EXTENDED TO AUGUST 15, 2024 Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

<u>A</u> F	or th	e 2022 calendar year, or tax year beginning OCT 1, 2022 and	ending S	EP 30, 2023				
B C	Check if pplicat	e: C Name of organization		D Employer identified	cation number			
	Addr	Je SMITHSONIAN INSTITUTION						
	]Name	Doing business as		53-0206027				
	Initia	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	r			
	]Final return	1000 JEFFERSON DRIVE SW		(202) 633-10	00			
	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,543,602,913.			
	Amer returr	WASHINGTON, DC 20300		H(a) Is this a group re				
L	Appli dtion pend	F Name and address of principal officer. Downed G. Dowen TT		for subordinates	? Yes X No			
		SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No			
		empt status: 🗴 501(c)(3) 🚺 501(c) ( ) (insert no.) 🛄 4947(a)(1) (	or 527	lf "No," attach a	list. See instructions			
JV	Vebs	Personal bearing the second bear	······	H(c) Group exemptio	n number			
000000000000000000000000000000000000000		f organization: Corporation X Trust Association Other	L Year	of formation: 1846	A State of legal domicile:			
Pa	irt I	Summary						
e	1		ASE AND D	IFFUSION OF				
Activities & Governance		KNOWLEDGE" IS THE MISSION SET FORTH BY JAMES SMITHSON.						
erne	2	Check this box if the organization discontinued its operations or dispos	ed of more	than 25% of its net ass				
Ň	3			17				
୍ଷ ୪	4	Number of independent voting members of the governing body (Part VI, line 1b)		<u> </u>				
es	5		I number of individuals employed in calendar year 2022 (Part V, line 2a)					
<u>V</u>	6	Total number of volunteers (estimate if necessary)	••••••	6	82471			
Act				<u>7a</u>	10,070,576.			
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>		0.			
				Prior Year	Current Year			
ę	8	Contributions and grants (Part VIII, line 1h)		1,440,330,179.	1,639,379,712.			
en	9	Program service revenue (Part VIII, line 2g)		92,495,451.	<u>110,685,734.</u> 59,876,906.			
Revenue	10		nent income (Part VIII, column (A), lines 3, 4, and 7d)         269, 279, 8           evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)         53, 877, 6					
	11							
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,855,983,046.	1,876,542,577.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	······	17,565,171.	16,736,496.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		748,449,680.	799,079,583.			
sua		Professional fundraising fees (Part IX, column (A), line 11e)		2,292,446.	1,783,493.			
Expenses		Total fundraising expenses (Part IX, column (D), line 25) 76,652,6						
"		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		719,339,140.	784,197,474.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,487,646,437.	1,601,797,046.			
	19	Revenue less expenses. Subtract line 18 from line 12		368,336,609.	274,745,531.			
is or			Beč	jinning of Current Year	End of Year			
Assets Balanc		Total assets (Part X, line 16)	·····	6,953,060,016.	7,198,888,846.			
Pd F		Total liabilities (Part X, line 26)		1,542,889,062.	1,509,141,868.			
ź, ł	22	Net assets or fund balances. Subtract line 21 from line 20	I	5,410,170,954.	5,689,746,978.			

Part II Signature Block

Form **990** 

Department of the Treasury Internal Revenue Service

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of off RONALD CORT Type or print na	EZ, UNDER SEC FOR ADMINIST	RATION	mall	Date	14
	Print/Type prep SHAWN HUTCH	INSON	Preparer's signature	Hutchison 8/8	8/24 Check PTIN if self-employed P01048557	
Preparer	Firm's name	KPMG LLP			Firm's EIN 13-5565207	
Use Only	Firm's address	8350 BROAD STREET, SUITE	900			
		MCLEAN, VA 22102			Phone no.703-286-8000	
May the I	RS discuss this	return with the preparer shown abo	ve? See instructions		X Yes No	
		or Donomurally Baduation Ast Nati	a ana tha announts in stu		Farma 990 (0000)	

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2022)

(Rev. January 2022)

### \*\* PUBLIC INSPECTION COPY \*\*

#### Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

#### File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

#### Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type o print	r Name of exempt organization or other filer, see instru	Taxpayer identification number (TIN)			r (TIN)		
	SMITHSONIAN INSTITUTION		53-020	06027			
File by the due date filing your	Number, street, and room or suite no. If a P.O. box, so 1000 JEFFERSON DRIVE SW	ee instruct	ions.				
return. Se instructior		preign addı	ress, see instructions.				
Enter th	ne Return Code for the return that this application is for (file	e a separat	e application for each return)				0 1
Applica	ation	Return	Application				Return
ls For		Code	Is For				Code
Form 9	90 or Form 990-EZ	01	Form 1041-A				08
Form 4	720 (individual)	03	Form 4720 (other than individual)				09
Form 9	90-PF	04	Form 5227				10
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form 9	90-T (trust other than above)	06	Form 8870				12
Form 9	90-T (corporation)	07					
<ul> <li>If the</li> <li>If this</li> <li>box </li> <li>1</li> <li>the</li> <li>the</li></ul>	phone No. ► 202-633-7167 e organization does not have an office or place of business s is for a Group Return, enter the organization's four digit ( 	Group Exe and atta AUGUST anization's , an	mption Number (GEN) I ch a list with the names and TINs of 15, 2024 , to file return for: d ending SEP 30, 2023	f this is fo all membe	r the whole ers the exte npt organiza	group, che nsion is fo	r.
<u>a</u> b If	any nonrefundable credits. See instructions.				\$		0.
e	stimated tax payments made. Include any prior year overp	ayment all	owed as a credit.	3b	\$		٥.
	alance due. Subtract line 3b from line 3a. Include your pa				-		
	sing EFTPS (Electronic Federal Tax Payment System). See			3c	\$		0.
Cautio instruct	<ul> <li>If you are going to make an electronic funds withdrawal ions.</li> </ul>	(direct deb	bit) with this Form 8868, see Form 84	153-TE and	d Form 8879	9-TE for pa	ayment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)

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	** PUBLIC INSPECTION COPY **		
Form	1990 (2022) SMITHSONIAN INSTITUTION	53-0206027	Page <b>2</b>
	rt III Statement of Program Service Accomplishments		<u> </u>
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	X
1	Briefly describe the organization's mission:		
	*INCREASE AND DIFFUSION OF KNOWLEDGE* IS THE MISSION SET FORTH BY		
	JAMES SMITHSON. THE SMITHSONIAN ENDEAVORS TO SHAPE THE FUTURE BY		
	PRESERVING OUR HERITAGE, DISCOVERING NEW KNOWLEDGE, AND SHARING OUR		
	RESOURCES WITH THE WORLD.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Y	es X No
•	If "Yes," describe these new services on Schedule O.		es X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? _ If "Yes," describe these changes on Schedule O.	······ ٢	es 🔼 No
4	Describe the organization's program service accomplishments for each of its three largest program services, as n	nonsured by expense	00
4	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others		
	revenue, if any, for each program service reported.		, and
4a		ue\$ 47.	497,328.)
Tu	EDUCATION, PUBLIC PROGRAMS AND EXHIBITIONS (SEE SCHEDULE O)		)
4b	(Code: ) (Expenses § 665,551,119. including grants of § 12,766,550. ) (Revenu	e\$51,	382,885.)
	RESEARCH AND COLLECTIONS (SEE SCHEDULE O)		
4c	(Code: ) (Expenses \$ 120,196,807. including grants of \$ ) (Revenu		553,957.)
	MEMBERSHIP (SEE SCHEDULE O)		,
4d		、 、	
4 -	(Expenses \$ including grants of \$ ) (Revenue \$       Total program service expenses     1,210,067,298.	)	
4e	Total program service expenses 1,210,067,298.	Earr	n <b>990</b> (2022)
		FUL	··· (2022)

232002 12-13-22

#### \*\* PUBLIC INSPECTION COPY \*\* SMITHSONIAN INSTITUTION

	990 (2022) SMITHSONIAN INSTITUTION 53-0206	027	Р	age
Pa	rt 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	X	
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			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	/ 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	Х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	х	
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	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, 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	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	- Tu		
D D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	x	
~	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
C		110		x
<b>ا</b> م	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			x
	Part X, line 16? If "Yes," complete Schedule D, Part IX		x	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	. <u>11e</u>	21	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	. 11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		x	
	Schedule D, Parts XI and XII	12a	~	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		v	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	. <u>14a</u>	Х	
b				
	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	X	
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	Х	
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	Х	
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
20a		20a		Х
b		0.00		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	. 21	Х	

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Form 990 (2022)

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	990 (2022) SMITHSONIAN INSTITUTION	53-0206	5027	P	age <b>4</b>
Par	t IV Checklist of Required Schedules (continued)				
				Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individual	ls on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		. 22	X	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization and the orga				
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes	s," complete		х	
04-	Schedule J	¢100.000 as af the	23	Δ	<u> </u>
248	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than a last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d				
			24a	х	
h	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		24b		x
	Did the organization maintain an escrow account other than a refunding escrow at any time during the				
	any tax-exempt bonds?	,	24c		x
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		24d		x
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess				
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		. 25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a				
	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		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any o	current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%				
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		. 26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, truste				
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, c				x
<b>00</b>	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete So	,	27		
28	Was the organization a party to a business transaction with one of the following parties (see the Scheduling thresholds, conditions, and executions):	ule L, Part IV,			
~	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor	Nr? 15			
a	"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	х	
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?				
	"Yes," complete Schedule L. Part IV		28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedul		. 29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified				
	contributions? If "Yes," complete Schedule M		. 30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedu	le N, Part I			X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," c	complete			
	Schedule N, Part II		32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulation				
	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 I			v	
<u>ог</u> -	Part V, line 1			X X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a distribution of the organization o	controlled entity	. <u>35a</u>	Δ	<u> </u>
u	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		35b		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		. 550		<u> </u>
00	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 organi				
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, P		37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11				
			. 38	х	
Par					
	Check if Schedule O contains a response or note to any line in this Part V				
				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	<b>1a</b> 36	93		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and rep	ortable gaming			
	(gambling) winnings to prize winners?		1c	000	
232004	12-13-22		Form	390	(2022)

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### \*\* PUBLIC INSPECTION COPY \*\* SMITHSONIAN INSTITUTION

Form	990 (2022) SMITHSONIAN INSTITUTION 53-0206	)27	Р	age 5
Par	t V 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 717	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	х	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	х	
	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	х	
b	If "Yes," enter the name of the foreign countryARMENIA, GABON, PANAMA			
	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		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			x
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			<u> </u>
Ua		6a		x
L	any contributions that were not tax deductible as charitable contributions?	0a		<u> </u>
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).		v	
a	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		X	<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	<u> </u>
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	_		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.) 11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1.15		
	excess parachute payment(s) during the year?	15	x	
	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		x
10				
17	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?	47		
		17		
00000	If "Yes," complete Form 6069.	Earn	990	(2022)
232005	12-13-22	FUIT	, 550	(2022)

6 2022.06000 SMITHSONIAN INSTITUTION 177

	990 (2022) SMITHSONIAN INSTITUTION 53-02060			age 6
Par	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for	a "No" .	respon	se
	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			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a1	7		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 1	7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 70	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	6		
7a		7a	x	
b	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	<u>/a</u>		
5		7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	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 be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal 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 purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? <i>If</i> " <i>No</i> ," <i>go to line 13</i>	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	10.	x	
40	on Schedule O how this was done Did the organization have a written whistleblower policy?	12c	X	
13 14		13	X	
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	14		
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	x	
	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 arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filedNONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3	s only)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	X       Own website       Another's website       Y       Upon request       Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
00	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records OFFICE OF FINANCE & ACCOUNTING - 202-633-7167			
	PO BOX 37012, WASHINGTON, DC 20013-7012			
232000	5 12-13-22	Form	<b>990</b>	(2022
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Form 990 (2022)	SMITHSONIAN	INSTITUTION

	Check if Schedule O contains a response or note to any line in this Part VII Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	
	Employees, and Independent Contractors	
	Employees, and Independent Contractors	
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	

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)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do		Pos		l than d	ne	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer ar	id a d	Irecto	r/trus	tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related organizations	rustee	trust		ee	npens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	lual tr	tional		nploy	st con yee	_	1033-1120)		organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(1) AMY CHEN	50.00	_	_							
CHIEF INVESTMENT OFFICER	0.00				х			1,110,792.	0.	46,520.
(2) MR LONNIE G. BUNCH, III	50.00									
SECRETARY OF THE SMITHSONIAN	0.00			х				861,379.	0.	68,391.
(3) JEFFREY SMITH	50.00									
INVESTMENT OFFICER	0.00					X		680,092.	0.	77,914.
(4) RYAN DOTSON	50.00									
INVESTMENT OFFICER	0.00					X		612,491.	0.	72,870.
(5) MICHAEL GIOVENCO	50.00									
INVESTMENT OFFICER	0.00					X		625,494.	0.	47,991.
(6) MEROE PARK	50.00									
DEPUTY SECRETARY & COO	0.00			х				580,769.	0.	46,288.
(7) MELISSA CHIU	50.00									
DIR, HIRSHHORN MUSEUM & SCULPTURE GA	0.00					X		435,857.	0.	79,902.
(8) ROBERT SPILLER	50.00									
ASSISTANT SECRETARY FOR ADVANCEMENT	0.00				х			427,363.	0.	82,713.
(9) JOSHUA TEWKSBURY	50.00								_	
DIRECTOR, STRI	0.00					x		455,421.	0.	54,363.
(10) KEVIN GOVER	50.00									
UNDER SEC FOR HISTORY & CULTURE	0.00				х			422,643.	0.	70,188.
(11) ELLEN STOFAN	50.00									
UNDER SEC FOR SCIENCE & RESEARCH	0.00				х			422,915.	0.	66,402.
(12) RONALD CORTEZ	50.00									
UNDER SEC FOR FIN/ADMIN & CFO	0.00			Х				417,084.	0.	70,316.
(13) RICHARD KURIN (THRU 9/30/19)	50.00								0	60, 400
FMR, ACT UNDER SEC MUSEUMS & RESEARC	0.00						Х	365,033.	0.	68,429.
(14) CAROL LEBLANC	50.00							205.054	0	44 500
PRESIDENT, SMITHSONIAN ENTERPRISES	0.00				Х			387,874.	0.	44,500.
(15) JULISSA MARENCO	50.00							052 141	0	
ASST SEC. FOR COMM/EXT AFFAIRS & CMO	0.00				X			273,141.	0.	64,595.
(16) JUDITH LEONARD	50.00							296 299	^	F1 025
GENERAL COUNSEL	0.00			X		-		286,288.	0.	51,035.
<pre>(17) ROGER BRISSENDEN (THRU 3/13/21) FMR, ACTING UNDER SEC. FOR SCI &amp; RSC</pre>	50.00						х	299,111.	0.	2 61 8
232007 12-13-22	0.00						Δ	2,5,111.	٥.	2,618. Form <b>990</b> (2022)

8

232007 12-13-22

Form 990 (2022)

2022.06000 SMITHSONIAN INSTITUTION 1

Form 990 (2022) SMITHSONIAN I Part VII Section & Officers Directors Trust									53-020	6027		Page <b>8</b>
	ees, Key Emp (B)	oloye	ees,		<u>d Hi</u> g C)	ghes	t C					
<b>(A)</b> Name and title	Average hours per week	box,	not cl , unles	Pos heck ss per	i <b>tior</b> more rson i	1 than c is both pr/trust	an	(D) Reportable compensation	(E) Reportable compensation		Estin amo	F) nated unt of
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC 1099-NEC)		compe fron organ and r	her insation ithe ization elated zations
(18) JANICE LAMBERT	50.00											
CHIEF FINANCIAL OFFICER	0.00				х			247,796.		٥.		39,672.
(19) ZULLY DORR (THRU 09/30/19)	50.00											
FMR, ACTING ASST SEC. FOR ADVANCEMEN	0.00						Х	231,070.		0.	!	55,660.
(20) PORTER WILKINSON	50.00											
CHIEF OF STAFF TO THE REGENTS	0.00			х				251,361.		0.		34,961.
(21) DERON BURBA 50.00												
FMR, CHIEF INFORMATION OFFICER	0.00						Х	219,176.		0.		60,497.
(22) ERA MARSHALL (THRU 9/30/18)	50.00											
FMR, DIR OF EQUAL EMPLOYMENT & MINOR	0.00						Х	241,693.		0.		21,154.
(23) CATHY HELM	50.00											
INSPECTOR GENERAL	0.00			х				233,481.		0.		24,631.
(24) JOHN LAPIANA (THRU 9/30/18)	50.00							012,000				
FMR, ACTING ASST SEC. FOR COMM/EXT A	0.00						Х	213,882.		0.		40,566.
(25) NANCY BECHTOL	50.00							215 502				00 410
DIRECTOR, SMITHSONIAN FACILITIES	0.00				X			215,593.		0.		29,419.
(26) FARLEIGH EARHART	50.00			x				200 442				NA 410
GENERAL COUNSEL (ACTING)	0.00			Λ				209,443.		0.		24,413. 46,008.
1b Subtotal	·····							10,727,242.		0.		
c Total from continuation sheets to Part VII								571,011. 11,298,253.		0.		90,997. 37,005.
<ul> <li>d Total (add lines 1b and 1c)</li> <li>2 Total number of individuals (including but no</li> </ul>								•	000 of reportable	<u>••</u>	<u> </u>	57,005.
compensation from the organization												1,828
										_	Y	es No
3 Did the organization list any former officer,	director, truste	ee, k	ey e	empl	loye	e, or	hig	phest compensated emp	oyee on			
line 1a? If "Yes," complete Schedule J for su	ıch individual									L	3 2	<u> </u>
4 For any individual listed on line 1a, is the su	m of reportable	e co	mpe	ensa	tion	and	oth	ner compensation from t	ne organization			
and related organizations greater than \$150	,000? If "Yes,	" со	mple	ete S	Sche	edule	Jf	for such individual		L	4 <sup>2</sup>	<u> </u>
5 Did any person listed on line 1a receive or a	ccrue compen	satio	on fr	om	any	unre	late	ed organization or individ	lual for services			
rendered to the organization? If "Yes," com	plete Schedule	e J fo	or su	ich i	oers	on .					5 2	K
Section B. Independent Contractors												
1 Complete this table for your five highest cor	•	•							•	nsatic	on from	
the organization. Report compensation for t	he calendar ye	ear e	ndin	ng w	vith c	or wi	:hin		ear.			
(A)	addraaa							(B)	omioco	0.0	(C)	otion
Name and business							_	Description of s	ervices		mpens	
CLARK/SMOOT/CONSIGLI, A JOINT VENTURE												
7500 OLD GEORGETOWN RD., BETHESDA, MI							_	CONSTRUCTION			98,8	93,155.
UNIVERSAL PROTECTION SERVICE, LP, 155	DI N.							CECUDIENV			20 0	95 691
TUSTIN AVE, SANTA ANA, CA 92705-8664	NITE						-	SECURITY			20,00	85,621.
TC PENNSY DRIVE, LLC, 444 MADISON AVE	, <sup>100E</sup>							ዋይል፤, ድሮጥልጣው			7 0	01 311
18TH FLOOR, NEW YORK, NY 10022-6903 DELL MARKETING L.P.							_	REAL ESTATE			', '	04,344.
1 DELL WAY, ROUND ROCK, TX 78682												
100 DISCOVERY PARK DE, LLC												
116 HUNTINGTON AVE, BOSTON, MA 02116								REAL ESTATE			4,6	52,746.

2 Total number of independent contractors (including but not limited to those listed above) who received more than 136 \$100,000 of compensation from the organization

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2022)

232008 12-13-22

Form 990 SMITHSONIAN I	INSTITUTION								53-02060	27	
Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, aı	nd H	lighe	est (	Compensated Employe	ees (continued)		
(A) (B) (C) (D) (E) (F)											
Name and title	u u								·	Estimated	
	hours	(C	heck	all t	that	app	ly)	compensation	compensation	amount of	
	per							from	from related	other	
	week	u.				loyee		the organization	organizations (W-2/1099-MISC)	compensation from the	
	(list any hours for	direct				d em p		(W-2/1099-MISC)	(00-2/1099-00130)	organization	
	related	e or c	stee			sated		(00-271033-10100)		and related	
	organizations	ndividual trustee or director	Institutional trustee		yee	Highest com pen sated em ployee				organizations	
	below	idual	ution	5	Key employee	est co	er				
	line)	Indivi	Instit	Officer	Key e	Highe	Former				
(27) DOUGLAS HALL	50.00										
FMR, ACTING UNDER SEC. FOR ADMINISTR	0.00						х	197,469.	0.	34,432.	
(28) JOAN MOCKERIDGE	50.00										
INSPECTOR GENERAL (ACTING)	0.00			х				197,538.	Ο.	34,296.	
(29) CHARLES ALCOCK (THRU 12/31/20)	50.00										
FMR DIR, HARVARD-SMITHSONIAN CENTER	0.00						х	176,004.	0.	22,269.	
(30) HONORABLE JOHN G. ROBERTS JR	2.00										
REGENT	0.00	х						0.	0.	0.	
(31) HONORABLE KAMALA D. HARRIS	2.00										
REGENT	0.00	х						0.	0.	0.	
(32) HONORABLE JOHN BOOZMAN	2.00										
REGENT	0.00	х						٥.	0.	0.	
(33) HONORABLE CATHERINE CORTEZ MAST	2.00										
REGENT	0.00	х						0.	0.	Ο.	
(34) HONORABLE DORIS MATSUI	2.00										
REGENT	0.00	х						0.	0.	Ο.	
(35) HONORABLE ADRIAN SMITH	2.00										
REGENT	0.00	х						0.	0.	Ο.	
(36) HONORABLE BARBARA M. BARRETT	3.00										
REGENT	0.00	х						0.	0.	Ο.	
(37) MR STEVE CASE	10.00										
REGENT (UNTIL 04/25/2023	0.00	х						0.	0.	Ο.	
(38) MR JOHN FAHEY	3.00										
REGENT	0.00	х						0.	0.	0.	
(39) MR ROGER W. FERGUSON JR.	3.00										
REGENT	0.00	х						0.	0.	Ο.	
(40) MR MICHEAL GOVAN	3.00										
REGENT	0.00	х						٥.	0.	0.	
(41) DR RISA J. LAVIZZO-MOUREY	3.00										
REGENT	0.00	х						٥.	0.	0.	
(42) MR MICHAEL M. LYNTON	3.00										
REGENT	0.00	х						0.	0.	0.	
(43) MS DENISE M. O'LEARY	2.00										
REGENT	0.00	х						٥.	0.	0.	
(44) MR FRANKLIN D. RAINES	2.00										
REGENT	0.00	х						0.	0.	0.	
(45) HONORABLE GARY PETERS	2.00										
REGENT	0.00	х						0.	0.	0.	
(46) HONORABLE GARRET GRAVES	2.00										
REGENT	0.00	х						0.	0.	Ο.	
Total to Part VII, Section A, line 1c											
		-	-		-						

Form 990 SMITHSONIAN									53-02060	27
Part VII Section A. Officers, Directors, Tr		est (		· · ·	/ <b>-</b> `					
(A) Name and title	<b>(B)</b> Average hours	(c	hecł	Pos	<b>C)</b> itior that		ly)	<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	per week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest com pen sated em ployee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
47) MS TONI BUSH	2.00									
EGENT	0.00	x						0.	0.	
		-								
		-								
		-								
		-								
		-								
		-								
		-								
otal to Part VII, Section A, line 1c		L		<u> </u>		<u>I</u>		571,011.		90,99

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# \*\* PUBLIC INSPECTION COPY \*\* SMITHSONIAN INSTITUTION

m ar	990 () <b>t VII</b>			IAN INS	<b>FITU</b>	TION			53-020602	7 Page
						or poto to opy lin	o in this Dort VIII			Г
		Check if Schedule O o	CONTRA	ins a respo	JIISE		(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue exclude from tax unde sections 512 - 5
Ś	1 a	Federated campaigns		1a		36,330.				
un		Membership dues				26,699,264.				
m	с	Fundraising events				5,379,042.	1			
ar A		<b>–</b>				409,993.				
mil	е	Government grants (contr			1,	337,296,650.	1			
ŝ	f	All other contributions, gifts,	grants	s, and			1			
the		similar amounts not included				269,558,433.				
Ò	g	Noncash contributions included in	lines 1a	i-1f <b>1g</b>	\$	79,506,303.				
and Other Similar Amounts	h	Total. Add lines 1a-1f					1,639,379,712.			
						Business Code				
	2 a	VISITORS/MEMBERS/EM	IPLO			900099	57,117,600.	42,557,893.		14,559,70
~	b	SUBSCRIPTIONS-MAGAZ	INE			513120	29,038,449.	29,038,449.		
nu	с	TOURS/CLASSES				900099	21,342,923.	21,342,923.		
eve	d	TRAVELING EXHIBITIO	NS			711300	1,666,789.	1,666,789.		
Revenue	е	THEATER INCOME				512000	103,936.	103,936.		
	f	All other program service	reven	ue		900099	1,416,037.	1,416,037.		
	g	Total. Add lines 2a-2f					110,685,734.			
	3	Investment income (includ	ding d	ividends, i	ntere	st, and				
		other similar amounts)					24,167,850.		2,230,640.	21,937,23
	4	Income from investment of	of tax-	exempt bo	ond p	roceeds				
	5	Royalties	<u></u>				8,744,219.			8,744,23
				(i) Rea	ıl	(ii) Personal				
	6 a	Gross rents	6a	11,876,	513.					
	b	Less: rental expenses	6b	3,131,	301.					
	с	Rental income or (loss)	6c	8,745,	212.					
	d	Net rental income or (loss)	)				8,745,212.			8,745,21
		Gross amount from sales of		(i) Securi	ties	(ii) Other				
		assets other than inventory	7a 🖣	69,061,	759.	1,861.	1			
	b	Less: cost or other basis					1			
2		and sales expenses	7b	33,354,	564.	0.				
	с	Gain or (loss)	7c	35,707,	195.	1,861.	1			
	d	Net gain or (loss)					35,709,056.	1,861.		35,707,19
5		Gross income from fundraisi								
5		including \$ 5,3	379,0	042. of						
		contributions reported on	line 1	c). See						
		Part IV, line 18			8a	599,137.				
	b	Less: direct expenses			8b	3,099,251.				
	с	Net income or (loss) from	fundra	aising eve	nt <u>s</u>		-2,500,114.			-2,500,11
	9 a	Gross income from gamin	ig acti	ivities. See	)					
		Part IV, line 19			9a					
	b	Less: direct expenses			9b					
	с	Net income or (loss) from	gamir	ng activitie	s					
	10 a	Gross sales of inventory, I								
		and allowances			10a	70,159,260.				
	b	Less: cost of goods sold			10b	27,475,220.				
	с	Net income or (loss) from	sales	of invento	ry		42,684,040.	42,505,383.	178,657.	
						Business Code				
e	11 a	MAG/WEBSITE ADVERTI				541800	5,685,676.		7,661,279.	-1,975,60
enu	b	INTERCOMPANY REVENU				900099	3,219,358.	3,219,358.		
Sev	С	MISCELLANEOUS REVEN				900099	21,834.	21,834.		
Revenue		All other revenue								
	е	Total. Add lines 11a-11d		<u></u>	<u></u>		8,926,868.	141,874,463.		85,217,82
		Total revenue. See instruction					1,876,542,577.		10,070,576.	

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12

Page 10  $53\!-\!0206027$ 

#### Form 990 (2022) SMITHSONIAN INSTITUTION Functional Expenses

2, 8, 9, 8, and 10b of Part Will.         éxpenses         general expenses         expenses           Carlas and other assistance to domestic organizations, foreign governments, see Part W, line 22         13, 238, 423,         13, 238, 423,         13, 238, 423,           Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part W, line 22         13, 238, 423,         13, 238, 423,         13, 238, 423,           Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part W, lines 15 and 16         2, 880, 420,         2, 880, 420,         2, 880, 420,           Compensation of current officers, directors, trustees, and key employees         10, 486, 193,         2, 440, 065,         7, 536, 052,         510           Compensation of current officers, directors, trustees, and wages         10, 486, 193,         2, 440, 065,         7, 536, 052,         510           Person (sa defined und resciond 9580(f)(3) and persons described in section 49580(f)(3) and persons described in section 49580(f)(3) and persons described in section 49580(f)(3) and person (sa default dure section 49580(f)(3) employer contributions (f) there employee benefits         53, 367, 503,         16, 823, 903,         26, 841, 824,         44           Other employee benefits         99, 944, 476,         70, 827, 354, 20, 800,         1778           Payroll taxes         45, 923, 045,         27, 10, 937,         40, 927, 1873,         17	ion 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All othe	er organizations must con	nplete column (A).	
Productive antibulities (approved by lines (approximate) (appro	Check if Schedule O contains a respon	se or note to any line in t	this Part IX		X
and domestic governments. See Part IV, line 21         617, 653.         617, 653.           Grants and other assistance to domestic individuals. See Part IV, line 12         13, 238, 423.         13, 238, 423.           Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16         2, 880, 420.         2, 880, 420.           Benefits paid to or for members         Compensation of current of filences, directors, trustees, and key employees         10, 486, 193.         2, 440, 065.         7, 536, 052.         510           Compensation of included above to disqualified persons (as defined under section 4980(h) (1) and persons described in section 4980(h) (1) and persons (as defined under section 4980(h) (1) and persons (as defined under section 4980(h) (1) and persons (as defined under section 4980(h) (1) and person (as defined under section 4980			Program service	Management and	<b>(D)</b> Fundraising expenses
Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation on included above to disqualified persons (ascrifted in section 4958(r)(11)) and persons descrifted in section 4958(r)(11) and persons descrifted in section 4958(r)(11	Grants and other assistance to domestic organizations				·
individuals. See Part IV, line 22       13,238,423.       13,238,423.       13,238,423.         Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16       2,880,420.       2,880,420.         Benefits paid to or for members       Compensation of current officers, directors, trustees, and key employees       10,486,193.       2,440,065.       7,536,052.       510         Compensation not included above to disgualified persons (as defined under section 4958)((1)(1) and persons (as defined under section 4958)((1)(1) and persons described in section 4958)((1)(1) and excuts and contributions (include section 401(k) and 403(b) employer contributions)       589,964,626.       457,395,022.       99,716,339.       32,653.         Person (as defined under section 4958)((1)(1) and persons (as defined under section 4958)((1)(1) and 403(b) employer contributions)       59,964,626.       457,395,022.       99,716,339.       32,653.         Other employee benefits       99,804,476.       70,827,354.       20,801,809.       8,175.         Management       33,367,503.       16,929,679.       16,406,171.       31         Legal       365,918.       266,385.       81,321.       18         Anargement fees       4,515,155.       4,515,155.       17,284         Other employee benefits       99,804,476.       70,827,348.       20,927.       877	and domestic governments. See Part IV, line 21	617,653.	617,653.		
Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part V, lines 15 and 16 Benefits paid to or for members       2,880,420.       2,880,420.         Compensation of unrent officers, directors, trustees, and key employees       10,486,193.       2,440,065.       7,536,052.         Compensation not included above to disgualified persons (as defined under section 49580)(11) and persons described in section 49580)(10) and persons described in section 49580)(10) and persons described in section 49580)(10) and persons described in section 49580)       2,087,523.       771,924.       1,028,869.       286         Other employee benefits       599,964,626.       457,395,022.       99,716,339.       32,853         Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)       63,369,262.       36,483,309.       26,841,824.       444         Other employee benefits       99,804,476.       70,827,354.       20,801,809.       8,173         Face for services (nonemployees):       33,367,503.       16,929,679.       16,406,171.       33         Management       b       2465,318.       266,385.       81,321.       18         Counting       3657,918.       266,385.       81,321.       17,284         Management fees       4,515,155.	Grants and other assistance to domestic				
organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16         2,880,420.         2,880,420.           Benefits paid to or for members         10,486,193.         2,440,065.         7,536,052.         510           Compensation of current officers, directors, trustees, and key employees         10,486,193.         2,440,065.         7,536,052.         510           Compensation not included above to disquilified persons (as defined under section 4956(r)(1)) and persons described in section 4956(r)(3)(8)         2,087,523.         771,924.         1,028,869.         286           Other salaries and wages         589,964,626.         457,395,022.         99,716,339.         32,853           Pension plan accruals and contributions (include section 401(k) and 405(c) (s)(p) elbenefits         99,964,476.         70,827,354.         20,001,809.         8,177           Payroli taxes         33,367,503.         16,929,679.         16,406,171.         31           Fees for services (nonemployees): a Management         365,918.         266,385.         81,321.         18           Column (A), amount, list line 11g expenses on Sch O.)         3,657,651.         2,718,937.         40,927.         897.           Office expenses         65,923,043.         30,420,901.         32,094,936.         1,277.           Royattes         82,5245.         20,003.	individuals. See Part IV, line 22	13,238,423.	13,238,423.		
individuals. See Part IV, lines 15 and 16         2,880,420.         2,880,420.           Benefits paid to of for members	Grants and other assistance to foreign				
Benefits paid to or for members         Image: Compensation of current officers, trustees, and key employees         10,486,193.         2,440,065.         7,536,052.         510           Compensation not included above to disqualified persons (as defined under section 4986(c)(3)(B)         2,087,523.         771,924.         1,028,869.         266           Other staries and wages         589,964,626.         457,395,022.         99,716,339.         32,853           Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)         63,369,262.         36,483,309.         26,841,824.         44           Other staries and wages         99,804,476.         70,827,354.         20,801,809.         8,175           Payroll taxes         33,367,503.         16,929,679.         16,406,171.         31           Fees for services (nonemployees):         33,367,503.         16,929,679.         16,406,171.         31           Management         569,408.         869,408.         869,408.         1,783           Column (A), amount, list line 11g expenses on Sch (O).         3,657,651.         2,718,937.         40,927.         897           Other entrainment expenses         63,786,931.         30,420,901.         32,094,936.         1,271           Gother, (line 11g amount exceds 10% of line 25,023,719.         85,76,795.	organizations, foreign governments, and foreign				
Compensation of current officers, directors, trustees, and key employees         10,486,193.         2,440,065.         7,536,052.         510           Compensation on included above to disguilled persons (as defined under section 4958(c)(3)(8)         2,087,523.         771,924.         1,028,869.         286           Other salaries and wages         589,964,626.         457,395,022.         99,716,339.         32,853           Pension plan acruals and contributions (include section 401(k) and 403(b) employer contributions)         63,369,262.         36,483,309.         26,841,824.         44           Other employee benefits         99,904,476.         70,827,354.         20,801,809.         8,175           Payroll taxes         33,367,503.         16,929,679.         16,406,171.         33         355,918.         266,385.         81,321.         18           Legal         365,918.         266,385.         81,321.         18         17,783,493.         1,783           Columing         63,765,651.         2,718,937.         40,927.         897           Other expenses         63,765,929,045.         31,822,962.         8,833,598.         5,277           Other optices         63,786,931.         30,420,901.         32,094,936.         1,231           Investment management tees         25,501,071.         1	individuals. See Part IV, lines 15 and 16	2,880,420.	2,880,420.		
trustees, and key employees       10,486,193.       2,440,065.       7,536,052.       510         Compensation not included above to disqualified persons (as defined under section 4958(1/(1)) and parsons described in section 4958(1/(1)) and persons described in section 4958(1/(1)) and 02(0) employer contributions       2,087,523.       771,924.       1,028,869.       286         Other salaries and wages       589,964,626.       457,395,022.       99,716,339.       32,853         Pension plan acruals and contributions (include section 401(k) and 403(b) employer contributions)       63,369,262.       36,483,309.       26,841,824.       44         Other employee benefits       99,804,476.       70,827,354.       20,801,809.       8,175         Payroll taxes       33,367,503.       16,929,679.       16,406,171.       31         Fees for services (nonemployees):       3       365,918.       266,385.       81,322.       10         a Management       2       0       1       1.783,493.       1,783       1,783         g Other. (If line 11g amount excees 10% of line 25, 021, 021.       12,094,933.       1,271       897         Office expenses       0,3785,913.       3,420,901.       32,093.       522.       564         Office expenses       0,3785,913.       3,420,901.       32,094,933.       52,023,914.       2	Benefits paid to or for members				
Compensation not included above to disqualified persons (as defined under section 4956(c)(3)(B)         2,087,523,771,924,1,028,869,266           Other salaries and wages         589,964,626,457,395,022,99,716,339,32,853           Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)         53,369,262,36,483,309,26,841,824,444           Other salaries and wages         539,964,626,457,395,022,99,716,339,32,853           Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)         63,369,262,36,483,309,26,841,824,444           Other sension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)         99,804,476,70,627,354,20,801,809,81,175           Payroll taxes         33,367,503,16,929,679,16,406,171,331           Fees for services (nonemployees): a Management         365,918,266,385,81,321,18           Legal         365,918,266,385,81,321,18           Professional fundraising services. See Part IV, line 17         1,783,493,1,178,3493,1,178           f Investment management fees         4,515,155,155,155,155,155,155,155,155,15	Compensation of current officers, directors,				
persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)         2,087,523.         771,924.         1,028,869.         286           Other salaries and wages         589,964,626.         457,395,022.         99,716,339.         32,853           Persion plan accruals and contributions (include section 401(k) and 403(b) employer contributions)         63,369,262.         36,483,309.         26,841,824.         44           9Parolit plane accruals and contributions)         99,804,476.         70,827,354.         20,801,809.         8,175.           Payroll taxes         33,367,503.         16,929,679.         16,406,171.         33         36           Anaragement	trustees, and key employees	10,486,193.	2,440,065.	7,536,052.	510,07
persons described in section 4958(c)(3)(B)         2,087,523.         771,924.         1,028,869.         286           Other salaries and wages         589,964,626.         457,339,022.         99,716,339.         32,853           Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)         63,369,262.         36,483,309.         26,841,824.         44           Other employee benefits         99,804,476.         70,827,354.         20,801,809.         8,175           Payroll taxes         33,367,503.         16,929,679.         16,406,171.         31           Persons described (nonemployees):         365,918.         266,385.         81,321.         18           a Management         869,408.         869,408.         4,515,155.         4,515,155.         1,783,493.         1,783,493.         1,783,493.         1,783,493.         1,783,493.         1,783,493.         1,783,493.         1,783,493.         1,783,493.         1,783,493.         1,783,493.         1,783,493.         1,783,493.         1,783,493.         1,728.4         4,515,155.         4,515,155.         4,515,155.         1,728.4         4,515,155.         1,728.4         1,221,937.         40,927.         897         0,57,651.         2,718,937.         40,927.         897         0,57,551.         2,718,937. </td <td></td> <td></td> <td></td> <td></td> <td></td>					
Other salaries and wages         589,964,626.         457,395,022.         99,716,339.         32,853           Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)         63,369,262.         36,483,309.         26,841,824.         44           Other employee benefits         99,804,476.         70,827,354.         20,801,809.         8,175.           Payroll taxes         33,367,503.         16,929,679.         16,406,171.         31           Fees for services (nonemployees):         a         365,918.         266,385.         81,321.         18           Accounting         869,408.         869,408.         869,408.         869,408.         1,783,493	persons (as defined under section $4958(f)(1)$ ) and				
Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)       63,369,262       36,483,309       26,841,824       44         Section 401(k) and 403(b) employer contributions)       99,804,476       70,827,354       20,801,809       8,175         Payroll taxes       33,367,503       16,929,679       16,406,171       31         Fees for services (nonemployees):       a       869,408       869,408       869,408         a Management       869,408       869,408       1,783         b Legal       365,918       266,385       81,321       18         c Accounting       869,408       869,408       0       0         e Protessional fundraising services. See Part IV, line 17       1,783,493.       1,783       1,783         g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.)       247,551,071       191,689,809       38,576,795       17,284         Advertising and promotion       3,657,651       2,718,937       40,927       897         Office expenses       63,786,931       30,420,901       32,044,936       1,271         Royatties       8,262,353       841,657       7,767,972       216         Occupancy       95,023,719       85,622,436       8,129,990	persons described in section 4958(c)(3)(B)				286,73
section 401(k) and 403(b) employer contributions)         63,369,262.         36,483,309.         26,841,824.         44           Other employee benefits         99,804,476.         70,827,354.         20,801,809.         8,175           Payroll taxes         33,367,503.         16,929,679.         16,406,171.         31           Fees for services (nonemployees):         33,367,503.         16,929,679.         16,406,171.         31           a Management         869,408.         869,408.         869,408.         61,325.         17,783,493.         1,783           e Professional fundraising services. See Part IV, line 17         1,783,493.         1,783         1,783         1,783           g Other. (if line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)         247,551,071.         191,689,809.         38,576,795.         17,284           Advertising and promotion         3,657,651.         2,718,937.         40,927.         897           Office expenses         63,786,931.         30,420,901.         32,094,936.         1,271           Information technology         63,786,931.         30,420,901.         32,094,936.         1,271           Royatties         95,023,719.         85,662,436.         8,129,990.         1,231           Travel         1	-	589,964,626.	457,395,022.	99,716,339.	32,853,26
Other employee benefits         99,804,476.         70,827,354.         20,801,809.         8,175           Payroll taxes         33,367,503.         16,929,679.         16,406,171.         31           Fees for services (nonemployees):         a         365,918.         266,385.         81,321.         18           a Management	Pension plan accruals and contributions (include				
Payroll taxes       33,367,503       16,929,679       16,406,171       31         Fees for services (nonemployees):       33,367,503       16,929,679       16,406,171       31         Management       365,918       266,385       81,321       18         b Legal       365,918       266,385       81,321       18         c Accounting       869,408       869,408       0         d Lobbying       1,783,493       1,783       1,783         e Professional fundraising services. See Part IV, line 17       1,783,493       1,783       1,783         f Investment management fees       4,515,155       4,515,155       1,7284         Advertising and promotion       3,657,651       2,718,937       40,927       897         Office expenses       45,929,045       31,822,962       8,833,598       5,272         Information technology       63,786,931       30,420,901       32,094,936       1,271         Royalties       25,245       260,093       552       564         Occupancy       95,023,719       85,662,436       8,129,990       1,231         Travel       15,523,440       13,833,073       643,123       1,047         Payments of fravel or entertainment expenses       5,030,530 </td <td>section 401(k) and 403(b) employer contributions)</td> <td></td> <td></td> <td></td> <td>44,12</td>	section 401(k) and 403(b) employer contributions)				44,12
Fees for services (nonemployees):         a         Management         a           b         Legal         365,918.         266,385.         81,321.         18           c         Accounting         869,408.         869,408.         6           d         Lobbying					8,175,31
a Management       365,918.       266,385.       81,321.       18         b Legal       365,918.       266,385.       81,321.       18         c Accounting       869,408.       869,408.       6         d Lobbying       1,783,493.       1,783       1,783         e Professional fundraising services. See Part IV, line 17       1,783,493.       1,783       1,783         g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)       247,551,071.       191,689,809.       38,576,795.       17,284         Advertising and promotion       3,657,651.       2,718,937.       40,927.       897         Office expenses       45,929,045.       31,822,962.       8,833,598.       5,272         Information technology       63,786,931.       30,420,901.       32,094,936.       1,271         Royatties       95,023,719.       85,662,436.       8,129,990.       1,231         Travel       15,523,440.       13,833,073.       643,123.       1,047         Payments of travel or entertainment expenses for any federal, state, or local public officials       5,030,530.       3,987,173.       887,724.       155         Payments to affiliates       197,013,734.       158,556,653.       38,043,352.       413	Payroll taxes	33,367,503.	16,929,679.	16,406,171.	31,65
b Legal       365,918.       266,385.       81,321.       18         c Accounting       869,408.       869,408.       869,408.         c Accounting       1,783,493.       1,783         e Professional fundraising services. See Part IV, line 17       1,783,493.       1,783         g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)       247,551,071.       191,689,809.       38,576,795.       17,284         Advertising and promotion       3,657,651.       2,718,937.       40,927.       897         Office expenses       45,929,045.       31,822,962.       8,683,598.       5,272         Information technology       63,786,931.       30,420,901.       32,094,936.       1,271         Royalties       260,093.       552.       564         Occupancy       95,023,719.       85,662,436.       8,129,990.       1,231         Travel       15,523,440.       13,833,073.       643,123.       1,047         Payments of travel or entertainment expenses for any federal, state, or local public officials       197,013,734.       158,556,653.       38,043,352.       413         Depreciation, depletion, and amortization       197,013,734.       158,556,653.       38,043,352.       413         Insurance	-				
c       Accounting       869,408.       869,408.         d       Lobbying       1,783,493.       1,783         e       Professional fundraising services. See Part IV, line 17       1,783,493.       1,783         f       Investment management fees       4,515,155.       4,515,155.         g       Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.)       247,551,071.       191,689,809.       38,576,795.       17,284         Advertising and promotion       3,657,651.       2,718,937.       40,927.       897         Office expenses       45,929,045.       31,822,962.       8,833,598.       5,277         Information technology       63,786,931.       30,420,901.       32,094,936.       1,271         Royalties       825,245.       260,093.       552.       564         Occupancy       95,023,719.       85,662,436.       8,129,990.       1,231         Travel       15,523,440.       13,833,073.       643,123.       1,047         Payments of travel or entertainment expenses       5,030,530.       3,987,173.       887,724.       155         Royalties       5,030,530.       3,987,173.       887,724.       155         Payments to affiliates       197,013,734.	Management				
d       Lobbying			266,385.	, , , , , , , , , , , , , , , , , , , ,	18,21
e       Professional fundraising services. See Part IV, line 17       1,783,493.       1,783         f       Investment management fees       4,515,155.       4,515,155.         g       Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.)       247,551,071.       191,689,809.       38,576,795.       17,284         Advertising and promotion       3,657,651.       2,718,937.       40,927.       897         Office expenses       45,929,045.       31,822,962.       8,833,598.       5,272         Information technology       63,786,931.       30,420,901.       32,094,936.       1,271         Royalties       825,245.       260,093.       552.       564         Occupancy       95,023,719.       85,662,436.       8,129,990.       1,231         Travel       15,523,440.       13,833,073.       643,123.       1,047         Payments of travel or entertainment expenses for any federal, state, or local public officials       5,030,530.       3,987,173.       887,724.       155         Payments to affiliates       197,013,734.       158,556,653.       38,043,352.       413         Insurance       2,121,714.       838,085.       1,280,480.       33         Other expenses. Itemize expenses on line 24e. If line 24e amount exce		869,408.		869,408.	
f       Investment management fees       4,515,155.       4,515,155.         g       Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.)       247,551,071.       191,689,809.       38,576,795.       17,284         Advertising and promotion       3,657,651.       2,718,937.       40,927.       897         Office expenses       45,929,045.       31,822,962.       8,833,598.       5,272         Information technology       63,786,931.       30,420,901.       32,094,936.       1,271         Royalties       825,245.       260,093.       552.       564         Occupancy       95,023,719.       85,662,436.       8,129,990.       1,231         Travel       15,523,440.       13,833,073.       643,123.       1,047         Payments of travel or entertainment expenses for any federal, state, or local public officials       5,030,530.       3,987,173.       887,724.       155         Interest       9ayments to affiliates       9197,013,734.       158,556,653.       38,043,352.       413         Other expenses. Itemize expenses on tocovered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),       2,121,714.       838,085.       1,280,480.       3					
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.)       247,551,071.       191,689,809.       38,576,795.       17,284         Advertising and promotion       3,657,651.       2,718,937.       40,927.       897         Office expenses       45,929,045.       31,822,962.       8,833,598.       5,272         Information technology       63,786,931.       30,420,901.       32,094,936.       1,271         Royatties       825,245.       260,093.       552.       564         Occupancy       95,023,719.       85,662,436.       8,129,990.       1,231         Travel       15,523,440.       13,833,073.       643,123.       1,047         Payments of travel or entertainment expenses for any federal, state, or local public officials       5,030,530.       3,987,173.       887,724.       155         Netrest       92       92,013,734.       158,556,653.       38,043,352.       413         Insurance       2,121,714.       838,085.       1,280,480.       3         Other expenses. Itemize expenses on toovered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 254e. If line 24e amount exceeds 10% of line 254e. If line 24e amount exceeds 10% of line 254e. If line 24e amount exceeds 10% of line 254e.       2       121,714.       838,085.       1,280,480. <td></td> <td></td> <td></td> <td></td> <td>1,783,49</td>					1,783,49
column (A), amount, list line 11g expenses on Sch O.)       247,551,071.       191,689,809.       38,576,795.       17,284         Advertising and promotion       3,657,651.       2,718,937.       40,927.       897         Office expenses       45,929,045.       31,822,962.       8,833,598.       5,272         Information technology       63,786,931.       30,420,901.       32,094,936.       1,271         Royalties       825,245.       260,093.       552.       564         Occupancy       95,023,719.       85,662,436.       8,129,990.       1,231         Travel       15,523,440.       13,833,073.       643,123.       1,047         Payments of travel or entertainment expenses for any federal, state, or local public officials       5,030,530.       3,987,173.       887,724.       155         Interest       8,826,353.       841,657.       7,767,972.       216         Payments to affiliates       197,013,734.       158,556,653.       38,043,352.       413         Insurance       2,121,714.       838,085.       1,280,480.       3         Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25c, column (A),       2,121,714.       838,085.       1,280,480.       3		4,515,155.		4,515,155.	
Advertising and promotion       3,657,651.       2,718,937.       40,927.       897         Office expenses       45,929,045.       31,822,962.       8,833,598.       5,272         Information technology       63,786,931.       30,420,901.       32,094,936.       1,271         Royalties       825,245.       260,093.       552.       564         Occupancy       95,023,719.       85,662,436.       8,129,990.       1,231         Travel       15,523,440.       13,833,073.       643,123.       1,047         Payments of travel or entertainment expenses for any federal, state, or local public officials       5,030,530.       3,987,173.       887,724.       155         Payments to affiliates       917,013,734.       158,556,653.       38,043,352.       413         Insurance       197,013,734.       158,556,653.       38,043,352.       413         Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),       197,013,734.       158,556,653.       38,043,352.       413					
Office expenses       45,929,045.       31,822,962.       8,833,598.       5,272         Information technology       63,786,931.       30,420,901.       32,094,936.       1,271         Royalties       825,245.       260,093.       552.       564         Occupancy       95,023,719.       85,662,436.       8,129,990.       1,231         Travel       15,523,440.       13,833,073.       643,123.       1,047         Payments of travel or entertainment expenses for any federal, state, or local public officials       5,030,530.       3,987,173.       887,724.       155         Interest       8,826,353.       841,657.       7,767,972.       216         Payments to affiliates       197,013,734.       158,556,653.       38,043,352.       413         Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),       197,013,734.       158,556,653.       38,043,352.       413	· · · · · · · · · · · · · · · · · · ·				17,284,46
Information technology       63,786,931.       30,420,901.       32,094,936.       1,271         Royalties       825,245.       260,093.       552.       564         Occupancy       95,023,719.       85,662,436.       8,129,990.       1,231         Travel       15,523,440.       13,833,073.       643,123.       1,047         Payments of travel or entertainment expenses for any federal, state, or local public officials       5,030,530.       3,987,173.       887,724.       155         Interest       8,826,353.       841,657.       7,767,972.       216         Payments to affiliates       197,013,734.       158,556,653.       38,043,352.       413         Other expenses. Itemize expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),       197,013,734.       158,556,653.       38,043,352.       413	-				897,78
Royalties       825,245.       260,093.       552.       564         Occupancy       95,023,719.       85,662,436.       8,129,990.       1,231         Travel       15,523,440.       13,833,073.       643,123.       1,047         Payments of travel or entertainment expenses for any federal, state, or local public officials       6       6       6       6         Conferences, conventions, and meetings       5,030,530.       3,987,173.       887,724.       155         Interest       8,826,353.       841,657.       7,767,972.       216         Payments to affiliates       197,013,734.       158,556,653.       38,043,352.       413         Insurance       2,121,714.       838,085.       1,280,480.       3         Other expenses. Itemize expenses on tocovered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),       2,121,714.       838,085.       1,280,480.       3					5,272,48
Occupancy       95,023,719.       85,662,436.       8,129,990.       1,231         Travel       15,523,440.       13,833,073.       643,123.       1,047         Payments of travel or entertainment expenses for any federal, state, or local public officials				, ,	1,271,09
Travel       15,523,440.       13,833,073.       643,123.       1,047         Payments of travel or entertainment expenses for any federal, state, or local public officials       5,030,530.       3,987,173.       887,724.       155         Conferences, conventions, and meetings       5,030,530.       3,987,173.       887,724.       155         Interest       8,826,353.       841,657.       7,767,972.       216         Payments to affiliates       197,013,734.       158,556,653.       38,043,352.       413         Insurance       2,121,714.       838,085.       1,280,480.       3         Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),       2,121,714.       838,085.       1,280,480.       3		,			564,60
Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings       5,030,530.       3,987,173.       887,724.       155         Interest       8,826,353.       841,657.       7,767,972.       216         Payments to affiliates       197,013,734.       158,556,653.       38,043,352.       413         Insurance       2,121,714.       838,085.       1,280,480.       3         Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),       197,013,734.       158,556,653.       1,280,480.       3	Occupancy				1,231,29
for any federal, state, or local public officials		15,523,440.	13,833,073.	643,123.	1,047,24
Conferences, conventions, and meetings       5,030,530.       3,987,173.       887,724.       155         Interest       8,826,353.       841,657.       7,767,972.       216         Payments to affiliates       197,013,734.       158,556,653.       38,043,352.       413         Insurance       2,121,714.       838,085.       1,280,480.       3         Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),       1       1       1       1       1       1       1       1       1       1       1       1       3       3					
Interest       8,826,353.       841,657.       7,767,972.       216         Payments to affiliates       197,013,734.       158,556,653.       38,043,352.       413         Insurance       2,121,714.       838,085.       1,280,480.       3         Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),       1       1       1       1       1       1       1       1       1       1       1       3		5 000 500	2 005 452	005 504	455.60
Payments to affiliates       197,013,734.       158,556,653.       38,043,352.       413         Depreciation, depletion, and amortization       197,013,734.       158,556,653.       38,043,352.       413         Insurance       2,121,714.       838,085.       1,280,480.       3         Other expenses. Itemize expenses on to covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),       1000000000000000000000000000000000000			, ,	,	155,63
Depreciation, depletion, and amortization197,013,734.158,556,653.38,043,352.413Insurance2,121,714.838,085.1,280,480.3Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),197,013,734.158,556,653.38,043,352.413	F	8,826,353.	841,657.	7,767,972.	216,72
Insurance       2,121,714.       838,085.       1,280,480.       3         Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),       1       <		100 012 024		20.042.250	412 50
Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),	. [				413,72
above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),		2,121,/14.	838,085.	1,280,480.	3,14
	above. (List miscellaneous expenses on line 24e. If				
	PROGRAM PRODUCTION	61,231,961.	56,266,252.		4,406,37
b RESEARCH/SUBCONTRACT 34,168,519. 34,172,97335,033. 30	RESEARCH/SUBCONTRACT	34,168,519.	34,172,973.	-35,033.	30,57
		9,590,175.	8,363,607.	1,100,060.	126,50
d <u>UNRELATED BUS. INC. TAX</u> 599,262. 599,262.	UNRELATED BUS. INC. TAX			599,262.	
	All other expenses			-1,242,937.	28,12
		1,601,797,046.	1,210,067,298.	315,077,086.	76,652,66
Joint costs. Complete this line only if the organization	Joint costs. Complete this line only if the organization				
reported in column (B) joint costs from a combined					
educational campaign and fundraising solicitation.					

232010 12-13-22

Check here

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if following SOP 98-2 (ASC 958-720)

2022.06000 SMITHSONIAN INSTITUTION 1776QA\_1

Form 990 (2022)

_				SPECTION CO		ED	0206027 - 44
	1 990 (2 rt X	2022) SMITHSONIAN INSTITUT Balance Sheet	LON			53-	0206027 Page <b>11</b>
Far				line in this Doub M			
		Check if Schedule O contains a response or not	e to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			845,280,151.	1	861,134,110.
	2	Savings and temporary cash investments			158,647,491.	2	353,902,694.
	3	Pledges and grants receivable, net			344,702,780.	3	290,649,838.
	4	Accounts receivable, net			15,383,181.	4	15,291,418.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subs	antial co	ontributor, or 35%			
		controlled entity or family member of any of the				5	
	6	Loans and other receivables from other disquali	fied pers				
		under section 4958(f)(1)), and persons described		,		6	
s	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			16,504,520.	8	15,619,432.
As	9				7,863,619.	9	8,701,099.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	6,091,631,290.			
	b	Less: accumulated depreciation		3,129,234,192.	2,836,265,466.	10c	2,962,397,098.
	11	Investments - publicly traded securities			202,975.	11	1,426,646.
	12	Investments - other securities. See Part IV, line			2,626,748,576.	12	2,607,781,410.
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets			91,375,098.	14	70,336,620.
	15	Other assets. See Part IV, line 11			10,086,159.	15	11,648,481.
	16	Total assets. Add lines 1 through 15 (must equ			6,953,060,016.	16	7,198,888,846.
	17	Accounts payable and accrued expenses		277,383,954.	17	270,834,736.	
	18	Grants payable			18		
	19	Deferred revenue			744,897,810.	19	750,396,555.
	20	Tax-exempt bond liabilities			90,814,091.	20	88,810,231.
	21	Escrow or custodial account liability. Complete				21	
ŝ	22	Loans and other payables to any current or form	ner office	r, director,			
litie		trustee, key employee, creator or founder, subst	antial co	ontributor, or 35%			
Liabilities		controlled entity or family member of any of the	se persoi	ns		22	
	23	Secured mortgages and notes payable to unrela	ated thirc	l parties	383,570,854.	23	344,446,027.
	24	Unsecured notes and loans payable to unrelated	d third pa	arties		24	
	25	Other liabilities (including federal income tax, pa	yables to	o related third			
		parties, and other liabilities not included on lines	s <b>1</b> 7-24).	Complete Part X			
		of Schedule D			46,222,353.	25	54,654,319.
	26	Total liabilities. Add lines 17 through 25			1,542,889,062.	26	1,509,141,868.
		Organizations that follow FASB ASC 958, che	ck here	X			
ces		and complete lines 27, 28, 32, and 33.					
lan	27			······	2,986,871,964.	27	3,066,495,491.
Ba	28	Net assets with donor restrictions		L	2,423,298,990.	28	2,623,251,487.
pun		Organizations that do not follow FASB ASC 9	58, chec	k here			
Γ		and complete lines 29 through 33.					
s S	29	Capital stock or trust principal, or current funds				29	
sse	30	Paid-in or capital surplus, or land, building, or ed				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in				31	
Ne	32	Total net assets or fund balances			5,410,170,954.	32	5,689,746,978.
	33	Total liabilities and net assets/fund balances .			6,953,060,016.	33	7,198,888,846. Form <b>990</b> (2022)

Form **990** (2022)

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Form 990 (2022)       SMITHSONIAN INSTITUTION       53-0206027       Page 12         Part XI       Reconciliation of Net Assets       X         Check if Schedule O contains a response or note to any line in this Part XI       X         1       Total revenue (must equal Part X, Ill, column (A), line 12)       1       1, 876, 542, 577.         2       Total revenue (sex equal Part X, Column (A), line 25)       2       1, 601, 797, 046.         3       274, 745, 531.       4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       5, 410, 170, 954.         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       6       -3, 957, 223.         6       Donated services and use of facilities       6       -3, 957, 223.       6         7       Investment expenses       7       -       -       8       8, 647, 618.         9       Other changes in net assets or fund balances (explain on Schedule O)       9       140, 104.       100       5, 689, 746. 978.         10       S, 689, 746. 978.       7       -       -       -       -       -         10       S, 689, 746. 978.       X       -       -       -       -       -       -       -		FODEIC INSFECTION COFT				
Check if Schedule O contains a response or note to any line in this Part XI       X         1       Total revenue (must equal Part VIII, column (A), line 12)       1       1,876,542,577.         2       Total expenses (must equal Part X, column (A), line 25)       2       1,601,797,046.         3       274,745,531.       4       4       5,410,170,954.         4       tassets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       5,410,170,954.         5       Net unrealized gains (losses) on investments       5       -3,957,229.         6       Donated services and use of facilities       6         7       Investment expenses       8       8,647,618.         9       Other changes in net assets or fund balances (explain on Schedule O)       9       140,104.         10       Net assets or fund balances (explain on Schedule O)       9       140,104.         10       Net assets or fund balances (explain on Schedule O)       9       140,104.         11       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other         11       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       2a       X         1       Accounting method used to prepare the F			53-02	06027	Pa	<sub>ge</sub> 12
1       Total revenue (must equal Part VIII, column (A), line 12)       1       1, 876, 542, 577.         2       Total expenses (must equal Part IX, column (A), line 25)       2       1, 601, 797, 046.         3       274, 745, 531.       4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       5, 410, 170, 954.         5       Donated services and use of facilities       6	Pa	rt XI Reconciliation of Net Assets				
2       Total expenses (must equal Part IX, column (A), line 25)       2       1, 601, 797, 046.         3       Revenue less expenses. Subtract line 2 from line 1       3       274, 745, 531.         4       Het assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       5, 410, 170, 954.         5       Donated services and use of facilities       6       6         7       1       1       1         9       Other changes in net assets or fund balances (explain on Schedule O)       9       140, 104.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       1       5, 689, 746, 978.         Part XII       Financial Statements and Reporting       X       X         Check if Schedule O contains a response or note to any line in this Part XII       X       Yes       No         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other       2       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, or both:       Separate basis       Consolidated basis       Both consolidated and separate basis, consolidated basis, or both:       2       X       2       X         If "Yes," check a box below to indicate whether th		Check if Schedule O contains a response or note to any line in this Part XI				X
2       Total expenses (must equal Part IX, column (A), line 25)       2       1, 601, 797, 046.         3       Revenue less expenses. Subtract line 2 from line 1       3       274, 745, 531.         4       Het assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       5, 410, 170, 954.         5       Donated services and use of facilities       6       6         7       1       1       1         9       Other changes in net assets or fund balances (explain on Schedule O)       9       140, 104.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       1       5, 689, 746, 978.         Part XII       Financial Statements and Reporting       X       X         Check if Schedule O contains a response or note to any line in this Part XII       X       Yes       No         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other       2       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, or both:       Separate basis       Consolidated basis       Both consolidated and separate basis, consolidated basis, or both:       2       X       2       X         If "Yes," check a box below to indicate whether th						
3       Revenue less expenses. Subtract line 2 from line 1       3       274,745,531.         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       5,410,170,954.         5       0.0 nated services and use of facilities       5       -3,957,229.         6       7       7         7       8       Prior period adjustments       8       8,647,618.         9       Other changes in net assets or fund balances (explain on Schedule O)       9       140,104.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       10       5,689,746,978.         Part XII       Financial Statements and Reporting       X       X         11       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other         11       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other       Yes       No         12       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other       Za       X         14       the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.       Za       X         14       Separate basis       Consolidated basis	1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,876	,542,	577.
4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       5, 410, 170, 954.         5       Net unrealized gains (losses) on investments       5       -3, 957, 229.         6       0       6         7       1       8       8, 647, 618.         9       0 ther changes in net assets or fund balances (explain on Schedule O)       9       140, 104.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       10       5, 689, 746, 978.         Part XII       Financial Statements and Reporting       X       X       Yes         11       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other, " explain on Schedule O.         2a       X       Yes       No       X       Yes       No         12       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other, " explain on Schedule O.         2a       Were the organization's financial statements compiled or reviewed by an independent accountant?       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis.       Dosolidated basis, or both:       Separate basis       Consolidated basis       Both consolidated and se	2	Total expenses (must equal Part IX, column (A), line 25)	2	1,601	,797,	046.
5       Net unrealized gains (losses) on investments       5       -3,957,229.         6       6       7         7       7       7         8       Prior period adjustments       8       8,647,618.         9       140,104.       9       140,104.         10       Net assets or fund balances (explain on Schedule O)       9       140,104.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       5,689,746,978.         Check if Schedule O contains a response or note to any line in this Part XII       X         Check if Schedule O contains a response or note to any line in this Part XII       X         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       X         1       Accounting method used to below to indicate whether the financial statements compiled or reviewed on a separate basis, consolidated basis, or both:       Separate basis, consolidated basis, or both:       Separate basis	3	Revenue less expenses. Subtract line 2 from line 1	3	274	,745,	531.
6       Donated services and use of facilities       6         7       1         8       Prior period adjustments       8         9       Other changes in net assets or fund balances (explain on Schedule O)       9       140,104.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)       9       140,104.         10       S, 689,746,978.       10       5, 689,746,978.         Part XII       Financial Statements and Reporting       X         Check if Schedule O contains a response or note to any line in this Part XII       X         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other         If the organization's financial statements compiled or reviewed by an independent accountant?       Yes       No         2a       X       X       2a       X         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:       2b       X         Separate basis       Consolidated basis       Both consolidated and separate basis.       2b       X         If 'Yes,' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection process during th	4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,410	,170,	954.
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)   10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))   10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))   10 5, 689, 746, 978.   Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O is a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O is a consolidated basis, or both: Check is consolidated basis, or both: 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: Check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Check a box below to indicate	5	Net unrealized gains (losses) on investments	5	- 3	,957,	229.
7       Investment expenses       7         8       Prior period adjustments       9         9       Other changes in net assets or fund balances (explain on Schedule O)       9       140,104.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)       9       140,104.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)       10       5,689,746,978.         Part XII       Financial Statements and Reporting       X       X       X         Check if Schedule O contains a response or note to any line in this Part XII       X       X       X         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other       Yes       No         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other       2a       X         If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.       2a       X       I         2       Were the organization's financial statements compiled or reviewed by an independent accountant?       2a       X       I         1       Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis,	6		6			
8       Prior period adjustments       8       8, 647, 618.         9       Other changes in net assets or fund balances (explain on Schedule O)       9       140, 104.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       10       5, 689, 746, 978.         Part XII       Financial Statements and Reporting       X       X       X         Check if Schedule O contains a response or note to any line in this Part XII       X       X       X         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       Yes       No         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       Yes       No         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other	7		7			
9       Other changes in net assets or fund balances (explain on Schedule O)       9       140,104.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       5,689,746,978.         Part XII       Financial Statements and Reporting       X         Check if Schedule O contains a response or note to any line in this Part XII       X         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       Yes       No         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       Za       X         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       Zb       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:       Zb       X         Separate basis       Consolidated basis       Both consolidated and separate basis       Zb       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:       Zb       X         Separate basis       Consolid	8		8	8	,647,	618.
column (B)       10       5,689,746,978.         Part XII       Financial Statements and Reporting       X         Check if Schedule O contains a response or note to any line in this Part XII       X         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       X         2a       X       X       Za       X         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:       2b       X         Separate basis       Consolidated basis       Both consolidated and separate basis, consolidated basis, or both:       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:       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:       2b       X         Separate basis       Consolidated basis       Both consolidated and separate basis       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:       2c	9		9		140,	104.
Part XII       Financial Statements and Reporting         Check if Schedule O contains a response or note to any line in this Part XII       X         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       Yes       No         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       Z       Yes       No         2a       X       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:       2a       X       Z       X         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       Both consolidated and separate basis       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:       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:       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:       2b       X         If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
Check if Schedule O contains a response or note to any line in this Part XII X   1 Accounting method used to prepare the Form 990: Cash X   If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a   2a X   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: 2a   Separate basis Consolidated basis Both consolidated and separate basis   b Were the organization's financial statements audited by an independent accountant?   If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis   b Were the organization's financial statements audited by an independent accountant?   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:   Separate basis Consolidated basis   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:   Separate basis Consolidated basis   If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?   If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.   3a X   If the organization duarde award, was the organization required to undergo an audi			10	5,689	,746,	978.
I       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       Yes       No         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       Vere       No         2a       Were the organization's financial statements compiled or reviewed by an independent accountant?       If       Yes       Yes       No         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       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis       2b       X       Image: Consolidated basis       Image: Consolidated basis <td< td=""><td>Pa</td><td>rt XII Financial Statements and Reporting</td><td></td><td></td><td></td><td></td></td<>	Pa	rt XII Financial Statements and Reporting				
1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other		Check if Schedule O contains a response or note to any line in this Part XII				X
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.       2a       X         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:       2a       X         Separate basis       Consolidated basis       Both consolidated and separate basis       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis       2b       X         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:       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:       2b       X         Separate basis       Consolidated basis       X       0       0       0         If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?       2c       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 organizat					Yes	No
2a       Were the organization's financial statements compiled or reviewed by an independent accountant?       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:       Image: Consolidated basis,	1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
Image: Separate basis       Consolidated basis       Both consolidated and separate basis         Image: Separate basis       Consolidated basis       Both consolidated and separate basis         Image: Separate basis       Consolidated basis       Both consolidated and separate basis         Image: Separate basis       Consolidated basis       Both consolidated and separate basis         Image: Separate basis       Consolidated basis       Both consolidated and separate basis         Image: Separate basis       Consolidated basis       Both consolidated and separate basis         Image: Separate basis       Consolidated basis       X         Image: Separate basis       Consolidated basis       X         Separate basis       Consolidated basis       X         Both consolidated and separate basis       Image: Separate basis       Image: Separate basis         Image: Separate basis       Consolidated basis       X         Both consolidated and separate basis       Image: Separate basis       Image: Separate basis         Image: Separate basis       Consolidated basis       X       Both consolidated and separate basis         Image: Separate basis       Consolidated basis       X       Both consolidated and separate basis         Image: Separate basis       Consolidated basis       X       Both consolidated and separate basis		If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
separate basis, consolidated basis, or both:   Separate basis   Were the organization's financial statements audited by an independent accountant?   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:   Separate basis   Consolidated basis   X   Both consolidated and separate basis   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:   Separate basis   Consolidated basis   X   Both consolidated and separate basis   c   If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?   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 Uniform Guidance, 2 C.F.R. Part 200, Subpart F?   b   If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
<ul> <li>Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Were the organization's financial statements audited by an independent accountant?</li> <li>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:</li> <li>Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</li> <li>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.</li> <li>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?</li> <li>If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit</li> </ul>		If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
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:       2b       X         Separate basis       Consolidated basis       X       Image: Separate basis		separate basis, consolidated basis, or both:				
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:       Image: consolid		Separate basis Consolidated basis Both consolidated and separate basis				
consolidated basis, or both:       Separate basis       Consolidated basis       X       Both consolidated and separate basis       Image: Consolidated basis       Consolidated basis       X       Both consolidated and separate basis       Image: Consolidated basis       Consolidated basis       X       Emage: Consolidated basis       Consolidated basis       X       Emage: Consolidated basis       Emage: Consolidated basis       X       Emage: Consolidated basis       Emage: Consolidated basis       X       Emage: Consolidated basis	b	Were the organization's financial statements audited by an independent accountant?		2b	х	
<ul> <li>Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</li> <li>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.</li> <li>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?</li> <li>If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit</li> </ul>		If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
c       If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?       2c       X         If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.       Image: Comparization changed either its oversight process or selection process during the tax year, explain on Schedule O.       Image: Comparization changed either its oversight process or selection process during the tax year, explain on Schedule O.       Image: Comparization 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 Uniform Guidance, 2 C.F.R. Part 200, Subpart F?       3a       X         b       If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit       Image: Comparized audit       Image: Comparized audit		consolidated basis, or both:				
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       a       a       X         b       If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit       If the organization did not undergo the required audit       If the organization did not undergo the required audit		Separate basis Consolidated basis X Both consolidated and separate basis				
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 Uniform Guidance, 2 C.F.R. Part 200, Subpart F?         b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?       3a X         b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit       Image: Comparization did not undergo the required audit		review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
Uniform Guidance, 2 C.F.R. Part 200, Subpart F?       3a       X         b       If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit       Image: Comparized audit		If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dule O.			
Uniform Guidance, 2 C.F.R. Part 200, Subpart F?       3a       X         b       If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit       Image: Comparized audit	3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				1
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit				3a	Х	
or audits, explain why on Schedule O and describe any steps taken to undergo such audits	b		ed audit			_
		or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	

Form **990** (2022)

	** PU	BLIC INSPECT	ON COPY **		
SCHEDULE A	Public Ch	arity Status an	d Public Support		OMB No. 1545-0047
(Form 990)			(c)(3) organization or a section	1	2022
Department of the Treasury		4947(a)(1) nonexempt cha Attach to Form 990 or Fo			Open to Public
Internal Revenue Service		ov/Form990 for instruction	s and the latest information.		Inspection
Name of the organizat				Employer	identification number
Part I Reason	SMITHSONIAN INSTITU		amplata this part \ Cas instruction		53-0206027
				JIS.	
Ē.	a private foundation because it is				
	onvention of churches, or associa scribed in section 170(b)(1)(A)(ii				
	a cooperative hospital service o				
	search organization operated in	*		A)(iii) Enter	the hospital's name
city, and sta					the hospital o hame,
	ion operated for the benefit of a	college or university owned	or operated by a governmental	unit describe	ed in
•	(b)(1)(A)(iv). (Complete Part II.)	0 ,	. , , ,		
	ate, or local government or gover	mmental unit described in	section 170(b)(1)(A)(v).		
7 X An organizat	ion that normally receives a subs	stantial part of its support fr	om a governmental unit or from	the general p	oublic described in
section 170	(b)(1)(A)(vi). (Complete Part II.)				
8 🗌 A communit	y trust described in section 170	(b)(1)(A)(vi). (Complete Parl	II.)		
9 📃 An agricultu	ral research organization describ	ed in section 170(b)(1)(A)(i	x) operated in conjunction with	a land-grant	college
or university	or a non-land-grant college of ag	riculture (see instructions).	Enter the name, city, and state o	of the college	or
university: _					
-	ion that normally receives (1) mo			-	•
	ated to its exempt functions, sub				
	unrelated business taxable incor	ne (less section 511 tax) fro	m businesses acquired by the c	rganization a	fter June 30, 1975.
	509(a)(2). (Complete Part III.)				
	ion organized and operated excl	•	• • • • • • • • • • • • • • • • • • • •		
-	ion organized and operated excl	•		-	
-	y supported organizations descriptions the type				neck the box on
	ough 12d that describes the type		-	-	sivina
	supporting organization operated rted organization(s) the power to		• • • • •		
	on. You must complete Part IV,	• • • •			ipporting
Ē Š	supporting organization supervis		ion with its supported organizat	ion(s) by hay	ina
	management of the supporting c				•
	on(s). You must complete Part I	-		uge the capp	
	nctionally integrated. A suppor		n connection with, and function	ally integrate	d with,
	ted organization(s) (see instructio			, ,	,
d 🗌 Type III no	on-functionally integrated. A su	porting organization oper	ated in connection with its supp	orted organiz	ation(s)
that is not	functionally integrated. The orga	nization generally must sat	sfy a distribution requirement ar	nd an attentiv	veness
requireme	nt (see instructions). You must o	complete Part IV, Sections	A and D, and Part V.		
e 🗌 Check this	box if the organization received	a written determination from	n the IRS that it is a Type I, Typ	e II, Type III	
	y integrated, or Type III non-func	tionally integrated supportir	ng organization.		
f Enter the number	of supported organizations				
	ving information about the suppo	<b>0</b>	(iv) is the organization listed	-f	
(i) Name of supp	ported (ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the organization listed in your governing document? (v) Amount	of monetary	(vi) Amount of other

organization	(described on lines 1-10 above (see instructions))	in your governi Yes	ng document? No	support (see instructions)	support (see instructions)
Total					

	A (Form 990) 2022
Part II	Support Sch

SMITHSONIAN INSTITUTION

53-0206027 F

Page 2

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	<b>(d)</b> 2021	(e) 2022	<b>(f)</b> Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1292933360.	1308610079.	1527783787.	1440330179.	1639379712.	7209037117.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1292933360.	1308610079.	1527783787.	1440330179.	1639379712.	7209037117.
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)						47,878,168.
6	Public support. Subtract line 5 from line 4.						7161158949.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	1292933360.	1308610079.	1527783787.	1440330179.	1639379712.	7209037117.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	40,511,011.	30,305,042.	23,458,833.	31,893,398.	42,557,942.	168,726,226.
9	Net income from unrelated business		. ,	. ,		,	
-	activities, whether or not the						
	business is regularly carried on	1,108,442.	1,442,506.	861,724.	494,916.	50,222.	3,957,810.
10	Other income. Do not include gain	, ,	, ,	,	,	,	, ,
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	59 614 575.	29,009,345.	15 067 957.	48 833 252.	71 845 329.	224,370,458.
11	<b>Total support.</b> Add lines 7 through 10	, , -	, , -	, , -	, , <u>-</u>		7606091611.
	Gross receipts from related activities,		une)			12	565,421,974.
	First 5 years. If the Form 990 is for th			ourth or fifth tax y		I	,,
10	organization, check this box and <b>stor</b>						
Sec	ction C. Computation of Publi		centage				
	Public support percentage for 2022 (I		-	olumn (f))		14	94.15 %
	Public support percentage from 2021					15	96.67 %
	<b>33 1/3% support test - 2022.</b> If the c						,,,
100	stop here. The organization qualifies						V
h	<b>33 1/3% support test - 2021.</b> If the c		-				·····
~	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances test					nd line 14 is 10% (	
170	and if the organization meets the fact						
	meets the facts-and-circumstances te			-	•	•	
h	10% -facts-and-circumstances test	-	-			7a and line 15 is '	
U	more, and if the organization meets th	-					
	· •						
10	organization meets the facts-and-circu		•				
IÖ	Private foundation. If the organization	T UIU HOL CHECK A L		a, 100, 17a, or 17b	, check this box al	iu see instructions	<u> </u>

Schedule A (Form 990) 2022

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Schedule A (Form 990) 2022 SMITHSONIAN INSTITUTION

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

53-0206027 Page **3** 

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	2 (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 per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and						
3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support		•	-		-	
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
9 Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
<ul> <li>Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on</li> </ul>						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) orgar	nization,
check this box and stop here						
Section C. Computation of Publ	ic Support Per	rcentage				
15 Public support percentage for 2022 (	line 8, column (f), d	livided by line 13,	column (f))		15	%
16 Public support percentage from 2021	Schedule A, Part	III, line 15			16	%
Section D. Computation of Inves	stment Income	e Percentage				
17 Investment income percentage for 2	022 (line 10c, colur	mn (f), divided by	line 13, column (f))		17	%
<b>18</b> Investment income percentage from					18	%
19a 33 1/3% support tests - 2022. If the						ine 17 is not
more than 33 1/3%, check this box a	nd <b>stop here.</b> The	organization qual	lifies as a publicly	supported organiz	ation	
b 33 1/3% support tests - 2021. If the	organization did r	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than 33 1/	3%, and
line 18 is not more than 33 1/3%, che	eck this box and <b>st</b>	op here. The org	anization qualifies	as a publicly supp	orted organiza	ition
20 Private foundation. If the organization	on did not check a	box on line 14, 19	9a, or 19b, check t	his box and see in	structions	
232023 12-09-22					Scheo	dule A (Form 990) 2022
		18	3			

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SMITHSONIAN INSTITUTION

#### Schedule A (Form 990) 2022 SMITH 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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 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).
- 8 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.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 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.)

19

232024 12-09-22

Yes No 1 2 3a 3b 3c 4a 4b 4c 5a 5b <u>5c</u> 6 7 8 9a 9b 9c 10a

| 10b | | Schedule A (Form 990) 2022

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Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described 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, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one more supported organizations have the power to regularly appoint or elect at least a majority of the organization's offic			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)	010,		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one support	ted		
	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,			
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
			V.	N
	Mana a maintin of the experimention is diverticed at the day of the day of the divertice of the divertice.		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	1		
000			Vee	N
4	Did the exercitation provide to each of its supported exercitations, by the last day of the fifth month of the		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	1		
2	organization's governing documents in effect on the date of notification, to the extent not previously provided?			
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 <b>Part VI</b> how			
~	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	2		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	cuons).		

- a \_\_\_\_ 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. $D\epsilon$	Describe in <b>Part VI</b> how you supported a governmental entity (see instruction <u>s).</u>	
---	--	---	--	--

20

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in **Part VI.** 

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.* 232025 12-09-22

3b | | Schedule A (Form 990) 2022

2a

2b

3a

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Yes No

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Sche	dule A (Form 990) 2022 SMITHSONIAN INSTITUTION			53-0206027 Page
	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	ov. 20, 1970 ( <i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	st complete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 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		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
ect	ion 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 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2022

232026 12-09-22

Sche	edule A (Form 990) 2022 SMITHSONIAN INSTIT			53-0206027	Page 7
Par	rt V Type III Non-Functionally Integrated 50	9(a)(3) Supporting Orga	nizations (continued)		
Sect	ion D - Distributions	Current Y	'ear		
1	Amounts paid to supported organizations to accomplish e	xempt purposes	1		
2	Amounts paid to perform activity that directly furthers exer	mpt purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organizations	s <b>3</b>		
4	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required -	provide 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 responsive			
	(provide details in Part VI). See instructions.		8		
9	Distributable amount for 2022 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) Underdistributions Pre-2022	(iii) Distributa Amount for	
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greate	r			
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
b	Excess from 2019				
C	Excess from 2020				
d	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

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Schedule A	(Form 990) 2022	SMITHSONIAN INSTITUTION		53-0206027	Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D, Section D, lines 5, 6, and	, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9 lines 2 and 3; Part IV, Section E, li	ns required by Part II, line 10; Part II, line c, 11a, 11b, and 11c; Part IV, Section B, ines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; 5, and 6. Also complete this part for any a	Ines 1 and 2; Part IV, Section Part V, Section B, line 1e; Pa	n C,
	(See instructions.)				
232028 12-09-2	2		23	Schedule A (Form S	990) 2022

## Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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### Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

# 2022

Employer identification number

SMI	53-0206027				
Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)( <sup>3</sup> ) (enter number) organization				

	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### **Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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 for an *exclusively* set in the set of the parts unless totaling the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an exclusively set of the parts unless totaling \$5,000 or more during the year for an exclusively set of the parts unless total set of the parts unless

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)

Name of organization

Page **2** 

Employer identification number

SMITHSONIAN INSTITUTION

53-0206027

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if a	(see instructions). Use duplicate 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		\$1,156,620,987.	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.)				
(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.) Schedule B (Form 990) (2022)				

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15550731 153541 1776QA

2022.06000 SMITHSONIAN INSTITUTION

1776QA\_1

Schedule B (Form 990) (2022)

Name of organization

Page 3

Employer identification number

SMITHSONIAN INSTITUTION

53-0206027

Part II	<b>t II</b> Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(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		
		\$			
223453 11-15	-22		Schedule B (Form 990) (2022)		

26 2022.06000 SMITHSONIAN INSTITUTION 1776QA\_1

Schedule B (Form 990) (2022)

Page 4

ame of organia	zation		Employer identification number
MITHSONIAN	INSTITUTION		53-0206027
Part III Exc from com	clusively religious, charitable, etc., contribution m any one contributor. Complete columns (a) th	nrough (e) and the following line entra aritable, etc., contributions of <b>\$1,000 or le</b>	tion 501(c)(7), (8), or (10) that total more than \$1,000 for the yea /. For organizations ss for the year. (Enter this info. once.) \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and	1 ZIP + 4	Relationship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
3454 11-15-22		27	Schedule B (Form 990) (20

#### 15550731 153541 1776QA

2022.06000 SMITHSONIAN INSTITUTION 1776QA\_1

SCHEDULE	)
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(Form 990)	
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# \*\* PUBLIC INSPECTION COPY \*\* Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.



Department of the Treasury Internal Revenue Service

#### Name of the organization

SMITHSONIAN INSTITUTION

Employer identification number

53-	0206027	
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Par	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		or Accour	its. Complete if the
		(a) Donor advised funds	<b>(b)</b> Fun	ds and other accounts
1	Total number at end of year	(-)	()	
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advise	ed funds	
-	are the organization's property, subject to the organization's e	-		Yes No
6	Did the organization inform all grantees, donors, and donor ac			
	for charitable purposes and not for the benefit of the donor or		-	
			•	Yes No
Par	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990, F	Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organizatio	n (check all that apply).		
	Preservation of land for public use (for example, recreat	on or education) Preservation of	a historically	important land area
	X Protection of natural habitat	Preservation of	a certified his	storic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form o	of a conserva	tion easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements		2a	1
b				88.25
с	Number of conservation easements on a certified historic stru	cture included in (a)	<u>2c</u>	
d	Number of conservation easements included in (c) acquired at	<b>,</b> , , ,		
	historic structure listed in the National Register			0
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or terminated by the	organization	during the tax
	year0			
4	Number of states where property subject to conservation ease			
5	Does the organization have a written policy regarding the peri-			
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	andling of violations, and enforcing cons	ervation ease	ments during the year
-			• • • • • • • • • • • • • • • • • • • •	
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conservat	ion easement	is during the year
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170/h	n)(4)(B)(i)	
-	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservatio			
	balance sheet, and include, if applicable, the text of the footnot	•		
	organization's accounting for conservation easements.	-		
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Otl	her Simila	r 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	s, not to report in its revenue statement a	nd balance sh	neet works
	of art, historical treasures, or other similar assets held for public	ic exhibition, education, or research in fu	rtherance of p	public
	service, provide in Part XIII the text of the footnote to its finan-	cial statements that describes these item	S.	
b	If the organization elected, as permitted under FASB ASC 958	s, to report in its revenue statement and b	alance sheet	works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	erance of put	olic service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
				\$
2	If the organization received or held works of art, historical trea		gain, provide	)
	the following amounts required to be reported under FASB AS	-		
	Revenue included on Form 990, Part VIII, line 1			\$
		бола <b>Г</b> олина 000		5 Oahadula D (Farm 000) 0000
	For Paperwork Reduction Act Notice, see the Instructions	tor Form 990.		Schedule D (Form 990) 2022
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22.06000	SMITHSONIAN	INSTITUTION	

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**	PUBL	.IC	INSF	PECT	ION	COPY	**
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0.1		N INSTITUTION					53-020	6027	D
	dule D (Form 990) 2022 SMITHSONIAI		t Historical Tre	asures or Ot	hor S	imilar			Page <b>2</b>
3	Using the organization's acquisition, accessi							(continue	ed)
3	collection items (check all that apply):	on, and other record	s, check any of the f	ollowing that that	ve signi	ncant u	56 01 115		
а	X Public exhibition	c	I X Loan or exc	hange program					
b	X Scholarly research	e		nange program					
c	X Preservation for future generations	·							
4	Provide a description of the organization's co	alloctions and ovalai	how those further th	o organization's	ovomnt	DURDOG	o in Dort	VIII	
5	During the year, did the organization solicit o	•		•	•	• •	enran	AIII.	
5	to be sold to raise funds rather than to be ma			-			x	Yes	No
Par	t IV Escrow and Custodial Arran								
	reported an amount on Form 990, Pa		ete in the organizatio		01110	iiii 000,	r art iv,	110 0, 01	
1a	Is the organization an agent, trustee, custodi		iary for contributions	s or other assets	not incl	uded			
14	on Form 990, Part X?							Yes	No
h	If "Yes," explain the arrangement in Part XIII						∟		
D.		and complete the lo	iowing table.					Amount	
•	Beginning balance					1c		7 4110 4110	
						1d			
	Additions during the year								
-	Distributions during the year					1e			
f 2a	Ending balance Did the organization include an amount on F					<b>1</b> f		Yes	No
	If "Yes," explain the arrangement in Part XIII.						∟	_ 165	
Par						<u></u>			
		(a) Current year	(b) Prior year	(c) Two years ba		Three ve	ears back	(e) Four y	ears back
1a	Beginning of year balance	., ,	2,532,513,197.	1,937,754,68	. ,			1,645,2	
	Contributions	168,176,189.				,	6,167.	, ,	00,996.
	Net investment earnings, gains, and losses	33,071,913.	, ,			,	3,159.	,	52,434.
	Grants or scholarships					,	,		
	Other expenditures for facilities								
e		97,227,935.	84,916,966.	79,750,15	7	76 88	5,815.	75 7	89,588.
f	Administrative expenses	2,973,540.	, ,			/	7,370.	,	84,510.
			2,323,063,719.	, ,					,
g	End of year balance Provide the estimated percentage of the curr				·•[-,	,	-,	-,,,-	
2	Board designated or quasi-endowment	41.0000	%	i) heiu as.					
d h	Permanent endowment 27.0000	%	70						
0	Term endowment 32.0000								
U	The percentages on lines 2a, 2b, and 2c sho	· -							
39	Are there endowment funds not in the posse		ation that are held an	nd administered fo	or the				
ou	organization by:							Y	'es No
	(i) Unrelated organizations							3a(i)	X
	(ii) Related organizations							3a(ii)	x
h	If "Yes" on line 3a(ii), are the related organizations							3b	
4	Describe in Part XIII the intended uses of the								
Par	t VI Land, Buildings, and Equipm	ent.							
	Complete if the organization answere		), Part IV, line 11a. S	ee Form 990, Par	t X, line	e 10.			
	Description of property	(a) Cost or c	other (b) Cost	or other (	<b>c)</b> Accı	umulate	d	(d) Book	value
		basis (investr		(other)	, depre	ciation		.,	
1a	Land		32	,818,456.				32,8	18,456.
	Buildings		5,331	,809,850.	2,609	,742,5	59.	2,722,0	67,291.
	Leasehold improvements		138	,958,151.	108	,815,8	810.	30,1	42,341.
	Equipment		328	,846,054.	292	,446,7	/91.	36,3	99,263.
	Other		259	,198,779.	118	,229,0	32.	140,9	69,747.
Total	. Add lines 1a through 1e. (Column (d) must e	aual Form 990. Part	X. column (B). line 10	0c.)				2,962,3	97,098.

Schedule D (Form 990) 2022

#### **PUBLIC INSPECTION COPY \*\*** \*\* SMITHSONIAN INSTITUTION

53-0206027 Page 3

#### Schedule D (Form 990) 2022 Part VII Investments - Other Securities.

Complete if the organization answered "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>(b)</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) SECURITIES-ENDOWMENT CONSOLIDATED	2,421,753,249.	END-OF-YEAR MARKET VALUE
(B) SECURITIES-SHORT-TERM	122,848,431.	END-OF-YEAR MARKET VALUE
(C) SECURITIES-GIFT ANNUITY PROGRAM	22,336,819.	END-OF-YEAR MARKET VALUE
(D) SECURITIES-MID TERM	39,892,635.	END-OF-YEAR MARKET VALUE
(E) SECURITIES-ENDOWMENT US TREAS	950,276.	END-OF-YEAR MARKET VALUE
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	2,607,781,410.	

#### Part VIII Investments - Program Related.

Complete if the organization answered "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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990. Part X. col. (B) line 13.)		

#### 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)	
(8)	
(9)	
otal. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	
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)	ESTIMATED REMEDIATION OBLIGATION	52,971,783.
(3)	ACCTS. PAY-CANCELLED APPROP.	343,537.
(4)	OTHER ACCRUED LIABILITIES	748,172.
(5)	BOND INTEREST PAYABLE	588,876.
(6)	OTHER LIABILITIES	1,951.
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	54,654,319.

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

X

Schedule D (Form 990) 2022

Sche	dule D (Form 990) 2022	SMITHSONIAN INSTITUTION			53-0	0206027	Page 4
Pa	t XI Reconciliation of	of Revenue per Audited Financial State	ements With I	Revenue per Ret	urn.		
	Complete if the orga	nization answered "Yes" on Form 990, Part IV, line	e 12a.				
1	Total revenue, gains, and ot	her support per audited financial statements			1	1,970,	921,936.
2	Amounts included on line 1	but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses	) on investments	2a	-3,957,229.			
b	Donated services and use of	f facilities	2b	8,816,340.			
с	Recoveries of prior year gra	nts	2c				
d	Other (Describe in Part XIII.)			63,460,932.			
е	Add lines 2a through 2d				2e	68,	320,043.
3	Subtract line 2e from line 1				3	1,902,	601,893.
4		990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not in	cluded on Form 990, Part VIII, line 7b	4a	4,515,155.			
b	Other (Describe in Part XIII.)		4b	-30,574,471.			
с					4c	-26,	059,316.
5	Total revenue. Add lines 3 a	and <b>4c.</b> (This must equal Form 990, Part I, line 12.)			5		542,577.
Pa	rt XII Reconciliation of	of Expenses per Audited Financial Sta	tements With	Expenses per R	eturr	า.	
	Complete if the orga	nization answered "Yes" on Form 990, Part IV, line	e 12a.				
1	Total expenses and losses	per audited financial statements			1	1,691,	345,912.
2	Amounts included on line 1	but not on Form 990, Part IX, line 25:					
а	Donated services and use of	f facilities	2a	8,816,340.			
b							
с	Other losses		2c				
d							
е	Add lines 2a through 2d				2e	8,	816,340.
3					3	1,682,	529,572.
4		990, Part IX, line 25, but not on line 1:					
а	Investment expenses not in	cluded on Form 990, Part VIII, line 7b	4a	4,515,155.			
b	Other (Describe in Part XIII.)	· · · · · · · · · · · · · · · · · · ·	4b	-85,247,681.			
с					4c	-80,	732,526.
5	Total expenses. Add lines 3	and <b>4c.</b> (This must equal Form 990. Part I. line 18			5	1,601,	797,046.
Pa	rt XIII Supplemental II						

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

31

PART II, LINE 3:

SMITHSONIAN INSTITUTION DID NOT MODIFY, TRANSFER, RELEASE, EXTINGUISH OR

TERMINATE ANY CONSERVATION EASEMENTS DURING THE YEAR.

PART II, LINE 6:

THE SMITHSONIAN ENVIRONMENTAL RESEARCH CENTER (SERC) IS LOCATED ON 2,650

ACRES OF LAND ON THE CHESAPEAKE BAY IN SOUTHERN MARYLAND SPANNING

FORESTS, WETLANDS, MARSHES, AND 12 MILES OF PROTECTED SHORELINE. THE SITE

SERVES AS A NATURAL LABORATORY FOR LONG-TERM AND CUTTING-EDGE ECOLOGICAL

RESEARCH. THE SMITHSONIAN HAS A CONSERVATION EASEMENT ASSOCIATED WITH

PROPERTY THAT IS IMMEDIATELY ADJACENT TO SERC LAND OWNED BY THE

INSTITUTION. FACILITIES AND SECURITY STAFF VISIT THE AREA REGULARLY AND

ARE THUS ABLE TO REPORT ANY UNUSUAL ACTIVITY ON THE LAND SUBJECT TO THE

53-0206027 Page **5** 

#### Part XIII Supplemental Information (continued)

EASEMENT. THE ORGANIZATION DOES NOT SEPARATELY TRACK THE HOURS AND

EXPENSES ASSOCIATED WITH MONITORING THE PROPERTY RELATED TO THE EASEMENT.

PART II, LINE 9:

THE SMITHSONIAN INSTITUTION'S CONSERVATION EASEMENT DOES NOT APPEAR IN THE

INSTITUTION'S AUDITED FINANCIAL STATEMENTS.

PART III, LINE 1A:

IN CONFORMITY WITH THE PRACTICE GENERALLY FOLLOWED BY MUSEUMS, NO VALUE IS

ASSIGNED TO THE COLLECTIONS IN THE STATEMENT OF FINANCIAL POSITION.

PURCHASES OF COLLECTION ITEMS ARE RECOGNIZED AS REDUCTIONS IN NET ASSETS

WITHOUT DONOR RESTRICTION IN THE PERIOD OF ACQUISITION.

PROCEEDS FROM DEACCESSIONS OR INSURANCE RECOVERIES FOR LOST OR DESTROYED

COLLECTION ITEMS ARE RECOGNIZED AS INCREASES IN THE APPROPRIATE NET ASSET

CLASS AND ARE DESIGNATED FOR FUTURE COLLECTION ACQUISITIONS, CARE, AND

MAINTENANCE.

PART III, LINE 4:

THE ACQUISITION, PRESERVATION, MANAGEMENT, AND STUDY OF COLLECTIONS ARE

FUNDAMENTAL TO THE SMITHSONIAN'S MISSION TO INCREASE AND DIFFUSE KNOWLEDGE

AND HAVE BEEN THE FOUNDATION UPON WHICH IT RESTS.

SMITHSONIAN COLLECTIONS ARE A NATIONAL AND GLOBAL RESOURCE ACCESSED EACH

YEAR BY MILLIONS OF VISITORS AND RESEARCHERS WHO USE TRADITIONAL METHODS

AND CUTTING-EDGE TECHNOLOGIES TO EXPLORE SUBJECTS FROM AERONAUTICS TO

ZOOLOGY.

Schedule D (Form 990) 2022

#### Part XIII Supplemental Information (continued)

THROUGH ITS COLLECTIONS, THE SMITHSONIAN PRESENTS THE ASTONISHING RECORD

OF AMERICAN AND INTERNATIONAL ARTISTIC, HISTORICAL, CULTURAL, AND

SCIENTIFIC ACHIEVEMENT, WITH A SCOPE AND DEPTH NO OTHER INSTITUTION IN THE

WORLD CAN MATCH.

SMITHSONIAN COLLECTIONS CONTRIBUTE TO POPULATION RECOVERY OF ENDANGERED

SPECIES, ADVANCES IN REPRODUCTIVE BIOLOGY, GENOME RESOURCE BANKING,

MEDICAL RESEARCH, FORENSIC ANALYSIS, BIO-SECURITY, AND CONSERVATION POLICY

WORLDWIDE.

ASSEMBLED OVER MORE THAN 175 YEARS, THE COLLECTIONS ARE CENTRAL TO THE

CORE ACTIVITIES AND TO THE VITALITY AND SIGNIFICANCE OF THE SMITHSONIAN.

PART V, LINE 4:

THE ENDOWMENT INCLUDES APPROXIMATELY 700 INDIVIDUAL ENDOWMENT FUNDS. THE

ENDOWMENT PROVIDES STABLE FINANCIAL SUPPORT FOR SCHOLARSHIP, RESEARCH

ACTIVITIES, OTHER PROGRAMS, ACQUISITIONS OF COLLECTIONS AND OTHER

INSTITUTIONAL ACTIVITIES.

IT PLAYS A CRITICAL ROLE IN ENABLING THE INSTITUTION TO ACHIEVE ITS

MISSION - "THE INCREASE AND DIFFUSION OF KNOWLEDGE."

THE ENDOWMENT INCLUDES BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS

DESIGNATED BY THE BOARD OF REGENTS TO FUNCTION AS ENDOWMENTS.

CLASSIFICATION AND REPORTING OF NET ASSETS ASSOCIATED WITH THE ENDOWMENT

REFLECT DONOR-IMPOSED RESTRICTIONS.

PART X, LINE 2:

Schedule D (Form 990) 2022 SMITHSONIAN INSTITUTION

FIN 48 (ASC 740) FOOTNOTE

Part XIII Supplemental Information (continued)

THE SMITHSONIAN ACCOUNTS FOR UNCERTAIN TAX POSITIONS, WHEN APPLICABLE. THE

TAX YEARS THAT REMAIN SUBJECT TO EXAMINATION BY THE MAJOR TAX

JURISDICTIONS UNDER THE STATUTE ARE FROM THE YEAR 2019 AND FORWARD.

54,673,210. 144,300. -4,196. 8,647,618. 63,460,932.	
-4,196. 8,647,618.	
8,647,618.	
63,460,932.	
-3,099,251.	
-27,475,220.	
-30,574,471.	
-27,475,220.	
-54,673,210.	
-3,099,251.	
-85,247,681.	
-	-27,475,220. -30,574,471. -27,475,220. -54,673,210. -3,099,251.

Schedule D (Form 990) 2022

	k	** PUBLI	C INSPECTION COPY	**		
SCHEDULE F			ivities Outside the Un		ites –	OMB No. 1545-0047
(Form 990)	Complete if the	organization a	nswered "Yes" on Form 990, Part IV,	line 14b, 15, o	or 16.	2022
Department of the Treasury Internal Revenue Service	Go to w	ww.irs.aov/Form	Attach to Form 990. 1990 for instructions and the latest in	nformation.	O	pen to Public
Name of the organization		in in it. govin on i			Employer ide	ntification number
SMITHSONIAN INSTITUT	TON				53-020602	7
		ctivities Out	side the United States. Comple	ete if the organ		
 Form 990, Par						
-	•		ds to substantiate the amount of its gra			<b>v</b> v
the grantees' eligibilit	y for the grants or a	issistance, and t	he selection criteria used to award the	grants or assis	stance?	X Yes No
2 For grantmakers. De United States.	escribe in Part V the	organization's	procedures for monitoring the use of its	grants and ot	her assistance o	outside the
			an be duplicated if additional space is no		with lists d in (d)	(6) Total
(a) Region	(b) Number of offices	employees, agents, and	(d) Activities conducted in the region (by type) (such as, fundraising, pro-	is a pro	vity listed in (d) gram service,	(f) Total expenditures for and
	in the region	independent contractors in the region	gram services, investments, grants to recipients located in the region)		e specific type (s) in the region	investments in the region
SOUTH ASIA	0	0	ACADEMIC APPOINTMENT STIPENDS			76,312.
						,0,312.
SUB-SAHARAN AFRICA	0	0	ACADEMIC APPOINTMENT STIPENDS			94 501
SUB-SAHARAN AFRICA	0	0	SITPENDS			94,501.
			ACADEMIC APPOINTMENT			
NORTH AMERICA	0	0	STIPENDS			246,069.
EAST ASIA AND THE			ACADEMIC APPOINTMENT			
PACIFIC	0	0	STIPENDS			327,929.
RUSSIA AND			ACADEMIC APPOINTMENT			
NEIGHBORING STATES	0	0	STIPENDS			56,767.
EUROPE (INCLUDING			ACADEMIC APPOINTMENT			
ICELAND & GREENLAND)	0	0	STIPENDS			616,534.
CENTRAL AMERICA AND			ACADEMIC APPOINTMENT			
THE CARIBBEAN	0	0	STIPENDS			864,476.
			ACADEMIC APPOINTMENT			

SOUTH AMERICA	0	0	STIPENDS	597,832.
3 a Subtotal	0	0		2,880,420.
<b>b</b> Total from continuation				
sheets to Part I	0	0		1264269509.
c Totals (add lines 3a				
and 3b)	0	0		1267149929.

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

Schedule F (Form 990) 2022

232071 10-17-22

Schedule F (Form 990) Part I Continuatio	n of Activitie	s per Regior	• (Schedule F (Form 990), Part I, line 3	3)	06027 Page
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	TRAVEL, RELATED TO RESEARCH, CONFERENCES AND TRAINING	573,226
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	TRAVEL, RELATED TO RESEARCH, CONFERENCES AND TRAINING	933,340
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	TRAVEL, RELATED TO RESEARCH, CONFERENCES AND TRAINING	903,737
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	TRAVEL, RELATED TO RESEARCH, CONFERENCES AND TRAINING	1,771,327
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	TRAVEL, RELATED TO RESEARCH, CONFERENCES AND TRAINING	409,948
NORTH AMERICA	0	0	PROGRAM SERVICES	TRAVEL, RELATED TO RESEARCH, CONFERENCES AND TRAINING	415,574
RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	TRAVEL, RELATED TO RESEARCH, CONFERENCES AND TRAINING	47,934
SOUTH AMERICA	0	0	PROGRAM SERVICES	TRAVEL, RELATED TO RESEARCH, CONFERENCES AND TRAINING	643,848
SOUTH ASIA	0	0	PROGRAM SERVICES	TRAVEL, RELATED TO RESEARCH, CONFERENCES AND TRAINING	70,501
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		1,091,016,065
Totals					

Schedule F (Form 990)	SMITHSONIAN			53-0206027	Page
			• (Schedule F (Form 990), Part I, line 3)		1
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
ORTH AMERICA	0	0	INVESTMENTS		5,037,26
CUROPE (INCLUDING CELAND & GREENLAND)	0	0	INVESTMENTS		122,652,69
					122,032,03
UB-SAHARAN AFRICA	0	0	INVESTMENTS		39,794,05
otals	•				126426950

** PUBLIC INSPECTION COPY *
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53-0206027

#### Schedule F (Form 990) 2022

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

SMITHSONIAN INSTITUTION

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)		<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING						
			ACADEMIC APPOINTMENT		DIRECT DEPOSIT			
			STIPENDS	15,000.	AND CHECKS	0.		
				· · ·				
2 Enter total number of	recipient organization	ns listed above that are r	ecognized as charities by the f	oreign country,	recognized as a tax	•		•
			or counsel has provided a sect			►		0
3 Enter total number of	other organizations of	or entities						1

Schedule F (Form 990) 2022

SMITHSONIAN INSTITUTION

53-0206027

(a) Type of grant or assistance	<b>(b)</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	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)
CADEMIC APPOINTMENT STIPENDS	NORTH AMERICA	25	246,069.	DIRECT DEPOSIT AND CHECKS	0.		
	SUB-SAHARAN						
CADEMIC APPOINTMENT STIPENDS		5	94,501.	DIRECT DEPOSIT AND CHECKS	0.		
CADEMIC APPOINTMENT STIPENDS	SOUTH ASIA	6	76,312.	DIRECT DEPOSIT AND CHECKS	0.		
	EAST ASIA AND THE						
CADEMIC APPOINTMENT STIPENDS	PACIFIC	19	327,929.	DIRECT DEPOSIT AND CHECKS	0.		
	RUSSIA AND NEIGHBORING						
	STATES	3	56,767.	DIRECT DEPOSIT AND CHECKS	0.		
	EUROPE (INCLUDING						
	ICELAND & GREENLAND)	58	601,534.	DIRECT DEPOSIT AND CHECKS	0.		
	CENTRAL AMERICA						
CADEMIC APPOINTMENT STIPENDS	AND THE CARIBBEAN	111	864,476.	DIRECT DEPOSIT AND CHECKS	0.		
CADEMIC APPOINTMENT STIPENDS	SOUTH AMERICA	77	597,832.	DIRECT DEPOSIT AND CHECKS	0.		

Schedule F (Form 990) 2022

Page 3

Schedu	Ile F (Form 990) 2022 SMITHSONIAN INSTITUTION	53-0206027	Page 4
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 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 Instructions for Forms 3520 and 3520-A; don't file with Form 990)	X Yes	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to		
	Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	No 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	X Yes	No
	Fund (see Instructions for Form 8621)		
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes."		
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		
	Foreign Partnerships (see Instructions for Form 8865)	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		
	Instructions for Form 5713; don't file with Form 990)	X Yes	No

#### \*\* PUBLIC INSPECTION COPY \*\* SMITHSONIAN INSTITUTION

53-0206027 Page 5

#### Schedule F (Form 990) 2022 Part V | Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c)

(estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

THE OFFICE OF ACADEMIC APPOINTMENTS AND INTERNSHIPS HAS CENTRAL

MANAGEMENT AND ADMINISTRATIVE RESPONSIBILITY FOR THE SMITHSONIAN PROGRAMS

OF RESEARCH FELLOWSHIPS AND OTHER ACADEMIC APPOINTMENTS FOR

UNDERGRADUATE, GRADUATE STUDENTS, POSTDOCTORAL AND SENIOR SCHOLARS

THE SMITHSONIAN INSTITUTION FELLOWSHIP PROGRAM IS A COMPETITIVE

FELLOWSHIP PROGRAM FOR GRADUATE AND POSTDOCTORAL FELLOWS, WHO APPLY TO

CONDUCT RESEARCH AT THE INSTITUTION WITH RESEARCH STAFF SERVING AS

ADVISORS. THE REVIEW PROCESS IS MADE UP OF DISCIPLINARY COMMITTEES

COMPRISED OF THE INSTITUTION'S STAFF WHO EVALUATE THE CANDIDATES AND THEN

SELECT THE FELLOWS. THERE ARE OTHER COMPETITIVE AND NON-COMPETITIVE

FELLOWSHIPS FOR VISITING SCHOLAR AND STUDENT APPOINTEES SELECTED THROUGH

THE SMITHSONIAN UNITS THAT GO THROUGH A VARIETY OF OTHER SELECTION

PROCESSES BEFORE AN AWARD IS MADE. AN OFFICIAL LETTER/AGREEMENT IS

PROVIDED TO EACH AWARD RECIPIENT IDENTIFYING THE AWARD TITLE, DATES OF

TENURE STIPEND ALLOWANCES AND REQUIRED RESPONSIBILITIES FOR HOLDING

THIS POSITION.

ALL RECIPIENTS EITHER WILL IDENTIFY A FINANCIAL INSTITUTION FOR RECEIPT

OF THEIR MONETARY AWARD OR THEY WILL RECEIVE US TREASURY CHECKS.

DEPENDING ON THE TENURE OF THE APPOINTMENT, PAYMENTS CAN RANGE FROM ONE

LUMP SUM, BIWEEKLY PAYMENTS OR MONTHLY PAYMENTS. MOST FELLOWSHIP

APPOINTMENTS ARE AWARDED FOR ONE TO TWO YEARS. ON OCCASION, THE

SMITHSONIAN INSTITUTION HAS VISITING SCHOLARS OR FELLOWS WHO ARE

CONDUCTING RESEARCH IN ANOTHER COUNTRY. PAYMENTS ARE USUALLY SUBMITTED AS

41

STATED ABOVE, HOWEVER, ON OCCASION, THERE MAY BE ONE OR TWO WHO REQUEST

232075 10-17-22

Page 5

# SMITHSONIAN INSTITUTION 53-0206027 Schedule F (Form 990) 2022 Part V | Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions. THAT THEIR PAYMENTS BE SENT TO THE COUNTRY OF THEIR RESEARCH. AT THE END OF TENURE, A FINAL REPORT OF THEIR RESEARCH ACCOMPLISHMENTS IS PROVIDED FOR OUR RECORDS. SMITHSONIAN RESEARCH STAFF WHO SERVE AS ADVISORS TO THESE FELLOWS STUDENTS AND SCHOLARS ARE USUALLY IN THE FIELD DURING THEIR TENURE. THE EIGHT SMITHSONIAN RESEARCH CENTERS LOCATED IN THE UNITED STATES AND ONE LOCATED IN PANAMA MONITOR THE PROGRESS OF THEIR FELLOWS ESPECIALLY THOSE FELLOWS IN OTHER COUNTRIES. AND THE ADMINISTRATIVE MANAGEMENT OF FUNDS IS MANAGED THROUGH THE INSTITUTION'S CENTRAL ADMINISTRATION FOR ACCOUNTABILITY. PART I, LINE 3 ACADEMIC APPOINTMENTS (STIPENDS) PER FORM 990 INSTRUCTIONS, STIPENDS ARE REPORTED ON SCHEDULE F IF THE PERSON RECEIVING THE STIPEND IS LIVING OR RESIDING OUTSIDE THE UNITED STATES AT THE TIME THE STIPEND IS PAID OR DISTRIBUTED. HOWEVER, MANY OF THESE STIPEND RECIPIENTS LATER TRAVELED TO THE SMITHSONIAN IN THE UNITED STATES TO PERFORM THEIR RESEARCH. FOREIGN TRAVELER PROGRAM SERVICES FOR TRAVEL RELATED TO RESEARCH, CONFERENCES AND TRAINING IS FOR TRAVEL BY SI EMPLOYEES, RESEARCH ASSOCIATES, OR INVITATIONAL TRAVELERS (I.E., INDIVIDUALS WHO ARE NOT SI EMPLOYEES). ONLY TRAVEL ESSENTIAL TO THE PERFORMANCE OF OFFICIAL SMITHSONIAN BUSINESS AND FOR WHICH TRAVEL-RELATED EXPENSES ARE TO BE PAID BY THE SMITHSONIAN, CAN BE APPROVED, AUTHORIZED, AND REIMBURSED. Schedule F (Form 990) 2022 232075 10-17-22 42

# Schedule F (Form 990) 2022 SMITHSONIAN INSTITUTION Part V Supplemental Information

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

INVESTMENTS

INVESTMENTS IN REGIONS INCLUDE INVESTMENTS IN FOREIGN PARTNERSHIPS AND

FOREIGN CORPORATIONS. THE FOREIGN REGION IS DETERMINED BY THE COUNTRY

WHOSE LAWS GOVERN THE INVESTMENT ENTITY. THE VALUE REPORTED REPRESENTS

THE FAIR MARKET VALUE OF THE INVESTMENT AT THE END OF THE FISCAL YEAR.

METHOD TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS

CENTRAL AMERICA AND THE CARIBBEAN: ACCRUAL

EAST ASIA AND THE PACIFIC: ACCRUAL

EUROPE (INCLUDING ICELAND AND GREENLAND): ACCRUAL

MIDDLE EAST AND NORTH AFRICA: ACCRUAL

NORTH AMERICA (CANADA & MEXICO ONLY): ACCRUAL

RUSSIA AND NEIGHBORING STATES: ACCRUAL

SOUTH AMERICA: ACCRUAL

SOUTH ASIA: ACCRUAL

SUB-SAHARAN AFRICA: ACCRUAL

232075 10-17-22

Schedule F (Form 990) 2022 43 2022.06000 SMITHSONIAN INSTITUTION 1776QA\_1

Department of the Treasury Internal Revenue Service Name of the organization Part I Fundraising required to corr	omplete if th Go t SMITHSONIA Activities.	e organization answered "Yes" on organization answered "Yes" on organization entered more than \$1 Attach to Form 990 of to www.irs.gov/Form990 for instruct N INSTITUTION	Form 5,000 o or Forr	990, F on For n 990-	art IV, line 17, 18, or m 990-EZ, line 6a.		0	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service Name of the organization Part I Fundraising required to corr	Go t SMITHSONIA	organization entered more than \$1 Attach to Form 990 o to www.irs.gov/Form990 for instruct N INSTITUTION	5,000 ( or Forr	on For n 990	m 990-EZ, line 6a.	19, or if the		0000
Name of the organization           Part I         Fundraising           required to com         Fundraising	SMITHSONIA Activities	to www.irs.gov/Form990 for instruct N INSTITUTION			E7			<b>ZUZZ</b>
Name of the organization           Part I         Fundraising           required to com	SMITHSONIA Activities	N INSTITUTION	ctions	and th	·CZ.			Open to Public
Part I Fundraising required to com	Activities				ne latest information			Inspection
Part I Fundraising required to com	Activities						er ide 20602	ntification number
·	ipiete tino pui	<ul> <li>Complete if the organization answer</li> </ul>	ered "Y	'es" or	ı Form 990, Part IV, liı			
key employees listed ir	ail solicitations ns ations ave a written o n Form 990, P hest paid indiv	s <b>f</b> X Solicita <b>g</b> X Special or oral agreement with any individual Part VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (incluc rofessi	non-g gover aising o ding of onal fu	overnment grants nment grants events ficers, directors, trust undraising services?	X	Yes	
(i) Name and address of or entity (fundrais		(ii) Activity	fundi have c or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	<b>(v)</b> Amount to (or retaine fundraise listed in co	d by) er	(vi) Amount paid to (or retained by) organization
AVALON CONSULTING GRO - 805 15TH STREET NW,		DIRECT MARKETING CONSULTANT	Yes	No X	0.	1,175,	116.	-1,175,116.
COMMUNITY COUNSELLING CO., LLC - 461 5TH AV		FUNDRAISING CONSULTANT		x	0.	450,	000.	-450,000.
YES & LIPMANHEARNE LL W MONROE STREET, 21 F		MARKETING SERVICES		x	0.	70,	000.	-70,000.
						1 505	110	1 605 116
		on is registered or licensed to solicit o		utions	or has been notified	1 , 695 , t is exempt fr		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS Schedule G (Form 990) 2022

232081 10-27-22

SMITHSONIAN INSTITUTION

53-0206027 Page **2** 

Schedule G (Form 990) 2022

**Part II** Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events
		NPG GALA	NY GALA	15	(add col. (a) through
		(event type)	(event type)	(total number)	col. <b>(c)</b> )
1	Gross receipts	3,570,431.	1,377,289.	1,030,459.	5,978,179
2	Less: Contributions	3,375,371.	1,286,899.	716,772.	5,379,042
3	Gross income (line 1 minus line 2)	195,060.	90,390.	313,687.	599,137
4	Cash prizes				
5	Noncash prizes				
6	Rent/facility costs				
6 7	Food and beverages			220,577.	220,577
8	Entertainment	370.	3,375.	2,425.	6,170
9	Other direct expenses	1,741,709.	875,227.	255,568.	2,872,504
10		n 9 in column (d)			3,099,251
11	Net income summary. Subtract line 10 from li	ine 3, column (d)			-2,500,114

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than

\$15,000 on Form 990-EZ, line 6a.

Revenue			<b>(a)</b> Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue				
Se	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct E	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	└── Yes % └── No	└── Yes % └── No	└── Yes % └── No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
9		ter the state(s) in which the organization condu				
		he organization licensed to conduct gaming ac No," explain:				Yes No
		ere any of the organization's gaming licenses re Yes," explain:			/ear?	Yes No

232082 10-27-22

Sch	edule G (Form 990) 2022	SMITHSONIAN INSTITUTION 53-	0206027	Page 3
11	Does the organization conduct ga	ming activities with nonmembers?	Yes	No
12		ficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming			
а	The organization's facility		13a	%
			13b	%
14	Enter the name and address of the	e person who prepares the organization's gaming/special events books and records:		
	Name			
	Address			
15a	Does the organization have a cont	tract with a third party from whom the organization receives gaming revenue?	Yes	No No
b	If "Yes," enter the amount of game	ing revenue received by the organization \$ and the amount		
	of gaming revenue retained by the	e third party \$		
с	If "Yes," enter name and address	of the third party:		
	Name			
	Address			
16	Gaming manager information:			
16	Gaming manager information.			
	Name			
	Gaming manager compensation	\$		
	Description of services provided			
	Director/officer	Employee Independent contractor		
47				
	Mandatory distributions:	akaka laurika manjua akawikakila diakularikana fusua kisa anamian musaasada ka		
а		state law to make charitable distributions from the gaming proceeds to	Yes	🗌 No
Ь		required under state law to be distributed to other exempt organizations or spent in the		
U	organization's own exempt activiti			
Pa		mation. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and P.	art III. lines 9.	9b. 10b.
		applicable. Also provide any additional information. See instructions.	, , ,	, ,
SCH	EDULE G, PART I, LINE 2B,	LIST OF TEN HIGHEST PAID FUNDRAISERS:		
/ <del>-</del> `				
(I)	NAME OF FUNDRAISER: AVALO	ON CONSULTING GROUP, INC.		
( T )		5 15TH STREET NW, WASHINGTON, DC 20005		
(1)	ADDRESS OF FUNDRAISER: 00	15 15TH STREET NW, WASHINGTON, DC 20005		
(I)	NAME OF FUNDRAISER: COMMU	NITY COUNSELLING SERVICE CO., LLC		
(I)	ADDRESS OF FUNDRAISER: 46	51 5TH AVENUE, NEW YORK, NY 10017		
/ <del>-</del> `				
	NAME OF FUNDRAISER: YES &			0001 0000
23208	33 10-27-22	Sche	dule G (Form	990) 2022

Schedule G (Form 990) SMITHSONIAN INSTITUTION

(I) ADDRESS OF FUNDRAISER:

227 W MONROE STREET, 21 FLOOR, CHIGAGO, IL 60606

Part IV | Supplemental Information (continued)

SCHEDULE G, PART I, LINE 2B

SI ENGAGED MULTIPLE FUNDRAISING SERVICES AND MANY WORK ON THE SAME

CAMPAIGNS. IT IS NOT POSSIBLE TO ACCURATELY REPORT THE EXACT AMOUNT OF

REVENUE ASSOCIATED WITH EACH CONTRACTOR. NONE OF THE CONTRACTORS

RETAINED HAD CONTROL OF CONTRIBUTIONS; ALL WERE PAID UNDER THE TERMS OF

NEGOTIATED CONTRACTS.

SI CLOSELY MONITORS FUNDRAISING PERFORMANCE AGAINST ESTABLISHED

CAMPAIGN GOALS FOR ITS CONTRACTORS, AND RESULTS ARE TAKEN INTO

CONSIDERATION IN FUTURE CONTRACT NEGOTIATIONS.

PART I, LINE 2B(II) LINE 2B COLUMN(II) ACTIVITY 5

MARKETING/FUNDRAISING CONSULTANT

SCHEDULE G, PART I

SI IS A TRUST INSTRUMENTALITY OF THE U.S. AND AS SUCH IS EXEMPT FROM

STATE REGULATIONS PURSUANT TO THE SUPREMACY CLAUSE OF THE U.S.

CONSTITUTION. ALL STATES THAT HAVE INQUIRED ABOUT SI FUNDRAISING

SOLICITATION REGISTRATION HAVE ACKNOWLEDGED THIS EXEMPTION.

Schedule G (Form 990)

232084 04-01-22

			** PUBLI	C INSPECT	ΓΙΟΝ COP	Y **			
SCHEDULE I		G	rants and Oth	er Assistan	ce to Organ	izations,		OMB No. 1	545-0047
(Form 990)		Gov	vernments, an ete if the organizatio	nd Individual	s in the Ŭni	ted States		20	22
Department of the Treasury			Ū	Attach to Form				Open to	Public
Internal Revenue Service			Go to www.irs	.gov/Form990 for	the latest inform	ation.		Inspe	ction
Name of the organizatio								Employer identification	
Part I General Inf	SMITHSONIAN IN							53-0206	027
			amount of the grants	ar assistance the	arentees' elisibility	for the grante or easi	tance and the colocti		
	ition maintain records to vard the grants or assis								No
	/ the organization's pro								
Part II Grants and	Other Assistance to I at received more than \$	Domestic Organiz	ations and Domestic	<b>Governments.</b> C	omplete if the org	anization answered "Y	es" on Form 990, Part	IV, line 21, for any	
<b>1 (a)</b> Name and add	Iress of organization ernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of g or assistanc	•
CLARK ATLANTA UNIV 223 JAMES P BRAWLE ATLANTA, GA 30314-	EY DR. SW	58-1825259	501(C)(3)	31,850.	0.			ACADEMIC APPT. ST	TIPENDS
JACKSON STATE UNIV 1400 J. R. LYNCH S JACKSON, MS 39217-	ST, STE 206 -0002	64-6000507	501(C)(3)	52,050.	0.			ACADEMIC APPT. ST	<b>FIPENDS</b>
FLORIDA A&M UNIVEF 400 FOOTE-HILYER A CENTER - TALLAHASS 32307-3100	ADMINISTRATION	59-0977035	501(C)(3)	31,850.	0.			ACADEMIC APPT. ST	FIPENDS
UNIVERSITY OF MARY 3112 LEE BLDG 7809 COLLEGE PARK, MD 2	REGENTS DRIVE	52-6002033	501(C)(3)	6,810.	0.			ACADEMIC APPT. ST	FIPENDS
UNIVERSITY OF MARY PARK - 4500 CAMPUS PARK, MD 20742-000	5 DRIVE - COLLEGE	52-6002033	501(C)(3)	35,000.	0.			ACADEMIC APPT. ST	<b>TIPENDS</b>
TEXAS SOUTHERN UNI 3100 CLEBURNE ST. HOUSTON, TX 77004-	4501	74-6001391		31,850.	0.			ACADEMIC APPT. ST	
	r of section 501(c)(3) ar	0 0		e line 1 table					22.
3 Enter total numbe	r of other organizations	listed in the line 1	table						4.

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

Schedule I (Form 990) SMITHSONIAN IN	ISTITUTION	I ODEN			1		53-0206027 Page 1
Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FISK UNIVERSITY 1000 17TH AVENUE NORTH NASHVILLE, TN 37208	62-0202000	501(C)(3)	20,500.	0.			ACADEMIC APPT. STIPENDS
TUSKEGEE UNIVERSITY 1200 W MONTGOMERY RD TUSKEGEE INSTITUTE, AL 36088-1923	63-0288878	501(C)(3)	47,434.	0.			ACADEMIC APPT. STIPENDS
HARVARD COLLEGE, PRESIDENT & FACULTY - PO BOX 4999 - BOSTON, MA 02212	04-2103580		74,771.	0.			ACADEMIC APPT. STIPENDS
APOLLO THEATRE FOUNDATION, INC 253 W. 125TH STREET NEW YORK, NY 10027-4408	13-3630066		5,100.	0.			ACADEMIC APPT. STIPENDS
BERNSTEIN ARTISTS, INC. 898 UNION ST APT 3B BROOKLYN, NY 11215-1681	11-3199855		16,500.	0.			ACADEMIC APPT. STIPENDS
CHICAGO HISTORICAL SOCIETY 1601 N CLARK STREET CHICAGO, IL 60614-6038	36-2167004	501(C)(3)	7,250.	0.			ACADEMIC APPT. STIPENDS
DAMASCUS GATE LLC 31 TRINITY PASS ROAD POUND RIDGE, NY 10576	92-1073266		6,000.	0.			ACADEMIC APPT. STIPENDS
DUBUQUE COUNTY HISTORICAL SOCIETY 350 E 3RD STREET DUBUQUE, IA 52001-2302	42-6072050	501(C)(3)	7,000.	0.			ACADEMIC APPT. STIPENDS
ELIZABETH GRACE VEATCH LLC 7054 CHARLESTON AVE NORTH BEACH, MD 20714-9606	25-7598757		59,840.	0.			ACADEMIC APPT. STIPENDS

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	urt II.)	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RIENDS OF THE NORTH CAROLINA 1 W. JONES ST.							
RALEIGH, NC 27601-1029	56-1240806	501(C)(3)	12,550.	0.			ACADEMIC APPT. STIPEND
HISTORICAL MUSEUM OF SOUTHERN FLORIDA – 101 WEST FLAGLER ST., STE C – MIAMI, FL 33130-1504	59-0968005	501(C)(3)	13,250.	0.			ACADEMIC APPT. STIPEND
INFORM EVALUATION & RESEARCH 010 S EAST ST							
AMHERST, MA 01002-3051	84-2883610	501(C)(3)	8,760.	0.			ACADEMIC APPT. STIPEND:
MARYLAND AFRICAN AMERICAN MUSE 330 E PRATT ST							
BALTIMORE, MD 21202-4403	52-2107879	501(C)(3)	10,000.	0.			ACADEMIC APPT. STIPEND
NONTANA STATE UNIVERSITY 16 MONTANA HALL 30ZEMAN, MT 59717	81-6010045	501(C)(3)	7,000.	0.			ACADEMIC APPT. STIPEND
ROBERT W. WOODRUFF LIBRARY 11 JAMES P BRAWLEY DR							
ATLANTA, GA 30314-4207	20-0267588	501(C)(3)	10,250.	0.			ACADEMIC APPT. STIPEND
SCOTTSDALE MUSEUM OF THE WEST 3830 NORTH MARSHALL WAY							
COTTSDALE, AZ 85251-5594	20-8862731	501(C)(3)	7,000.	0.			ACADEMIC APPT. STIPEND
THE LAW OFFICE OF GOSS & ASSOC 56 HANOVER STREET							
BOSTON, MA 02113	46-4279421		6,510.	0.			ACADEMIC APPT. STIPEND
THE WHITNEY INSTITUTE							

ACADEMIC APPT. STIPENDS

Schedule I (Form 990)

5099 HIGHWAY 18

WALLACE, LA 70049-2803

20,500.

Ο.

47-4417039 501(C)(3)

SMITHSONIAN INSTITUTION 53-0206027 Schedule I (Form 990) Page 1 Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government valuation non-cash assistance or assistance if applicable cash grant noncash (book, FMV, assistance appraisal, other) UNIVERSITY OF CONNECTICUT 438 WHITNEY RD. EXT. U-1133 STORRS, CT 06269-1133 06-0772160 501(C)(3) 14,796. 0. ACADEMIC APPT. STIPENDS UNIVERSITY OF KANSAS 1 UNIVERSITY OF KANSAS LAWRENCE, KS 66044-3155 48-1124839 501(C)(3) 55,107, Ο. ACADEMIC APPT. STIPENDS

53-0206027

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.

SMITHSONIAN INSTITUTION

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
ESEARCH FELLOWSHIPS AND ACADEMIC APPOINTMENTS	1297	13,238,423.	0.		ACADEMIC STIPENDS

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

PART I, LINE 2:

Schedule I (Form 990) 2022

THE SMITHSONIAN PROGRAMS OF RESEARCH FELLOWSHIPS AND OTHER ACADEMIC

APPOINTMENTS FOR UNDERGRADUATE, GRADUATE STUDENTS, POSTDOCTORAL AND SENIOR

SCHOLARS. THE SMITHSONIAN INSTITUTION FELLOWSHIP PROGRAM IS A COMPETITIVE

FELLOWSHIP PROGRAM FOR GRADUATE AND POSTDOCTORAL FELLOWS, WHO APPLY TO

CONDUCT RESEARCH AT THE INSTITUTION WITH RESEARCH STAFF SERVING AS

ADVISORS.

THE REVIEW PROCESS IS MADE UP OF DISCIPLINARY COMMITTEES COMPRISED OF THE

** PUBLIC INSPECTION COPY **		
Schedule I (Form 990) SMITHSONIAN INSTITUTION	53-0206027	Page <b>2</b>
Part IV Supplemental Information		
INSTITUTION'S RESEARCH STAFF WHO EVALUATE THE CANDIDATES AND THEN SELECT		
THE FELLOWS. THERE ARE OTHER COMPETITIVE AND NON-COMPETITIVE FELLOWSHIPS		
FOR VISITING SCHOLAR AND STUDENT APPOINTEES SELECTED THROUGH THE		
SMITHSONIAN UNITS THAT GO THROUGH A VARIETY OF OTHER SELECTIONS PROCESSES		
BEFORE AN AWARD IS MADE. AN OFFICIAL LETTER/AGREEMENT IS PROVIDED TO EACH		
AWARD RECIPIENT IDENTIFYING THE AWARD TITLE, DATES OF TENURE, STIPEND		
ALLOWANCES, AND REQUIRED RESPONSIBILITIES FOR HOLDING THIS POSITION. ALL		
RECIPIENTS EITHER WILL IDENTIFY A FINANCIAL INSTITUTION FOR RECEIPT OF		
THEIR MONETARY AWARD OR THEY WILL RECEIVE US TREASURY CHECKS. DEPENDING ON		
THE TENURE OF THE APPOINTMENT, PAYMENTS MAY BE MADE IN A LUMP SUM OR IN		
PERIODIC PAYMENTS.		
MOST FELLOWSHIP APPOINTMENTS ARE AWARDED FOR ONE TO TWO YEARS. AT THE END		
OF TENURE, A FINAL REPORT OF THEIR RESEARCH ACCOMPLISHMENTS IS PROVIDED FOR		
OUR RECORDS. SMITHSONIAN RESEARCH STAFF WHO SERVE AS ADVISORS TO THESE		
OUR RECORDS. SMIINSONIAN RESEARCH STAFF WHO SERVE AS ADVISORS TO THESE		
FELLOWS, STUDENTS AND SCHOLARS ARE USUALLY IN THE FIELD DURING THEIR		
TENURE.		
THE INDIVIDUAL SMITHSONIAN RESEARCH CENTERS MONITOR THE PROGRESS OF THEIR		
FELLOWS, AND THE FUNDS ARE MANAGED THROUGH THE INSTITUTION'S CENTRAL		
ADMINISTRATION TO ENSURE ACCOUNTABILITY. SIMILAR PROCESSES ARE FOLLOWED FOR		
AWARDS MADE TO ORGANIZATIONS WHOSE ACADEMIC STAFF PERFORM THE RELATED		
RESEARCH.		

Schedule I (Form 990)

232291 04-01-22

		** PUBLIC INSPECTION COPY **									
SC	HEDULE J	** PUBLIC INSPECTION COPY ** Compensation Information		OMB No. 1	1545-004	47					
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest	_	20	22	)					
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		ZU	<u> </u>	-					
Depa	rtment of the Treasury	Attach to Form 990.		Open to	pen to Public						
	al Revenue Service	in the deal y									
Nam	ne of the organization	1	Employer ic	dentificatio	on nui	nber					
		SMITHSONIAN INSTITUTION	53-02	206027							
Pa	rt I Question	s Regarding Compensation									
					Yes	No					
1a	Check the appropri	ate 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 First-class or c	harter travel Housing allowance or residence for perso	nal use								
	Travel for com		sidence								
		ation and gross-up payments Health or social club dues or initiation fee									
	Discretionary s	spending account Personal services (such as maid, chauffer	ır, chef)								
b	-	on line 1a are checked, did the organization follow a written policy regarding payment or									
				<b>1</b> b	X						
2		require substantiation prior to reimbursing or allowing expenses incurred by all directors,									
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2	Х						
3		ly, of the following the organization used to establish the compensation of the organization's									
		ctor. Check all that apply. Do not check any boxes for methods used by a related organization	on to								
	·	ation of the CEO/Executive Director, but explain in Part III.									
	X Compensation										
		ompensation consultant									
	X Form 990 of o	ther organizations	ommittee								
4		any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing									
	organization or a re	-									
а		e payment or change-of-control payment?				X					
b		eive payment from a supplemental nonqualified retirement plan?				X					
С	•	eive payment from an equity-based compensation arrangement?		<b>4c</b>		X					
	If "Yes" to any of lir	es 4a-c, list the persons and provide the applicable amounts for each item in Part III.									
_		)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.									
5		n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	'n								
	contingent on the re			_		v					
						X X					
a		ation?		<u>5b</u>		•					
~		r 5b, describe in Part III.									
6		n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation of a section of the section of t	'n								
_	contingent on the n			0-		x					
a	The organization?			<u>6a</u>		X					
a		ation?		<u>6b</u>		A					
-		r 6b, describe in Part III.									
1		n Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		-	х						
•		es 5 and 6? If "Yes," describe in Part III		7	Λ						
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the				v					
~				8		X					
9		d the organization also follow the rebuttable presumption procedure described in									
		53.4958-6(c)?			- 000						
LHA	For Paperwork Re	eduction Act Notice, see the Instructions for Form 990.	Schedu	ule J (Forn	n 990)	2022					

232111 10-18-22

53-0206027

#### Schedule J (Form 990) 2022

SMITHSONIAN INSTITUTION

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

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

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

		(B) Breakdown of W	-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		reported as deferred on prior Form 990	
(1) AMY CHEN	(i)	431,578.	673,880.	5,334.	44,500.	2,020.	1,157,312.	0.
CHIEF INVESTMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MR LONNIE G. BUNCH, III	(i)	827,727.	25,000.	8,652.	44,500.	23,891.	929,770.	0.
SECRETARY OF THE SMITHSONIAN	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JEFFREY SMITH	(i)	267,171.	412,500.	421.	40,587.	37,327.	758,006.	0.
INVESTMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) RYAN DOTSON	(i)	240,992.	371,250.	249.	36,229.	36,641.	685,361.	0.
INVESTMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MICHAEL GIOVENCO	(i)	253,671.	371,250.	573.	36,228.	11,763.	673,485.	0.
INVESTMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) MEROE PARK	(i)	563,963.	15,000.	1,806.	44,500.	1,788.	627,057.	0.
DEPUTY SECRETARY & COO	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) MELISSA CHIU	(i)	431,762.	3,000.	1,095.	44,500.	35,402.	515,759.	0.
DIR, HIRSHHORN MUSEUM & SCULPTURE GA	(ii)	0.	0.	0.	0.	0.	٥.	0.
(8) ROBERT SPILLER	(i)	415,557.	10,000.	1,806.	44,500.	38,213.	510,076.	0.
ASSISTANT SECRETARY FOR ADVANCEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) JOSHUA TEWKSBURY	(i)	324,648.	130,000.	773.	43,500.	10,863.	509,784.	0.
DIRECTOR, STRI	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) KEVIN GOVER	(i)	411,943.	5,000.	5,700.	44,500.	25,688.	492,831.	0.
UNDER SEC FOR HISTORY & CULTURE	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) ELLEN STOFAN	(i)	414,952.	5,000.	2,963.	44,500.	21,902.	489,317.	0.
UNDER SEC FOR SCIENCE & RESEARCH	(ii)	0.	0.	٥.	0.	0.	٥.	0.
(12) RONALD CORTEZ	(i)	414,114.	0.	2,970.	44,500.	25,816.	487,400.	0.
UNDER SEC FOR FIN/ADMIN & CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) RICHARD KURIN (THRU 9/30/19)	(i)	344,574.	13,000.	7,459.	51,460.	16,969.	433,462.	0.
FMR, ACT UNDER SEC MUSEUMS & RESEARC	(ii)	0.	0.	٥.	0.	0.	٥.	0.
(14) CAROL LEBLANC	(i)	387,874.	0.	0.	44,500.	0.	432,374.	0.
PRESIDENT, SMITHSONIAN ENTERPRISES	(ii)	0.	0.	0.	0.	0.	٥.	0.
(15) JULISSA MARENCO	(i)	262,737.	10,000.	404.	39,146.	25,449.	337,736.	0.
ASST SEC. FOR COMM/EXT AFFAIRS & CMO	(ii)	0.	0.	0.	0.	0.	٥.	0.
(16) JUDITH LEONARD	(i)	270,740.	10,000.	5,548.	39,146.	11,889.	337,323.	0.
GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	٥.	0.

Schedule J (Form 990) 2022

53-0206027

#### Schedule J (Form 990) 2022

SMITHSONIAN INSTITUTION

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

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

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

	(	<b>B)</b> Breakdown of W	-2 and/or 1099-MISC compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title	(i) Base compensation		(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(17) ROGER BRISSENDEN (THRU 3/13/21)	(i)	282,111.	17,000.	0.	2,334.	284.	301,729.	0.
FMR, ACTING UNDER SEC. FOR SCI & RSC	ii)	٥.	0.	0.	0.	0.	0.	0.
(18) JANICE LAMBERT	(i)	243,250.	4,000.	546.	35,771.	3,901.	287,468.	0.
CHIEF FINANCIAL OFFICER	ii)	٥.	Ο.	0.	0.	0.	0.	0.
(19) ZULLY DORR (THRU 09/30/19)	(i)	228,070.	3,000.	0.	33,282.	22,378.	286,730.	0.
FMR, ACTING ASST SEC. FOR ADVANCEMEN	ii)	٥.	Ο.	0.	0.	0.	0.	0.
(20) PORTER WILKINSON	(i)	241,122.	10,000.	239.	33,682.	1,279.	286,322.	0.
	ii)	٥.	Ο.	0.	0.	0.	0.	0.
(21) DERON BURBA	(i)	214,269.	4,000.	907.	30,870.	29,627.	279,673.	0.
	ii)	٥.	0.	0.	0.	0.	0.	0.
(22) ERA MARSHALL (THRU 9/30/18)	(i)	195,319.	46,374.	0.	0.	21,154.	262,847.	0.
FMR, DIR OF EQUAL EMPLOYMENT & MINOR	ii)	٥.	Ο.	0.	0.	0.	0.	0.
(23) CATHY HELM	(i)	233,481.	Ο.	0.	0.	24,631.	258,112.	0.
INSPECTOR GENERAL	ii)	٥.	Ο.	0.	0.	0.	0.	0.
(24) JOHN LAPIANA (THRU 9/30/18)	(i)	210,577.	2,000.	1,305.	28,902.	11,664.	254,448.	0.
FMR, ACTING ASST SEC. FOR COMM/EXT A	ii)	٥.	Ο.	0.	0.	0.	0.	0.
(25) NANCY BECHTOL	(i)	210,562.	3,749.	1,282.	28,445.	974.	245,012.	0.
	ii)	٥.	Ο.	0.	0.	0.	0.	0.
(26) FARLEIGH EARHART	(i)	199,443.	10,000.	0.	10,142.	14,271.	233,856.	0.
GENERAL COUNSEL (ACTING)	ii)	٥.	Ο.	0.	0.	0.	0.	0.
(27) DOUGLAS HALL	(i)	192,469.	5,000.	0.	10,142.	24,290.	231,901.	0.
FMR, ACTING UNDER SEC. FOR ADMINISTR	ii)	٥.	Ο.	0.	0.	0.	0.	0.
(28) JOAN MOCKERIDGE	(i)	187,538.	10,000.	0.	9,845.	24,451.	231,834.	0.
INSPECTOR GENERAL (ACTING)	ii)	٥.	Ο.	0.	0.	0.	0.	0.
(29) CHARLES ALCOCK (THRU 12/31/20)	(i)	169,517.	3,500.	2,987.	21,468.	801.	198,273.	0.
FMR DIR, HARVARD-SMITHSONIAN CENTER	ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	ii)							
	(i)							
	ii)							
	(i)							
	ii)							

Schedule J (Form 990) 2022

53-0206027

#### Schedule J (Form 990) 2022

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

CHARTERED TRAVEL FOR BONA-FIDE BUSINESS PURPOSES WAS AUTHORIZED FOR TWO KEY

SMITHSONIAN INSTITUTION

EMPLOYEES WHEN THE CIRCUMSTANCES OF THEIR TRAVEL MET THE REQUIREMENTS OF

THE SMITHSONIAN'S POLICY FOR SUCH TRAVEL. CHARTERED CLASS TRAVEL WAS

APPROVED IN EACH INSTANCE BY THAT INDIVIDUAL'S DESIGNATED "APPROVING

OFFICIAL" FOR TRAVEL.

THE SMITHSONIAN'S TRAVEL POLICY IS GUIDED BY THE FEDERAL TRAVEL REGULATIONS

AS SUPPLEMENTED BY THE SMITHSONIAN'S TRAVEL HANDBOOK. THE ACCOUNTABLE PLAN

FOR TRAVEL REIMBURSEMENTS MAINTAINED BY THE SMITHSONIAN MEETS IRS

REQUIREMENTS, THEREFORE NO PORTION OF THIS TRAVEL WAS TREATED AS TAXABLE

COMPENSATION.

PART I, LINE 7:

OFFICE OF INVESTMENTS INCENTIVE PLAN: THE INCENTIVE PLAN PAYOUT IS BASED ON

PRE-DETERMINED GOALS. QUANTITATIVE GOALS COMPARE OUR PORTFOLIO PERFORMANCE

TO A POLICY BENCHMARK OVER A THREE YEAR PERIOD, AND QUALITATIVE GOALS ARE

ESTABLISHED ANNUALLY FOR EACH EMPLOYEE. A SET FORMULA IS USED TO CALCULATE

THE FINAL PAYOUT, AND QUANTITATIVE RESULTS ARE AUDITED BEFORE REGENT

53-0206027

Page 3

Schedule J (Form 990) 2022

SMITHSONIAN INSTITUTION

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

APPROVAL.

PART II: COMPENSATION FROM AN UNRELATED ORGANIZATION OR INDIVIDUAL

NAME: CHARLES ALCOCK

COMPENSATION FROM UNRELATED ORGANIZATION: 177,482

NAME OF UNRELATED ORGANIZATION: HARVARD UNIVERSITY

SCHEDULE K (Form 990) Co Department of the Treasury Internal Revenue Service	mplete if the orga	nization answered explanations, and	formation on Ta "Yes" on Form 99 I any additional info gov/Form990 for in	0, Part IV, li ormation in	ine 24a. Pro Part VI.	ovide descripti				c	20	1545-00 <b>)22</b> o Pub tion	
Name of the organization	ΤͲΙΙͲΤΟΝ							-	-	identif		n num	ber
Part I Bond Issues	1101104								55 02	10002			
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) issu	le price	(f) Descriptio	on of purpose	( <b>a</b> ) De	feased	(h) On	hehalf	(i) Po	
		(0) 00011 //	(4) Date looded				(9) 20104000		of issuer		financing		
								Yes	No	Yes	No	Yes	No
FAIRFAX COUNTY ECONOMIC DEVELOPMENT													
A AUTHORITY	54-0787833	30382ECZ5	12/03/03	77,5	45,000.	NEW CONSTRUC	TION		x		х		х
													[
B DISTRICT OF COLUMBIA	53-6001131	254839756	04/29/10	33,8	25,749.	REFUNDING OF	1997 BONDS		x		х		х
													1
С													L
													ĺ
D													Ĺ
Part II Proceeds													
			A			В	С				D		
1 Amount of bonds retired													
2 Amount of bonds legally defeased													
3 Total proceeds of issue			77,	545,000.		33,825,749.							
4 Gross proceeds in reserve funds													
5 Capitalized interest from proceeds									_				
6 Proceeds in refunding escrows													
· · · · ·				530,475.		612,994.			_				
•				6,161.									
			77,	008,364.					_				
11 Other spent proceeds						33,212,755.							
12 Other unspent proceeds				0000		0010			_				
<b>13</b> Year of substantial completion				2003		2010							
	<u> </u>		Yes	Νο	Yes	No	Yes	No		Yes	_	No	
14 Were the bonds issued as part of a refunding i	•			х	x								
if issued prior to 2018, a current refunding issu				Δ	^						_		
15 Were the bonds issued as part of a refunding i				х		x							
	prior to 2018, an advance refunding issue)?			Δ	x	A							
<ul><li>16 Has the final allocation of proceeds been made</li><li>17 Does the organization maintain adequate book</li></ul>			Х						_		-		
final allocation of proceeds?	3 and 1000103 10 St		x		x								

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

Sch	edule K (Form 990) 2022 SMITHSONIAN INSTITUTION			53-	0206027				Page <b>2</b>
Par	t III Private Business Use								
			A		В		0	C	)
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?		х		X				
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?		Х		x				
3a	Are there any management or service contracts that may result in private								
	business use of bond-financed property?		Х	Х					
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?			Х					
с	Are there any research agreements that may result in private business use of								
	bond-financed property?		X		x				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other								
	outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities								
	other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5	Enter the percentage of financed property used in a private business use as a								
	result of unrelated trade or business activity carried on by your organization,								
	another section 501(c)(3) organization, or a state or local government		.00 %		1.94 %		%		%
6	Total of lines 4 and 5		.00 %		1.94 %		%		%
_7	Does the bond issue meet the private security or payment test?		Х		x				
8a	Has there been a sale or disposition of any of the bond-financed property to a non-								
	governmental person other than a 501(c)(3) organization since the bonds were issued?		Х		x				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or								
	disposed of		%		%		%		%
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?	Х		Х					
Par	t IV Arbitrage			_					
			Ą		В	(	2	0	
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		х		X				
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		х		X				
	Exception to rebate?	Х		Х					
	No rebate due?		X		X				
	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?	Х		Х					

Schedule K (Form 990) 2022 SMITHSONIAN INSTITUTION			53-0	206027				Page 3
Part IV Arbitrage (continued)								
		A		В		C		D
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		X		Х				
<b>b</b> Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		Х				
<b>b</b> Name of provider								
c Term of GIC								
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		Х				
7 Has the organization established written procedures to monitor the								
requirements of section 148?	X		Х					
Part V Procedures To Undertake Corrective Action								
		A		В		C		D
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 under								
applicable regulations?	x		Х					
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	e K. See instru	uctions.					
SCHEDULE K, PART III, LINE 5								
THE PERCENTAGE OF FINANCED PROPERTY USED IN PRIVATE BUSINESS USE AS A								
RESULT OF UNRELATED TRADE OR BUSINESS ACTIVITY IS BASED ON THE								
PERCENTAGE OF UNRELATED REVENUE IN THE GIFT SHOP WITHIN THE SPACE								
FINANCED BY THIS BOND ISSUE.								
THE PRIVATE BUSINESS USE FOR THE CURRENT YEAR WAS LESS THAN 5%. THE								
PRIVATE BUSINESS IS BEING MONITORED AND WILL REMAIN UNDER 5% FOR THE								
ENTIRE MEASUREMENT PERIOD (1998-2028).								

SCHEDULE L	1	* Tro			ISP Vith	EC1		)PY ** Persons				MB No. 1	1545-00/	47
(Form 990)	Complete if t							<b>FEI SOIIS</b> IV, line 25a, 25b, 26,	27.2	8a.				<u></u>
. ,	•••••••						art V, line 38a		,	,		Z	JΖ	Ζ
Department of the Treasury Internal Revenue Service	Go	to wav					orm 990-EZ.	est information.			-	pen To spect		lic
Name of the organizatio			w.ii 3.gov/i orii	1990 1		uction		est mornation.	Em	olover		ificatio		mber
0	SMITHSONI	AN IN	ISTITUTION							3-020				
Part I Excess	Benefit Trans	sactio	ons (section 5	01(c)(3	), secti	ion 50 <sup>-</sup>	l(c)(4), and see	ction 501(c)(29) orgai	nizatio	ons on	ly).			
Complete	if the organizatio	n answ	vered "Yes" on	Form 9	90, Pa	art IV, li	ne 25a or 25b	, or Form 990-EZ, Pa	art V, I	ine 40	b.			
1 (a) Name of disqua	lified person	(b) R	elationship bet person and o			ified	(0	c) Description of tran	sactio	n			Correc	
	•		person and o	Iganiza									es	No
												+	-	
												+	-+	
2 Enter the amount of section 4958			•	Ũ		•	•	0 ,		¢				
3 Enter the amount of														
						<b>,</b>				+				
	o and/or Fror													
	-					, Part \	/, line 38a or F	orm 990, Part IV, line	e 26; o	or if th	e orga	nizatio	n	
	n amount on For	i i i	Part X, line 5, 6 (c) Purpose	- i	2. oan to or	(-	Voriginal		(	10	(h) Ap	proved	(1) \A	/ritten
(a) Name of interested person	(b) Relation with organ		of loan	fror	(d) Loan to or from the organization?     (e) Original principal amount     (f) Balance due		(f) Balance due		) In ault?	by bo	ard or nittee?	(1) **	ment?	
					From				Yes	No	Yes	No	Yes	No
												<u> </u>	<u> </u>	
												<b> </b>	<b> </b>	
												<u> </u>		
													<u> </u>	
Total			afiting a later		J Da-		\$							
	or Assistance		•											
Complete	if the organizatio	n answ	relea resion	FOLLER	90, Pa	urriv, ll I	118 27.							

(a) Name of interested person	<b>(b)</b> Relationship between interested person and the organization	<b>(c)</b> Amount of assistance	<b>(d)</b> Type of assistance	(e) Purpose of assistance

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

Schedule L (Form 990) 2022

232131 11-01-22

53-0206027 Page **2** 

# Schedule L (Form 990) 2022 SMITHSONIAN INSTITUTION Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	aring of zation's nues?
				Yes	No
MARIA MARABLE-BUNCH	WIFE OF L. BUNCH SE	199,977.	ANNUAL COMP		х
KIM BURBA	WIFE OF DERON BURBA	115,712.	ANNUAL COMP		x

#### Part V Supplemental Information.

Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: MARIA MARABLE-BUNCH

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

WIFE OF L. BUNCH SECRETARY OF THE SMITHSONIAN INSTITUTION

(D) DESCRIPTION OF TRANSACTION: ANNUAL COMPENSATION

(A) NAME OF PERSON: KIM BURBA

(D) DESCRIPTION OF TRANSACTION: ANNUAL COMPENSATION

Schedule L (Form 990) 2022

232132 11-01-22

#### SCHEDULE M (Form 990)

#### \*\* PUBLIC INSPECTION COPY \*\* **Noncash Contributions**

OMB No. 1545-0047

2022
Open to Public
Inspection

Employer identification number

53-0206027

Department of the Treasury Internal Revenue Service

#### Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

#### SMITHSONIAN INSTITUTION

Pa	rt I 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	(d) Method of de noncash contribu	etermini	•	s
1	Art - Works of art	x	1,232	ronn ooo, r art vin, inte rg	MARKET VALUE			
2	Art - Historical treasures							
2	Art - Fractional interests		1					
4								
4 5	Books and publications Clothing and household goods							
5 6	Cars and other vehicles							
-								
7 8	Boats and planes							
	Intellectual property		294	79 266 303	MARKET VALUE			
9 10	Securities - Publicly traded		254	15,200,505.				
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
40								
12 13	Securities - Miscellaneous							
13	Qualified conservation contribution - Historic structures							
14	Qualified conservation contribution - Other							
15								
15 16	Real estate - Residential Real estate - Commercial							
17								
18	Real estate - Other		1,150		MARKET VALUE			
10 19	Collectibles		1,100					
20	Food inventory							
20 21	Drugs and medical supplies		1		MARKET VALUE			
21	Taxidermy		1,944		MARKET VALUE			
22	Historical artifacts		68,418		MARKET VALUE			
23 24	Scientific specimens Archeological artifacts							
24 25	Other (GOODS )	x	1	240 000	MARKET VALUE			
25 26	Other (ARCHIVAL CUBIC )	x	1,761	· · · ·	MARKET VALUE			
20 27	Other (ARCHIVAL GIGABY )	X	1,199		MARKET VALUE			
28	Other (ARCHIVAL ITEMS )	x	239		MARKET VALUE			
29	Number of Forms 8283 received by the orga				<u></u>			
23	for which the organization completed Form 8						57	
	for which the organization completed form of	200, 1 art v, L	onee Acknowledg	ement			Yes	No
302	During the year, did the organization receive	by contributio	n any property rep	orted in Part L lines 1 throug	nh 28 that it		165	
<b>5</b> 0a	must hold for at least 3 years from the date of	-	•••••					
						30a		x
<b>۲</b>	exempt purposes for the entire holding perio If "Yes," describe the arrangement in Part II.	u:				30a		
31	Does the organization have a gift acceptance	onlicy that re	auires the review (	of any nonstandard contribut	tions?	31	x	
	Does the organization hire or use third partie			•				
JZd			-			32a	x	1
	contributions?					JZd		L

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

b If "Yes," describe in Part II.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

232141 09-09-22

** PUBLIC INSPECTION COPY **
Schedule M (Form 990) 2022       SMITHSONIAN INSTITUTION       53-0206027       Page 2         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):
THIS COLUMN REPRESENTS THE NUMBER OF CONTRIBUTIONS, NOT THE NUMBER OF
ITEMS RECEIVED.
SCHEDULE M, LINE 32B:
ITEMS ARE SOLD THROUGH COMMERCIAL GALLERIES AND AUCTIONS HOUSES.
INDIVIDUALS AND FIRMS ARE HIRED ON A CONTRACTUAL BASIS TO PROCESS
ACQUISITIONS.
ALTHOUGH THE SMITHSONIAN ACQUIRES COLLECTION ITEMS AND OBJECTS WITH THE
GOOD FAITH INTENTION OF RETAINING THEM FOR AN INDEFINITE PERIOD OF
TIME, PRUDENT COLLECTIONS MANAGEMENT INCLUDES JUDICIOUS CONSIDERATION
OF APPROPRIATE DEACCESSIONING AND DISPOSAL TO REFINE AND IMPROVE THE
QUALITY AND RELEVANCE OF THE COLLECTIONS WITH RESPECT TO THE
SMITHSONIAN'S MISSION AND PURPOSE. WHEN OBJECTS ARE DEACCESSIONED FOR
DISPOSAL BY SALE, THE SMITHSONIAN CONTRACTS WITH COMMERCIAL GALLERIES
OR AUCTION HOUSES TO SELL THE OBJECTS IN ORDER TO ASSURE THE BEST
RETURN FROM THE SALE.
SCHEDULE M, LINE 33:
IN ACCORDANCE WITH PROFESSIONAL PRACTICE, AS ALLOWED BY SFAS 116, THE
SMITHSONIAN DOES NOT ASSIGN VALUE TO COLLECTION ITEMS ACQUIRED BY
DONATION.

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2022.06000 SMITHSONIAN INSTITUTION

232142 09-09-22

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SCHEDULE O	
(Form 990)	

Department of the Treasury

Internal Revenue Service

# \*\* PUBLIC INSPECTION COPY \*\* 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 Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



Employer identification number 53-0206027

Name of the organization SMITHSONIAN INSTITUTION

FORM 990, PAGE 1, LINE K

THE SMITHSONIAN INSTITUTION IS A TRUST INSTRUMENTALITY OF THE U.S.

CREATED BY CONGRESS; ORGANIZED PURSUANT TO 20 U.S.C. SEC. 41 ET SEQ.

FORM 990, PAGE 1, LINE M

STATE OF LEGAL DOMICILE:

AS A TRUST INSTRUMENTALITY OF THE UNITED STATES, THE SMITHSONIAN

INSTITUTION IS A FEDERAL ENTITY THAT IS NOT DOMICILED IN ANY STATE

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

EDUCATION, PUBLIC PROGRAMS AND EXHIBITIONS:

THE SMITHSONIAN'S COLLECTIONS OF NEARLY 157 MILLION OBJECTS (ART

ARTIFACTS AND SCIENTIFIC SPECIMENS) ARE THE HEART OF THE INSTITUTION.

RESEARCH, PUBLIC PROGRAMS AND EXHIBITIONS ARE BASED ON THESE

COLLECTIONS. WHICH ADDITIONALLY INCLUDE MORE THAN 33 MILLION DIGITAL

RECORDS OF ONLINE MATERIAL. CARE OF THE COLLECTIONS INVOLVES THE WORK

OF REGISTRARS, CONSERVATORS, MUSEUM SPECIALISTS, DESIGNERS, CURATORS

AND EDITORS. APPROXIMATELY 148 MILLION OBJECTS AND SPECIMENS ARE PART

OF THE NATIONAL MUSEUM OF NATURAL HISTORY COLLECTIONS AND ARE PRIMARILY

USED FOR RESEARCH BY BOTH SMITHSONIAN SCIENTISTS AND RESEARCHERS FROM

AROUND THE WORLD. IN SOME CASES. THE MUSEUM HAS THE DEFINITIVE.

IRREPLACEABLE COLLECTION OF A CERTAIN SPECIES WHICH IS ESSENTIAL FOR

COMPARATIVE STUDIES.

IN NOVEMBER 2022, THE SMITHSONIAN LAUNCHED THE "LIFE ON A SUSTAINABLE

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 10-28-22 66

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Schedule O (Form 990) 2022 Name of the organization SMITHSONIAN INSTITUTION	Page 2 Employer identification number 53-0206027
PLANET" CLIMATE CHANGE INITIATIVE TO EXPLORE AND SHARE STRATEGIES FOR	
ADAPTING TO AND MITIGATING THE IMPACTS OF CLIMATE CHANGE WITH THE	
PUBLIC. UNDER THIS PROGRAM, THE SMITHSONIAN'S NATIONAL ZOO AND	
CONSERVATION BIOLOGY INSTITUTE (NZCBI) EXPANDED ITS SMITHSONIAN BIRD	
FRIENDLY CERTIFICATION PROGRAM TO INCLUDE STANDARDS FOR COCOA FARMING -	
THE ONLY CERTIFICATION THAT GUARANTEES 100% OF THE COCOA PRODUCED COMES	
FROM FARMS THAT CONSERVE BIRDS AND OTHER WILDLIFE BY PROTECTING FORESTS	
AND NATIVE SHADE TREES.	
SCIENTISTS AT NZCBI CONTINUED TO PLAY A LEADING ROLE IN THE	
SMITHSONIAN'S GLOBAL EFFORTS TO SAVE WILDLIFE SPECIES FROM EXTINCTION	
AND TRAIN FUTURE GENERATIONS OF CONSERVATIONISTS. IN NOVEMBER 2022, TWO	
ANDEAN BEAR CUBS (VULNERABLE STATUS) WERE BORN AND WENT ON VIEW IN	
MARCH. THE MAJORITY OF WHAT SCIENTISTS KNOW ABOUT ANDEAN BEARS COMES	
FROM ZOOS LIKE NZCBI THAT STUDY ANDEAN BEAR BEHAVIOR, HEALTH AND	
REPRODUCTION. IN MAY, THE PRIMATE STAFF WELCOMED THE BIRTH OF A WESTERN	
LOWLAND GORILLA - A CRITICALLY ENDANGERED SPECIES. AND FIVE MORE	
CHEETAH CUBS (VULNERABLE STATUS) WERE BORN IN SEPTEMBER AT THE FRONT	
ROYAL, VIRGINIA, CAMPUS AS PART OF THE CHEETAH BREEDING CENTER	
COALITION. AT THE END OF SEPTEMBER, THE ZOO CELEBRATED THE GIANT PANDA	
CONSERVATION AND BREEDING PROGRAM'S SUCCESS DURING THE WEEK-LONG	
FAREWELL, PANDA PALOOZA, BEFORE THE THREE GIANT PANDAS RETURNED TO	
CHINA AT THE END OF THE YEAR.	
THE CENTER FOR ASTROPHYSICS   HARVARD & SMITHSONIAN LAUNCHED THE	
TROPHOSPHERIC EMISSIONS: MONITORING OF POLLUTION SATELLITE, CALLED	
TEMPO, AFTER A DECADE OF SPACEFLIGHT PREPARATION. TEMPO TRANSMITTED ITS	

FIRST IMAGES OF AIR POLLUTION OVER NORTH AMERICA IN AUGUST AND PROVIDES

232212 10-28-22

Schedule O (Form 990) 2022

Name of the organization

SMITHSONIAN INSTITUTION

Page 2 Employer identification number 53-0206027

HOURLY MEASUREMENTS OF AIR POLLUTION DATA, ALLOWING FOR BETTER

MONITORING OF AIR QUALITY AND SAFETY FOR COMMUNITIES AND ENVIRONMENTS

AROUND THE WORLD.

THE SMITHSONIAN FORMED AND CONVENED A HUMAN REMAINS TASK FORCE TO

DEVELOP A POLICY FOR THE APPROPRIATE HANDLING, SHARED STEWARDSHIP OR

ETHICAL RETURN OF HUMAN REMAINS IN THE SMITHSONIAN'S COLLECTION,

INCLUDING NATIVE AND NON-NATIVE REMAINS, AND FURTHER PROMOTE RESPECTFUL

ENGAGEMENT WITH DESCENDANTS AND DESCENDANT COMMUNITIES.

IN JANUARY, THE NATIONAL MUSEUM OF AMERICAN HISTORY ADDED FIRST LADY

JILL BIDEN'S INAUGURAL ENSEMBLES TO ITS HISTORIC FIRST LADIES

COLLECTION, CONTINUING THE 100-YEAR LONG TRADITION. NMAH ALSO ACCEPTED

THE ROBERT "MACK" MCCORMICK BLUES AND FOLKLORE ARCHIVAL COLLECTION, A

FOUNDATIONAL SOURCE FOR UNDERSTANDING AMERICAN MUSIC, INTO ITS ARCHIVE

CENTER FOR SCHOLARLY ACCESS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

RESEARCH AND COLLECTIONS:

IN JULY, THE SMITHSONIAN HOSTED A FREE, TWO-DAY NATIONAL EDUCATION

SUMMIT IN WASHINGTON, D.C. THE SUMMIT BROUGHT TOGETHER THOUSANDS OF

TEACHERS, MUSEUM EDUCATORS, CURRICULUM SPECIALISTS, LIBRARIANS AND

EDUCATION AGENCIES FROM ACROSS THE NATION TO DISCUSS KEY ISSUES IN

EDUCATION AND EXPLORE LEARNING STRATEGIES WITH SMITHSONIAN EXPERTS AND

COLLABORATORS. THIS YEAR'S THEME "TOGETHER WE THRIVE: FOSTERING A SENSE

OF BELONGING" EXPLORED PRESSING ISSUES AND TOPICS THAT SHAPE PEOPLE'S

SHARED FUTURE IN EDUCATION: LIFE ON A SUSTAINABLE PLANET, STEAM

232212 10-28-22

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Schedule O (Form 990) 2022

Name of the organization

SMITHSONIAN INSTITUTION

Page 2 Employer identification number 53-0206027

EDUCATION, AND RECKONING WITH OUR RACIAL PAST.

THE CENTER FOR ENVIRONMENTAL JUSTICE AT THE ANACOSTIA COMMUNITY MUSEUM

LAUNCHED ON EARTH DAY, SEEKING TO CREATE A FUTURE IN WHICH

ENVIRONMENTALISM IS A CORNERSTONE OF CIVIC ENGAGEMENT. UNDER THE "LIFE

ON A SUSTAINABLE PLANET" INITIATIVE, THE CENTER WILL ORGANIZE

PROGRAMMING, SUCH AS PANELS, ACADEMIES, AND COMMUNITY GARDENING TO

PLACE SCIENTIFIC DATA IN THE CONTEXT OF DAILY LIFE WHICH RESIDENTS CAN

USE TO DEVELOP HEALTHY, EQUITABLE COMMUNITIES.

THE NATIONAL MUSEUM OF AMERICAN HISTORY OPENED "ENTERTAINMENT

NATION"/"NACIN DEL ESPECTACULO," A 7,200-SQUARE-FOOT, MULTIMEDIA

EXHIBITION WITH AROUND 200 OBJECTS ON VIEW INCLUDING THE RUBY SLIPPERS,

PRINCE'S GUITAR, AND ALI'S BOXING ROBE. THIS WAS THE SMITHSONIAN'S

FIRST DEDICATED EXPLORATION OF ENTERTAINMENT HISTORY, AND IT IS THE

LARGEST LONG-TERM BILINGUAL EXHIBITION ON THE NATIONAL MALL.

IN OCTOBER 2022, THE NATIONAL AIR AND SPACE MUSEUM OPENED EIGHT NEW AND

RENOVATED GALLERIES IN THE WEST WING OF THE NATIONAL MALL BUILDING. THE

EXHIBITIONS FEATURE HUNDREDS OF NEW ARTIFACTS AND LONGTIME FAVORITES IN

DYNAMIC, IMMERSIVE, AND TECHNOLOGICALLY UPGRADED SPACES. THE GALLERIES

ALSO IMPLEMENTED NEW INTERACTIVES ACCESSIBLE TO VISITORS WITH VISION,

HEARING AND MOBILITY DISABILITIES.

FOR THE FIRST TIME SINCE 2020, THE ANNUAL MOTHER TONGUE FILM FESTIVAL

RETURNED TO THE NATIONAL MALL FOR IN-PERSON EVENTS IN FEBRUARY. THE

FESTIVAL, HOSTED BY THE SMITHSONIAN'S RECOVERING VOICES INITIATIVE,

CENTERS AROUND THE INTERNATIONAL MOTHER LANGUAGE DAY TO CELEBRATE

69

232212 10-28-22

Schedule O (Form 990) 2022 Name of the organization

SMITHSONIAN INSTITUTION

Page 2 Employer identification number

 $5\,3-0\,20\,60\,27$ 

CULTURAL AND LINGUISTIC DIVERSITY. THE FESTIVAL FEATURED 27 FILMS IN 23

LANGUAGES FROM REGIONS ACROSS THE GLOBE.

IN DECEMBER 2022, "OUR SHARED FUTURE: RECKONING WITH OUR RACIAL PAST,"

THE SMITHSONIAN'S RACE INITIATIVE, HOSTED THE FIRST PANEL AT THE

NATIONAL MUSEUM OF AFRICAN AMERICAN HISTORY AND CULTURE, BRINGING

TOGETHER DIVERSE GROUPS OF INDIVIDUALS TO DISCUSS RACE AND RACISM IN

HISTORICAL, CULTURAL, AND CONTEMPORARY CONTEXTS. IN ADDITION TO THE

NATIONAL DISCUSSIONS, THE SMITHSONIAN BEGAN PREPARATIONS FOR LOCAL

COMMUNITY CONVERSATIONS AROUND RACE IN CITIES AND TOWNS ACROSS THE U.S.

THESE COMMUNITY CONVERSATIONS, CO-HOSTED BY LOCAL ORGANIZATIONS, WILL

HELP FACILITATE OPEN DIALOGUE ABOUT ISSUES RELATED TO RACE IN THEIR

COMMUNITIES.

THE NATIONAL MUSEUM OF THE AMERICAN LATINO (NMAL) AND THE SMITHSONIAN

AMERICAN WOMEN'S HISTORY MUSEUM (SAWHM) CONTINUED TO GROW AND TAKE

SHAPE THIS YEAR, ALTHOUGH THEY DO NOT HAVE BUILDINGS YET. NMAL OPENED A

LATINO MUSEUM STUDIES PROGRAM FOR UNDERGRADUATE STUDENTS NATIONWIDE, TO

BOOST THE REPRESENTATION OF LATINOS IN THE MUSEUM FIELD AND THE WOMEN'S

HISTORY MUSEUM LAUNCHED A DIGITAL CAMPAIGN, SHARE YOUR STORY, TO

COLLECT STORIES FROM THE PUBLIC THAT WILL HELP SHAPE THE FUTURE OF THE

MUSEUM.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

MEMBERSHIP:

THE NATIONAL ASSOCIATE PROGRAM IS THE INSTITUTION'S LARGEST AND MOST

BASIC MEMBERSHIP PROGRAM. THE PROGRAM PROVIDES MEMBERS WITH SMITHSONIAN

232212 10-28-22

## \*\* DI IRI IC INCOECTION CORV \*\*

** PUBLIC INSPECTION COPY **				
Schedule O (Form 990) 2022	Page <b>2</b>			
Name of the organization SMITHSONIAN INSTITUTION	Employer identification number 53-0206027			
MAGAZINE, WHICH IS PUBLISHED 11 TIMES A YEAR. THE PRINT AND ONLINE				
PUBLICATION PROVIDES IN-DEPTH COVERAGE OF HISTORY, SCIENCE, NATURE, ART				
AND WORLD CULTURES. "FRIENDS OF THE SMITHSONIAN" IS A HIGHER-LEVEL				
MEMBERSHIP PROGRAM FOR PEOPLE INTERESTED IN A DEEP PHILANTHROPIC				
CONNECTION TO THE SMITHSONIAN. FRIENDS RECEIVE SMITHSONIAN MAGAZINE,				
PLUS THEY ARE INVITED TO VARIOUS EVENTS AND ARE GIVEN THE OPPORTUNITY				
TO LEARN ABOUT AND SUPPORT THE INSTITUTION'S EXHIBITIONS AND RESEARCH.				
THE SMITHSONIAN ASSOCIATES IS A SELF-SUPPORTING MEMBERSHIP PROGRAM				
WHICH PRODUCES INFORMATIVE, ENLIGHTENING, ENTERTAINING, AND INSIGHTFUL				
PROGRAMS INSPIRED BY AND GOING BEYOND SMITHSONIAN RESEARCH, COLLECTIONS				
AND EXHIBITIONS. PROGRAMS ENGAGE AUDIENCES FROM PRE-K TO				
POST-RETIREMENT WHO HAVE KEEN INTEREST IN FURTHERING THEIR				
UNDERSTANDING OF THE ARTS AND SCIENCES, THE PAST, PRESENT, AND FUTURE				
OF WORLD CULTURES.				
THE LARGEST MUSEUM-BASED EDUCATIONAL PROGRAM IN THE WORLD, SMITHSONIAN				
ASSOCIATES ANNUALLY PRODUCES MORE THAN 1,000 ONLINE AND IN-PERSON				
SEMINARS AND LECTURES, MULTI-PART COURSES, STUDIO ARTS CLASSES, STUDY				
TOURS, CONCERTS AND CHILDREN'S PROGRAMS. NOTABLE GUESTS INCLUDED				
SCIENTIST AND TV PERSONALITY BILL NYE, JOURNALIST ANDERSON COOPER,				
TRAVEL EXPERT RICK STEVES, EMMY-NOMINATED MEXICAN CHEF PATI JINICH,				
MASTER CHEF JACQUES PEPIN AND CELEBRITY CHEF CARLA HALL, AND CHIEF				
MEDICAL OFFICER OF WEBMD JOHN WHYTE.				

FORM 990, PART IV, LINE 12B

THE SMITHSONIAN'S AUDITED FINANCIAL STATEMENTS ARE INCLUDED IN THE

UNITED STATES GOVERNMENT'S CONSOLIDATED AUDITED FINANCIAL STATEMENTS.

232212 10-28-22

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Schedule O (Form 990) 2022 Name of the organization

SMITHSONIAN INSTITUTION

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

THE BYLAWS OF THE ORGANIZATION DELEGATE AUTHORITY TO THE EXECUTIVE

COMMITTEE TO ACT ON BEHALF OF THE BOARD OF REGENTS WHEN THE BOARD OF

REGENTS IS NOT IN SESSION. THE BOARD OF REGENTS ELECTS FROM ITS MEMBERS AN

EXECUTIVE COMMITTEE CONSISTING OF THREE MEMBERS.

THE EXECUTIVE COMMITTEE HAS AND MAY EXERCISE ALL POWERS OF THE BOARD OF

REGENTS WHEN THE BOARD OF REGENTS IS NOT IN SESSION, EXCEPT THOSE EXPRESSLY

RESERVED TO ITSELF BY THE BOARD OF REGENTS, PROVIDED THAT ALL SUCH

PROCEEDINGS ARE REPORTED TO THE GOVERNANCE AND NOMINATING COMMITTEE AND THE

BOARD OF REGENTS ON A REGULAR BASIS.

THE CHAIR OF THE BOARD SERVES AS CHAIR OF THE EXECUTIVE COMMITTEE. THE VICE

CHAIR OF THE BOARD SERVES AS A MEMBER OF THE EXECUTIVE COMMITTEE.

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

REGENT FRANKLIN RAINES AND REGENT STEVEN CASE HAD A BUSINESS RELATIONSHIP

DURING THE TAX YEAR.

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

PURSUANT TO FEDERAL STATUTE, THE BOARD OF REGENTS CONSISTS OF THE VICE

PRESIDENT OF THE UNITED STATES, THE CHIEF JUSTICE OF THE UNITED STATES,

THREE MEMBERS OF THE U.S. SENATE, THREE MEMBERS OF THE U.S. HOUSE OF

REPRESENTATIVES, AND NINE ADDITIONAL CITIZEN REGENTS.

THE THREE SENATORS ARE APPOINTED BY THE PRESIDENT PRO TEMPORE OF THE U.S.

SENATE, AND THE THREE MEMBERS OF THE HOUSE OF REPRESENTATIVES ARE APPOINTED

72

232212 10-28-22

Schedule O (Form 990) 2022

Name of the organization

SMITHSONIAN INSTITUTION

Page 2 Employer identification number 53-0206027

BY THE SPEAKER OF THE HOUSE OF REPRESENTATIVES. THEIR APPOINTMENT TERMS

COINCIDE WITH THE TERMS FOR WHICH THEY ARE ELECTED, AND THEY MAY BE

REAPPOINTED IF RE-ELECTED.

THE CITIZEN REGENTS ARE NOMINATED BY THE BOARD OF REGENTS, AND APPOINTED BY

A JOINT RESOLUTION OF CONGRESS WHICH IS SIGNED BY THE PRESIDENT OF THE

UNITED STATES.

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

THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM AND IS REVIEWED

BY THE OFFICE OF GENERAL COUNSEL, THE OFFICE OF THE UNDER SECRETARY FOR

FINANCE AND ADMINISTRATION, AND BY AN INDEPENDENT OUTSIDE COUNSEL FIRM.

AFTER THIS REVIEW PROCESS, THE 990 IS REVIEWED AND AFFIRMED BY THE AUDIT

AND REVIEW COMMITTEE OF THE BOARD OF REGENTS.

THE 990 IS THEN MADE AVAILABLE TO THE FULL BOARD OF REGENTS FOR REVIEW AND

COMMENT PRIOR TO ITS FILING.

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

ALL OFFICERS, KEY EMPLOYEES, AND CERTAIN OTHER EMPLOYEES ARE REQUIRED TO

COMPLETE AND FILE ANNUALLY A CONFIDENTIAL FINANCIAL DISCLOSURE REPORT.

THESE REPORTS - WHICH REQUIRE DISCLOSURE OF CERTAIN ASSETS, EARNED INCOME,

LIABILITIES, OUTSIDE POSITIONS, OUTSIDE CONTRACTS AND AGREEMENTS, GIFTS,

HOSPITALITY, REIMBURSEMENTS, AND OTHER INTERESTS RELATED TO THE EMPLOYEE'S

SMITHSONIAN POSITION - ARE REVIEWED BY THE INSTITUTION'S OFFICE OF GENERAL

COUNSEL FOR COMPLIANCE WITH APPLICABLE CONFLICT OF INTEREST POLICIES AND

73

LAWS.

232212 10-28-22

#### Schedule O (Form 990) 2022

Name of the organization

SMITHSONIAN INSTITUTION

IN ADDITION TO THIS REQUIRED REPORTING, ALL KEY EMPLOYEES ARE REQUIRED TO

COMPLY WITH THE INSTITUTION'S STANDARDS OF CONDUCT, WHICH, AMONG OTHER

THINGS, REQUIRES THAT EMPLOYEES NOT ENGAGE IN PRIVATE OR PERSONAL

ACTIVITIES THAT MIGHT CONFLICT OR APPEAR TO CONFLICT WITH SMITHSONIAN

INTERESTS, REQUIRES THAT EMPLOYEES OBTAIN OFFICE OF GENERAL COUNSEL

APPROVAL BEFORE ENGAGING IN AN OUTSIDE ACTIVITY FOR COMPENSATION, AND

REQUIRES EMPLOYEES TO CONSULT WITH THE OFFICE OF GENERAL COUNSEL WHENEVER A

DOUBT EXISTS AS TO WHETHER AN ACTIVITY OR PLANNED ACTIVITY

VIOLATES THE STANDARDS.

ALL MEMBERS OF THE SMITHSONIAN'S GOVERNING BODY ARE REQUIRED TO COMPLETE

AND FILE ANNUALLY THE BOARD OF REGENTS ANNUAL DISCLOSURE STATEMENT. THESE

STATEMENTS - WHICH REQUIRE REPORTING BY MEMBERS (INCLUDING ANY REPORTABLE

INTERESTS HELD BY IMMEDIATE FAMILY MEMBERS) ON OUTSIDE POSITIONS AND

SUBSTANTIAL SHAREHOLDING IN FOR-PROFIT BUSINESS ENTITIES, OUTSIDE POSITIONS

IN NON-PROFIT ENTITIES, AND INTERESTS AND AFFILIATIONS OF THE MEMBER THAT

HAVE OR SOUGHT TO HAVE A RELATIONSHIP TO THE SMITHSONIAN - ARE REVIEWED BY

THE INSTITUTION'S GENERAL COUNSEL FOR COMPLIANCE WITH APPLICABLE CONFLICT

OF INTEREST POLICIES AND LAWS.

IN ADDITION TO THIS REQUIRED REPORTING, ALL MEMBERS OF THE SMITHSONIAN'S

GOVERNING BODY ARE REQUIRED TO COMPLY WITH THE BOARD OF REGENTS ETHICS

GUIDELINES, WHICH, AMONG OTHER THINGS, DEFINE CONFLICTS OF INTEREST AND

ESTABLISH PROCEDURES FOR DISCLOSING AND REPORTING OF CONFLICTS AND RECUSAL

FROM DECISION-MAKING.

FORM 990, PART VI, SECTION B, LINE 15:

232212 10-28-22

Schedule C	) (Form	990	2022

Page **2** 

Name of the organization SMITHSONIAN INSTITUTION Employer identification number 53-0206027

THE SMITHSONIAN ENSURES THAT COMPENSATION PAID TO OFFICERS AND OTHER KEY

EMPLOYEES IS REASONABLE AND COMPARABLE TO SIMILAR ORGANIZATIONS. EMPLOYEES

OF THE SMITHSONIAN MAY BE PAID WITH FEDERALLY APPROPRIATED FUNDS OR WITH

NONFEDERAL ("TRUST") FUNDS. MOST TRUST FUNDED (NONFEDERAL) OFFICER AND KEY

EMPLOYEE POSITIONS ARE SUBJECT TO MARKET-BASED COMPENSATION, AND THE BOARD

OF REGENTS' COMMITTEE ON COMPENSATION AND HUMAN RESOURCES ENGAGES AN

INDEPENDENT CONSULTANT TO DEVELOP AND ASSEMBLE COMPARABILITY DATA FOR ITS

CONSIDERATION AND TO INFORM ITS DECISIONS.

THE COMMITTEE'S ANNUAL DELIBERATIONS AND DECISIONS ARE DOCUMENTED AS PART

OF THE FINAL RECOMMENDATION MATERIALS SUBMITTED TO THE BOARD OF REGENTS.

SALARIES FOR FEDERAL EMPLOYEES ARE DETERMINED BY STATUTORILY ESTABLISHED

PAY RANGES FOR CIVIL SERVICE EMPLOYEES.

AS A MATTER OF POLICY, THE SMITHSONIAN HAS ESTABLISHED SIMILAR RANGES FOR

CERTAIN TRUST FUNDED OFFICER AND KEY EMPLOYEE POSITIONS AND MAINTAINS THOSE

RANGES IN PROPORTION TO THE APPROPRIATE FEDERAL PAY RANGES.

FORM 990, PART VI, SECTION C, LINE 19:

THE SMITHSONIAN MAKES ITS GOVERNING DOCUMENTS, STATEMENT OF VALUES AND CODE

OF ETHICS, AND AUDITED FINANCIAL STATEMENTS AVAILABLE ON ITS PUBLIC WEBSITE

(WWW.SI.EDU). DOCUMENTS MAY ALSO BE VIEWED AT THE OFFICE OF FINANCE AND

ACCOUNTING OR MAILED.

FORM 990, PART IX, LINE 11G, OTHER FEES:

ADVSRY & ASSISTNC SRVCS PSC:

PROGRAM SERVICE EXPENSES

MANAGEMENT AND GENERAL EXPENSES

232212 10-28-22

15550731 153541 1776QA

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Schedule O (Form 990) 2022

420,125.

132,505.

Schedule O (Form 990) 2022 Name of the organization SMITHSONIAN INSTITUTION		Employer identification number 53-0206027
SMIRSONIAN INSTITUTION		55-0200027
UNDRAISING EXPENSES	1,089.	
OTAL EXPENSES	553,719.	
DVISORY AND ASST SVCS NON PSC:		
ROGRAM SERVICE EXPENSES	1,777,167.	
ANAGEMENT AND GENERAL EXPENSES	141,402.	
UNDRAISING EXPENSES	303,632.	
OTAL EXPENSES	2,222,201.	
CENTRAL ENGINEERING SERVICES:		
PROGRAM SERVICE EXPENSES	11,561,870.	
ANAGEMENT AND GENERAL EXPENSES	42.	
UNDRAISING EXPENSES	0.	
OTAL EXPENSES	11,561,912.	
ECH/ADMIN SVCS - 1099 VENDORS:		
ROGRAM SERVICE EXPENSES	347,365.	
ANAGEMENT AND GENERAL EXPENSES	11,211.	
UNDRAISING EXPENSES	852.	
OTAL EXPENSES	359,428.	
ON-BENEFIT POOL TUITION:		
ROGRAM SERVICE EXPENSES	33,622.	
ANAGEMENT AND GENERAL EXPENSES	153.	
UNDRAISING EXPENSES	1.	
OTAL EXPENSES	33,776.	
SAO MACHINE SHOP SERVICES:		
32212 10-28-22	76	Schedule O (Form 990) 2
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15550731 153541 1776QA

2022.06000 SMITHSONIAN INSTITUTION 1776QA\_1

Schedule O (Form 990) 2022 Name of the organization SMITHSONIAN INSTITUTION		Employer identification number 53-0206027
		55-0206027
PROGRAM SERVICE EXPENSES	149,821.	
MANAGEMENT AND GENERAL EXPENSES	-35.	
FUNDRAISING EXPENSES	110.	
TOTAL EXPENSES	149,896.	
INSTITUTIONAL MEMBERSHIP&FEES:		
PROGRAM SERVICE EXPENSES	786,119.	
MANAGEMENT AND GENERAL EXPENSES	210,449.	
FUNDRAISING EXPENSES	78,820.	
TOTAL EXPENSES	1,075,388.	
SUPPORT EXTERNAL ORGANIZATIONS:		
PROGRAM SERVICE EXPENSES	136,668.	
MANAGEMENT AND GENERAL EXPENSES	23,871.	
FUNDRAISING EXPENSES	2,061.	
TOTAL EXPENSES	162,600.	
TEMP EMPLOYMENT SVCS:		
PROGRAM SERVICE EXPENSES	2,983,081.	
MANAGEMENT AND GENERAL EXPENSES	3,904,593.	
FUNDRAISING EXPENSES	495,252.	
TOTAL EXPENSES	7,382,926.	
OTHER PROFESSIONAL SERVICES:		
PROGRAM SERVICE EXPENSES	86,828,505.	
MANAGEMENT AND GENERAL EXPENSES	11,348,211.	
FUNDRAISING EXPENSES	11,978,961.	
TOTAL EXPENSES	110,155,677.	

15550731 153541 1776QA

2022.06000 SMITHSONIAN INSTITUTION 1776QA\_1

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Schedule O (Form 990) 2022		
Name of the organization SMITHSONIAN INSTITUTION		Employer identification numbe 53-0206027
AUDIO VISUAL SERVICES:		
PROGRAM SERVICE EXPENSES	2,175,557.	
MANAGEMENT AND GENERAL EXPENSES	-251,514.	
FUNDRAISING EXPENSES	386,760.	
FOTAL EXPENSES	2,310,803.	
LECTURES HONORARIA:		
PROGRAM SERVICE EXPENSES	2,520,662.	
MANAGEMENT AND GENERAL EXPENSES		
FUNDRAISING EXPENSES	51,667.	
TOTAL EXPENSES	2,597,886.	
EXHIBIT SERVICES:		
PROGRAM SERVICE EXPENSES	8,673,346.	
MANAGEMENT AND GENERAL EXPENSES	59,388.	
FUNDRAISING EXPENSES	13,811.	
TOTAL EXPENSES	8,746,545.	
OTHER PURCH G&S GOVT:		
PROGRAM SERVICE EXPENSES	-19,766.	
MANAGEMENT AND GENERAL EXPENSES	-297,144.	
FUNDRAISING EXPENSES	-82.	
TOTAL EXPENSES	-316,992.	
IAT IN-HOUSE CONSULTANT:		_
PROGRAM SERVICE EXPENSES	-4,727.	
MANAGEMENT AND GENERAL EXPENSES	-33,729.	

15550731 153541 1776QA

2022.06000 SMITHSONIAN INSTITUTION

Schedule O (Form 990) 2022 Name of the organization SMITHSONIAN INSTITUTION		Employer identification number
		55 0200027
UNDRAISING EXPENSES	630.	
OTAL EXPENSES	-37,826.	
AO CENTRAL ENG. SERV-ACCR:		
ROGRAM SERVICE EXPENSES	29,355.	
ANAGEMENT AND GENERAL EXPENSES	0.	
UNDRAISING EXPENSES	8.	
TOTAL EXPENSES	29,363.	
AO MACHINE SHOP SERV-ACCR:		
PROGRAM SERVICE EXPENSES	8,439.	
IANAGEMENT AND GENERAL EXPENSES	0.	
UNDRAISING EXPENSES	0.	
COTAL EXPENSES	8,439.	
REIMB GOVERNMENT AGENCIES:		
ROGRAM SERVICE EXPENSES	-5,806.	
ANAGEMENT AND GENERAL EXPENSES	-1,393.	
UNDRAISING EXPENSES	-15.	
OTAL EXPENSES	-7,214.	
PERATION & MAINT FACILITIES:		
ROGRAM SERVICE EXPENSES	31,488,545.	
ANAGEMENT AND GENERAL EXPENSES	16,252,059.	
UNDRAISING EXPENSES	70,410.	
OTAL EXPENSES	47,811,014.	
WASTE REMOVAL:		
232212 10-28-22	79	Schedule O (Form 990) 20

15550731 153541 1776QA

Schedule O (Form 990) 2022 Name of the organization		Page 2 Employer identification number
SMITHSONIAN INSTITUTION		53-0206027
PROGRAM SERVICE EXPENSES	373,101.	
MANAGEMENT AND GENERAL EXPENSES	79,520.	
FUNDRAISING EXPENSES	883.	
TOTAL EXPENSES	453,504.	
GUARD SERVICES:		
PROGRAM SERVICE EXPENSES	22,093,100.	
MANAGEMENT AND GENERAL EXPENSES	4,973,529.	
FUNDRAISING EXPENSES	535,720.	
TOTAL EXPENSES	27,602,349.	
CUSTODIAL SERVICES:		
PROGRAM SERVICE EXPENSES	3,024,569.	
MANAGEMENT AND GENERAL EXPENSES	686,848.	
FUNDRAISING EXPENSES	248,090.	
TOTAL EXPENSES	3,959,507.	
MEDICAL CARE:		
PROGRAM SERVICE EXPENSES	305,773.	
MANAGEMENT AND GENERAL EXPENSES	503.	
FUNDRAISING EXPENSES	5.	
TOTAL EXPENSES	306,281.	
EQUIP. NON IT MAINT & REPAIR:		
PROGRAM SERVICE EXPENSES	5,735,218.	
MANAGEMENT AND GENERAL EXPENSES	825,833.	
FUNDRAISING EXPENSES	12,950.	
TOTAL EXPENSES	6,574,001.	
232212 10-28-22	80	Schedule O (Form 990) 2022

2022.06000 SMITHSONIAN INSTITUTION 1776QA\_1

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Schedule O (Form 990) 2022 Name of the organization		Page Employer identification numbe
SMITHSONIAN INSTITUTION		53-0206027
CATERING:		
PROGRAM SERVICE EXPENSES	6,445,021.	
MANAGEMENT AND GENERAL EXPENSES		
FUNDRAISING EXPENSES		
TOTAL EXPENSES		
COST OF SHARING EXPENSE:		
PROGRAM SERVICE EXPENSES	3,201,971.	
MANAGEMENT AND GENERAL EXPENSES	100.	
FUNDRAISING EXPENSES	437,256.	
TOTAL EXPENSES	3,639,327.	
COST SHARING CENTRAL SERVICE:		
PROGRAM SERVICE EXPENSES	0.	
MANAGEMENT AND GENERAL EXPENSES	104.	
FUNDRAISING EXPENSES	0.	
TOTAL EXPENSES	104.	
STAFF/BUSINESS EXPENSE:		
PROGRAM SERVICE EXPENSES	506,492.	
MANAGEMENT AND GENERAL EXPENSES	90,066.	
FUNDRAISING EXPENSES	276,526.	
TOTAL EXPENSES	873,084.	
PEST CONTROL SERVICES:		
PROGRAM SERVICE EXPENSES	114,616.	
MANAGEMENT AND GENERAL EXPENSES	8,674.	

15550731 153541 1776QA

<sup>2022.06000</sup> SMITHSONIAN INSTITUTION 1776QA\_1

Schedule O (Form 990) 2022		Page <b>2</b>
Name of the organization SMITHSONIAN INSTITUTION		Employer identification number 53-0206027
FUNDRAISING EXPENSES	94.	
TOTAL EXPENSES	123,384.	
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	247,551,071.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:		
CHANGE IN NET ASSETS OF RELATED ORGS	-4,196.	
PROCEEDS FROM SALES OF COLLECTIONS	144,300.	
TOTAL TO FORM 990, PART XI, LINE 9	140,104.	
FORM 990, PART XII, LINE 2B		
THE SMITHSONIAN INSTITUTION IS SEPARATELY AUDITED. THE SMIT	THSONIAN	
INSTITUTION'S AUDITED FINANCIAL STATEMENTS ARE INCLUDED IN	THE UNITED	
STATES GOVERNMENT'S CONSOLIDATED AUDITED FINANCIAL STATEMEN	NTS.	
232212 10-28-22		Schedule O (Form 990) 2022

### **Related Organizations and Unrelated Partnerships**

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

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

	Inspection
Employer id	dentification number
53-020	06027

OMB No. 1545-0047

**Open to Public** 

Name of the organization

SCHEDULE R (Form 990)

SMITHSONIAN INSTITUTION

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

<b>(a)</b> Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	micile (state or Total income		<b>(f)</b> Direct controlling entity

## 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>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	cont	<b>g)</b> 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
CLAY FELLOWSHIPS CHARITABLE TRUST -							
04-3560268, 10 MEMORIAL BOULEVARD,	SUPPORT OF SMITHSONIAN			12 TYPE			
PROVIDENCE, RI 02903	ASTROPHYSICAL OBSERVATORY	MASSACHUSETTS	501(C)(3)	III-O	N/A		х
	-						
	-						

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

Schedule R (Form 990) 2022

#### Schedule R (Form 990) 2022 SMITHSONIAN INSTITUTION

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)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j		(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets		ortionate tions?	amount in box 20 of Schedule	mana partr	al or Perc <sup>ging</sup> er?	centage nership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No	
BLACKBIRD 1846 ENERGY FUND,												
LP - 47-3887280, 10000			BLACKBIRD 1846									
MEMORIAL DRIVE, SUITE 550,			ENERGY FUND									
HOUSTON, TX 77024	INVESTMENTS	DE	GP, LP	EXCLUDED	-3,718.	816,322.		x	N/A		c	100%
	7											
	1											
	1											
	1											
	1											
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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.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	<b>(h)</b> Percentage ownership	512(l contr	(i) ction (b)(13) trolled tity?
		country)		or trusty		233613		Yes	No
CHARITABLE REMAINDER TRUSTS (2)									
1000 JEFFERSON DRIVE, S.W.	CHARITABLE REMAINDER								
WASHINGTON, DC 20560	TRUST	DC	N/A	TRUST				х	
CHARITABLE REMAINDER TRUSTS (2)									
1000 JEFFERSON DRIVE, S.W.	CHARITABLE REMAINDER								
WASHINGTON, DC 20560	TRUST	MA	N/A	TRUST				х	
CHARITABLE REMAINDER TRUSTS (1)									
1000 JEFFERSON DRIVE, S.W.	CHARITABLE REMAINDER								
WASHINGTON, DC 20560	TRUST	MI	N/A	TRUST				х	
CHARITABLE REMAINDER TRUSTS (5)									
1000 JEFFERSON DRIVE, S.W.	CHARITABLE REMAINDER								
WASHINGTON, DC 20560	TRUST	NY	N/A	TRUST				Х	
CHARITABLE REMAINDER TRUSTS (3)									
1000 JEFFERSON DRIVE, S.W.	CHARITABLE REMAINDER								
WASHINGTON, DC 20560	TRUST	VA	N/A	TRUST				х	

Schedule R (Form 990) SMITHSONIAN INSTITUTION

53 - 0206027

Part IV Continuation of Identification of Related Organizations Taxable as a Corporation or Trust

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i Sect 512(b contro enti	i) tion
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year	Percentage ownership	512(b contro	)(13) olled
		foreign country)		or trust)		assets			No
FOUNDATION CREDIT OPPORTUNITIES OFFSHORE									
LTD., PO BOX 309, UGLAND HOUSE, GRAND,	]	CAYMAN							l
CAYMAN ISLANDS KY1-1104	INVESTMENTS	ISLANDS	N/A	TRUST			100%	х	<b></b>
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#### SMITHSONIAN INSTITUTION Schedule R (Form 990) 2022

53-0206027 Page 3

Part V	Transactions With Related Organizations.	Complete if the organization answered	d "Yes" on Form 990, Part IV, line 34, 35b, or 36.
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Note:       Complete line 1 if any entity is listed in Parts II, III, or V of this schedule.       Yes       No         1       During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV?       Image: Complete line 1 if any entity is listed in Parts II-IV.       Image: Complete line 1 i							
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity       1a       X         b Gift, grant, or capital contribution to related organization(s)       1c       X         c Gift, grant, or capital contribution from related organization(s)       1c       X         c Loans or loan guarantees to or for related organization(s)       1c       X         e Loans or loan guarantees by related organization(s)       1e       X         f Dividends from related organization(s)       1f       X         g Sale of assets to related organization(s)       1f       X         g Sale of assets to related organization(s)       1f       X         i Exchange of assets from related organization(s)       1i       X         j Lease of facilities, equipment, or other assets from related organization(s)       1i       X         k Lease of facilities, equipment, or other assets from related organization(s)       1i       X         k Lease of facilities, equipment, or other assets from related organization(s)       1i       X         n Performance of services or membership or fundraising solicitations for related organization(s)       1i       X         n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)       1in       X         n Sharing of facilities, equipment, mailling lists, or other assets with related organizatio	Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No		
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	s		1s	Х			
	2						

<b>(a)</b> Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
<u>(1)</u>			
<u>(2)</u>			
<u>(3)</u>			
<u>(4)</u>			
<u>(5)</u>			
<u>_(6)</u>			

#### Schedule R (Form 990) 2022 SMITHSONIAN INSTITUTION

53-0206027 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>(b)</b> Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners s 501(c)(3 orgs.? Yes N	<b>(g)</b> Share of end-of-year assets	(h Dispro tion allocat Yes	) opor- ate ions? <b>No</b>	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General managin partner Yes No	(k) Percentage ownership

Schedule R (Form 990) 2022

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53-0206027 Page **5** 

### Part VII Supplemental Information

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

Schedule R (Form 990) 2022

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