII			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on			
	Schedule O.	_		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		<u>X</u>
	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	X	
	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	1	Х	
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on			
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	20		v
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	26		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A (Form 990)

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

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

PH]	LLL	IPS EXETER ACADEMY					02-0	222174
Pai	rt I	Reason for Public Ch	arity Status. (All	organizations must	comple	ete this p	oart.) See instruction	ns.
Γhe	orga	anization is not a private fou	ndation because it	is: (For lines 1 through	gh 12, ch	eck only	one box.)	
1		A church, convention of chu	urches, or associa	tion of churches descr	ribed in s	ection 1	70(b)(1)(A)(i).	
2	X	A school described in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	90).)		
3		A hospital or a cooperative	hospital service o	rganization described	in sectio	n 170(b)	(1)(A)(iii).	
4		A medical research organiz	•	-				(iii). Enter the
		hospital's name, city, and st	· ·	•	•		(/ / / /	` ,
5		An organization operated to		a college or universit	v owne	d or ope	rated by a governme	ental unit described in
		section 170(b)(1)(A)(iv). (C			,			
6		A federal, state, or local go		rnmental unit describe	d in sect	ion 170(b)(1)(A)(v).	
7		An organization that norma	_			-		om the general public
-		described in section 170(b)	=	· ·		3-		and general plane
8		A community trust describe		· ·	Part II.)			
9		An agricultural research org			-	operated	Lin conjunction with a	land-grant college
		or university or a non-land-	=			-	=	
		university:	grant concge or as	grioditaro (oco motraci	10110). LI	11101 1110 1	name, ony, and state of	Title college of
0		An organization that norma	Illy receives (1) mo	ore than 331/3 % of its	sunnort	from cor	ntributions membersh	in fees, and aross
		receipts from activities rela	ted to its exempt f	unctions, subject to c	ertain ex	ceptions	s: and (2) no more thar	n 331/3 % of its
		support from gross investment of the arganization						businesses
1		acquired by the organization An organization organization organized						
2		An organization organized a	•	•			, , , ,	ry out the nurnoses of
_		one or more publicly suppo	•	-	-			
		the box on lines 12a through	•			•		, ,, ,
_		_		• • • • • • • • • • • • • • • • • • • •			•	•
а		Type I. A supporting orgative supported organization		•	-		=	
		supporting organization.	. , .	• • • •		ajority of	the directors of truste	es of the
b		Type II. A supporting org	-			with ite	supported organization	on(e) by baying
b		control or management of						
		_ organization(s). You must		_	tile saili	c persor	is that control of man	age the supported
С		Type III functionally integ	-		ited in co	onnectio	n with and functional	lly integrated with
·		_ its supported organization						ny integrated with,
d		Type III non-functionally						ted organization(s)
_		that is not functionally into			-			
		requirement (see instruct	•	•			•	2 4.1 4.10.11.10.1000
е		Check this box if the orga	•	-				I. Type III
		functionally integrated, or						, ,,
f	En	ter the number of supported			-	_		
g	Pro	ovide the following information	on about the suppo	orted organization(s).				
	(i) N	ame of supported organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of
				(described on lines 1-10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
				az e ve (e ce mem a cheme))	Yes	No	mon donone)	men donone,
A)								
B)								
C)								
D)								
-,								
E)								
Γot a	ıl							

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	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	19,526,643.	50,175,585.	55,133,970.	37,964,153.	18,954,636.	181,754,987.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE
3	The value of services or facilities furnished by a governmental unit to the organization without charge						NONE
4	Total. Add lines 1 through 3	19,526,643.	50,175,585.	55,133,970.	37,964,153.	18,954,636.	181,754,987.
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).						15,188,520.
6	Public support. Subtract line 5 from line 4						166,566,467.
	tion B. Total Support	(a) 2010	(b) 2020	(a) 2021	(4) 2022	(a) 2022	(f) Total
_	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023 18,954,636.	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	19,526,643. 7,260,804.	50,175,585. 6,374,696.	55,133,970.	37,964,153. 17,288,192.	10,296,020.	181,754,987. 44,301,950.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						NONE
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	618,059.	175,161.	673,439.	967,616.	948,388.	3,382,663.
11	Total support. Add lines 7 through 10						229,439,600.
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	344,113,965.
13 Sec	First 5 years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sup			, third, fourth,	or fifth tax yea	ar as a section	501(c)(3)
<u>000</u> 14	Public support percentage for 2023 (li			11 column (f))		14	72.60 %
15	Public support percentage from 2022		-			15	73.19 %
	331/3% support test - 2023. If the org					•	
·ou	box and stop here. The organization qu						
b	331/3% support test - 2022. If the org						
	this box and stop here . The organization						
17a	10%-facts-and-circumstances test - 2			_			
	10% or more, and if the organization	n meets the fac	cts-and-circumst	ances test, che	ck this box ar	d stop here. E	xplain in
	Part VI how the organization meets						
	organization			_			
b	10%-facts-and-circumstances test - 2						
	15 is 10% or more, and if the organiz	_					
	in Part VI how the organization meets					-	-
	organization			_	-		
18	Private foundation. If the organization						
	instructions						<u> </u>

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.)

Sec	tion A. Public Support				· ·	•	
	endar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
ı a	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
•	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support						<u>I</u>
	endar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on.						
12	, , , , , , , , , , , , , , , , , , ,						
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 5 years. If the Form 990 is for	the organizati	on's first, secon	d, third. fourth	or fifth tax ve	ar as a section	501(c)(3)
-	organization, check this box and stop here	· ·	•		•		` ` ` `
Sec	tion C. Computation of Public Supp						
15	Public support percentage for 2023 (line 8,			mn (f))		15	%
16	Public support percentage from 2022 Sche					16	%
	tion D. Computation of Investment					1	,,,
17	Investment income percentage for 2023 (lir			13, column (f))		17	%
18	Investment income percentage from 2022 S					18	%
	331/3% support tests - 2023. If the or						
u	17 is not more than 331/3%, check this	-					
h	331/3% support tests - 2022. If the orga						
~	line 18 is not more than 331/3 %, check						
20	Private foundation. If the organization of		•				

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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).
- B Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on 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 on 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.**
- 10 a 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 line 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
g <i>y</i>			
s d	1		
er	2		
	3a		
d e	3b		
3)			
lf	3c		
n	4a		
n	4b		
n <i>d</i> 3)			
, "	4c		
N N n; n			
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,	5b 5c		
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е	8		
e s	00		
h	9a 9b		
it	9c		
n d			
0	10a 10b		

Page 5 Schedule A (Form 990) 2023

Part	V Supporting Organizations (continued)			- 5 -
			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 on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,	44.		
Sacti	provide detail in Part VI. on B. Type I Supporting Organizations	11c		
Jecti	on b. Type roupporting organizations		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
200ti	on C. Type II Supporting Organizations	2		
ecu	on 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		103	110
'	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
	Did the consideration of the consideration of the consideration of the fifth consideration		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
	the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
•	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
3	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on 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 in	structi	ons).	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	e instr		r
2	Activities Test. Answer lines 2a and 2b below.		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, how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
D	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	6.		
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3h		i .

Pa	art V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nization	S						
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See								
	instructions. All other Type III non-functionally integrated supporting organ								
Se	ection 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							
	ection 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):								
a	Average monthly value of securities	1a							
b	Average monthly cash balances	1b							
	Fair market value of other non-exempt-use assets	1c							
C	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 0.015 of line 3 (for greater amount, see instructions).	4							
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5							
	Multiply line 5 by 0.035.	6							
7		7							
8		8							
Se	ection C - Distributable Amount			Current Year					
1	Adjusted net income for prior year (from Section A, line 8, column A)	1							
2	Enter 0.85 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		lly integra	ited Type III supporting	g organization					
	(see instructions).	-		· -					

Schedule A (Form 990) 2023

Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continued)		
Sect	ion D - Distributions		, , , , , , , , , , , , , , , , , , ,		Current Year
1	Amounts paid to supported organizations to accomplish ex	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpo	zations	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	ıs	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
_3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
C	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from				
	Section D, line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				

Schedule A (Form 990) 2023

and 4c.

Breakdown of line 7:

a Excess from 2019...

b Excess from 2020...

c Excess from 2021...

d Excess from 2022...

e Excess from 2023...

Excess distributions carryover to 2024. Add lines 3j

Schedule A (Form 990 or 990-EZ) 2023 Part VI

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

SCHEDULE A, PART II - OTHER INCOME						
DESCRIPTION	2019	2020	2021	2022	2023	TOTAL
OTHER INCOME	618,059.	175,161.	673,439.	967,616.	948,388.	3,382,663.
TOTALS	618,059.	175,161.	673,439.	967,616.	948,388.	3,382,663.

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization		Employer identification number					
PHILLIPS EXETER ACA Organization type (check on		02-0222174					
Organization type (check on	<i>ъ</i>).						
Filers of:	Section:						
Form 990 or 990-EZ							
	4947(a)(1) nonexempt charitable trust not treated as a	a private foundation					
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a pri	vate foundation					
	501(c)(3) taxable private foundation						
Check if your organization is	covered by the General Rule or a Special Rule.						
	7), (8), or (10) organization can check boxes for both the General	Rule and a Special Rule. See					
General Rule							
	n filing Form 990, 990-EZ, or 990-PF that received, during the year or property) from any one contributor. Complete Parts I and II. Secontributions.						
Special Rules							
regulations under : 16b, and that rece	n described in section 501(c)(3) filing Form 990 or 990-EZ that metricology sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule Advived from any one contributor, during the year, total contributions unt on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1.	A (Form 990), Part II, line 13, 16a, or sof the greater of (1) \$5,000; or					
contributor, during literary, or educati	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$							
-	t isn't covered by the General Rule and/or the Special Rules doe /, line 2, of its Form 990; or check the box on line H of its Form 99						

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization PHILLIPS EXETER ACADEMY

Employer identification number 02-0222174

art I	Contributors ((see instructions)	. Use dup	olicate copies	of Part I	if additional	space is needed.
-------	----------------	--------------------	-----------	----------------	-----------	---------------	------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	N/A	\$850,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	N/A	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3_	N/A	\$1,125,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	N/A	\$1,000,000.	Person X Payroll Noncash (Complete Part II for
			noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			(d)
No.	Name, address, and ZIP + 4	Total contributions	(d) Type of contribution Person Payroll Noncash (Complete Part II for

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Name of organization PHILLIPS EXETER ACADEMY

Employer identification number 02-0222174

Part I C	Contributors (see instructions).	Use duplicate copies of Part I	if additional space is needed.
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	N/A	\$673,422.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	N/A	\$535,376.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	N/A	\$442,326.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization PHILLIPS EXETER ACADEMY Employer identification number

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112-	11 2 2 2	1/4

Part II Nonc	eash Property (see instructions). Use duplicate copies	of Part II if additional space is ne	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

\$_

(See instructions.)

Name of organization **Employer identification number** 02-0222174 PHILLIPS EXETER ACADEMY Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (c) Use of gift (b) Purpose of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

Open to Public

OMB No. 1545-0047

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. Inspection

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

	(see separate instructions), ther Section $501(c)(4)$, (5) , or (6) org				
	e of organization	·		Employer ide	ntification number
PH:	LLIPS EXETER ACADEM	Y		02-03	222174
Pa	rt I-A Complete if the o	organization is exempt under	section 501(c) or	is a section 527 orga	nization.
1	Provide a description of t	he organization's direct and ind	irect political camp	aign activities in Part	IV. See instructions for
	definition of "political campa	aign activities."			
2		xpenditures. See instructions			
3	Volunteer hours for political	campaign activities. See instruction	ons		
Pai		organization is exempt under			
1	Enter the amount of any exc	cise tax incurred by the organization	on under section 495	5 \$	
2		cise tax incurred by organization m			
3		a section 4955 tax, did it file Form			
					Yes No
	If "Yes," describe in Part IV.				
Pa	t I-C Complete if the c	organization is exempt under	section 501(c), ex	cept section 501(c)(3	3).
1		xpended by the filing organization			
2		ng organization's funds contributed			
		es			
3		enditures. Add lines 1 and 2. En		,	
_	line 17b			\$	
4	Did the filing organization fil	e Form 1120-POL for this year?	or (CINI) of all coefic	n 507 political argania	Yes No
5		is. For each organization listed, er			
		tributions received that were pron			
		nd or a political action committee (
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	• •			filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate political organization.
					If none, enter -0
(1)					
(1)			_		
(2)					
(-)					
(3)					
(-,					
(4)					
. ,					
(5)					
_					
(6)					

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

Schedule C (Form 990) 2023

				R ACADEMY	- F04/-)/0)I		-0222174 Page 2
Pa	rt II-A Complete if the org section 501(h)).	anızatı	on is exen	npt under section	1 501(c)(3) and	filed Form 5/68 (ele	ction under
Α				affiliated group (and		ach affiliated group mem	ber's name, address,
В	Check if the filing organiz	ation ch	ecked box A	A and "limited contro	l" provisions app	oly.	
			ying Expend			(a) Filing	(b) Affiliated
	(The term "expenditu	ıres" me	ans amour	nts paid or incurred.)	organization's totals	group totals
1a	Total lobbying expenditures to ir	nfluence	public opini	ion (grassroots lobb	ying)		
b	Total lobbying expenditures to ir	nfluence	a legislative	e body (direct lobbyi	ng) [
С	Total lobbying expenditures (add	d lines 1	a and 1b) .				
d	Other exempt purpose expendite	ures					
е	Total exempt purpose expenditu	ires (add	l lines 1c an	nd 1d)			
f	Lobbying nontaxable amount.	Enter th	e amount f	from the following	table in both		
	columns.						
	If the amount on line 1e, column (a)	or (b) is:	The lobbying	ng nontaxable amount	is:		
	not over \$500,000,		20% of the	amount on line 1e.			
	over \$500,000 but not over \$1,000,	000,	\$100,000 pl	us 15% of the excess	over \$500,000.		
	over \$1,000,000 but not over \$1,50	0,000,	\$175,000 pl	us 10% of the excess	over \$1,000,000.		
	over \$1,500,000 but not over \$17,0	00,000,	\$225,000 pl	us 5% of the excess of	ver \$1,500,000.		
	over \$17,000,000,		\$1,000,000				
g	Grassroots nontaxable amount	enter 25	% of line 1f)			
h	Subtract line 1g from line 1a. If a	zero or le	ss, enter -0				
	Subtract line 1f from line 1c. If z				_		
	If there is an amount other that					tion file Form 4720	
•	reporting section 4911 tax for th				•		Yes No
	1 5			aging Period Under			
	(Some organizations that	made a	section 50	1(h) election do no	t have to compl	ete all of the five colun	nns below.
		See	the separa	te instructions for I	ines 2a through	2f.)	
		Lobb	ying Exper	nditures During 4-Yo	ear Averaging Pe	riod	
	Calendar year (or fiscal year beginning in)	(a)	2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column (e))						
С	Total lobbying expenditures						
d	Grassroots nontaxable amount						

Schedule C (Form 990) 2023

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

 Grassroots lobbying expenditures

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	(;	a)		(b))	
	cription of the lobbying activity.	Yes	No		Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local						
	legislation, including any attempt to influence public opinion on a legislative matter or						
	referendum, through the use of:						
а	Volunteers?		X				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.		X				
С	Media advertisements?		X				
d	Mailings to members, legislators, or the public?		X				
е	Publications, or published or broadcast statements?		X				
f	Grants to other organizations for lobbying purposes?		X				
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? Other activities?	X	21			111.	427
i j	Other activities? Total. Add lines 1c through 1i						427
J 2a	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		Х			,	
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?						
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	ection			
	501(c)(6).						
_				ſ		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 from				3		
Pal	t III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No"		-		lino '	2 ic	
	answered "Yes."	<i>1)</i> 710	Ј) Га	ı ı ııı-A,	iiiie .	J, 13	
1	Dues, assessments and similar amounts from members			1			
2							
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amore political expenses for which the section 527(f) tax was paid).	unis	OI				
а	Current year			2a			
b	Carryover from last year			2b			
С	Total			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du			3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion						
	excess does the organization agree to carryover to the reasonable estimate of nondeductible I						
	and political expenditures next year?			4			
5	Taxable amount of lobbying and political expenditures. See instructions.			5			
	TIV Supplemental Information	4	Par	() D(I		4	
	ride the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate se instructions); and Part II-B, line 1. Also, complete this part for any additional information.	a gro	up iisi	i); Part i	I-A, III	nes 1	and
•							
SEE	C PAGE 4						

LOBBYING ACTIVITIES

SCHEDULE C, PART II-B, LINE 1I

PHILLIPS EXETER ACADEMY IS A MEMBER OF A NUMBER OF PROFESSIONAL AND EDUCATIONAL ASSOCIATIONS BENEFITTING BUSINESS OPERATIONS, EDUCATIONAL EXPERIENCES, AND STUDENT LIFE THAT MAY USE A PORTION OF MEMBERSHIP DUES TO LOBBY ON BEHALF OF THEIR MEMBERS. TOTAL MEMBERSHIP DUES PAID BETWEEN 7/1/23 AND 6/30/24 WAS \$111,427. THE PORTION OF MEMBERSHIP DUES ALLOCATED TO LOBBYING ACTIVITIES BY THESE ASSOCIATIONS IS NOT DETERMINABLE.

SCHEDULE D (Form 990)

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,

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

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

PH]	LLIPS EXETER ACADEMY	02-0222174
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or	Accounts
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held	in donor advised
	funds are the organization's property, subject to the organization's exclusive legal control? .	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fu	ınds can be used
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for a	ny other purpose
	conferring impermissible private benefit?	Yes No
Pa	rt II Conservation Easements	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
		of a historically important land area
		of a certified historic structure
_	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	
	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
C	Number of conservation easements on a certified historic structure included on line 2a	2c
d	Number of conservation easements included on line 2c acquired after July 25, 2006, and	24
	not on a historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or termi	nated by the organization during the
4	tax year Number of states where property subject to conservation easement is located	
4 5	Does the organization have a written policy regarding the periodic monitoring, inspecti	ion handling of
J	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing	
•	cian and volunteer nears devoted to morntoning, inspecting, narrating or violations, and emorning	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing co	onservation easements during the year
	3, 4, 3,	,
8	Does each conservation easement reported on line 2d above satisfy the requirements of sec	tion 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and	d expense statement and balance
	sheet, and include, if applicable, the text of the footnote to the organization's financial statem	nents that describes the
	organization's accounting for conservation easements.	
Pa	Organizations Maintaining Collections of Art, Historical Treasures, or Other	r Similar Assets
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue of art, historical treasures, or other similar assets held for public exhibition, education,	e statement and balance sheet works
	service, provide in Part XIII the text of the footnote to its financial statements that describes the	or research in furtherance of public nese items.
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue st	
	art, historical treasures, or other similar assets held for public exhibition, education, or rese	
	provide the following amounts relating to these items:	_
	(i) Revenue included on Form 990, Part VIII, line 1	
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar a	assets for financial gain, provide the
	following amounts required to be reported under FASB ASC 958 relating to these items:	•
a	Revenue included on Form 990, Part VIII, line 1	
b	ASSELS IIIUIUUEU III FUIIII 990. Fäil A	J

Pa	rt III Organizations Maintaini	ng Collections of	Art, Historical Tr	easures, o	r Other	Similar Assets (continue	d)	
3	Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its								
	collection items (check all that apply).								
а	x Public exhibition		d Loan	or exchange	e progran	n			
b	x Scholarly research		e Other						
С	X Preservation for future gene	rations							
4	Provide a description of the organ	nization's collections	and explain how	they further	the org	ganization's exemp	ot purpose	in Part	
	XIII.								
5	During the year, did the organization								
	assets to be sold to raise funds rath		ained as part of the	organizatior	n's collec	tion?	Yes	X No	
Pa	rt IV Escrow and Custodial A Complete if the organiza 990, Part X, line 21.	•	es" on Form 990,	Part IV, line	9, or re	eported an amou	int on For	m	
1a	Is the organization an agent, trus	tee, custodian or o	ther intermediary f	or contribut	ions or	other assets not			
	included on Form 990, Part X?					[Yes	No	
b	If "Yes," explain the arrangement i	n Part XIII and comp	olete the following ta	ble.					
						Amoun	t		
С	Beginning balance			1c					
d	Additions during the year			1d					
е	Distributions during the year			1e					
f	Ending balance								
	Did the organization include an am	•				, ,	Yes	No	
b	If "Yes," explain the arrangement i	n Part XIII. Check h	ere if the explanation	n has been p	rovided i	n Part XIII			
Pa	rt V Endowment Funds								
	Complete if the organiza		es" on Form 990,						
		(a) Current year	(b) Prior year	(c) Two yea		(d) Three years back	(e) Four y	ears back	
1 a	Beginning of year balance	1,518,793,999.	1,432,678,577.	1,616,411,	173.	1,313,339,317.	1,315,2	74,700.	
b	Contributions	8,424,555.	18,254,460.	23,826,	079.	34,203,091.	16,6	90,851.	
С	Net investment earnings, gains,								
	and losses	128,721,364.	138,381,111.	-141,813,		337,216,640.		79,080.	
d	Grants or scholarships	22,904,037.	22,475,570.	21,619,	501.	22,015,150.	20,8	03,700.	
е	Other expenditures for facilities								
	and programs	50,351,410.	47,552,579.	43,715,		45,929,792.		41,397.	
f	Administrative expenses	506,760.	492,000.	410,		402,933.		50,217.	
g	End of year balance	1,582,177,711.	1,518,793,999.	1,432,678,		1,616,411,173.	1,313,3	39,317.	
2 a	Provide the estimated percentage Board designated or quasi-endown			, column (a))	held as:				
b	Permanent endowment26.61	00 %							
С	Term endowment56.8800_%								
	The percentages on lines 2a, 2b, a	and 2c should equal	100%.						
3a	Are there endowment funds not in	the possession of the	ne organization that	are held an	ıd admin	istered for the			
	organization by:						Υ	es No	
	(i) Unrelated organizations?						3a(i)	Х	
	(ii) Related organizations?						3a(ii)	X	
b	If "Yes" on line 3a(ii), are the relate	•	•				3b		
4	Describe in Part XIII the intended u		tion's endowment fu	ınds.					
Pa	rt VI Land, Buildings, and Equ Complete if the organize	uipment ation answered "Y	es" on Form 990	Part IV line	e 11a S	See Form 990 P	art X line	10	
	Description of property	(a) Cost or		or other basis			d) Book valu		
		(inves	,	other)	depre	eciation			
_	Land			152,977.	004 55	11 025		977.	
b	Buildings		541,	337,160.	224,3]	L1,835.	317,025	,325.	
C	Leasehold improvements			705 551	10.0	12.600	10 505	0.50	
d	Equipment			725,571.	T8,04	13,609.	10,681		
e Take	Other	(d) much = ==== 1		217,893.	D//		43,217		
ı ota	II. Add lines 1a through 1e. <i>(Column</i>	ı (a) must equal ⊢ori	ıı 990, Part X, Ime 1	uc, coiumn (i	D))		375,078	<u>,157.</u>	

Schedule D (Form 990) 2023

02-0222174

Part VII	Investments - Other Securitie	, c
ган, уп	IIIVESIIIIEIIIS - OIIIEI SECUITIIE	;3

Complete if the organization answered	l "Yes" on Form 990	, Part IV, line 11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) GLOBAL EQUITIES	614,941,533.	FMV
(B) ABSOLUTE RETURN & LONG /SHORT	395,989,627.	FMV
(C) PRIVATE EQUITY & REAL ESTATE	386,257,033.	FMV
(D) OTHER	1,543,871.	FMV
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B))	1,398,732,064.	
Part VIII Investments - Program Related		
Complete if the organization answered	l "Yes" on Form 990	, Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description (b) Book value

(1)

(2)

(3)

(4)

(5)

(6)

(7)

Total. (Column (b) must equal Form 990, Part X, line 15, col. (B)).

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)ANNUITIES & DEFERRED GIVING AR	31,991,333.
(3)ASSET RETIREMENT OBLIGATION	3,890,727.
(4)BOND INTEREST RATE SWAP	4,326,699.
(5)STUDENT ORGANIZATION FUNDS	200,443.
(6)PENSION & OTHR EMPLYMNT RLTD	9,471,044.
(7)STUDENT INSURANCE PAYABLE	84,246.
(8)BONDS PAYABLE	30,000,000.
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)).	79,964,492.

^{2.} 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.

(8) (9)

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n	
1	Total revenue, gains, and other support per audited financial statements	1	249,830,068.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	65,264,661.
3	Subtract line 2e from line 1	3	184,565,407.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	2,713,741.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	187,279,148.
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ırn	
1	Total expenses and losses per audited financial statements	1	175,548,482.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)	_	
е	Add lines 2a through 2d	2e	19,394,495.
3	Subtract line 2e from line 1	3	156,153,987.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b		4c	2 024 221
С 5	Add lines 4a and 4b	5	2,034,231. 158,188,218.
	XIII Supplemental Information		150,100,210.
2; Part	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; F XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	Part V, nation	line 4; Part X, line
SEE	SUPPLEMENTAL PAGE		

FORM 990, SCHEDULE D, PART III, LINE 1A

THE ACADEMY'S COLLECTIONS INCLUDE WORKS OF ART, LITERARY WORKS,
HISTORICAL TREASURES, AND ARTIFACTS. THESE COLLECTIONS ARE PROTECTED AND
PRESERVED FOR PUBLIC EXHIBITION, EDUCATION, RESEARCH, AND FURTHERANCE OF
PUBLIC SERVICE. THE COLLECTIONS, WHICH WERE ACQUIRED THROUGH PURCHASES
AND CONTRIBUTIONS SINCE THE ACADEMY'S INCEPTION, ARE NOT RECOGNIZED AS
ASSETS IN THE STATEMENT OF FINANCIAL POSITION OR CONTRIBUTIONS IN THE
STATEMENT OF ACTIVITIES. PROCEEDS FROM DEACCESSIONS OR INSURANCE
RECOVERIES ARE REFLECTED AS INCREASES IN THE APPROPRIATE NET ASSET
CLASSES. THE COLLECTIONS ARE SUBJECT TO A POLICY THAT REQUIRES PROCEEDS
FROM THEIR DEACCESSIONS OR INSURANCE RECOVERIES TO BE USED TO ACQUIRE
OTHER ITEMS FOR COLLECTIONS.

FORM 990, SCHEDULE D, PART III, LINE 4

THE ACADEMY HAS BOOKS, PAINTINGS AND OTHER ITEMS WITH HISTORICAL

SIGNIFICANCE THAT ARE HELD FOR STUDY AND OBSERVATION BY OUR STUDENTS AND

FACULTY. THESE OBJECTS ARE PRESERVED SO THAT THEY MAY PROVIDE EDUCATIONAL

EXPERIENCE TO FUTURE GENERATIONS OF STUDENTS AND ADULTS IN THE CAMPUS

COMMUNITY.

Schedule D (Form 990) 2023

FORM 990, SCHEDULE D, PART V, LINE 4

PHILLIPS EXETER ACADEMY'S ENDOWED FUNDS ARE INVESTED INTO PERPETUITY AND THE INCOME IS USED TO FUND ACADEMY PROGRAMS. THE FUNDS ARE INVESTED FOR LONG TERM GROWTH SO THAT CURRENT AND FUTURE GENERATIONS OF STUDENTS WILL RECEIVE BENEFIT FROM THE FUNDS.

FORM 990, SCHEDULE D, PART X - FIN 48

THE ACADEMY IS A TAX-EXEMPT ORGANIZATION ACCORDING TO SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC); HOWEVER, THE ACADEMY IS SUBJECT TO FEDERAL INCOME TAXES ON UNRELATED BUSINESS INCOME RELATED TO CERTAIN INVESTMENTS. DURING THE YEARS ENDED JUNE 30, 2024 AND 2023, THE ACADEMY EVALUATED ITS TAX POSITIONS AND CONCLUDED IT DID NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS.

FORM 990, SCHEDULE D, PART XI, LINE 2D

AMOUNTS INCLUDED ON LINE 1, BUT NOT FORM 990, PART VIII, LINE 12:

COS NETTED AGAINST GROSS REVENUE	679,510
ASSET RETIREMENT OBLIGATION ADJUSTMENT	-67,053
CHANGE IN VALUE OF FUNDS FOR DEFERRED GIVING	2,252,609
PV ADJUSTMENTS FOR PHASED RETIREMENT PLAN	435,000
OTHER PLANT RELATED CHANGES	-185,126
TRANSFERS FROM ENDOWMENT TO PLANT	21,366,504

Part XIII Supplemental Information (continued)

TOTAL 24,481,444

FORM 990, SCHEDULE D, PART XI, LINE 4B

AMOUNTS INCLUDED ON FORM 990, PART VIII, LINE 12, BUT NOT ON LINE 1:

SUMMER FINANCIAL AID NETTED AGAINST TUITION 711,637

TOTAL 711,637

FORM 990, SCHEDULE D, PART XII, LINE 2D

AMOUNTS INCLUDED ON LINE 1, BUT NOT ON FORM 990, PART IX, LINE 25

OTHER COMPONENTS OF NET PERIODIC PENSION COST 367,000

INTEREST RATE SWAP ADJUSTMENT (2,698,373)

PENSION RELATED CHANGES OTHER THAN

NET PERIODIC PENSION COSTS 1,509,261

OTHER PLANT RELATED (185,127)

TRANSFERS TO/FROM ENDOWMENT 20,401,732

TOTAL 19,394,493

Schedule D (Form 990) 2023 PHILLIPS EXETER ACADEMY 02-0222174 Page 5

Part XIII Supplemental Information (continued)

FORM 990, SCHEDULE D, PART XII, LINE 4B

AMOUNTS INCLUDED ON PART IX, LINE 25, BUT NOT ON LINE 1:

SUMMER FINANCIAL AID NETTED AGAINST TUITION 711,637

COS NETTED AGAINST GROSS REVENUE (679,510)

TOTAL 32,127

SCHEDULE E (Form 990)

Schools

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Inspection

PHILLIPS EXETER ACADEMY

Employer identification number 02-0222174

Pa	rt I			
_			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	1	Х	
2	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	
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet			
	homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the			
	homepage, or 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
	SEE SUPPLEMENTAL PAGE			
ļ	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	x	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory			
	basis?	4b	x	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
•	with student admissions, programs, and scholarships?	4c	X	
Ы	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
_	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
	if you answered two to any of the above, please explain. If you need more space, use I are it.			
5	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	5a		Х
b	Admissions policies?	5b		Х
С	Employment of faculty or administrative staff?	5с		X
d	Scholarships or other financial assistance?	5d		Х
е	Educational policies?	5e		Х
f	Use of facilities?	5f		Х
a	Athletic programs?	5g		Х
h	Other extracurricular activities?	5h		Х
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
	you allowed to diff of the above, please explain if you need more epace, and i all in			
a	Does the organization receive any financial aid or assistance from a governmental agency?	6a		Х
a b	Has the organization's right to such aid ever been revoked or suspended?	6b		X
.,	If you answered "Yes" on either line 6a or line 6b, explain on Part II.	35		Λ
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering			
	4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering racial nondiscrimination? If "No," explain on Part II	7	77	
	racial nonciscinnination: it inc, explain on Pattil	7	X	

02-0222174 Schedule E (Form 990 or 990-EZ) (2023)

Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information (see instructions).

RACIALLY NONDISCRIMINATORY POLICY

SCHEDULE E, PART I, LINE 3

THE POLICY IS EXPLAINED TO ALL CANDIDATES UPON APPLYING TO THE ACADEMY

AND TO GUIDANCE COUNSELORS OF SCHOOLS THROUGHOUT THE COUNTRY AND FOREIGN

COUNTRIES BY MEANS OF THE ACADEMY APPLICATION FORM AND WEBSITE.

THE ACADEMY MEETS THE REQUIREMENTS OF SECTIONS 4.01 THROUGH 4.05 OF REV.

PROC 75-50, COVERING RACIAL NONDISCRIMINATION, BECAUSE IT DRAWS A

SUBSTANTIAL PERCENTAGE OF ITS STUDENTS FROM AROUND THE U.S. AND WORLD,

ENROLLS STUDENTS FROM WIDE RANGING BACKGROUNDS, AND FOLLOWS A RACIALLY

NONDISCRIMINATORY POLICY AS TO STUDENTS.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

20**23**Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990.

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

Inspection
Employer identification number

PART I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1	For grantmakers. Does the orgother assistance, the grantees' award the grants or assistance?	eligibility for t			•	Yes No
2	For grantmakers. Describe in Foutside the United States.	Part V the org	anization's pro	ocedures for monitoring t	he use of its grants and	dother assistance
3	Activities per Region. (The follow	ving Part I, line	3 table can be	e duplicated if additional sp	ace is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)	EAST ASIA AND THE PACIFIC	NONE	NONE	PROGRAM SERVICES	FACULTY DEVELOPMENT	6,447.
(2)	CENTRAL AMERICA/CARIBBEAN	NONE	NONE	PROGRAM SERVICES	ADMISSIONS RECRUITMENT	9,691.
(3)	EAST ASIA AND THE PACIFIC	NONE	NONE	PROGRAM SERVICES	ADMISSIONS RECRUITMENT	34,526.
(4)	MIDDLE EAST AND NORTH AFRICA	NONE	NONE	PROGRAM SERVICES	STUDY PROGRAMS	38,667.
(5)	CENTRAL AMERICA/CARIBBEAN	NONE	NONE	INVESTMENTS		499,782,548.
(6)	EUROPE	NONE	NONE	INVESTMENTS		42,136,707.
	NORTH AMERICA	NONE	NONE	INVESTMENTS		7,647,984.
(8)	EAST ASIA AND THE PACIFIC	NONE	NONE	FUNDRAISING		26,213.
(9)	EUROPE	NONE	NONE	FUNDRAISING		21,793.
(10)	NORTH AMERICA	NONE	NONE	FUNDRAISING		347.
(11)	EAST ASIA AND THE PACIFIC	NONE	NONE	PROGRAM SERVICES	STUDY PROGRAMS	162,415.
(12)	EUROPE	NONE	NONE	PROGRAM SERVICES	STUDY PROGRAMS	312,403.
(13)	EUROPE	NONE	NONE	PROGRAM SERVICES	FACULTY DEVELOPMENT	7,286.
(14)	NORTH AMERICA	NONE	NONE	PROGRAM SERVICES	FACULTY DEVELOPMENT	1,756.
(15)	SOUTH AMERICA	NONE	NONE	PROGRAM SERVICES	FACULTY DEVELOPMENT	6,809.
(16)	SOUTH ASIA	NONE	NONE	PROGRAM SERVICES	STUDY PROGRAMS	46,077.
(17)						
3a	Subtotal	NONE	NONE			550,241,669.
b		1.01.2	110112			,,,,
С		NONE	NONE			550,241,669.

Schedule F (Form 990) 2023 PHILLIPS EXETER ACADEMY 02-0222174 Page **2**

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
2 Ente	mpt 501(c)(3) organization	nt organizations listed aboven by the IRS, or for which the ganizations or entities	grantee or counsel h	nas provided a sect	ion 501(c)(3) equi	valency letter			

Schedule F (Form 990) 2023 PHILLIPS EXETER ACADEMY 02-0222174 Page **3**

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
_(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

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

Schedule F (Form 990) 2023

Part V Supple

Supplemental Information

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

SCHEDULE F, PART I, LINE 3

THE ACADEMY USES THE ACCRUAL METHOD OF ACCOUNTING AND REPORTS THE TOTAL BOOK VALUE OF INVESTMENTS IN THE AGGREGATE BY REGION ON THE 990. FOREIGN TRAVEL EXPENSES ARE REPORTED ON THE 990 BASED ON THE ACCRUAL METHOD USED TO ACCOUNT FOR THEM IN THE FINANCIAL STATEMENTS. AT YEAR END THE EXPENSES ARE MANUALLY AGGREGATED BY REGION, ACTIVITY AND TYPE OF SERVICE.

SCHEDULE I (Form 990)

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

2023

OMB No. 1545-0047

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

					02-0222174	
nd Assistanc	е					
nts or assistand	e?					X Yes No
Domestic Or	ganizations ar	nd Domestic Gov	vernments. Com	plete if the organiz	ation answered "Y	es" on Form 990,
that received	more than \$5	,000. Part II can b	oe duplicated if a	additional space is n	eeded.	
(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
	substantiate the or assistance dures for moreonestic Organization of the control	substantiate the amount of the nts or assistance? edures for monitoring the use Domestic Organizations at that received more than \$5 (b) EIN (c) IRC section	substantiate the amount of the grants or assistants or assistance?	substantiate the amount of the grants or assistance, the grantees of assistance? dures for monitoring the use of grant funds in the United States. Domestic Organizations and Domestic Governments. Compart that received more than \$5,000. Part II can be duplicated if a beginning to the comparison of the comparison of the grants of the grantees of the grants of the	substantiate the amount of the grants or assistance, the grantees' eligibility for the grantents or assistance? edures for monitoring the use of grant funds in the United States. Domestic Organizations and Domestic Governments. Complete if the organizations that received more than \$5,000. Part II can be duplicated if additional space is not the complete in the organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of (f) Method of valuation (book, FMV, appraisal, page 1)	substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and nts or assistance?

Schedule I (Form 990) (2023) PHILLIPS EXETER ACADEMY 02-0222174 Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(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 non-cash assistance
1 regular session scholarship	491		24,218,340.	FMV	TUITION FEES/ASSISTA
1 REGULAR DESIGN SCHOLARSHIP	471		24,210,340.	PPIV	TOTITON PEED/ADDIDIA
2 REGULAR SESSION OTHER AID	491	160,713.	1,520,347.	FMV	OTHER FIN. ASSIST.
3 SUMMER PROGRAM SCHOLARSHIPS	116		711,637.	FMV	TUITION FEES/ASSISTA
4 AUXILIARY AID	NONE		172,777.	FMV	OTHER FIN. ASSIST.
5					
•					
6					
7					

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

MONITORING GRANT FUNDS

SCHEDULE I, PART I, LINE 2

SCHOLARSHIPS AND MOST FINANCIAL ASSISTANCE CREDITS ARE NON CASH AND ARE

APPLIED DIRECTLY TO STUDENT ACCOUNTS AT THE ACADEMY. ON OCCASION

FINANCIAL AID STUDENTS ARE REIMBURSED FOR NECESSARY EXPENSES SUCH AS

TRANSPORTATION OR THE COST OF COMPUTER EQUIPMENT. DOCUMENTATION

EVIDENCING PAYMENT BY THE STUDENT IS REQUIRED BEFORE DISBURSEMENT OF CASH

AID IS MADE. PHILLIPS EXETER ACADEMY MAINTAINS EXTENSIVE RECORDS TO

JUSTIFY BOTH AWARDS AND THE FINANCIAL NEED ELIGIBILITY OF THE RECIPIENTS.

SCHEDULE J (Form 990)

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.

Inspection

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

PHILLIPS EXETER ACADEMY 02-0222174 **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. X Housing allowance or residence for personal use			
	Travel for companions Tax indemnification and gross-up payments Discretionary spending account Payments for business use of personal residence Health or social club dues or initiation fees 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	46	37	
2	explain	1b	X	
	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 Written employment contract X 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 organization or a related organization:			
a h	Receive a severance payment or change-of-control payment?	4a 4b	X	X
C	Participate in or receive payment from an equity-based compensation arrangement?	4c	21	X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 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
b	Any related organization?	5b		X
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
b	Any related organization?	6b		X
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		Х
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			
9	in Part III	8		X
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2023

Schedule J (Form 990) 2023 PHILLIPS EXETER ACADEMY 02-0222174 Page **2**

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.

			nd/or 1099-MISC and/or		(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
JUSTIN MERRILL	(i)	383,772.	NONE	90.	37,180.	43,479.	464,521.	NONE
1 DIRECTOR OF INVESTMENTS	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
MORGAN DUDLEY	(i)	329,433.	NONE	396.	39,600.	35,747.	405,176.	NONE
2 DIRECTOR INSTITUTIONAL ADV.	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
HOLLY BARCROFT	(i)	316,925.	NONE	60.	37,180.	49,590.	403,755.	NONE
3 GENERAL COUNSEL	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
WILLIAM LEAHY	(i)	209,791.	NONE	258.	25,933.	76,848.	312,830.	NONE
4 DEAN OF ENROLLMENT	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
WILLIAM RAWSON	(i)	550,489.	NONE	106,262.	96,030.	39,936.	792,717.	NONE
5 PRINCIPAL	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
MARIJKA BEAUCHESNE	(i)	364,997.	NONE	60.	37,180.	18,235.	420,472.	NONE
6 CFO	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
KATHARINA LILLY	(i)	270,028.	NONE	24,794.	34,627.	97,061.	426,510.	NONE
7 MEDICAL DIRECTOR	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
_16	(ii)							

Schedule J (Form 990) 2023 PHILLIPS EXETER ACADEMY 02-0222174 Page 3

Part | 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.

SCHEDULE J, PART I, LINE 1

THE PRINCIPAL AND DEAN OF ENROLLMENT LIVE ON CAMPUS AS A CONDITION OF EMPLOYMENT AND FOR THE CONVENIENCE OF THE EMPLOYER, TO PARTICIPATE IN ACTIVITIES WITH THE STUDENTS AND TO CONDUCT BUSINESS OUTSIDE NORMAL BUSINESS HOURS. THE VALUE OF ON-CAMPUS HOUSING IS A NONTAXABLE BENEFIT REPORTED ON SCHEDULE J, PART II, COLUMN D.

THE RESIDENCE OF THE PRINCIPAL IS USED THROUGHOUT THE YEAR FOR ACADEMY RELATED EVENTS. A HOUSEKEEPING SERVICE CLEANS THE RESIDENCE. THE SERVICE IS ALLOCATED BETWEEN THE PUBLIC AND PRIVATE SPACES. CLEANING OF THE PRIVATE RESIDENCE IS INCLUDED IN PRINCIPAL RAWSON'S TAXABLE COMPENSATION.

FOR CALENDAR YEAR 2023, MORGAN DUDLEY AND WILLIAM RAWSON HAD SOCIAL CLUB MEMBERSHIPS IN CONNECTION WITH THE ORGANIZATION'S BUSINESS PURPOSES AND INSTITUTIONAL ADVANCEMENT.

Schedule J (Form 990) 2023 PHILLIPS EXETER ACADEMY 02-0222174 Page **3**

Part | 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.

SCHEDULE J, PART I, LINE 4B

THE PRINCIPAL PARTICIPATES IN A DEFERRED COMPENSATION PROGRAM. VESTING IN THIS PROGRAM IS CALCULATED AT A RATE OF 20% PER YEAR FOR EACH FULL YEAR OF SERVICE BEGINNING JULY 1, 2023, AND ENDING JUNE 30, 2028 AND WILL BE PAID OUT IN THE YEAR FOLLOWING RETIREMENT, REFERRED TO AS THE POST PRINCIPAL PERIOD. AN ACCRUAL OF \$56,430 HAS BEEN INCLUDED IN SCHEDULE J, PART II, COLUMN C.

SCHEDULE K (Form 990)

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.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization Employer identification number PHILLIPS EXETER ACADEMY 02-0222174 Part I **Bond Issues** (i) Pooled (h) On (g) Defeased (b) Issuer EIN (c) CUSIP # (d) Date issued (f) Description of purpose (a) Issuer name (e) Issue price behalf of financing issuer Yes Yes Nο Yes No Nο 644614SZ3 04/01/2016 A NH HEALTH & EDUCATION FACILITIES AUTHORITY 02-0279866 80,000,000. SEE PART VI x В С D Part II **Proceeds** R C D 80,130,819. 5 6 7 490,448. 8 9 10 29,640,371. 11 Other spent proceeds....... 50,000,000. 13 2018 Yes Yes Yes No 14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, Χ Were the bonds issued as part of a refunding issue of taxable bonds (or, if 15 issued prior to 2018, an advance refunding issue)?........... Χ Does the organization maintain adequate books and records to support the

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

Schedule K (Form 990) 2023

Schedule K (Form 990) 2023

Pa	rt III Private Business Use	H HEALTI	H & EDUCA	ATION FA	CILITIES	AUTHOR	ITY		
			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?	i	X						
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?		X						
3a	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		%	6	%		%		%
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		0.3049 %		%		%		%
6	Total of lines 4 and 5		0.3049 %	5	%		%		%
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								
	nongovernmental 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		%	b	%		%		%
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 Regulations sections 1.141-12 and 1.145-2?	X							
Pa	rt IV Arbitrage								
			A		В	(С)
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and		No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		X						
	If "No" to line 1, did the following apply?								
a	Rebate not due yet?	X							
	Exception to rebate?								
C	No rebate due?								
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
	performed	_							
3	Is the bond issue a variable rate issue?	X							

Schedule K (Form 990) 2023

Part IV Arbitrage (continued)		I & EDUCA	UCATION FACILITIES AUTHORITY							
		Α	E	3		С	ı)		
4a Has the organization or the governmental issuer entered into a qualified	d Yes	No	Yes	No	Yes	No	Yes	No		
hedge with respect to the bond issue?	. X									
b Name of provider	BNY MELLO	ON								
c Term of hedge		34.250								
d Was the hedge superintegrated?		X								
e Was the hedge terminated?		Х								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х								
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?		Х								
7 Has the organization established written procedures to monitor the										
requirements of section 148?	. X									
Part V Procedures To Undertake Corrective Action	<u> </u>				1		<u>'</u>			
		Α	E	3		С)		
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No		
of federal tax requirements are timely identified and corrected through the										
voluntary closing agreement program if self-remediation isn't available unde										
applicable regulations?										
Part VI Supplemental Information. Provide additional information for responses	to question	ns on Sched	dule K. Se	e instructi	ions.	1				
Supplemental information: I Tovide additional information for responses	to question	is on some	Jule IX. OC	e iristi ucti	0113.					

Schedule K (Form 990) 2023 Page 4

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

SCHEDULE K, PART I, LINE A, COLUMN F

BOND PURPOSE : CAPITAL CONSTRUCTION AND REFUNDING OF 2007 BOND

SCHEDULE K, PART II, LINE 3

INCLUDES INTEREST EARNED OF \$130,819

SCHEDULE M (Form 990)

Noncash Contributions

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

Attach to Form 990.

2023

Open to Public

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

02-0222174

PHILLIPS EXETER ACADEMY

Par	Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash cont			
1	Art - Works of art			3				
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							
9	Securities - Publicly traded		104	761,730.	FMV			
10	Securities - Closely held stock		-	, , , , , , , , , , , , , , , , , , , ,	-			
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
	contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (<u>SEE SUPP PAGE</u>)		1.	NONE				
26	Other ()							
27	Other ()							
28	Other (
29	Number of Forms 8283 received							
	which the organization completed F	Form 8283,	Part V, Donee Acknowledge	ement	29			
							Yes	No
30a	During the year, did the organizat				- 1			
	28, that it must hold for at least 3	-						
	used for exempt purposes for the e		period?			30a		X
	If "Yes," describe the arrangement i							
31	Does the organization have a			-				
	contributions?					31	Х	
32a	Does the organization hire or use	-	-	•				
_	contributions?					32a		X
	If "Yes," describe in Part II.							
33	If the organization didn't report an	amount in c	column (c) for a type of pro	perty for which column (a)	is checked,			

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

Schedule M (Form 990) 2023

Part II

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

SCHEDULE M, PART I, COLUMN (B)

THE NUMBER OF CONTRIBUTIONS ARE USED FOR REPORTING THE LIST OF NONCASH CONTRIBUTIONS.

	the organizati	ion is reporting ir	rovide the information of Part I, column (b), the complete this part for	number o	f contributions,	the nur			
SCHEDULE	M, PART I	- OTHER NONC	CASH CONTRIBUTIONS						
DESCRIPT	CION	(A) CHECK	(B) NUMBER OF CONTRIBUTIONS	(C)	REVENUES REPORTED	(D)	METHOD	OF	DETERMINING
MUSICAL	INSTRUM	X	1		NONE				
TOT	TALS	===	1.	=====:	NONE				

Schedule M (Form 990) (2023)

JSA

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.

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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Employer identification number PHILLIPS EXETER ACADEMY 02-0222174

MISSION STATEMENT AND VALUES

FORM 990, PART I, LINE 1 AND PART III, LINE 1 UNITE GOODNESS AND KNOWLEDGE AND INSPIRE YOUTH FROM EVERY QUARTER TO LEAD PURPOSEFUL LIVES.

[TEXT IN QUOTATIONS IS TAKEN FROM THE ACADEMY'S DEED OF GIFT, DRAFTED IN 17811

KNOWLEDGE AND GOODNESS

"ABOVE ALL, IT IS EXPECTED THAT THE ATTENTION OF INSTRUCTORS TO THE DISPOSITION OF THE MINDS AND MORALS OF THE YOUTH UNDER THEIR CHARGE WILL EXCEED EVERY OTHER CARE; WELL CONSIDERING THAT THOUGH GOODNESS WITHOUT KNOWLEDGE IS WEAK AND FEEBLE, YET KNOWLEDGE WITHOUT GOODNESS IS DANGEROUS, AND THAT BOTH UNITED FORM THE NOBLEST CHARACTER, AND LAY THE SUREST FOUNDATION OF USEFULNESS TO [HU]MANKIND." EXETER TODAY CONTINUES THE COMMITMENT TO UNITE KNOWLEDGE AND GOODNESS. THE CHALLENGES THAT STUDENTS MEET AT EXETER AND THE SUPPORT THEY RECEIVE HAVE A COMMON OBJECTIVE: TO STIMULATE THEIR DEVELOPMENT AS INDIVIDUALS AND PREPARE THEM TO LEAD PURPOSEFUL LIVES.

ACADEMIC EXCELLENCE

ACADEMIC EXCELLENCE IS A SIGNATURE STRENGTH OF PHILLIPS EXETER ACADEMY. IN EVERY DISCIPLINE AND AT EVERY LEVEL WITHIN OUR CURRICULUM WE INSPIRE STUDENTS TO DEVELOP CRITICAL THINKING SKILLS AND SEEK COMPLEX TRUTHS.

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.

OMB No. 1545-0047

2023

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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PHILLIPS EXETER ACADEMY

02-0222174

INTELLECTUAL EXPLORATION THROUGH RIGOROUS INQUIRY AND THOUGHTFUL DISCOURSE AT THE HARKNESS TABLE NURTURES INQUISITIVENESS, CREATIVITY, INSIGHT, EMPATHY, INDEPENDENT THOUGHT AND MASTERY IN OUR STUDENTS.

YOUTH FROM EVERY QUARTER

"THE ACADEMY SHALL EVER BE EQUALLY OPEN TO YOUTH OF REQUISITE

QUALIFICATION FROM EVERY QUARTER." WE SEEK TO BUILD AN INTENTIONALLY

DIVERSE COMMUNITY OF STUDENTS AND ADULTS. WE ARE COMMITTED TO TEACHING

THE SKILLS, MODELING THE BEHAVIORS, PROVIDING THE RESOURCES AND

CULTIVATING THE INCLUSION AND EQUITY THAT ARE REQUIRED TO UNLOCK THE

RICHNESS OF THAT DIVERSITY. OUR HARKNESS PEDAGOGY IS GROUNDED IN THE

BELIEF THAT WE ARE ALL BETTER EQUIPPED TO LEARN AND TO LEAD WHEN OUR

THOUGHTS ARE TESTED BY OTHERS, PARTICULARLY BY THOSE WHOSE IDEAS,

PERSPECTIVES, EXPERIENCES OR IDENTITIES DIFFER FROM OUR OWN.

YOUTH IS THE IMPORTANT PERIOD

THE "TIME OF YOUTH IS THE IMPORTANT PERIOD" TO INSTILL A LASTING CAPACITY

TO NURTURE ONE'S SELF, DEVELOP A SENSE OF ONE'S OWN POTENTIAL AND

CONSIDER ONE'S PLACE IN THE LARGER WHOLE. OUR RESIDENTIAL COMMUNITY

ENCOURAGES STUDENTS TO EXPLORE EMERGING INTERESTS - ACADEMIC, ARTISTIC,

ATHLETIC AND EXTRACURRICULAR - WITH SIMILARLY MOTIVATED PEERS AND IN THE

PROCESS DEVELOP THEIR VALUES AND PASSIONS AND THE AGENCY NEEDED TO CARRY

THESE FORWARD.

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.

on 2023
Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service

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PHILLIPS EXETER ACADEMY 02-0222174

NON SIBI

NON SIBI, OR NOT FOR ONESELF, INSCRIBED ON EXETER'S SEAL, ATTESTS TO THE PHILOSOPHY THAT WISDOM GAINED HERE SHOULD BE USED FOR OTHERS AS WELL AS FOR ONESELF. EXONIANS ARE MOTIVATED BY THIS PHILOSOPHY TO FACE THE CHALLENGES OF THEIR DAY. TEACHING AND LIVING THE PRINCIPLES OF A JUST AND SUSTAINABLE SOCIETY - ENVIRONMENTALLY, ECONOMICALLY AND SOCIALLY - ARE FUNDAMENTAL TO THIS PHILOSOPHY TODAY. EXETER SEEKS TO GRADUATE YOUNG PEOPLE WHOSE AMBITIONS AND ACTIONS ARE INSPIRED BY THEIR INTEREST IN OTHERS AND THE WORLD AROUND THEM.

PROGRAM SERVICE ACCOMPLISHMENTS

FORM 990, PART III, LINE 4A

PHILLIP EXETER ACADEMY'S PRIMARY PROGRAM SERVICE IS THE EDUCATION OF STUDENTS IN GRADES 9 THROUGH 12 IN A RESIDENTIAL BOARDING SCHOOL ENVIRONMENT. APPROXIMATELY 20% OF STUDENTS ARE DAY STUDENTS AND DO NOT RESIDE ON CAMPUS. ENROLLMENT FOR 2023-2024 WAS 1,078. THE FOUNDATION OF EXETER'S REGULAR SESSION CURRICULUM CONTINUES TO BE THE TEACHING METHOD MADE POSSIBLE IN 1931 BY THE GENEROSITY OF EDWARD HARKNESS: DISCUSSION IN SMALL CLASSES MEETING AROUND SEMINAR TABLES WHERE MAXIMUM STUDENT INVOLVEMENT AND INTERCHANGE ARE BOTH ENCOURAGED AND REQUIRED. SINCE 1931, THIS PROCESS HAS CONTINUED WHILE THE CONTENT OF THE CURRICULUM HAS UNDERGONE SEVERAL REVISIONS AS EXETER HAS SOUGHT TO BLEND ITS RESPECT FOR TRADITION WITH ITS COMMITMENT TO EDUCATE YOUNG PEOPLE FOR A RAPIDLY CHANGING WORLD.

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.

OMB No. 1545-0047

2023

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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02-0222174

PHILLIPS EXETER ACADEMY

THE CURRENT CURRICULUM IS BASED ON TWO FUNDAMENTAL ASSUMPTIONS ABOUT AN EXETER EDUCATION. FIRST, EXETER VIEWS ITS CHARGE AS PROVIDING STUDENTS WITH A BROAD, LIBERAL ARTS PROGRAM THAT CREATES A STRONG FOUNDATION FOR CONTINUING STUDY AT THE COLLEGE AND UNIVERSITY LEVEL. SECOND, THE ACADEMY BELIEVES THE PROCESS OF EDUCATION IS AS IMPORTANT AS ITS CONTENT. FACULTY EMPHASIZE NOT MERELY WHAT THEY WANT STUDENTS TO KNOW, BUT ALSO WHAT SORTS OF INDIVIDUALS THEY WANT THEM TO BECOME: YOUNG PEOPLE WHOSE PASSION FOR LEARNING EXCEEDS WHAT THEY ALREADY KNOW AND WHOSE INTEREST IN OTHERS AND IN THE WORLD SURPASSES THEIR SELF-CONCERN. EXETER'S SCHOOL YEAR CONSISTS OF THREE TERMS, WHICH ALLOWS EXPANDED ELECTIVE CHOICES ACROSS A RANGE OF DISCIPLINES TO BE COMBINED WITH A FOCUS ON DEPTH OF STUDY IN ADVANCED COURSES IN EACH DEPARTMENT. STUDENTS NORMALLY ENROLL IN FIVE COURSES AND PARTICIPATE IN A SPORT EACH TERM.

EVERY YEAR, STUDENTS COME TO US FROM AROUND THE WORLD AND ARE ADMITTED WITHOUT REGARD TO THE FAMILY'S ABILITY TO PAY. THE ACADEMY IS COMMITTED TO MEETING THE FULL DEMONSTRATED FINANCIAL NEED OF EACH ADMITTED STUDENT AND APPROXIMATELY HALF OF ALL ADMITTED STUDENTS RECEIVE FINANCIAL AID.

FORM 990, PART III, LINE 4B

PHILLIPS EXETER ACADEMY'S SUMMER SCHOOL: TYPICALLY, EVERY SUMMER PHILLIPS

EXETER ACADEMY'S EXETER SUMMER PROGRAM, WHICH HAS BEEN IN OPERATION SINCE

1919, WELCOMES STUDENTS TO CAMPUS FOR FIVE WEEKS OF ACADEMIC STUDY,

ATHLETICS, AND EXPLORATION THAT CARRY PARTICIPANTS FAR BEYOND THE

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.

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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Employer identification number 02-0222174

PHILLIPS EXETER ACADEMY

CLASSROOMS AND THE PLAYING FIELDS.

FORM 990, PART VI, SECTION A, LINE 1A

GOVERNING BODY AND MANAGEMENT

THE EXECUTIVE COMMITTEE WHICH CONSISTS OF THE PRESIDENT, THE VICE

PRESIDENT, THE PRINCIPAL AND NOT FEWER THAN TWO OTHER TRUSTEES SHALL HAVE

THE POWERS OF THE TRUSTEES IN THE INTERVALS BETWEEN TRUSTEES' MEETINGS.

THEY MAY ACT, ON BEHALF OF THE TRUSTEES, UPON ALL MATTERS EXCEPT THOSE

WHICH, IN THE OPINION OF THE COMMITTEE SHOULD AWAIT THE NEXT MEETING OF

THE TRUSTEES. ALL ACTION SO TAKEN SHALL BE DEEMED THE ACTION OF THE

GOVERNING BODY AND MANAGEMENT

TRUSTEES.

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

THE GENERAL ALUMNI ASSOCIATION (GAA) BOARD OF DIRECTORS CONSISTS OF 20 REGULAR MEMBERS. THEY ELECT FOUR OFFICERS: PRESIDENT, TWO VICE-PRESIDENTS AND A SECRETARY. THE PRESIDENT AND TWO VICE-PRESIDENTS SERVE WITH THE ACADEMY'S BOARD OF TRUSTEES FOR THEIR TERMS AS GAA OFFICERS WHICH CAN BE A PERIOD FROM 2-6 YEARS.

FORM 990 REVIEW PROCESS

FORM 990, PART VI, SECTION B, LINE 11

PHILLIPS EXETER ACADEMY'S FORM 990 IS PREPARED BY THE FINANCE DEPARTMENT IN COLLABORATION WITH OUTSIDE TAX CONSULTANTS. THE REVIEW PROCESS STARTS WITH THE DIRECTOR OF FINANCE, CFO, AND GENERAL COUNSEL, FOLLOWED BY THE CHAIR OF THE AUDIT AND RISK COMMITTEE. THE COMPLETED FORM, WITH THE EXCEPTION OF ONE LINE ON SCHEDULE B, WHICH REDACTS THE IDENTITY OF A DONOR, IS THEN PROVIDED TO ALL TRUSTEES FOR REVIEW PRIOR TO FILING WITH

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.

OMB No. 1545-0047

2023

Open to Public Inspection

02-0222174

Department of the Treasury Internal Revenue Service

Name of the organization

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Employer identification number

THE IRS.

PHILLIPS EXETER ACADEMY

CONFLICT OF INTEREST POLICY

FORM 990, PART VI, SECTION B, LINE 12

PHILLIPS EXETER ACADEMY MAINTAINS A WRITTEN CONFLICT OF INTEREST POLICY

REQUIRING DISCLOSURE OF RELEVANT FACTS THAT GIVE RISE TO A POTENTIAL

CONFLICT OF INTEREST. ANNUALLY, TRUSTEES, MEMBERS OF THE INVESTMENT

COMMITTEE, ADMINISTRATORS, AND STAFF WITH PURCHASING RESPONSIBILITIES ARE

REQUIRED TO ACKNOWLEDGE IN WRITING THAT THEY HAVE READ, UNDERSTAND AND

SIGN A CONFLICT OF INTEREST. ADDITIONALLY, AT THE END OF THE FISCAL YEAR

AND BEFORE THE SUBMISSION OF FORM 990, EACH TRUSTEE, OFFICER AND/OR KEY

EMPLOYEE IS PROVIDED WITH A QUESTIONNAIRE REQUIRING DISCLOSURE OF ANY

CONFLICTS OF INTEREST THAT MAY HAVE EXISTED DURING THE PRIOR FISCAL YEAR.

PROCESS FOR DETERMINING COMPENSATION

FORM 990, PART VI, SECTION B, LINE 15

PHILLIPS EXETER ACADEMY MAINTAINS AN EXECUTIVE COMPENSATION PHILOSOPHY INTENDED TO COMPLY WITH IRC 4958 INTERMEDIATE SANCTIONS THAT REQUIRES PERIODIC REVIEW OF PEER INSTITUTIONS FOR COMPENSATION COMPARISONS AMONG EXECUTIVES DEEMED "DISQUALIFIED PERSONS." THE BOARD OF TRUSTEES APPROVES THEIR SALARIES ANNUALLY AND DOCUMENTS THEIR DETERMINATIONS IN MEETING MINUTES. OTHER EXECUTIVE COMPENSATION IS BASED ON A REVIEW OF PEER SCHOOLS USING ABOPS AND OTHER SALARY SURVEY DATA AND IS APPROVED BY THE ADMINISTRATION.

DISCLOSURE

FORM 990, PART VI, SECTION C, LINE 19

PHILLIPS EXETER ACADEMY'S GOVERNING DOCUMENTS, STATEMENT OF FINANCIAL

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.

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number
PHILLIPS EXETER ACADEMY 02-0222174

POSITION, STATEMENT OF ACTIVITIES AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

RECONCILIATION OF CHANGE IN NET ASSETS

FORM 990, PART XI, OTHER CHANGES, LINE 9

PENSION RELATED CHARGES OTHER THAN NET

PERIODIC PENSION COST	(1,509,261)
CHANGE IN VALUE OF FUNDS FOR DEFERRED GIVING	2,252,609
INTEREST RATE SWAP ADJUSTMENT (EB)	2,698,373
OTHER COMPONENTS OF NP PENSION COST	(367,000)
RECLASSIFICATIONS	1,298,446
MISCELLANEOUS	34,272
TOTAL OTHER CHANGES, LINE 9	4,407,439

	<u></u>
Name of the organization	Employer identification number
PHILITPS EXETER ACADEMY	02-0222174

IAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
ROBERT A.M. STERN ARCHITECTS, LLP.		
ONE PARK AVENUE		
NEW YORK, NY 10016	CONTRACT SERVICES	1,835,086.
MARTINI NORTHERN, LLC		
PO BOX 164		
NEWFIELDS, NH 03856	CONTRACT SERVICES	7,839,586.
UKG INC.		
2250 N. COMMERCE PARKWAY		
WESTON, FL 33326	IT CONSULTING SVCS	862,270.
BEYER BLINDER BELLE ARCHITECTS & PLANNER		
120 BROADWAY 20TH FL		
NEW YORK, NY 10271	ARCHITECT CONSULTING	1,793,800.
HARVEY CONSTRUCTION CORP.		
10 HARVEY ROAD		
BEDFORD, NH 03110	CONTRACT SERVICES	10,430,551.

Name of the organization

PHILLIPS EXETER ACADEMY

Employer identification number
02-0222174

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

PUBLICLY TRADED SECURITIES 99,777,003. 113,583,622. FMV

TOTALS ------

Name of the organization		Employer identification number
PHILLIPS EXETER ACADEMY		02-0222174
FORM 990, PART X - DEFERRED REVENUE		
DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
DEFERRED REVENUE	23,857,626.	16,681,171.
TOTALS		
	23,857,626.	16,681,171.
	=========	=========

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization	Employer identification numbe
PHILLIPS EXETER ACADEMY	02-0222174

(a) Name, address, and EIN (if applicable) of disregarded enti	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
1)					
2)					
3)					
4)					
5)					
6)					

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

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5	g) 512(b)(13) rolled tity?
							Yes	No
(1) HEINZ EXETER SCHOLARSHIP	FUND 25-1482044							
PO BOX 185	PITTSBURG, PA 15201	SCHOLARSHIP	PA	501(C)(3)	PF	N/A		Х
(2) MS/SC TRUST FBO PHILLIPS	EXETER ACADEMY 57-6114852							
PO BOX 748	SULLIVANS ISLAND, SC 29482	SCHOLARSHIP	sc	501(C)(3)	12D, III-0	N/A		Х
(3) YOCUM FAMILY PERPETUAL CH	ARITABLE TRUST 23-7704439							
1100 N MARKET ST	WILMINGTON, DE 19890	SCHOLARSHIP	PA	501(C)(3)	120, III-O	N/A		X
(4) T/U/W PHILENA R. PEABODY-	LLOYD 01-34608 36-6088658							
P.O. BOX 803878	CHICAGO, IL 60680	SCHOLARSHIP	IL	501(C)(3)	120, III-O	N/A		Х
(5)								
(6)								
(7)								

Schedule R (Form 990) 2023 PHILLIPS EXETER ACADEMY 02-0222174 Page **2**

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of- year assets	Disprop	h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	(j) eral or laging tner?	(k) Percentage ownership
		oou,		,			Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
•												
(7)												

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

<i></i>				<u> </u>				
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Section 512(b)(13) controlled entity?
(1) POOLED INCOME FUND (2)								
	FUNDRAISING	NH	N/A	T				
(2) CHARITABLE REMAINDER TRUST (79)								
SEE SCHEDULE R, PART VII FOR LEGAL DOMICILE - COLUMN (C),	FUNDRAISING		N/A	T				
(3)								
(4)								
(5)								
(6)								
(7)								

Schedule R (Form 990) 2023 PHILLIPS EXETER ACADEMY 02-0222174 Page 3

Yes No

Χ

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

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.

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

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

b	Gift, grant, or capital contribution to related organization(s)				ar		Χ_
С	Gift, grant, or capital contribution from related organization(s)				1c	Х	
	Loans or loan guarantees to or for related organization(s)				1d		X
	Loans or loan guarantees by related organization(s)				1e		X
	- Louis of loan guarantoos by foldiou organization(o)						
f	Dividends from related organization(s)				1f		
	Sale of assets to related organization(s)				1g	- -	X
					1h		X
n :	Purchase of assets from related organization(s)				1i		X
	Exchange of assets with related organization(s)				-		
J	Lease of facilities, equipment, or other assets to related organization(s)				1j	-	X
	Lease of facilities, equipment, or other assets from related organization(s)				1k		X
	Performance of services or membership or fundraising solicitations for related organization(s)				11		X
	Performance of services or membership or fundraising solicitations by related organization(s)				1m		X
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		X
0	Sharing of paid employees with related organization(s)				10		X
р	Reimbursement paid to related organization(s) for expenses				1p		X
	Reimbursement paid by related organization(s) for expenses				1q	:	X
·							
r	Other transfer of cash or property to related organization(s)				1r	:	X
	Other transfer of cash or property from related organization(s)				1s	Х	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete t	his line, including cove	ered relationships and trans	action thre	sholds	i.	
	(a)	(b)	(c)		(d)		
	Name of related organization	Transaction	Amount involved	Method			
		type (a - s)		amou	ınt invol	vea	
(1)							
(- /							
(2)							
. ,							
(3)							
(3)							
(3)							
(3)							
(3) (4) (5)							
(3)				nedule R (I			

Schedule R (Form 990) 2023 PHILLIPS EXETER ACADEMY 02-0222174 Page **4**

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)		e) partners tion (c)(3) rations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop	h) ortionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ner?	(k) Percentage ownership
			sections 512 - 514)	Yes	No			Yes	No	(' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	Yes	No	
_(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART IV, LINE (2), COLUMN (C)

CA, DE, FL, IA, IL, MA, MD, MI, NC, NH, NJ, NY, OH, PA, RI, SD, TX